



**Innopharma**  
education

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## **Quality Assurance Manual**

**Revision 9.0 January 2026**

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# 1. The Quality Assurance and Enhancement Framework at Innopharma Education

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The policies and procedures within this Quality Assurance Manual (QAM), along with a set of associated documents, form the basis of the Innopharma Education Quality Assurance and Enhancement Framework (QAEF).

## 1.1 ESG Standard: Policy for Quality Assurance

### **ESG Standard 1.1**

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

## 1.2 Definitions

Within the QAEF, the following definitions apply:

- a) **Strategy:** A strategy details the key objectives of the College and sets out a plan for their successful achievement.
- b) **Policy:** A policy sets out a principle or an intended course of action in a given situation. Policies guide decision-making at the College on a day to day basis. Policies therefore establish the ‘what to do’ in those situations.
- c) **Procedure:** A procedure describes the specific actions undertaken to implement a College policy. Procedures therefore guide the ‘how to do’, and not the ‘what to do’.
- d) **Standard:** A standard outlines the acceptable level of quality or attainment within a particular area of the College’s operations.
- e) **Resource:** A resource is a functional document that supports the implementation of the College’s policies and procedures. For example, application forms, checklists or handbooks.
- f) **Blended Learning:** A type of education where teaching, learning and assessment occur using a mix of online and on-site learning with the online components taking place synchronously, asynchronously, or in combination.

## 1.3 Overview

The QAEF of Innopharma Education has been developed with regard to the following standards and guidelines:

- Core Statutory Quality Assurance Guidelines (QQI, 2016).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines (QQI, 2016)<sup>1</sup>.
- Topic Specific Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes (QQI, 2018)

- Assessment and Standards, Revised (QQI, 2013).
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).

The College's QAEF has therefore been developed with regard to the guidelines for quality assurance that are applicable to all providers. In keeping with QQI's guidelines, the QAEF also takes account of the College's specific "*context, overall goals and scope of provision*"<sup>1</sup>.

The policies and procedures with the QAEF additionally meet the requirements of:

- Employment Equality Acts 1998 – 2015
- Disability Act 2005
- Data Protection Act 2018

Within the College, Strategies, Policies, Procedures and Standards are approved by either the **Board of Directors** or the **Academic Council**. In some cases, policies may require approval by both.

Resources are approved by either the **Director of Academic Affairs** or the **Director of Academic Programmes**, as appropriate.

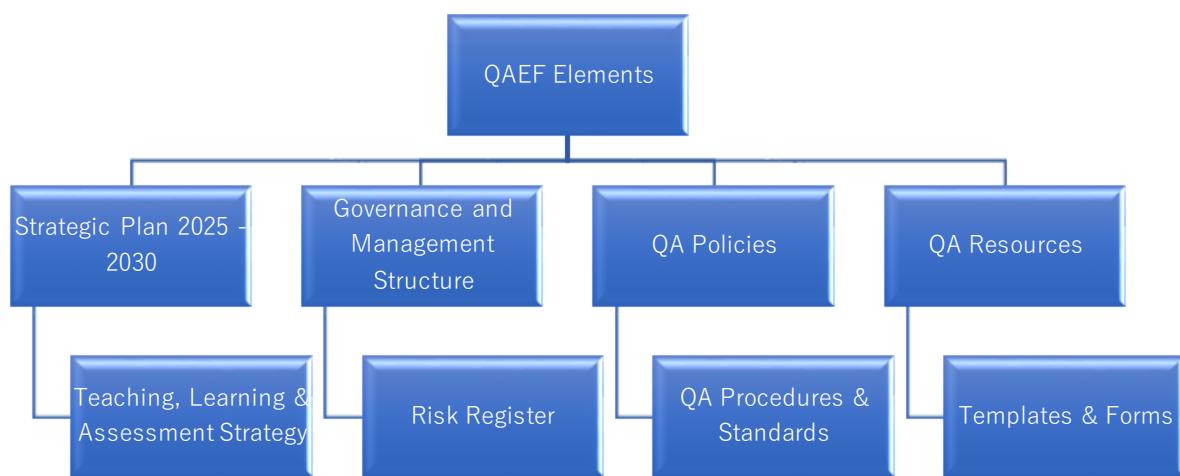
#### **1.4      Associated Documents**

- Innopharma Transforms: Strategic Plan 2020 – 2025
- Innopharma Education Governance and Management Structure
- Innopharma Education Risk Register
- Innopharma Education Learning, Teaching and Assessment Strategy 2020 – 2025
- Innopharma Education Blended Learning Standards
- Innopharma Education Marks & Standards
- Innopharma Education Student Handbooks<sup>2</sup>

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<sup>1</sup> QQI *Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016*, p.1

<sup>2</sup> Student Handbooks are programme specific, and will be developed concurrent to the associated programme documents.



#### **1.4.1 Visual Representation of the QAEF at Innopharma Education**

## 2. Governance and Management of Quality

QA Area (s)	<ul style="list-style-type: none"><li>• Governance</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policy Owner	President

### 2.1 Overview

Innopharma Education's legal entity is that of a registered company limited by guarantee in Ireland. The Board of Directors of the Company has resolved to add a non-executive Director to the Board. The re-constituted Board for Innopharma Education (the College) governs the operation of the College as a commercial, for-profit organisation.

The Board of Directors has established a self-regulating Academic Council to govern, maintain and promote the academic standards of the College's programmes of education and training and the awards that it provides and to advise the Board of Directors on academic matters.

The College is committed to the development and maintenance of a governance structure that is effective and fit for purpose and protects the integrity of academic standards and processes. It ensures that it is governed and managed effectively, with clear and appropriate lines of accountability for its responsibilities. The governance model ensures that objective oversight is in place to ensure that the College is financially sustainable, that financial management is sound, and that a clear distinction exists between corporate governance (concerned with the strategic, financial and business matters of the College) and academic governance (concerned with the protection and maintenance of academic standards of its programmes of education and training and its awards).

The Board of Directors appoints an Academic Council to assist it in the planning, co-ordination, development and overseeing of the educational work of the College and with a mission to protect, maintain and develop the academic standards of the College. It delegates responsibility to that body for academic decision-making, and for overseeing and developing academic standards at the College. Similarly, it delegates responsibility to the Executive Management Team for the day-to-day management of the College. The Board of Directors makes the final strategic decisions for the College, based on advice from the Academic Council or the Executive Management Team, as appropriate.

The Board of Directors appoints an independent chairperson to the Academic Council, and there is a clear delineation of responsibility between the Board of Directors and the Academic Council. This helps ensure that:

*"Academic decision-making reflects the interests of learners and the maintenance of standards. It is independent of commercial considerations"<sup>3</sup>.*

<sup>3</sup> QQI Core Statutory Quality Assurance Guidelines 2016, p.6

Specific responsibilities of the Academic Council are discharged through a committee structure, which initially will be limited to a Programme Development Committee and a Student Services Committee. In addition, temporary, project-oriented subcommittees may be established as necessary. Further details are provided in [2.4.5 Committees of the Academic Council](#) below.

The Executive Management of the College is provided by the Executive Management Team, which is chaired by the CEO/ President.

The Board of Directors will establish a Strategic Advisory Board to advise the Board of Directors, the Academic Council and the Executive Management Team on strategic issues that may impact on the work of the College.

## 2.2 Corporate Governance in the College

### 2.2.1 Major Units of Governance:

The following are the major units of governance in the College:

1. The **Board of Directors** of Innopharma Group Holdings Ltd. Innopharma Group holdings Ltd (Registered as Innopharma group holdings Ltd company registration number 730709) and trading as Innopharma Education, hereinafter referred to as the 'College', is an autonomous company that reports to the Companies Registration Office.
2. The **Academic Council** of the College established by the Board of Directors by formal resolution.
3. A **Strategic Advisory Board** established by the Board of Directors by formal resolution.
4. The **Executive Management Team** established by the Board of Directors by formal resolution.

## 2.3 Terms of Reference for the Board of Directors

### 2.3.1 Purpose

The Board of Directors is the governing authority of the College. The Board of Directors is ultimately responsible for Corporate Governance of the College. It is responsible for the resources and the general business of the College, as well as setting its strategic direction.

### 2.3.2 Composition and Membership of the Board of Directors:

#### Directors:

- i. There are six directors

#### Chairperson:

- ii. A person with extensive experience at a senior level in higher education, in Ireland and abroad.

The composition of the Board of Directors has regard to gender representation.

### 2.3.3 Meetings

- Meetings of the Board of Directors shall normally be held at least four times per year and scheduled in advance, having regard to the cycle of required decision-making in the College.

- The quorum for meeting of the Board of Directors is 50% of the membership plus one.
- In the event that the designated Chair is absent from the meeting, the other directors shall appoint one of their membership present, to act as Chair for that meeting.
- Meetings are normally held face to face, but in exceptional circumstances an incorporeal meeting may be appropriate.
- Decisions are made, insofar as is practicable, by consensus. In the absence of consensus, decisions are made by open ballot.

#### **2.3.4 Attendance of Non-members at a Meeting**

- The Board of Directors may invite whomsoever it wishes to its meetings to assist in informing its strategy and decisions.
- Non-members may attend a meeting of Board of Directors only on invitation of the Board of Directors and communicated through the secretary. Non-members shall remain in attendance solely for the business to which their attendance relates.

#### **2.3.5 Appointment of Chairperson**

The Board of directors has, by formal resolution, co-opted a person with extensive experience in higher education, as a Chairperson, to bring an external expert focus to its work.

#### **2.3.6 Functions and Responsibilities**

The Board of Directors has the following functions:

*Fiduciary Responsibilities:*

The Board of Directors:

- Has corporate and legal responsibility for the College.
- Is responsible for ensuring the financial viability of the College from year to year.
- Shall provide oversight of financial governance and budgetary decision-making.
- Is responsible for preparation and filing of statutory annual returns and accounts for submission to the Companies Registration Office. It may engage assistance from the Executive Management Team in this regard.
- Is responsible for the submission of final accounts for financial and performance audit on an annual basis.
- Is responsible for approving annual financial budgets, as prepared and submitted by the Executive Management Team.
- Is responsible for setting staff salary levels on an annual basis.
- In the exercise of these functions, the Board of Directors shall not attempt to exercise any undue influence over academic decision-making in the College.

*College Governance:*

The Board of Directors:

- Shall appoint the Chief Executive as the President of the College, *pro tem*. The Board of Directors may, at its absolute discretion, appoint another person to be President of the College, at a time in the future. The person, so appointed, would not be a member of the Board of Directors.

- Shall determine the mission and vision of the College.
- Shall review and approve the College's strategic planning proposals, as prepared by the Executive Management Team, in consultation with the Academic Council. Such proposals will be reviewed taking into account business opportunities and risks
- Shall review and approve an Operational Plan to implement the Strategic Plan, in place at any one time.
- Shall approve any significant financial investment required by a new programme proposal, prior to its submission to the Academic Council.
- Shall approve funding associated with draft new programme proposals, and subsequently approve the costs and budgets associated with fully drafted programmes prior to submission for validation to QQI.
- Following validation by QQI, and on the advice of the Academic Council, shall determine whether and when to commence the programme.
- Shall delegate authority for academic decision-making to the Academic Council, by formal resolution. The scope and nature of academic decision-making is outlined in the terms of reference for the Academic Council, which are approved by the Board.
- Shall uphold the ethics, values and culture of the College and act in the interests of all the College stakeholders in the highest ethical manner.
- Is responsible for the identification and evaluation of risks to the College and for monitoring, managing and mitigating risk through the use of the risk register, or other process.
- Shall appoint staff as required for the efficient operation of the College.

### **2.3.7 Delegation of Authority to the Academic Council**

The Board of Directors shall delegate authority for academic decision-making to the Academic Council, by formal resolution. The scope and nature of academic decision-making is outlined in the terms of reference for the Academic Council, which are approved by the Board.

The Board of Directors shall receive a report from the Academic Council for each scheduled meeting of the Board. This report shall include an update on academic matters, including new programme development, enrolment report, examination report etc.

### **2.3.8 Delegation of Authority to the Executive Management Team**

The Board of Directors shall delegate authority for the day-to-day management of the College, including limited budgetary discretion, to the Executive Management Team, by formal resolution. The scope and nature of its responsibilities is outlined in the terms of reference for the Executive Management Team, which are approved by the Board.

## **2.4 Terms of Reference for Academic Council**

### **2.4.1 Purpose**

The Board of Directors shall appoint an Academic Council with a dual role:

- I. *Advisory:* To assist the Board of Directors in the planning, co-ordination, development and overseeing of the educational work of the College.

II. *Directive*: To protect, maintain and develop the academic standards of the courses and the activities of the College. The Academic Council shall exercise this role in a manner that is independent of commercial considerations.

#### **2.4.2 Composition and Membership**

- I. Chair - An appropriately qualified, independent, external person, with experience at a senior level in higher education and / or an enterprise agency appointed by the Board of Directors.
- II. Deputy Chair - An appropriately qualified, independent, external person, with experience at a senior level in higher education
- III. Further Education SME – An appropriately qualified, independent, external person, with experience at a senior level in further education
- IV. Higher Education SME - An appropriately qualified, independent, external person, with experience at a senior level in higher education up to Level 9.
- V. Secretary
  - i. Director of Academic Affairs
- VI. Ex Officio Members
  - i. Head of Teaching and Learning
  - ii. Head of Academic Programmes
  - iii. Registrar
  - iv. Director of Post Graduate Programmes and Research
  - v. Programme Lead for HE and FE programmes
  - vi. Learner Support representative
  - vii. Librarian
  - ii. College President. (If the post of President is held by the Chief Executive, they shall not be an ex-officio member of the Council, but may be invited to attend certain meetings on the invitation of the Chair, where they deem it beneficial. In such instances, they shall not have voting rights).
- VII. Nominated Members
  - i. Two members of academic staff nominated by their peers.
  - ii. One learner representative nominated through class representation processes.
- VIII. In attendance – by invitation

The Chair may invite a post holder or any external party to attend as required, where relevant to the business of a specific meeting.

The Chair and Deputy Chair shall hold office for a term of three years, and each may be re-appointed for one further term by the Board of Directors. Nominated members of the Academic Council shall hold office for a period of three years but may be re-nominated for a further three-year term.

The Academic Council may regulate its own business, subject to any directions from the Board of Directors. In this regard, the Academic Council may establish Standing Orders for the conduct of its business.

#### **2.4.3 Meetings**

- Meetings of the Academic Council shall normally be held twice in each semester, and scheduled in advance, having regard to the cycle of academic business in the College.
- Members shall be given at least 5 working days' notice of a meeting, to include the draft agenda and the associated papers for the meeting.
- Members have the right to seek to add an item to the agenda and any such request must be communicated to the Secretary, six days in advance of the meeting.
- The quorum for meeting of the Academic Council is 50% of the membership, plus one.
- In the event that the designated Chair is absent from the meeting, the Deputy chair who also provides externality shall act as chair for that meeting, or act in accordance with the appropriate procedure laid down in the Standing Orders in place at that time.
- Meetings are normally held face to face, but in exceptional circumstances an incorporeal meeting may be appropriate.
- In the case where a member of the Academic Council brings a proposal for decision to the Council, they may speak to the proposal, but may not vote on it, should a vote be required.
- Decisions are made, insofar as is practicable, by consensus. In the absence of consensus, decisions are made by open ballot, with the Chair having a casting vote in the event of a tie.

#### **2.4.4 Functions and Responsibilities**

In carrying out its functions, the Academic Council shall ensure that there is no undue influence exercised by commercial decision-makers over academic decision-making.

The Academic Council has the following functions:

- *Advisory Role*
- Advises the Board of Directors on strategic academic planning and associated resource requirements.
- Consults with the Board of Directors at the appropriate stages in the development of new academic programmes, as outlined in Section 5 of this Manual.
- Makes recommendations to the Board of Directors that the College should commence an academic programme, following validation.
- Advises the Board of Directors on risk management and mitigation associated with academic processes in the College. It shall do this through regular review and amendment of the risk register and onward reporting to the Executive Management Team and the Board of Directors.
- The Academic Council shall provide a report for each scheduled meeting of the Board of Directors. This report shall include an update on academic matters, including new programme development, enrolment report, examination report etc.

- *Academic Oversight*
  - Approves all academic policies and procedures.
  - Ensures that systems of academic administration are in place, which are fit for purpose and encompass the entirety of the learner experience.
  - Ensures that academic standards and rigour are adopted, upheld and applied in all academic programmes.
  - Establishes and manages the activities of its committees, including their terms of reference.
  - Establishes and manages ad hoc committees as appropriate to deal with specific academic issues.
  - Delegates responsibility and, where appropriate, decision-making authority to subcommittees.
  - *Quality Assurance*
- Reviews and approves academic aspects of the quality assurance policies and procedures of the College, including updates or amendments to these, subject to the requirements of QQI and other accrediting bodies.
- Approves implementation plans for amendments to quality assurance procedures subsequent to regulatory changes and quality assurance engagement activities.
- Monitors the implementation of quality assurance procedures and associated improvement activities.
- Monitors ongoing compliance with the requirements of QQI and other accrediting bodies.
- Approves applications and reports prior to submission to QQI and other accrediting bodies.
- Establishes a panel from which an Appeals Board may be drawn by the Chair of that Appeals Board, as required (Section 3.8 [Policy for Appeals](#)).
  - *Teaching, Learning and Assessment*
- Appoint External Examiners in accordance with the provisions of section 8.2.3, [Nominating External Examiners](#).
- Approves the Teaching, Learning and Assessment Strategy (inclusive of Blended Learning) of the College, and monitors its implementation.
- Reviews Examination results for QQI and other accredited programmes.
- Reviews reports from External Examiners.
  - *Programme Monitoring and Development*
- Reviews and approves proposals for programme development, in line with the policy and procedures set out in [Section 5 of the Quality Assurance Manual](#).
- Identifies, escalates and actions academic risk and mitigation thereof during programme development and review.
- Monitors new programme development and approves programmes subject to their validation by QQI or other accrediting bodies, in line with the policy and procedures set out in [Section 5 of the Quality Assurance Manual](#).

- Approves new programme proposals, making recommendations to the Board of Directors regarding academic resource requirements as needed, appointing Programme Development Groups, monitoring the work of these and approving all programme documentation prior to their submission to QQI for validation.
- Approves the Access, Transfer and Progression opportunities set out in programme specific procedures by Programme Development Teams.
- Reviews annual reports from programme boards and approves any proposed amendments to programmes prior to their submission to QQI and other accrediting bodies.
- Reviews the reports of external review panels for the validation of new programmes or revalidation of existing programmes.

#### **2.4.5 Committees of the Academic Council**

In the early years of the College’s development, the business of the Academic Council will be carried out more efficiently through the use of temporary, project-oriented subcommittees established as necessary. Notwithstanding this, the Council recognises that there is a need to set in place a basic structure of committees that are essential to deliver on the functions of the Council. The Academic Council has therefore determined to constitute the following committees immediately:

- **Programme Development Committee**, which will review proposals for new programmes from Programme Development Groups that are established by the Academic Council following approval in principle to proceed to the detailed development phase.
- **Student Services Committee**, which will receive and consider reports from the appropriate College staff and administrative units and make recommendations for improvements to the Academic Council.

In the longer term, the Academic Council may consider establishing further committees such as a Quality Enhancement (QE) Committee, Library Committee, Teaching and Learning Committee, Research Committee etc. In the meantime, the functions that would be allocated to these committees will be carried out by the Academic Council as a whole, or through temporary, project-oriented subcommittees.

To encourage engagement with all employees of Innopharma Education, the Academic Council utilises the concept of workflow teams to develop, integrate and implement the quality policies and procedures across the organisation. Initially workflow teams were established in the areas of Teaching and Learning, Admissions, Marketing, Programme Monitoring and Learner Support. These workflow teams developed and refined the concepts which ultimately will become the committees when required.

In addition to the use of committees, the Council will be receiving reports from the various functions in the College, as detailed in the relevant Sections of the QAM, that contribute to the implementation of its role. Such reports emanate from the Admissions Function, Programme Boards, Examination Boards, Post Examination processes (reviews, appeals) etc. The College does not regard these boards as Committees of the Academic Council, in the strict sense, as that might imply that the Academic Council could exercise control over their

actions. The Academic Council's role is to establish policies and procedures that must be followed by these boards in the exercise of their functions.

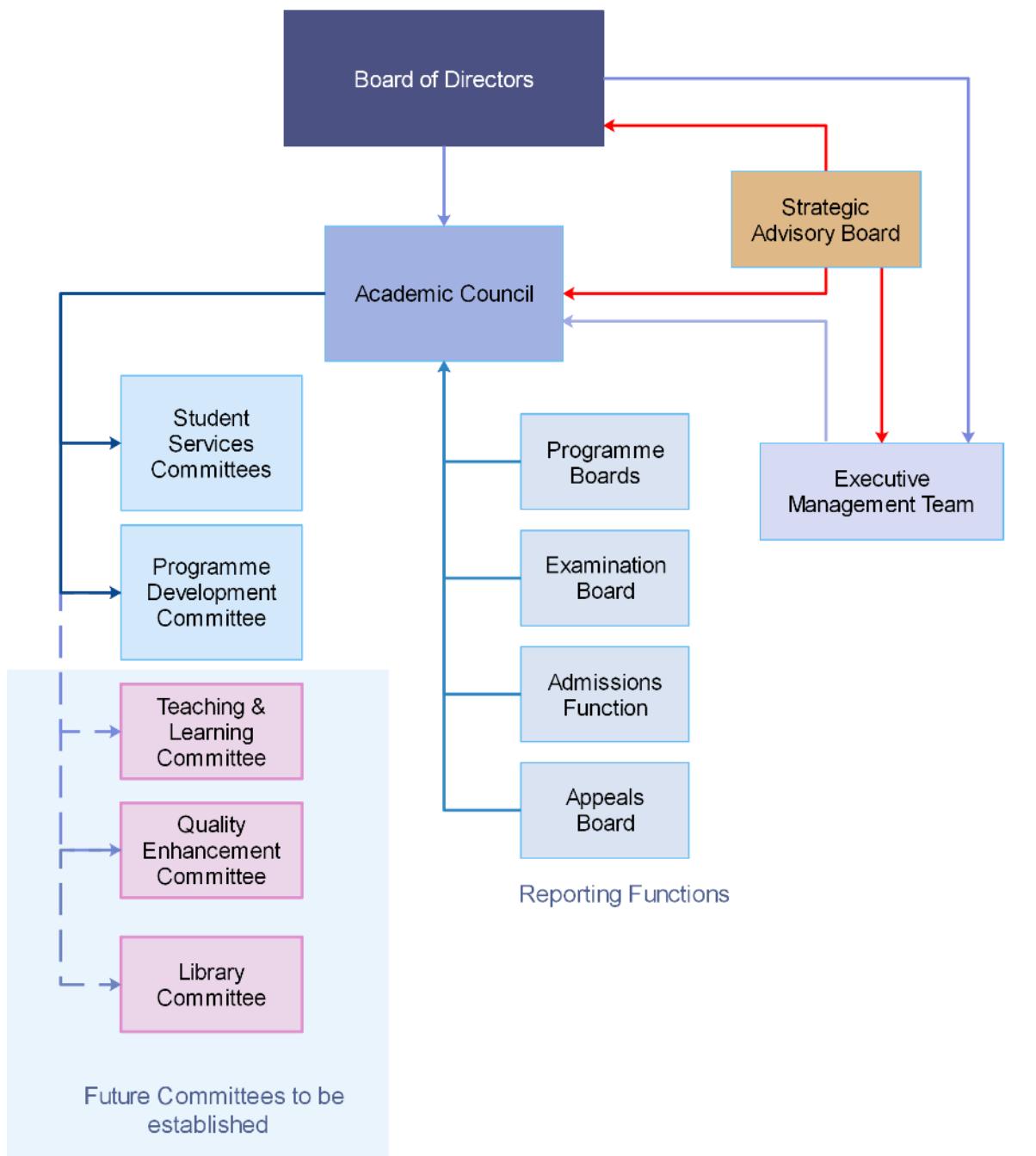
The Academic Council may appoint members of staff of the College, who are not members of the Council, to its Committees, with their agreement. It may also appoint external experts to a committee to assist in carrying out its function.

#### **2.4.6      Programme Development Committee**

This Committee is established by the Academic Council to exercise oversight of new programme development and to make recommendations to the Council. It reviews in detail proposals for new programmes, in accordance with QQI's requirements for validation and the procedures set out in [Section 5](#) and reports to the Council with recommendations. The Academic Council shall constitute the committee having regard to the scale of the College's operations and its scope of provision and potential conflict of interest. It should be chaired by a member of the Academic Council, who may be the Chair of the Council.

#### **2.4.7      Student Services Committee**

This Committee is established by the Academic Council to advise it on the development and enhancement of learner services in the College. In exercising this role, it reviews in detail reports from the appropriate College staff and administrative units and makes recommendations to the Academic Council for improvements.



AC establishes and  
sponsors a range of  
academic committees

AC reviews a range of  
academic boards and  
academic functions

SAB provides strategic  
advice to AC, EMT and  
BOD

### Overall Governance Structure

## **2.5 Terms of Reference for Programme Boards**

### **2.5.1 Purpose**

The Programme Board is responsible for the effective management, operation and review of the Programme and reports to the Academic Council. It is constituted for each programme that leads to an award. The College may incorporate two or more closely related programmes into a single programme board. Where two or more programmes have a common year a programme board may be established to facilitate this.

### **2.5.2 Composition and Membership**

- i. Chair: Programme Lead
- ii. Programme Lecturers
- iii. Regional Programme Administration Manager(s)
- iv. Head of Teaching and Learning
- v. Learner Support representative
- vi. Learner Representative (one per stage)
- vii. Director of Academic Programmes (ex-officio).

### **2.5.3 Meetings**

- Meetings of Programme Boards shall normally be held twice in each semester and scheduled in advance.
- Members shall be given at least 5 working days' notice of a meeting, to include the draft agenda and the associated papers for the meeting.
- Members have the right to seek to add an item to the agenda and any such request must be communicated to the Secretary, six days in advance of the meeting.
- The quorum for Programme Board meetings is 50% of the membership, plus one.
- In the event that the designated Chair is absent from the meeting, the members present shall appoint one of their membership present, to act as chair for that meeting.
- Recommendations are made, insofar as is practicable, by consensus. In the absence of consensus, decisions are made by open ballot, with the Chair having a casting vote in the event of a tie.

### **2.5.4 Functions and Responsibilities:**

Programme Boards have the following functions and responsibilities:

- To consider learner feedback.
- To consider lecturer feedback.
- To maintain the Approved Programme Schedule, Syllabi and Assessment Schedule.
- To ensure adherence to Marks and Standards.
- To review examination and continuous assessment results.
- To ensure an appropriate Teaching Learning and Assessment approach is implemented.
- To consider learner attendance issues.
- To examine the effectiveness of support services.

- To make recommendations on the use of existing resources and the need for new resources.
- To recommend appropriate external experts to Academic Council.
- To prepare Programmatic Review material.
- To review a draft of the Annual Programme Monitoring Report, prepared by the Programme Lead.

## **2.6 Terms of Reference for the Strategic Advisory Board:**

### **2.6.1 Purpose**

The purpose of the Strategic Advisory Board is to advise the Board of Directors, the Academic Council and the Executive Management Team on strategic issues that may impact on the work of the College. Agenda will include external guest speaker(s) on selected current and relevant subjects. This will offer the executive management the opportunity to discuss strategic matters in a forum, removed from the day-to-day management pressures, and with the benefit of external inputs.

### **2.6.2 Composition and Membership**

- i. Chair: An independent external person, with extensive knowledge of higher education and/or industry, with international experience.
- ii. President (in the event that the post of President is not held by the Chief Executive).
- iii. Director of Academic Affairs.
- iv. Director of Postgraduate Programmes and Research
- v. Director of Industry Engagement and Training
- vi. Chief Financial Officer
- vii. Registrar
- viii. Head of Academic Programmes
- ix. A recent graduate, who will act as a representative of the learner community.

### **2.6.3 Meetings**

- Meetings of the Strategic Advisory Board shall normally be held twice each year and scheduled in advance.
- Members shall be given at least 5 working days' notice of a meeting, to include the draft agenda and the associated papers for the meeting.
- Members have the right to seek to add an item to the agenda and any such request must be communicated to the Secretary, six days in advance of the meeting.
- The quorum for meeting of the Strategic Advisory Board is 50% of the membership, plus one.
- Recommendations are made, insofar as is practicable, by consensus. In the absence of consensus, decisions are made by open ballot, with the Chair having a casting vote in the event of a tie.

### **2.6.4 Functions and Responsibilities:**

- Conduct a high-level review of Strategic Plan and the Operational Plan.
- Formulate ideas for inclusion in the successor Strategic Plan.
- Advise on trends in higher education delivery, nationally and internationally.
- Advise on trends in industry.
- Advise on threats and opportunities in the College's operations.
- Advise on future niche areas with potential for adding to the College's suite of programmes.

## **2.7 Terms of Reference for Executive Management Team**

### **2.7.1 Purpose**

The Board of Directors shall appoint an Executive Management Team with primary institutional responsibility for the day-to-day management of the College.

### **2.7.2 Composition and Membership**

- I. Chairperson
  - i. President (in the event that the post of President is not held by the Chief Executive).
- II. Ex Officio Members
  - ii. Director of Post Graduate Programmes and Research
  - iii. Director of Academic Affairs
  - iv. Director of Industry Engagement and Training
  - v. Chief Financial Officer

The Executive Management Team may seek advice from other persons as it sees fit, to help in its decision-making.

It may also ask persons operating key support functions for the College, such as Finance and HR to attend particular meetings where their expertise may be beneficial to further inform decision-making.

### **2.7.3 Meetings**

- Meetings of the Executive Management Team shall normally be held monthly.
- Meetings are normally held face to face either in person or online.
- In the event that the designated Chair is absent from the meeting, the members present shall appoint one of their membership present, to act as chair for that meeting.
- Decisions are made, insofar as is practicable, by consensus. In the absence of consensus, decisions are made by open ballot, with the Chair having a casting vote in the event of a tie.

### **2.7.4 Functions**

The Executive Management Team has the following functions:

- To develop an Operational Plan for the implementation of the aims and objectives of the College's Strategic Plan, for approval by the Board of Directors.

The Operational Plan shall include action plans and the setting of goals and timescales for their achievement.

- To implement the Operational Plan as approved by the Board of Directors, including the monitoring of approved action plans and progress against goals.
- To enter into capital contracts up to the value of €25,000 in an individual contract. Proposed contracts above this figure are subject to approval by the Board of Directors.
- To manage resources to make sure that appropriate and effective facilities and services are available and scheduled to ensure the quality of delivery to learners, including making adequate resources available to the Academic Council to carry out its functions (such as appointing external examiners).
- To consider the Initial Programme Feasibility stage of new programme development, including feasibility and associated risk, and if approved to forward the application, with comments, to the Academic Council. Following this, it shall inform the Board of Directors of its decision.
- To review the rationale and business case for the development of all new programmes proposed. The Executive Management Team is responsible for completing this review prior to the submission of a new programme proposal for approval to the College's decision-making bodies, the Academic Council and Board of Directors.
- To manage and deploy staff, including recruitment, performance management and development of staff.
- To maintain and review the Risk Register, including identification, management and mitigation of risk, taking account of any additional advice from the Academic Council. The Risk Register is forwarded for review to the Board of Directors.
- In the exercise of these functions it shall not attempt to exercise any undue influence over academic decision making in the College.

## 2.8 Membership of Chief Executive/President on Units of Governance

The following table shows the President's membership of the major units of governance, when that role is held by the Chief Executive and if it is held by another person:

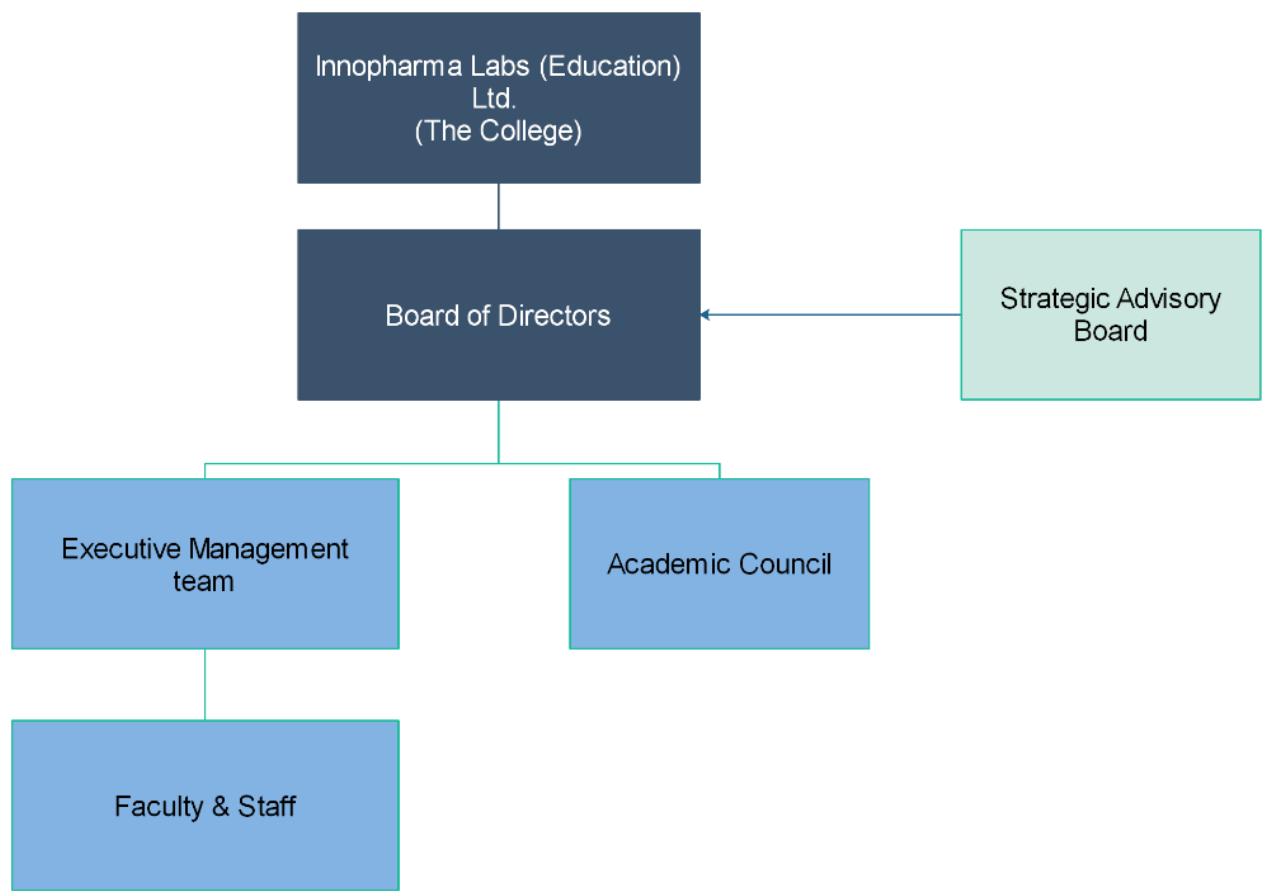
Scenario	Board of Directors	Academic Council	Executive Management Team
Post of President held by Chief Executive	<input checked="" type="checkbox"/>	No	<input checked="" type="checkbox"/>
Post of President held by person other than Chief Executive	No	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

## 2.9 Meetings of Units of Governance:

The following is a table of a typical schedule of meetings of the major units of governance.

	Board of Directors	Academic Council	Executive Management Team	Strategic Advisory Board
Sept	X	X	X	X
Oct			X	
Nov		X	X	
Dec	X		X	
Jan		X	X	
Feb			X	
Mar	X	X	X	X
Apr			X	
May		X	X	
Jun			X	
Jul		X	X	
Aug	X		X	

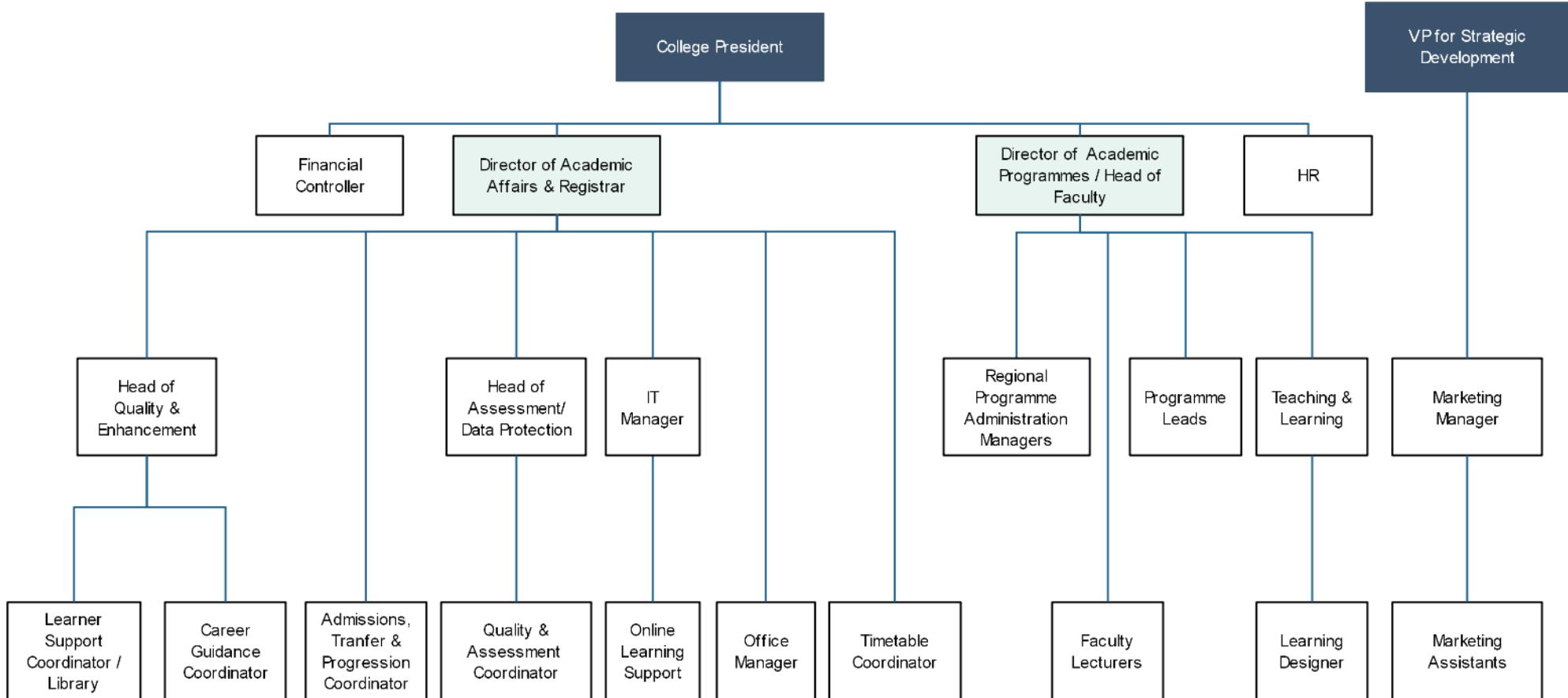
The Governance and Management Structure for the College is shown below.



**Governance and Management Structure**

## 2.10 Roles and Responsibilities

The College Organisation Structure is shown below.



### **2.10.1 College President:**

Reporting to the Board of Directors, the President is the CEO of the College.

#### **Responsibilities**

- The President is responsible for ensuring the implementation of the strategic plan determined by the Board of Directors.
- The President controls and directs the activities of the College and its staff.
- The President, working with the Executive Management Team, is responsible for the efficient and proper management of the College.
- Producing concept papers, business plans and funding proposals for potential funders including corporate and government funded initiatives.
- Coordinating with industry to further the overall growth strategy and strategic plan.
- Developing an effective network in industry, government, business fora, etc. to develop relationships with external and internal partners.
- The President provides a bridge between the Board of Directors and the management of the College.

### **2.10.2 Director of Industry Engagement and Training**

The Director of Industry Engagement and Training drives strategic initiatives and supports the development of long-term growth plans and profitability goals. The role includes analysing and recommending emerging industry trends, expansion opportunities, government initiatives, industry collaboration, internal business performance and business process improvement.

#### **Responsibilities:**

The Director of Industry Engagement and Training is responsible for:

- Leading the development and delivery of a strategy, framework and processes through which the College prioritises and manages its strategic development opportunities.
- Ensuring that the College has a coherent coordinated portfolio of development opportunities that are aligned with the College's strategy and ambition.
- Supporting the College to enhance its academic offerings and attract high-quality students.
- Working with the Executive Management Team to develop and execute the strategic plan and growth trajectory of the College.
- Representing the College's growth plan and strategy in external fora.
- Partnering with leaders across the organisation to take advantage of the company's core competencies. Recognise strategies under consideration which add value and those which do not add value.
- Ensuring projects are properly scoped and costed in order to make the implementation phase as smooth as possible.
- Assisting the sponsors of projects with the resolution and escalation of issues, and the unblocking of barriers or obstacles to ensure success.

### **2.10.3 Director of Academic Affairs**

Reporting to the College President, the Director of Academic Affairs is responsible for the maintenance of academic standards, and quality assurance. They are responsible for delivering major aspects of academic administration and learner services including learner discipline and the effective management of the Director of Academic Affairs office.

The Director of Academic Affairs is the main point of contact with awarding and regulatory bodies, including QQI.

The Director of Academic Affairs is a member of the Executive Management Team.

**Specific Functional responsibilities:**

The Director of Academic Affairs manages the following functions:

- *Academic Governance*

- Supporting the business of the Academic Council, and its sub-committees.
- The Director of Academic Affairs is secretary to the Academic Council.
- Academic Quality Assurance including, *inter alia*,
  - Safeguarding the integrity and currency of programme validation and awards, including compliance with the terms and conditions of programme approval and the requirements and regulations of accrediting bodies for ongoing provision of delivery.
  - Instigating review and, where necessary, revision of QA policy and procedure on an annual basis.
  - Facilitating and organising Programmatic Review and QQI Cyclical Review.
  - Leading academic policy formulation and educational development, including implementing, reviewing and up-dating academic policies such as the Academic Quality Assurance Manual and the College's Marks and Standards regulations.
  - Acting as advisor to the Board of Directors, the College President and Academic Council and its committees, on academic matters and specifically those of a regulatory nature.
  - In cooperation with the Director of Academic Programmes, leading the College through accreditation, recognition, validation and review events.
  - In cooperation with all staff, fostering a quality culture across all areas of the College.

- *Staff Development*

In cooperation with the Head of Teaching and Learning, working to organise and provide staff training seminars and workshops in curriculum design, delivery and assessment including those that support the College's Blended Learning Strategy.

- *Liaison Activities*

- The Director of Academic Affairs is the primary liaison with accreditation bodies.
- Liaises with national and international HE quality networks and agencies.
- In cooperation with the College President and other senior executives, facilitates academic partnerships with external institutions and providers of education.

- *Management of Information*
- The Director of Academic Affairs has responsibility for the creation, retention and maintenance of data relating to programme validation and content, and to the admission, registration and examination performance of students.
- The Director of Academic Affairs ensures that statutory requirements in relation to the information to be made available to learners are complied with.
- The Director of Academic Affairs has responsibility for compliance with GDPR through the College Data Protection and Record Management Policy.
- The Director of Academic Affairs authorises public information and communication.
- *Management and Administration*
- Acting as manager to the College Registrar, Head of Teaching & Learning, College Librarian and Research Specialist
- *Special Projects*

Undertakes projects that may arise from time to time as agreed with the Board of Directors and /or Academic Council.

## 2.10.4 Registrar

Reporting to the Director of Academic Affairs the college Registrar is responsible for the maintenance of academic standards, and quality assurance. They are responsible for regulatory compliance within the College, under the auspices of Academic Council; academic records, including admissions, examination, graduation and academic regulations. The Registrar is the College's designated Data Protection Representative. The registrar leads, manages and directs an academic team comprising admissions, examinations and assessment.

- **Academic Standards**
- Ensures that policies and procedures exist that underpin the quality of programmes; that these are followed and that they meet the appropriate standards.
- Management and revision of regulations in relation to breaches of the Code of Conduct and academic integrity.
- Ensuring there are current and appropriate QA policies and procedures in place and that they are implemented.
- Ensuring that examination standards are maintained through the management of the operation of the exams function, including exam sitting, external examiners, invigilation, implementing Examination Board decisions and organising graduation.
- In cooperation with all staff, fostering a quality culture across all areas of the College.

- *Student lifecycle*
- Recruitment, admissions, registration and examination processes for all students.
- Management of preparation and circulation of the European Diploma Supplement.
- Leads and assumes responsibility for day-to-day operations of admissions office, examinations and assessment.
- *Assessment*
- Managing the scheduling and timetabling of exams.
- Coordination of all examination sessions.
- Liaising with Programme Leads and teaching staff to ensure compliance with all examination requirements, including timely receipt of papers and QA compliance.
- Maintaining security and integrity of the assessment process.
- Management of Internal and External Examination Boards.
- Creating, quality assuring and maintaining assessment and awards information and documentation.
- Identifying procedures to enhance efficiency and effectiveness of the department.
- Liaison with external examiners.
- Management and coordination of graduation ceremonies.
- Supporting Faculty in addressing learner issues including academic integrity, failing/cause for concern students and reasonable accommodation in assessment requests.
- Taking lead responsibility for the management of the Student Information System in relation to assessment and awards.
- Liaising with QQI and all other relevant stakeholders as appropriate.
- Line management of the Examinations Team.
- Other such duties as commensurate with the role.

#### **2.10.5 Head of Academic Programmes**

Reporting to the Director of Academic Affairs, the Head of Academic Programmes has overall responsibility for academic leadership in the College. The Director of Academic Programmes is responsible for the programmes of the College, for teaching and learning development, and for the development and implementation of the policies and procedures governing the standard, content and delivery of validated programmes.

The Director of Academic Programmes leads, supports the academic team comprising of Programme Leads, Regional Programme Administration Team, lecturers and assessors in relation to new academic developments, programme quality enhancement initiatives and continuing development of programmes. Also, within their purview is the promotion of the highest academic standards, statutory frameworks and legislation, and awarding body regulations.

### **Specific Functional responsibilities:**

These include providing academic leadership and direction, and the efficient and effective management of resources. The Head of Academic Programmes manages and coordinates the following functions:

- *Academic Leadership*
  - Fostering a quality academic culture throughout the College.
  - Ensuring that staff have clear direction in relation to the College's strategy and operations.
  - Assuming responsibility and accountability for the day-to-day academic operations of the College.
  - Chairing Examination Boards, if required.
- *Academic standards and quality assurance*
  - Promoting a quality culture throughout the College by ensuring that appropriate academic standards are established and embedded in programme development and delivery.
  - Ensuring that processes are in place for monitoring the application of quality assurance policy and procedure as it relates to programme development, implementation and review (both internal and external).
  - Ensuring that criteria are set for review and evaluation and revision of programmes of education and training.
  - Ensuring that appropriate action is taken if there are any deviations from set standards.
  - Implementing academic policies, standards, processes and procedures, to ensure all learner and academic related processes are fair, consistent, robust and transparent; and are compliant with statutory frameworks and legislation.
  - Ensuring that validation requirements are implemented in full for all approved programmes.
  - Participating, as required, in external fora on quality assurance, programme development, delivery mechanisms, assessment and benchmarking.
  - Operating the procedures outlined in [Section 5](#) for Programmatic Review, as they relate to the process of programme review and amendment.
  - In cooperation with all staff, fostering a quality culture across all areas of the College.
  - Evaluating proposals for the appointment of External Examiners and recommending appointments to Academic Council, as outlined in [Section 5](#).
- *Student Lifecycle*
  - The Head of Academic Programmes has ultimate responsibility for the delivery of all academic programmes.
  - The Head of Academic Programmes is responsible for the overall coordination and development of assessment in conjunction with supporting functions.
  - The Head of Academic Programmes, through the faculty and staff they lead, is responsible for the overall operation of assessment and examination.

- *Management and Administration*
- Supports Programme Leads, Regional Programme Administration Team, lecturers and assessors.
- Serving as a link between faculty, staff and the Director of Academic Affairs.
- *Liaison Activities*
- In cooperation with the Director of Academic Affairs, acting as a liaison with accreditation bodies and collaborating partners.
- *Programme Design, Development and Validation*
- Providing a leading role in the continuing academic development and improvement of validated provision in the College.
- Leading staff in the College through new programme design and development and submission to Academic Council.
- *Programme Delivery*
- Managing and directing the academic team.
- Participating, as required, in academic staff recruitment.
- Providing advisory recommendations to the President on all academic appointments, and promotions.
- Ensuring that appropriate resources and facilities are available to deliver and assess all programmes of teaching and learning.

#### **2.10.6 Head of Quality Assurance and Admissions**

The Head of Quality Assurance and Admissions reports to the Director of Academic Affairs and the Registrar.

Working with the Director of Academic Affairs and the Registrar, the Head of Quality Assurance and Admissions is responsible for ensuring quality assurance policies and procedures are effectively implemented and integrated throughout all levels of the organisation, and that all staff have a clear understanding of their roles and responsibilities in relation to these, and to oversee and co-ordinate the Admissions process across all programmes and locations in conjunction with the Regional Programme Administration Managers.

The Head of Quality Assurance and Admissions is the primary day-to-day point of contact between the College and QQI.

#### **Specific Functional responsibilities:**

- Proactively initiating quality assurance activity within the College; implementing and monitoring quality assurance policies and procedures; reporting to the Academic Council in relation to all academic dimensions of quality assurance at the College, including:
  - Student recruitment, retention and achievement
  - Indicators of teaching quality and teaching staff performance
  - Delivery of curriculum, including resource and materials development
  - Student, staff and stakeholder feedback
  - Programme review and development

- Ensuring the dissemination of information pertaining to quality assurance across all academic and teaching staff; leading staff development activities to embed quality assurance in staff practice.
- Overseeing the authorship, maintenance and review of all documentation relevant to the College's engagement with QQI.
- Supporting programme leaders in advising on the quality assurance aspects of programme validation and programmatic review activity and overseeing the implementation of the approval process.
- Monitoring and reporting on implementation of quality improvement plans.
- Developing and managing the range of non-academic learner services in the College, including:
  - Disability Support Service
  - Health Services including Counselling Services
  - Careers Service
- Representing the College at appropriate events.
- Maintaining an external profile through engagement with appropriate bodies and organisations.
- Performing any other reasonable duty, for example, marketing activity, commensurate with the level of the role.

**Admissions Specific Functional responsibilities:**

- *Pre-Admissions*
  - Ensuring that admissions arrangements are clear and accessible to all prospective learners.
  - Supporting the marketing team to ensure that all marketing material contains statements on the Awarding Body, the Award Type, The Award Title, The Level of the Award and the credits attached to the award.
  - Providing assistance with recruitment activities, admission publications, and information sessions.
  - Providing support to prepare admission related presentations for information events.
    - *Admissions*
  - Overseeing the administration of the College's admissions system and ensuring that all Regional Programme Administration Manager are following protocol in admissions procedures.
  - Providing a professional, welcoming service to prospective applicants and others who are interested in understanding more about the College and our programmes of study and who engage with the College in person, by telephone or digitally.
  - Advising applicants about the programmes offered, admission procedures, eligibility and costs involved.
  - Facilitating the submission by applicants of all required documentation to support the application.
  - Co-ordinating the follow-up for any enquiries through direct meetings, live chat, phone calls and emails in a timely manner.
  - Overseeing the analysis of applications based on approved admission policies.
  - Organising the interview schedule for applicants to understand their objectives and background.

- Liaising with the Head of Faculty/Programme Lead in processing admissions post interview.
- Overseeing course offers and tuition fees request, ensuring that decisions regarding the allocation of places on programmes are timely and transparent.
- Where necessary, ensuring that applicants who wish to appeal an admissions decision are guided through the process.
  - *Registration of students*
- Providing assistance to the students to complete all the enrolment documentation.
- Ensuring that all registered learner data is maintained on the enrolment systems in line with GDPR.
- Ensuring that all class lists are updated regularly to reflect changes in learner's attendance.
- Providing guidance and information to any students wishing to progress.
  - *Other responsibilities*
- Developing innovative communication strategies, recruitment strategies and enrolment plans in coordination with senior management to attract and enrol more students.
- Developing, monitoring and reviewing the integrity and suitability of the various admissions pathways and the various entry quotas.
- Ensuring that all applicants are treated in a fair, equal and consistent manner.
- Keeping up to date on new programmes or changes to existent programmes to ensure that advice to applicants is always current.
- Generating an Admissions report on each programme by preparing statistical information, in order to enhance management decision making.
- Maintaining a database of learner information, telephone logs and learner feedback in order to generate learner reports for management whenever required.

#### **2.10.7 Director of Postgraduate Programmes and Research**

Reporting to the President, the **Director of Postgraduate Programmes and Research** provides academic leadership and management of the programmes.

##### **Specific Functional responsibilities:**

- Supporting the implementation of the College Strategic Plan.
- Taking operational responsibility for the delivery of programmes.
- Managing the development and quality of teaching, research and learner support services.
- Making recommendations for staff development.
- Monitoring and managing faculty resources.
- Supporting learner recruitment, open days and other activity, such as graduation.
- Cooperating with the Director of Affairs and Executive Management Team in the efficient running of the College.
- *Academic Leadership of the Faculty:*
- Encouraging excellence in teaching, learning, research and professional activities within the College.
- Appointing an academic team to develop programme submission.

- Facilitating the collection of learner feedback and the resultant implementation on matters arising from that feedback as appropriate.
- *Staff Management and Development:*
- Appointing an academic programme development team to develop a programme submission.
- Providing orientation and guidance to all staff in the faculty.
- Undertaking effective planning and development review, including the management of staff performance and performance reviews; support for the professional development of all staff in the College.
- Contributing to the recruitment, selection, induction, administration, performance management and resolution of grievances of staff in the College.
- Ensuring that the duty of care owed to staff, and learners is exercised, particularly in relation to the maintenance of a learning/working environment free from bullying, harassment or discriminatory practices.
- *Compliance*
- Complying with the QA and academic standards contained in the Quality Assurance Manual.
- Ensuring academic staff are aware of, and adhere to the policies, guidelines and regulations.

#### **2.10.8 Programme Lead**

Reporting to the Director of Academic Affairs, the **Programme Lead** is responsible for the academic coordination, management and development of a single programme. This includes the management and support of learners on that programme, supported by the Regional Programme Administration Manager.

##### **Specific Functional responsibilities:**

- Mentoring learners and ensuring they have access to guidance and support on both academic and non-academic matters related to the learner life cycle.
- Working with the Head of Academic Programmes to allocate appropriate staffing for modules.
- Reviewing programme documentation to ensure teaching schemes, module guides, reading lists, are relevant, current and accurate.
- Ensuring, where appropriate, that all content on the VLE is accessible, meets minimum standards and is populated with up-to-date material.
- Ensuring the appropriate teaching, learning and assessment strategies are implemented and that modules are taught and assessed in accordance with the Approved Programme Schedule.
- Co-ordinating assessment submission deadlines across a stage to ensure an appropriate learner workload.
- Ensuring timely feedback is delivered to learners.
- Ensuring all examination papers for modules on their programme are written and moderated well in advance of the examination taking place, are in accord with submission timetables and are appropriate to the programme level.

- Liaising, through the Head of Faculty and Director of Academic Programmes, with the relevant External Examiners.
- Ensuring examination results for modules on their programme(s) are inputted to the Learner Management System in good time prior to Examination Board Meetings.
- Communicating with learners on academic and personal issues, liaising with the Class Representatives and participating in the Class Representative Meetings.
- Working with the Regional Programme Administration Manager and Learner Support Coordinator in the management and support of learners on programmes.
- Reporting to the appropriate Programme Board related matters such as learner feedback, learner numbers, attendance and performance indicators.
- Preparing and managing the programme action plan based on feedback from External Examiners, staff, 'Module Review and Development Plans', learner feedback and ongoing review against the requirements of the Quality Assurance Manual.
- Collating all programme-based data into the Annual Programme Monitoring Report to facilitate monitoring and enhancement.
- Leading the Programme Team in the continuous review and improvement of the programme.
- Leading the revalidation process to ensure that all team members are fully briefed and able to assist in the process.
- Developing and implementing transition plans on completion of a revalidation process.
- Leading on the validation process for new programmes assigned to them by the Head of Faculty.
- Supporting recruitment activity as required.

#### **2.10.9 IT Manager**

**The IT Manager** reports to the Chief Financial Officer with a dotted line to the Director of Academic Affairs.

The key objective of the IT Manager is to ensure suitable information technology and educational resources. This includes educational technology and any VLE required by the College, identified at programme development and agreed at validation.

#### **Specific Functional responsibilities:**

- Liaising with Programme Lead and Head of Faculty to identify and specify the IT and computing requirements for programme delivery.
- Providing and managing sustainable computing facilities accessible to staff and learners.
- Systematically upgrading hardware and software in line with technical developments and advising the College on more effective tools and methodologies to enhance the learner experience.

- Coordinating the rota of online support personnel for all online delivery of classes and ensuring monitoring of chat box to support learners and lecturers.
- Coordinating the rota of online support for examinations process.
- Providing training on learning platforms such as Zoom and Innoskills (Moodle) for new staff.
- Managing WiFi and other classroom technology required for face-to-face delivery of classes.
- Maintaining an inventory of equipment and purchasing any necessary hardware required for staff members.
- Maintaining a comprehensive list of IT and computing resources and ensuring that all software is properly licensed and copyright protocols are respected. Other responsibilities include firewalls, backups and security of data.
- As a key member of the data protection team, ensuring all regulatory requirements are met.
- Striving to provide excellent customer service to learners and staff with IT queries / requirements.
- Providing and informing staff of efficient IT solutions for conducting business – such as Sharepoint, Microsoft Teams, GoToMeeting, Solgari and other software solutions.

#### **2.10.10 Head of Teaching and Learning**

The Head of Teaching and Learning reports to the Director of Academic Affairs and is responsible for driving excellence in teaching and learning across all faculties, with a focus on innovative practices and digital technologies. Provides strategic guidance and support to academic staff in enhancing their teaching methods, particularly in blended and e-learning design, while promoting digital innovation to transform traditional teaching methods and boost student engagement. Oversees the design, delivery, and quality of programs and plays a key role in guiding and supporting teaching, learning, and assessment practices across the institution. Additionally, manages and directs the College's learner services, ensuring alignment with institutional goals and fostering a culture of contemporary educational research and practice. Collaborates with senior leadership and Academic Council to advance teaching and learning strategies, while developing and implementing policies to enhance educational practices.

##### *Teaching and Learning Strategy*

- Provides strategic leadership and support of standards of excellence in teaching and learning initiatives
- Provide support and guidance for new and existing lecturers, and support staff to advance their teaching, learning and assessment practices
- Provides a leading role in the enhancement of teaching and learning, particularly in blended Learning and e-learning design
- Promotes digital innovation in education with the aim to transform traditional teaching methods and enhance student engagement

- Fosters innovation in teaching methods, and ensuring alignment with institutional strategies
- Develops and implements policies to enhance educational practices
- Collaborates with senior management and department heads to align teaching and learning strategies with institutional goals
- Promotes contemporary educational research, theory and practice in pedagogy, assessment and reporting
- Disseminate information on Teaching and Learning events, awards, grants, development opportunities, and relevant policy update

*E-Learning Development, Design and Digital Innovation*

- Developing high quality online tutorials and resources for the College's academic team
- Supporting academic staff in the design and development of programmes for blended learning delivery
- Creating learning objects and digital media for use in the curriculum in consultation with subject matter experts
- Advising academic staff on suitable pedagogic approaches for inclusive and dynamic blended and online delivery
- Making recommendations to the Director of Academic Affairs and the Head of Academic Programmes on the use of the Virtual Learning Environment (VLE).
- Researching new equipment, software and teaching techniques that will enhance the online experience for the learner.

*Academic Standards and Quality Assurance*

- Ensures compliance with national and international quality standards
- Oversees the review and enhancement of teaching and learning practices
- Participates in quality assurance processes, including program reviews and accreditation in accordance with College and QQI requirements
- Support the Head of Academic Programmes in the oversight of all taught provision offered by the college and contribute to processes to assure and enhance quality, as outlined in Section 5.
- Assist Head of Academic Programmes and the Programme Development Group in preparing programme documentation for submission, as outlined in Section 5.
- In cooperation with all staff, fostering a quality culture across all areas of the College.

**Learner Support**

- Designing, delivering and coordinating workshop programmes across all disciplines on key academic support issues e.g. study and research skills, note taking, learning technologies, academic writing, exam and revision techniques.
  - Developing specialised one-to-one support for students with disabilities, mature students and students availing of counselling services.

- Managing and developing a range of online study skills resources for learners.
- Assisting in the preparation of awareness and publicity material relating to academic supports (including posters, flyers, email communications, and social media).
- Assisting in projects to include self-evaluation with colleagues to enhance and develop the learner support services.
- Assisting with programme monitoring and learner feedback mechanisms.
- Identifying appropriate third-party counselling services which best meet the learner needs.
- Maintaining currency in regulations and standards relating to learner supports.

*Staff Development*

- Responsible for academic and support staff induction and ongoing development of new staff members
- Provides professional development opportunities for academic and support staff
- Encourages innovation in teaching practices among faculty members.
- Responsible for organising and providing staff training seminars and workshops to enhance curriculum and module design and delivery standards, as well as emerging blended learning, teaching and assessment practices, such as innovative pedagogies, technology-enhanced learning, and alternative assessment strategies

*Programme Design, Development, and Validation*

- Assist with the development of new programmes through internal and collaborative development
- Ensures programs meet validation requirements and quality standards
- Collaborates with faculty to design and enhance curriculum offerings

*Programme Delivery*

- Ensures effective delivery of teaching and learning programs.
- Monitors program quality and makes recommendations for improvement.
- Supports faculty in implementing innovative teaching methods and technologies.
- Participating, as required, in academic staff recruitment
- Providing advisory recommendations to the Director of Academic Affairs on all teaching and learning initiatives and enhancements

*Management and Administration*

- Manages budgets related to teaching and learning initiatives
- Coordinates administrative tasks related to teaching and learning programs
- Oversees the development of teaching and learning policies and procedures

*Information Management*

- Analyses data on teaching and learning effectiveness to inform strategic decisions.
- Maintains records of teaching and learning initiatives and outcomes.

- Communicates key information to stakeholders regarding teaching and learning developments.

*Liaison Activities*

- Collaborates with external bodies to stay updated on best practices in teaching and learning.
- Represents the institution at national and international forums related to teaching and learning.
- Liaises with other departments to ensure alignment of teaching and learning strategies.

**2.10.11 Regional Programme Administration Manager**

The **Regional Programme Administration Manager** reports to the Head of Faculty.

The key roles of the Regional Programme Administration Manager are:

- To be the face of the College for the learner, within the community and within industry.
- To understand the learner's capabilities and coach learners in their job search.
- To work with learners and industrial contacts to obtain work placements and/or full-time roles within industry.

**Specific Functional responsibilities:**

- *Recruitment of students on to programmes*
- Attending weekly meetings during the recruitment phase of relevant programme.
- Working on recruitment strategy including working with DSP, Intreo, media and local events.
- Requesting all applicants to submit required documentation.
- Reviewing documentation and set up interviews for suitably qualified applicants.

Organising local open days, including organising venue, presenting, and coordination of interviews and relevant paperwork.

- *Co-ordinating Induction*
- Creating final class list for the programmes.
- Inviting all successful applicants to attend scheduled induction day.
- Prior to induction ensure that all learner information is up to date to include:
  - Induction Presentation
  - Programme handbook
  - Programme Timetables (including Labs dates)
  - Attendance monitoring procedure
  - Social Welfare documentation (where needed)
  - Student Code of Conduct
  - Innoskills (Moodle)/Zoom set-up and troubleshooting
  - Ensure Springboard applications are complete

- Communication with Innopharma staff/lecturers regarding induction dates.
- Contacting any successful applicant who does not attend and update the class list accordingly.
- *Programme interaction with learners*
  - Creating learner profile records.
  - Attending and/or delivering Work Preparation module.
  - Support learners to complete CVs to required standards post formal module.
  - Supporting learners in preparation for job interviews.
  - Updating placements and jobs on Innopharma central database.
  - Providing support to learners who gain employment to complete programme.
  - Monitoring and tracking weekly attendance in central database.
  - Communicating change of status (working, other change of circumstances affecting attendance) to Dublin office, ensuring that Change of Status form is completed and signed by learner.
- Overseeing examination preparation in conjunction with the Head of Assessment.
  - completing exam information session to include all examination procedures
  - communicating timetable information to class group
  - communicating any change in learner circumstances
  - organising suitable exam venues (where needed)
  - liaising with exam supervisors / invigilators regarding exams dates and organisation
  - organising delivery of exam papers/return exam scripts
  - attending Exam Board meetings
  - communicating exam results procedures
- Communicating with lecturers on any learner and timetable issues.
- Organising industry visits and guest lecturers.
- Providing support (technical and administrative) for online learning modules.
- Providing ongoing support to learners to complete the programme and to ensure learning outcomes are achieved.
- *Other duties*
  - Seeking testimonials from learners for future publications and advertising.
  - Gathering general and formal feedback from learners throughout the programme.
  - Organising and attending scheduled Programme Board Meetings.
  - Organising end of term lunch event for learners.
  - Post-course work with participants to overall achieve our objectives in attaining employment outcomes (75% minimum target).

### **2.10.12 College Librarian and Research Specialist**

Reporting to the Director of Academic Affairs, the College Librarian and Research Specialist also ensures library resources and research supports are fully integrated into academic requirements and validation standards. As a core contributor to the college's academic infrastructure, the College Librarian and Research Specialist participates in strategic working groups focused on Research, Academic Integrity, and Artificial Intelligence, providing expert guidance on research topics and assisting the Registrar with investigations into academic misconduct.

The College Librarian and Research Specialist is responsible for the strategic development and operational oversight of Innopharma's library service, while working in close partnership with the Director of Postgraduate Programmes & Research to support the development and maintenance of the scholarly research ecosystem.

The role serves as a critical bridge to scholarly publishing by managing the Institutional Repository and serving as Editor-in-Chief for the internal academic journal, coordinating with cross-functional teams to showcase the institution's research profile. Operationally, the College Librarian and Research Specialist collaborates with the IT Department to manage the Library Management System (LMS) and secure authentication protocols (e.g., OpenAthens), ensuring seamless access to digital collections. Pedagogically, the role is responsible for the design and delivery of a comprehensive suite of workshops tailored to enhance learners' academic skills and integrity, while working with the Director of Postgraduate Programmes & Research to develop mandatory training and resources for Level 9 dissertation supervisors, ensuring a standardised, high-quality approach to research guidance across all validated programmes.

### **2.10.13 On-line Learning Support Team**

Reporting to the IT Manager, On-line Learning Support personnel are responsible for the provision of online support to classes broadcast live or recorded.

#### **Specific Functional responsibilities:**

- Ensuring all learners have access to the virtual learning environment.
- Scheduling of online classes in the online software application and notification to all learners.
- Ensuring all learners can access the online class when required.
- Providing troubleshooting IT support related to online classes, specifically login, audio and video issues, broadband issues that are in the control of the College, browser choice, etc. The online class support is not expected to resolve issues relating to the learner's broadband provider.
- Providing IT support to the lecturer relating to access, broadcast and recording of online classes.
- Liaising between the lecturer and learner to ensure questions and comments in the learner chatbox are addressed and discussed.
- Ensuring the class is recorded and archived on the VLE for future access.
- Ensuring audio and video equipment is in good working order at all times.
- Ensuring online Attendance is accessible for the lecturer.

- Feeding back any concerns, suggestions or otherwise to the lecturer if appropriate.

## 2.11 Control Sheet

Policy and Procedure Title	Governance
Responsible Officer(s)	President
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	December 2025
Supersedes	2.0
Next Revision Date	December 2026
Designated Reviewers	Executive Management Team, Academic Council, Director of Academic Affairs
Scope	All programmes

### 2.11.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	President	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	President	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	The governance and management structure within the College has been restructured. The terms of reference for the Academic Council have been clarified, and detailed terms of reference all units of governance are included. The governance structure is represented visually, and a separate organisation chart is also provided.	President	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	The Governance Graphic has been updated to provide greater clarity, additional duties referenced in other sections of the QAM have been included in the the responsibilities of main governing bodies, responsibilities for the Director of Academic Affairs and Registrar provider greater clarity on the role of being the main liaison with QQI, clarity is provided on the role of Chair for meetings of major units of governance when the Chair is absent.	President	Academic Council

Version 4.0	10 <sup>th</sup> March 2021	The Composition for Academic Council (Section 2.4.2) has been revised to include an external Deputy Chair, to outline the tenure of the Chair and Deputy Chair and to update section 2.4.3 on Meetings to clarify that the Deputy Chair will act as chair in the event of his / her absence from the meeting.	President	Academic Council
Version 5.0		Frequency of meetings for EMT from bi-monthly to monthly	President	Academic Council
Version 6.0		Details of the BOD have been updated to acknowledge change in structure of Innopharma Education	Director of Academic Affairs	Academic Council
Version 7.0		Composition of AC has been updated to include an SME in Further Education	Director of Academic Affairs	Academic Council
Version 9.0		Job Descriptions have been updated to include the duties of Head of Teaching and Learning and that of the College Librarian and Research Specialist	Director of Academic Affairs	President

### 3. Our Learners' Charter and Associated Policies and Procedures

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Governance and Management of Quality</li><li>Documented Approach to QA</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and learners
Policy Owner	Director of Academic Affairs

The College is committed to the following core values, which underscore our organisational culture, our strategic priorities, and our decision-making.

#### 3.1 Core Values

The following core values are included in the College's Strategic Plan 2020-2025.

##### 3.1.1 We strive for Excellence

We are committed to quality and continuous improvement. That means taking a best practice approach to everything we do.

##### 3.1.2 We act with Integrity

We are committed to honesty, transparency and upholding the highest ethical standards. That means being accountable to our learners, our partners, our stakeholders and the wider community.

##### 3.1.3 We value Diversity

We are committed to inclusion, equity and mutual respect. That means actively working to eliminate bias and create an environment where every member of our community can excel.

##### 3.1.4 We foster Innovation

We are committed to creativity, collaboration and problem-solving. That means continually seeking ways to optimize, enhance and add value to all our activities.

##### 3.1.5 We nurture Collaboration

We are committed to mutual support, teamwork and cooperation. That means developing an open and participatory environment for our learners, partners and each other.

Our Learner Charter has been drafted in line with these values and expresses the College's commitment, through a partnership with our learners, to ensure good working relations in the College and an efficient, effective and supportive academic environment.

#### 3.2 Learner Responsibilities and Code of Conduct

##### 3.2.1 College Responsibilities

The College is committed to:

- Providing programmes of study that will provide our learners with opportunities for personal and social development.
- Ensuring our programmes are relevant to current and future economic and social needs in the country and in a European context.
- Provide support mechanisms to assist our learners to complete their programmes.
- Providing a high-quality teaching and learning environment for our learners.
- Promoting and supporting progression through the National Framework of Qualifications.
- Promoting equality of opportunity and the recognition of the diversity of our learner groups.
- Using learner feedback as part of its processes for monitoring and evaluating the effectiveness of programmes and services.

### **3.2.2 Learner Expectations**

Learners at the College have the right:

- To be provided with up-to-date and accurate information relating to programmes, facilities and services.
- To have applications considered in a fair, efficient and timely manner.
- That they will have any special requirements considered by the College.
- To receive a high-quality educational experience and support services.
- To receive appropriate feedback on their academic progress and transparency regarding allocation of marks.
- To representation on the College's governance structures.
- To be treated with courtesy and respect and not suffer discrimination.
- To fair and just procedures, including appropriate appeals procedures, in all matters involving breaches of the Code of Conduct.
- To be able to represent personal views in a reasonable manner.

### **3.2.3 Expectations of the College**

The College expects that learners will:

- Provide accurate and comprehensive information about themselves, their qualifications and previous experience.
- Inform the College if their personal circumstances change, so that appropriate interventions may be deployed.
- Inform the College if they decide to withdraw from their studies.
- Treat all members of the College community with courtesy and respect (both in physical and virtual environments).
- Inform the College of any concerns regarding equality, discrimination, harassment or safety.
- Behave in a manner that will not bring the College into disrepute.
- Participate in the College induction and orientation activities.

- Submit all coursework in line with guidance and within the stipulated time.
- Adhere to the College's Assessment Regulations, including adherence to the highest standards of academic integrity.

### **3.3 Code of Conduct for Learners**

The College recognises that its learners are responsible individuals, capable of making informed decisions about their behaviour. It expects that each learner while engaged in College related activities will behave in a mature, courteous and honest manner which protects the reputation of the College. While self-discipline will be expected and encouraged, failure to meet the standards expected may result in sanctions up-to-and including suspension and exclusion.

The following Code of Conduct with specific provisions shall apply:

1. It is the learner's responsibility to ensure that any College fees or charges are paid.
2. Learners must ensure they are validly registered on their module/programme and carry their learner card.
3. Learners must obey any lawful instruction of the College staff.
4. Learners must not behave in a manner that may infringe the rights of others.
5. Learners must respect College property and that of all members of the College community, at all times.
6. Learners must adhere to the academic discipline of the programme, including the requirements of attendance and assessments.
7. Learners must comply with the College's Internet Access and Usage Policy (Section 10.1.6.4 Internet Access and Internet usage policy)
8. Learners must ensure that they behave appropriately in their communications on or through social media.
9. Learners must comply with the Assessment Regulations of the College.
10. Learners must comply with Health and Safety regulations of the College generally and any specific regulations related to their programme.
11. Vehicles and bicycles may be parked only in authorised places and are parked at owner's risk.
12. The College does not accept responsibility for any loss of personal property. Any such loss should be reported to the College without delay.

### 3.4 Policy on Communication for Learners

QA Area (s)	Learner Responsibilities
Applies to	<input type="checkbox"/> Staff only <input checked="" type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

#### 3.4.1 Purpose

The purpose of this policy is to outline the principles and guidelines of appropriate and professional communication for Innopharma Education learners.

#### 3.4.2 Scope

This policy has been written as a guide for learners in terms of appropriate communication in the learning environment. In the next section, you will find the principles for professional communication for learners along with guidelines and examples.

This policy applies to all Innopharma Education programmes, inclusive of those delivered under collaborative provision arrangements, excepting where this policy directly conflicts with the QA procedures of a collaborative partner.

This policy applies to learners while enrolled on a programme with Innopharma Education or its partner colleges, TU Dublin, and Griffith College.

This policy does not apply to non-enrolled learners.

#### 3.4.3 Policy

- *Principles*

Communication within Innopharma Education must follow the principles<sup>4</sup> outlined below:

- Confidentiality
- Completeness
- Conciseness
- Consideration
- Concreteness
- Clarity
- Courtesy & Respect
- Correctness

- *Guidelines*

All communication by learners within Innopharma Education will adhere to the guidelines<sup>5</sup> outlined below. In practice, this means that when you communicate, you should always:

<sup>4</sup> Adapted from: Zani, R. M., Ali, S. & Samanol, S. (2011) 'Effective communication leads to productivity improvement in the organization', *Elixir Management Arts*, 39 (2011), 4818-4821.

<sup>5</sup> Adapted from:

Student Guidelines for Communicating in Online, Professional Contexts. *Centre for Teaching Excellence, University of Waterloo*.

### Respect the privacy and confidentiality of fellow learners (Confidentiality)

- Do not share personal information pertaining to others with third parties. For example, if someone emails/messages you, requesting a classmate's phone number or email address, **always** check with the individual first, before giving out their contact information.
- Do not store/keep personal information pertaining to others without their knowledge and consent.
- Always check with the individual if sharing their contact details within the College.
- Be prudent in terms of personal information and/or personal details that you share about yourself. For example, do not post contact details/sensitive information in group chats, forums, online activities or discussions.
- Do not Cc peers/classmates on emails without their consent.
- Do not forward emails from peers/classmates without their consent.
- Be mindful of chain emails and sensitive information within that may be shared inadvertently. Always create a new email for a new query or topic.

### Provide all necessary information (Completeness)

- When communicating with staff or lecturers, ensure that you have provided all the necessary information in order for them to assist you with your query. For example:

*Incorrect: Hi Joe, I can't find the lecture slides.*

*Correct: Hi Joe, I can't find the lecture slides from Wednesday's lecture on Learning Strategies.*

- If you are emailing staff or lecturers about a particular issue, make sure to include what you would like them to do in order to assist you with the particular issue. For example:

*Incorrect: Hi Joe, I can't attend the workshop on Academic Integrity.*

*Correct: Hi Joe, I can't attend the workshop on Academic Integrity. Is it possible to access the presentation slides or will the workshop run again during the semester?*

- Always sign off on emails with your full name, the name of the programme you are studying and the name of your cohort. For example:

*Kind regards,*

*Joe Bloggs,*

*Level 6 Food Science and Technology – Dublin, September 2021*

### Communicate in a concise and succinct manner (Conciseness)

- Avoid writing paragraphs of text when emailing a member of staff or a lecturer.
- Evaluate what the best method of communication is for the query that you have (call Vs email).
- In order to communicate concisely, avoid repetition.
- Avoid unnecessary jargon and emoticons in professional communications.

- Write in clear, concise sentences. For example:

*Incorrect: Thanks. Will do.*

*Correct: Thank you for your email. I will attend the workshop on Tuesday 2<sup>nd</sup> of February at 3pm.*

- Avoid using short forms of words such as “u 2” instead of “you too” or abbreviations such as “prob” instead of “probably”/“doc” instead of “document”.
- Avoid informal acronyms like LOL or BTW. Formal acronyms such as ASAP are acceptable.
- Avoid using all caps in written communications as it can be interpreted as shouting. For example: “THANK YOU FOR YOUR EMAIL”.

Be considerate of the individual receiving your message (Consideration)

- Prepare communication with the message receiver in mind.
- Be mindful that humans are at the other end of communication; put yourself in their shoes before communicating.
- When sending emails, make the subject line of the email specific and clear. For example:

*Subject: Query regarding second assessment – Learning to Learn module*

- For emails, use standard font styles such as Times New Roman, Calibri, Arial in a size 12 or 14. Avoid elaborate font styles.

*Incorrect: Hello/Hello/Hello*

*Correct: Hello/ Hello/Hello*

- If an email asks you to RSVP or acknowledge receipt of it, make sure to do so as this is important for the recipient in terms of planning.
- If someone is consistently being negative in the online environment (discussion forums, chat box, WhatsApp) or in the physical environment, bring it to the attention of your Programme Manager.

Ensure your communication is specific (Concreteness)

- When communicating, ensure that communication is specific and detailed rather than general.
- If communicating to staff on behalf of the class, use specific information. For example:

*Incorrect: Some of the class can't access the lecture recording.*

*Correct: I have been contacted by five classmates stating that they can't access the lecture recording for the Learning to Learn module that took place on Tuesday 14<sup>th</sup> August.*

- Be specific when engaging in group work or group study in person or online. For example:

*Incorrect: I will send it next week.*

*Correct: I will complete the notes for lecture 4 and share them with you by 12pm next Wednesday.*

- Follow the plain language guidelines to avoid misunderstandings. Click [here](#) for more information.

Avoid ambiguity by communicating in a clear manner (Clarity)

- Be clear in the purpose of your communication.
- Information and required actions should be clear to the reader.
- Avoid long sentences conveying multiple points. If emailing staff or a lecturer, communicate clearly. For example:

*Incorrect: I thought the lecture was on Friday and I talked to work and they said I can have Friday off but only if I work Thursday but I can't work Thursday because I have my WP assignment due.*

*Correct: Please note that I will not be able to attend the online lecture on Friday this week for the Learning to Learn module. I will watch the recording and get in touch if I have any questions regarding the content.*

- If you are calling the office, have at hand the details of who you would like to speak to and what you are ringing about.

Practice courtesy and respect when communicating with staff and fellow learners (Courtesy & Respect)

- When communicating, it is important to be polite and have good manners.
- Do not post insulting messages on forums or chat groups.
- Respect all individuals equally without discriminating on the nine grounds of equality legislation: age, gender, race, religion, civil status, family status, sexual orientation, disability (physical, mental, or intellectual) or membership of the Traveller community.
- Be polite, considerate, and mindful of other individuals.
- Always be courteous when communicating with staff and fellow learners. For example:

*Incorrect: What?*

*Correct: Could you please repeat that?*

- Be mindful of humour and sarcasm as it can easily be misinterpreted.
- Be mindful that tone may not be obvious in written messages. For example:

*Incorrect: I didn't see the email!?!?*

*Correct: Apologies for not seeing the email sooner.*

- In terms of online communication, do not say anything that you would not say to someone in person. Before you write something or respond to something in the online environment, ask yourself “Would I say this out loud?”
- Communication and contributions in the online environment also represent you, so ensure you act professionally at all times.
- Respect other people’s opinions and be open to new perspectives.
- Do not expect instant responses to emails from staff or classmates. For staff and lecturers, it is reasonable to expect a response within 48 hours of sending an email.

- Do not interrupt others while they are speaking. Rather, wait for them to finish or in online sessions, use the Raise Hand function.
- Use a lecturer's proper title, such as "Dr."
- Address lecturers and staff as they have introduced themselves. For example, if a lecturer introduced themselves as Dr. Blogg, don't address them by their first name.
- Use the preferred names of your classmates and staff. If someone signs off as Catherine/Alison/Michael, don't shorten their name to Cathy/Ally/Mike.
- When individuals have indicated preferred pronouns (such as "he", "she", and "they"), use their preferred pronouns when referring to them.
- Always maintain professionalism. If you are required to create a username for an online activity or online tool, do not create an offensive or silly username. Likewise, for online activities where answer submission is required, do not use bad language or submit inappropriate answers.
- If someone writes something offensive or hateful in the online environment (discussion forum, chat box, WhatsApp), says it verbally or in the physical environment, immediately bring it to your Programme Manager's attention.

Ensure that you are using the correct/appropriate language (Correctness)

- Ensure that you are using the correct level of language (formal with staff members or informal with your classmates). For example:

*Incorrect: Hiya/Howdy Jane*

*Correct: Hi/Hello/Good morning/Good afternoon/Good evening Jane*

- Ensure that written communications are error-free. For example, check that dates/times are correct if applicable or spell the recipient's name correctly. If the recipient's name is Gregory:

*Incorrect: Hi George, thanks for your email.*

*Correct: Hi Gregory, thanks for your email.*

- For written online communications, check the email address/name field to ensure that you are sending your message to the correct person.
- Limit the use of emoticons and avoid using outlandish ones when speaking to staff or lecturers. For example:

*Incorrect: Thanks Jane, I appreciate your help 🎉😊🏆❤️*

*Correct: Thanks Jane, I appreciate your help 😊*

#### 3.4.4 Responsibility

- The overall responsibility for communication principles and guidelines for learners, lies with the **Director of Academic Affairs**.
- The **Head of QA** and the **Learner Support Coordinator** are responsible for communicating the policy to learners and providing supporting resources.
- **Programme Managers** and **Lecturers** are responsible for monitoring and enforcing the policy to learners.

### 3.5 Policy for Learner Complaints

<b>QA Area (s)</b>	<ul style="list-style-type: none"><li>• Governance and Management of Quality</li><li>• Documented Approach to QA</li><li>• Teaching and Learning</li><li>• Supports for Learners</li></ul>
<b>Applies to</b>	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and learners
<b>Policy Owner</b>	Director of Academic Programmes

#### 3.5.1 Purpose

The purpose of this policy is to provide learners with a process through which they can have complaints regarding the College and its employees, learners or facilities addressed in a meaningful and constructive way. For the purposes of this policy, a 'complaint' is defined as any specific concern about the provision of a programme of study or a related service/facility.

#### 3.5.2 Scope

- The policy applies to all learners who are in receipt of services from the College.
- The policy applies to all College services and programmes.
- The policy is distinct from the College's Policy for Appeals.

The Complaints Procedure deals with complaints that cannot be dealt with under any other structure; therefore, this procedure does **not** cover

- Applicants appealing against an admissions decision.
- Learners appealing against an Examination Board decision.

#### 3.5.3 Policy

The College is committed to ensuring that both the interests of learners and those of staff are safeguarded. Feedback is actively sought throughout the academic year through various channels. This is done to mitigate against a learner issue escalating into a complaint. The channels through which feedback can be given are:

- Discussions with lecturers.
- Discussions with programme leads.
- Class representative meetings.
- Group issues can be communicated through a nominated representative or the class representative.
- Learner feedback questionnaires.

- Learner Support Coordinator.

In the unusual event where the above channels prove insufficient to resolve a specific issue, a learner will be directed to our complaints process. In all matters relating to a complaint only those named in the complaint will be informed of the case and will have a right to reply as part of the investigation.

However, it is important to note that the right to complain does not extend to:

- Complaints that are of a frivolous or vexatious nature;
- Complaints that are made for the purpose of personal gain;
- Complaints that are made anonymously.

Complaints are taken seriously by the College and reviewed by the Executive Management Team, Academic Council and Board of Directors as an important source of information regarding the College's performance and potential for improvement in relevant areas of operation. The College will endeavour to respond to and, where possible, resolve complaints within a two-week period.

**Complainants** (the persons making the complaint) are encouraged to first seek informal and prompt resolution of any issues of concern though communicating directly with the person(s) responsible for the matter. For example, a learner is encouraged to raise issues related to classroom or online learning directly with their lecturer.

Where this is not possible, informal complaints are handled following the principle of subsidiarity<sup>6</sup>. Complaints are therefore handled as much as possible at the nearest level to the issue of concern. For example, a learner may raise issues with a programme with the Programme Leader, or issues with a lecturer with the Head of Faculty. Informal complaints may be escalated to higher levels only where there is no resolution possible at a lower level.

The **subject of a complaint** (the person who is being complained about OR is responsible for the matter being complained about) has the right to be notified of the nature of the complaint, and provided with a copy of the complaint and the complainant's details. The subject of a complaint has the right to respond.

The Complaints process comprises up to three stages:

1. Stage 1 – Informal
2. Stage 2 – Formal Investigation of Complaint
3. Stage 3 - Appeal

#### **3.5.4 Responsibility**

The Director of Academic Programmes has responsibility for ensuring learners and staff are aware of the College's complaints policy and procedure.

All staff and learners at the College have responsibility for adhering to the policy and procedure for complaints, whether they are the complainant, the subject of a complaint or the person to which the complaint is escalated for potential resolution.

#### **3.5.5 Related Legislation, Regulation or Guidelines**

1. Core Statutory Quality Assurance Guidelines 2016 (QQI).

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<sup>6</sup> The principle of subsidiarity dictates that functions that can be carried out efficiently by smaller or lesser bodies within the College will not be exercised by larger or greater bodies.

2. Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
3. Policies and criteria for the validation of programmes of education and training 2017 (QQI)
4. Policy and Criteria for Making Awards 2014 (QQI)
5. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
6. Assessment and Standards, Revised 2013 (QQI).
7. Policy for Determining Awards Standards – QQI, 2014
8. NFQ Awards Standards
9. European Credit Transfer and Accumulation System (ECTS) User Guide –2015
10. International Standard Classification of Education (ISCED) – UNESCO, 2011.

### **3.6 Procedure for Learner Complaints**

Having regard to the rights and responsibilities outlined in the Learner Charter, and in the context of a learner seeking to make a complaint, the College is committed to:

- Handling complaints from learners in all instances, in so far as is possible, in a co-operative rather than an adversarial way. Towards this end, every effort will be made in each instance to arrive at a solution by consensus among the relevant parties.
- Handling complaints in a sensitive and confidential manner, with due recognition of the personal implications for both learners and members of staff involved.
- Ensuring students will not be disadvantaged because they make a complaint.
- Ensuring the reputations and professional integrity of members of staff of the College are protected from unsubstantiated complaints.
- Avoiding prejudiced responses to complaints, by way of comment or otherwise, particularly by those to whom formal complaints are made in the first instance.
- Ensuring academic standards are always safeguarded from being undermined by any misuse or mishandling of the complaints procedure.
- Applying the principles of natural justice when dealing with complaints i.e. all parties to a complaint have the right to be heard; all relevant submissions and evidence will be considered; matters that are not relevant shall not be considered; and the decision-maker(s) will not be biased.
- Ensuring there will be full disclosure of any records maintained within the College of complaints involving staff members to the staff member concerned.

#### **Further:**

- In the event that it is determined that a complaint is made which is unfounded and of malicious intent, the complainant may be referred to establish whether the

learner is in breach of College regulations, in which case the learner may be liable to suspension, expulsion or such other penalty as decided.

- Where a learner complaint does not follow the correct process and/or is directed to a senior member of staff, their complaint will be directed to the Head of Faculty who will ensure it enters the procedure at the appropriate point and is directed to the correct person.
- Complaints can provide an important source of feedback on the performance of the College's services and members. As such the College will monitor the registration of complaints and the progress towards resolution.

### **3.6.1    Stages in the Complaints Process**

Before making a formal complaint, a learner should first try to resolve the issue informally through the channels listed in the policy statement or directly with the person who is the subject of their complaint or with the immediate manager/supervisor of the service.

Where a learner or group are unable to resolve the matter, they will be entitled to action the complaints process. The complainant is entitled to be accompanied at all stages of the complaints process by a person of their choosing. Legal representation is not permitted.

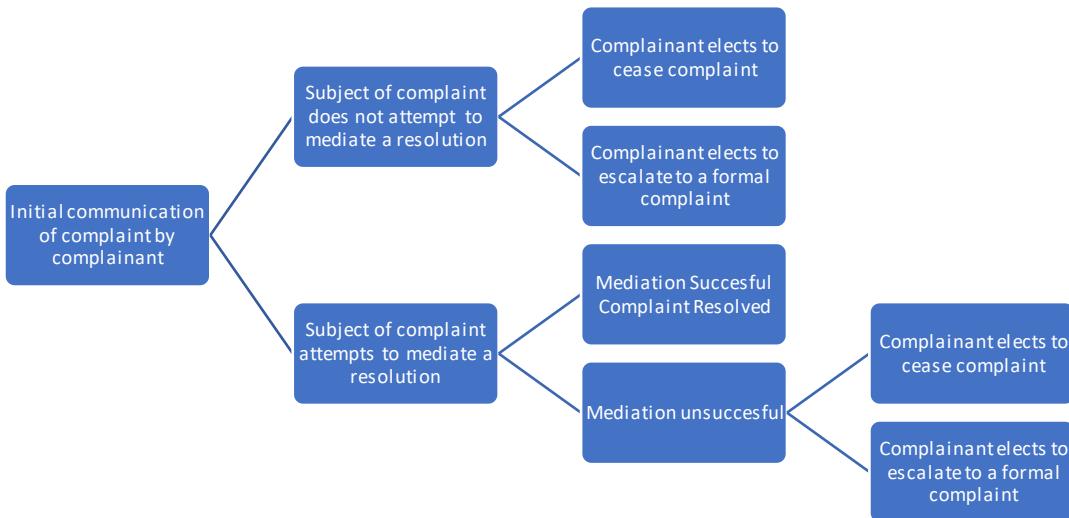
### **3.6.2    Stage 1: Informal Process**

#### **Note:**

Informal complaints should normally be made within three working days of the incident, matter or concern being complained about.

#### **Steps:**

1. Initial communication is made orally or in writing by the complainant (the person making the complaint) to the person who is the subject of the complaint (the person who is being complained about OR is responsible for the matter being complained about).
2. The subject of the complaint has three working days to acknowledge the complaint and attempt to mediate a satisfactory resolution. Other persons at the nearest level to the issue of concern (for example, lecturers) may be called upon to assist in this mediation if necessary.
3. If mediation is successful, the complaint is considered resolved.
4. If mediation is unsuccessful, or the complaint is unaddressed, the complainant may choose to:
  - a. Escalate to a formal complaint, OR
  - b. Cease the complaint.



### 3.1.1 Informal Process Graphic

#### 3.6.3 Stage 2 Formal Complaints

##### Note:

Complaints should normally be submitted within 5 working days of the incident, matter or concern being complained about. If the submission of a complaint is delayed, a rationale for this must be provided (for example, due to an informal complaints procedure being followed but unsatisfactorily resolved). If a complaint is made after a period of 4 weeks or more and no informal complaints procedure was followed in the interim, the complaint will not be accepted.

This process aims to be clear and fair, and a complainant can opt for informal resolution at any point.

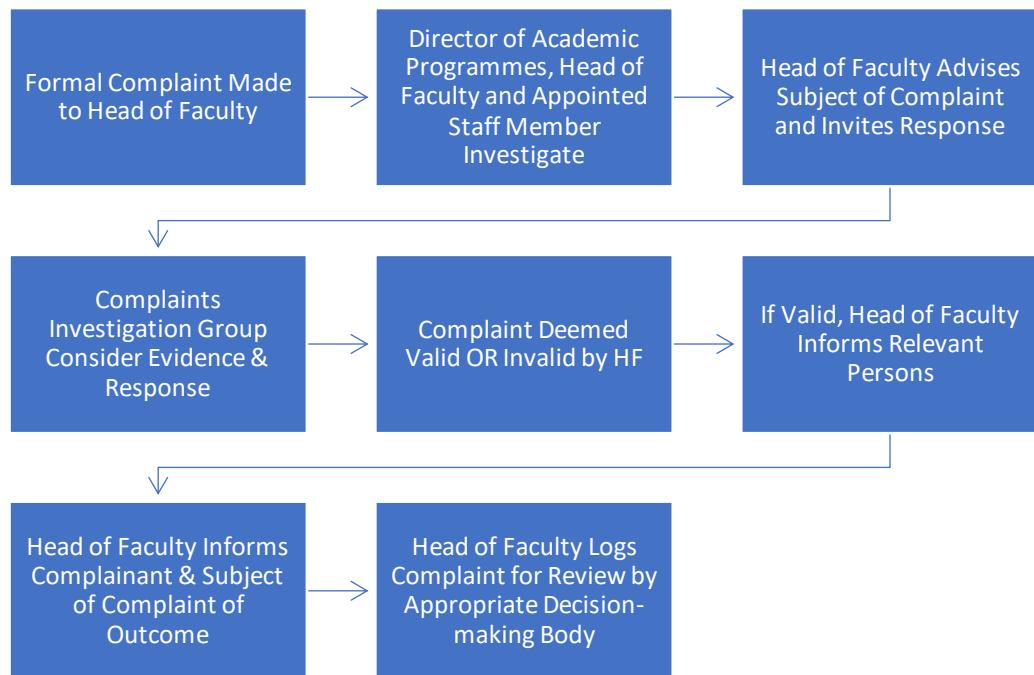
Complainants will be made aware in advance of embarking on the formal complaint process of the following:

- The complainant's representative can be a fellow learner / staff member, a relative, a friend, or an adviser. Legal representation is not permitted. Where the complainant insists on having legal representation this stage of the process shall cease and the process shall move to the Appeals stage, [3.8 Policy for Appeals](#).
- The representative can speak on behalf of the complainant.
- The complainant and relevant staff members have the right of attendance and representation at any hearing.
- Where the complainant decides not to attend a hearing, they must formally write to advise they are not exercising this right.
- Any costs in relation to the complaint or translation costs that occur as a result of the hearing must be borne by the complainant.

##### Steps:

1. A formal complaint is made in writing by the complainant to the Head of Faculty. Complaints should be specific and where possible supported by appropriate evidence.

2. The Head of Faculty passes details of the complaint on to the Director of Academic Programmes who shall establish a Complaints Investigation Group with the following membership:
  - Chair: Director of Academic Programmes
  - Head of Faculty
  - Member of staff with no previous involvement with the complainant
  - No member of staff will be appointed to the Complaints Investigation Group, if they've had any previous involvement in the investigation of the complaint or if the nature of the complaint is against them
3. The Head of Faculty advises the subject of the complaint of the details and nature of the complaint and invites them to respond.
4. The Complaints Investigation Group considers the complaint, associated evidence and the response from the subject of the complaint. In so doing, it may hear directly from the parties involved.
5. Where the complaint is not considered valid, the process concludes.
6. Where the complaint leads to recommendations or actions taken as a consequence of the complaint, the Head of Faculty informs all relevant persons/bodies within the College.
7. The Head of Faculty informs all parties in writing (complainant, subject of complaint and any other relevant persons) of the outcome of the investigation of the complaint, the findings, any decisions made or actions arising from those decisions. Such actions may include invoking the disciplinary process.
8. The Head of Faculty logs the details of the complaint for review by the appropriate body (Academic Council, Executive Management Team, Board of Directors or any combination of these).
9. The Complainant may seek to appeal the outcome of the stage 2 process, through the Appeals mechanism Section [3.8 Policy for Appeals](#).
10. Should the subject of the complaint be a member of staff, they may seek to appeal the outcome of the stage 2 process, through the appropriate HR mechanism.



### 3.7 Policy for Dealing with Disciplinary Breaches

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Governance and Management of Quality</li><li>Documented Approach to QA</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and learners
Policy Owner	Director of Academic Affairs

#### 3.7.1 Purpose

The purpose of this policy is to provide the College with a process through which they can have complaints against a learner for misconduct investigated in a fair, constructive and thorough manner, and appropriate sanctions applied. For the purposes of this policy, 'misconduct' is defined as an alleged breach of the Learner Code of Conduct, described in the Learner Charter.

#### 3.7.2 Scope

The policy applies to all learners who are in receipt of services from the College.

#### 3.7.3 Policy

The College assumes that learners will comply with the requirements of the Code of Conduct on a voluntary basis through the exercise of mature self-discipline.

Where circumstances warrant it, the College may suspend a learner pending the completion of inquiries and without prejudice to the outcome of disciplinary procedures.

Nothing in this policy and associated procedures shall prevent the College from referring matters to the Garda Síochána where it considers this to be appropriate.

The College classifies misconduct at three levels:

1. Minor infringement: Minor infringements include, but are not limited to, noise, disorderly conduct and minor damage.
2. Major infringement: Major infringements include but are not limited to, repeated minor offences, injury or threats to the person, harassment, bullying, abusive or dangerous behaviour, nuisance, damage to property, malicious tampering with and/or disabling of security and safety systems.
3. Gross misconduct: Gross misconduct includes, but is not limited to, assault causing serious harm (including sexual assault), serious or repeated harassment, discrimination, extreme nuisance, serious damage to property and use of illegal substances.

In order to support a charge under any of these headings, proof presented in support of that charge must be considered to be beyond all reasonable doubt by the investigating body.

This provides protection for both the College and the learner. The College reserves the right

to report major or gross misconduct to the appropriate authorities where it deems it necessary.

As is the case in dealing with complaints, the disciplinary process comprises up to three stages:

1. Stage 1 – Informal
2. Stage 2 – Formal Investigation of Alleged Breach of Code of Conduct
3. Stage 3 - Appeal

#### **3.7.4 Responsibility**

The Director of Academic Affairs has responsibility for ensuring learners and staff are aware of the College's disciplinary policy and procedure.

All staff and learners at the College have responsibility for adhering to the disciplinary policy and procedure, whether they are the person bringing the charge or the subject of the charge.

#### **3.7.5 Related Legislation, Regulation or Guidelines**

1. Core Statutory Quality Assurance Guidelines 2016 (QQI).
2. Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
3. Policies and criteria for the validation of programmes of education and training 2017 (QQI)
4. Policy and Criteria for Making Awards 2014 (QQI)
5. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
6. Assessment and Standards, Revised 2013 (QQI).
7. Policy for Determining Awards Standards – QQI, 2014
8. NFQ Awards Standards
9. European Credit Transfer and Accumulation System (ECTS) User Guide –2015
10. International Standard Classification of Education (ISCED) – UNESCO, 2011.

### **3.8 Procedure for Dealing with Disciplinary Breaches**

#### **3.8.1 Procedure**

Should it become necessary to initiate the disciplinary process, the following procedures will apply:

1. An allegation of a breach of the Code of Conduct may be made by any member of academic, administrative or support staff. In certain circumstances, the Director of Academic Affairs may invoke the Complaints Procedure in respect of a complaint received from a member of the public, in as far as it relates to a *prima facie* case of an alleged breach of the Code of Conduct.

2. Where it becomes appropriate that disciplinary proceedings are to be invoked arising from a complaint by one learner against another learner, the formal procedure will be initiated by the appropriate Programme Lead.
3. Where a disciplinary action results in the imposition of a sanction against a learner, that fact will be noted on the learner's record and may be taken into account by the College authorities in responding to requests for character references if such is deemed relevant and appropriate.

The disciplinary procedure is structured in a three-stage process.

### **3.8.2 Stage 1: Informal Process**

Minor infringements are expected to be handled at this stage as an informal process and no written record will be maintained.

Allegations of serious breaches of the Code of Conduct should proceed to Stage 2 directly.

- *Steps:*

1. The complainant who has observed an alleged breach of the Code of Conduct should raise the matter with the learner concerned with a view to reaching a resolution. It is important that the complainant is confident that they have identified the correct learner.
2. It may be necessary in some cases to engage with the Programme Lead to expedite a resolution.
3. If these informal efforts fail to resolve the matter satisfactorily, it should proceed to Stage 2.

- *Stage 2: Formal Process*

1. The complainant should outline in writing the alleged breach of the Code of Conduct, to the Director of Academic Affairs. The information provided must be detailed and comprehensive, including dates, witnesses etc. It should also include details of any informal attempts made to address the matter.
2. The Director of Academic Affairs then appoints an appropriate manager such as Head of Faculty to investigate the incident.
3. The College retains the right to suspend a learner suspected of gross misconduct whilst the investigation into the incident is taking place. Such investigations shall be conducted as quickly as possible to limit the academic impact on the learner. In this instance the learner will be informed in writing of their suspension by the Director of Academic Affairs. They will be requested to cease contact with any other parties involved during this period.
4. The Head of Faculty conducts the investigation and on completion a report is issued outlining the reasons to call the learner before the Disciplinary Committee. The learner is notified in writing by the Director of Academic Affairs Office and a copy of the findings of the investigation is made available.

5. The Disciplinary Committee is established, by the Director of Academic Affairs, with the following membership:
  - Chair: Director of Academic Programmes. In the event that the disciplinary issue arises from the College's Complaints Procedure, the Director of Academic Affairs shall appoint a chair from the membership of the Academic Council, other than any learner representative.
  - A member of the Executive Management Team not previously involved in the case.
  - A member of lecturing staff not previously involved in the case.
6. A learner who is the subject of a referral to the Disciplinary Committee is required to attend the meeting and has the right to be accompanied and to present their own case. If a learner fails to attend or chooses not to attend the hearing, the hearing shall proceed in their absence.
7. Following the hearing, the Disciplinary Committee shall reach a decision on the case at hand and will apply a penalty appropriate to the offence committed. This decision will be communicated to the Director of Academic Affairs and the learner shall be notified in writing of the outcome, normally within 72 hours of the hearing.
8. In the event of the learner choosing to exercise their right of appeal, the application of the disciplinary penalty shall be suspended pending the outcome of the appeal. In the event of the learner not choosing to exercise their right of appeal, the disciplinary penalty shall be applied.

### **3.8.3   Penalties**

1. In the case of minor infringements, the Director of Academic Affairs will issue an oral warning to the learner which shall be effective for six months. A note shall be retained on the learner's file.
2. In the case of major infringements, the Director of Academic Affairs shall issue a written warning which shall normally be effective for 12 months unless otherwise stated at the time of issue. A copy of the written warning shall be retained on the learner's file.
3. In the case of a second major infringement, the Director of Academic Affairs shall issue a final written warning that shall normally be effective for the remainder of the learner's programme of study. A copy of the written warning shall be retained on the learner's file.
4. It should be noted that in the case of a major infringement, the circumstances may be considered so serious as to warrant the issuance of a final warning without prior warnings. A further major infringement subsequent to the issuance of a final warning shall normally lead to the learner's expulsion. A record of expulsion shall

be retained per the data retention policy on the learner's file and communicated to the relevant authorities where appropriate.

5. In the case of gross misconduct, the appropriate penalty is immediate expulsion. A record of expulsion shall be retained on the learner's file and communicated to the relevant authorities where appropriate.
6. Following the issuing of a decision by the Student Disciplinary Committee, a learner may be required to:
  - Give a written undertaking as to their subsequent conduct within the College.
  - Give a verbal or written apology to the parties impacted by their behaviour.
  - Cover the cost of damage to property (College or personal).

#### **3.8.4 Confidentiality**

If the Learner Disciplinary Committee is satisfied at any stage within these procedures that misconduct has not taken place, no documentation relating to the alleged misconduct and the associated investigations shall be retained. The disciplinary process, once entered into, is confidential to all parties. Therefore, it is essential that any individuals involved in the process respect this paramount need for confidentiality. Breaches of such confidentiality may lead to disciplinary action being taken.

#### **3.8.5 Appeal**

If the learner is dissatisfied with the decision of the Disciplinary process, they may appeal in accordance with the policy and procedure in Section [3.8 Policy for Appeals](#).

## 3.9 Policy for Appeals

QA Area (s)	<ul style="list-style-type: none"><li>• Governance and Management of Quality</li><li>• Documented Approach to QA</li><li>• Teaching and Learning</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and learners
Policy Owner	Director of Academic Affairs

### 3.9.1 Purpose

The purpose of this policy is to set out the grounds for, principles and possible outcomes of appeals by students against administrative, operational and academic decisions made by the College.

### 3.9.2 Scope

The policy applies to students wishing to appeal decisions made by the College related to administrative, operational, academic or other matters. For example, *where grounds exist* an appeal can be made in relation to any of the following:

- non-admission to a programme of study,
- outcome of a Complaints Process
- outcome of a Disciplinary Process
- decision of an Academic Misconduct Committee
- decisions of a Review Board on assessment outcomes, including a request from the Director of Academic Programmes from section 9.18.5

### 3.9.3 Policy

The College recognises the right of learners to appeal decisions made by the College *where grounds exist*. The President shall determine if the case made by the appellant in their application to invoke the Appeals Process is valid based on the grounds below. Should they determine that such is the case they shall convene an Appeals Board to deal with the matter.

The Appeals Board shall be established in accordance with the provisions of Section [3.8 Policy for Appeals](#)

The College has established grounds for a valid appeal as follows:

1. Evidence that the College did not follow an established procedure in the making of a decision.
2. Circumstances or information of which the original decision-making body was not aware when its decision was taken, and a valid, substantiated reason why that information was not made available by the *appellant* (the person making the appeal).

3. Evidence of substantive bias by one or more of the decision-makers in arriving at a decision.

The following exclusions **do not** constitute grounds for an appeal:

1. Disagreement with a decision.
2. Disappointment with the result of an assessment or an opinion that a higher mark should have been obtained.
3. Complaints about persons or procedures, which must be addressed in the first instance under the College's complaints policy and procedure.
4. Reopening of a matter that has already been decided on in a previous appeals process.

Appeals must be made within five working days of the issue of a decision, subject to extenuating circumstances (for example, serious illness). Appeals will consider evidence supplied by the appellant and evidence supplied against the grounds for appeal. This entails investigation of relevant information and investigation of the factual accuracy of the appellant's assertions.

In all instances, appeals must be evidence based. Hearsay and opinion will not be considered as evidence. If a staff member or learner appellant wishes to present in person to the Appeals Board, they must indicate this at the point of instigating an appeal and explain the purpose of appearing in person. The External Chair of the Appeals Board will decide whether there is merit or usefulness in the appellant appearing in person. An appellant appearing in person may be accompanied by a friend, colleague or family member acting in a supporting capacity. If the person accompanying the appellant is a member of the legal profession, they may advise the student, but cannot interact directly with the Board.

Appeals will be considered by an Appeals Board, drawn from a panel established by the Academic Council for this purpose and constituted as follows:

- Chair: An appropriately qualified, independent, external person, with experience at a senior level in higher education.
- One additional member with competence to make a decision on the matter (e.g. an external examiner in the case of an appeal against the decision of a review board), selected by the Chairperson.
- One additional member from the Executive Management Team, selected by the Chairperson.
- A learner representative, who had not had a previous involvement in the case. This may be a current learner on another programme or a graduate, selected by the Chairperson.

No individual member of the Appeals Board may have had any previous involvement in the case being appealed. Persons asked to sit on an Appeals Board will be asked to first declare any conflicts of interest and the Chair shall make a decision on their continued membership, on the basis of this declaration.

An Appeals Board may reject an appeal (the original decision stands) or uphold an appeal. If an appeal is upheld, a reconsideration of the original decision is made by the Appeals Board, and a new decision is issued to place the appellant in the position where they would have been had the original decision not been made.

### **3.9.4 Legal Proceedings**

In the event of a learner commencing legal proceedings or in the event of proceedings being commenced against the complainant in relation to a complaint, the above procedures may be suspended or abandoned at the discretion of the College.

### **3.9.5 Responsibility**

The Head of Faculty has responsibility for ensuring learners and staff are aware of the College's appeals policy and procedure.

All staff and learners at the College have responsibility for adhering to the policy and procedure for appeals, whether they are the appellant, the subject of an appeal or a member of the Appeals Board.

### **3.9.6 Related Legislation, Regulation or Guidelines**

11. Core Statutory Quality Assurance Guidelines 2016 (QQI).
12. Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
13. Policies and criteria for the validation of programmes of education and training 2017 (QQI)
14. Policy and Criteria for Making Awards 2014 (QQI)
15. Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
16. Assessment and Standards, Revised 2013 (QQI).
17. Policy for Determining Awards Standards – QQI, 2014
18. NFQ Awards Standards
19. European Credit Transfer and Accumulation System (ECTS) User Guide –2015
20. International Standard Classification of Education (ISCED) – UNESCO, 2011.

### 3.10 Procedure for Appeals

QA Area (s)	<ul style="list-style-type: none"><li>• Governance and Management of Quality</li><li>• Documented Approach to QA</li><li>• Teaching and Learning</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and learners
Policies this Procedure relates to	Policy for Appeals

#### 3.10.1 Procedure

*Note:*

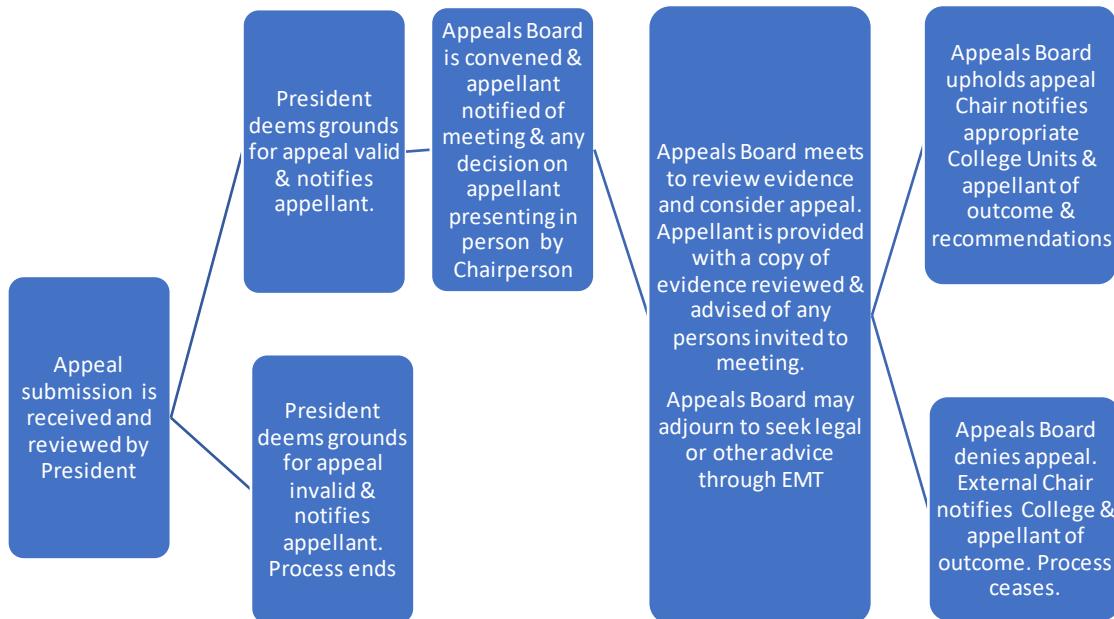
Appeals should be initiated within 5 working days of the issue of the decision being appealed, subject to extenuating circumstances (for example, serious illness).

Steps:

1. The appellant (person making the appeal) submits the appeal to the President using the appropriate form. The appeal submission should include:
  - a. A completed appeals application form
  - b. Verifiable evidence which addresses the appeal criteria
2. The appeal must be accompanied by a fee of €100 which will be refunded if the appeal is successful.
3. The President assesses the application for appeal to establish if it is complete and meets the grounds for an appeal as per the College's [Policy for Appeals](#).
4. If the President deems that there are no valid grounds for appeal, the appeal is rejected, and the appellant notified.
5. If the President deems that the grounds for appeal are valid and the application is complete, they give approval for the Appeals Board to be convened, in accordance with the provisions in the policy above. The President appoints the External Chair and notifies the appellant.
6. Should the appellant seek to present in person to the Appeals Board this must be indicated on the application for appeal form, alongside a rationale for presenting in person. The External Chair of the Appeals Board will decide if there is merit in the appellant attending in person.
7. The appellant is notified a minimum of three working days in advance of the meeting of the Appeals Board and is provided with a copy of all material provided to the Appeals Board by the External Chairperson. This communication also responds to any requests by the appellant to present in person to the Appeals Board.
8. The Appeals Board meets to review evidence, agree findings and determine a fair resolution. The Appeals Board may, at its discretion, invite persons who may have

evidence or information relevant to the matter being appealed to attend. The appellant is advised of any person the Appeals Board meets by the External Chairperson.

9. If the Appeals Board upholds the appeal, consideration is given to the implications of this. The Appeals Board may adjourn to consult with the Board of Directors or take legal advice as required. Following a final decision (and any associated recommendations), the External Chair will communicate the decision and the rationale for its decision.
10. If an appeal pertains to assessment or academic matters, the External Chair will communicate the decision to the Academic Council (without providing personal information), the Head of Faculty and the appellant.
11. If an appeal pertains to non-academic matters, the External Chair will communicate the decision to the Head of Faculty, the Executive Management Team and the appellant.
12. Following notification of the decision, the process concludes. No further appeals process is available within the College.



**Appeals Process Graphic**

### 3.11 Control Sheet

Policy and Procedure Title	Our Learners' Charter and Associated Policies and Procedures
Responsible Officer(s)	Director of Academic Programmes
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	27 <sup>th</sup> June 2020
Supersedes	2.0
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

#### 3.11.2 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Programmes	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Programmes	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	Learner Charter incorporated into QAM; Appeals Procedure updated to The President; Changes to the Policy and Procedure to provide greater clarity of the process	Director of Academic Programmes	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Section 3.5.4 has been updated to clarify on the process should legal representation be insisted upon, Section 3.7.1 clarifies when the Director of Academic Affairs can invoke the complaints process, Section 3.7.4 clarifies the appointment of a chair from the Academic Council, Section 3.8.3 has had a major review to provide greater clarity on the Appeals Process.	Director of Academic Programmes	Academic Council
Version 4.0	10 <sup>th</sup> March 2021	Section 3.5.4 has been update to provide clarity that no member of staff will be appointed to the Complaints Investigation Group, if they've had any previous involvement in the investigation of the complaint or if the nature of the complaint is against them	Director of Academic Programmes	Academic Council
Version 5.0	27 <sup>th</sup> August 2021	Policy on Communications for Learners – New Policy approved	Director of Academic Affairs	Academic Council

## 4. Documented Approach to Quality Assurance

### 4.1 Policy for the Quality Assurance and Enhancement Framework

QA Area (s)	<ul style="list-style-type: none"><li>• Documented Approach to QA</li><li>• Governance and Management of Quality</li><li>• Programmes of Education and Training</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policy Owner	Head of Quality Assurance and Admissions

#### 4.1.1 ESG Standard:

##### ESG Standard 1.1

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

##### 4.1.2 Purpose

The purpose of this policy is to outline the principles governing the creation, maintenance and review of the quality assurance policies and procedures of the College.

##### 4.1.3 Scope

This policy has relevance to the activities of all staff (academic, administrative, operations) and students within the College.

##### 4.1.4 Policy

The policies and procedures within this Quality Assurance Manual (QAM), along with a set of associated documents, form the basis of the Innopharma Education Quality Assurance and Enhancement Framework (QAEF).

- *Definitions*
- a) **Strategy:** A strategy details the key objectives of the College and sets out a plan for their successful achievement.
- b) **Policy:** A policy sets out a principle or an intended course of action in a given situation. Policies guide decision-making at the College on a day to day basis. Policies therefore establish the 'what to do' in those situations.
- c) **Procedure:** A procedure describes the specific actions undertaken to implement a College policy. Procedures therefore guide the 'how to do', and not the 'what to do'.
- d) **Standard:** A standard outlines the acceptable level of quality or attainment within a particular area of the College's operations.
- e) **Resource:** A resource is a functional document that supports the implementation of the College's policies and procedures. For example, application forms, checklists or handbooks.

#### **4.1.5 Policy Principles**

The development, monitoring and review of the Quality Assurance and Enhancement Framework (QAEF) of the College will be:

- i. Consultative (the opinions of students, staff and other stakeholders will be sought and appropriately considered).
- ii. Undertaken based on the subsidiarity principle (functions that can be carried out efficiently by smaller or lesser bodies within the College will not be exercised by larger or greater bodies; delegation of functions to the former will be accompanied by support from the latter)<sup>7</sup>.
- iii. Based on evidence and expertise, both internal and external.
- iv. Presented in usable formats, written in plain English and available to staff and the public as required<sup>8</sup>.
- v. Consistent, i.e. policies and procedures will not contradict each other.

*Policies will be:*

- i. Accompanied by a clear statement of purpose alongside who the policy applies to, responsibility for its implementation and the approving body.
- ii. Based on clear and specific criterion, designed to guide how decisions are taken.
- iii. Approved by the Board of Directors (if relevant to administrative or operational domains), the Academic Council (if relevant to academic standards) or both (if relevant to both domains).
- iv. Reviewed regularly on a two-year cycle to ensure they remain implementable, aligned to the legislative and regulatory context, and are fit for purpose<sup>9</sup>.

*Procedures will be:*

- i. Developed to assist in the implementation of a parent policy; procedures cannot be developed in isolation.
- ii. Designed for efficient and effective implementation.
- iii. Approved by the Director of Academic Affairs (if relevant to administrative or operational domains), the Academic Council or its delegated subcommittee (if relevant to academic standards) or both (if relevant to both domains).
- iv. Regularly reviewed on a two year cycle (or more frequently as required) to ensure they do not entail unnecessary administrative requirements<sup>10</sup>.

The College is committed to ensuring that policies and procedures within the QAEF remain effective, relevant, fit for purpose and compliant with changes to statutory, legal and accrediting body requirements. To ensure this, internal quality reviews are conducted on a

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<sup>7</sup> See Section 1.3 of Core Statutory Quality Assurance Guidelines 2016 (QQI).

<sup>8</sup> See Section 2.1 of Core Statutory Quality Assurance Guidelines 2016 (QQI).

<sup>9</sup> See Section 2.1 of Core Statutory Quality Assurance Guidelines 2016 (QQI).

<sup>10</sup> See Section 1.3 of Core Statutory Quality Assurance Guidelines 2016 (QQI).

cyclical basis by the Head of Quality Assurance and Admissions, with each area of the QAEF reviewed at least once in every two year cycle. Each policy within the QAEF is assigned to a policy owner, and where this is not the Head of Quality Assurance and Admissions, review of that policy and associated procedures will be undertaken in communication with the policy owner.

#### **4.1.6 Responsibility**

- **The Board of Directors** is ultimately responsible for the development, approval, monitoring and review of quality assurance policies and procedures of the College.
- **The Academic Council** is delegated responsibility by the Board of Directors for the development, approval, monitoring and review of all academic quality assurance policies and procedures.
- **The Director of Academic Affairs, Director of Academic Programmes, Registrar, Head of Quality Assurance and Admissions** and relevant **Programme Leads** and **Managers** have responsibility for the day to day management and implementation of the quality assurance policies and procedures within academic programmes.
- **The Administrative Team** have responsibility for the implementation of the quality assurance policies and procedures within all operational and administrative activities.
- Operational WorkFlow Teams may be established to complete projects as set out by the Academic Council, Director of Academic Affairs or Director of Academic Programmes. The Operational WorkFlow Team will have responsibility for the mapping out of projects, assignment of duties and tasks to complete projects and reporting back on actions and outcomes to the Academic Council. Operational WorkFlow teams will typically dissolve once the intended project has been completed. \*
- **All staff and students** at the College have responsibility for implementation of the quality assurance policies and procedures in the course of their work and studies.
- **The Head of Quality Assurance and Admissions** is responsible for developing an internal quality review schedule for approval by both the Academic Council and the Board of Directors, and for executing and reporting on the outcomes of review activities to both bodies.
- **All staff** across the College may be involved in monitoring and reviewing policies and procedures as they relate to their roles and providing feedback on these to **the Head of Quality Assurance and Admissions**.

\*Operational workflow teams (work or project teams) are delegated responsibility for the implementation of specific, time-bound tasks/projects of limited and pre-defined scope.

They are a routine aspect of line management within any division in the College. Members of an operational workflow team are therefore appointed in consultation with their line managers and on the basis of the following considerations:

- The relevance of the task/project to an individual's work area and professional role.
- The relevant expertise of the individual.
- The individual's workload capacity.

For example, the Director of Academic Affairs may establish an operational workflow team to identify any revisions required to Springboard admissions forms and procedures for the College in line with new Springboard requirements. That team may consist of 2 individuals who work in the admissions team who are sufficiently familiar with the current forms and procedures and who have capacity within their current workload to complete the work within a prescribed time frame (e.g., three weeks). The team will undertake the work as required, identifying any associated actions and tasks, and reporting back to the Director of Academic Affairs. The Director of Academic Affairs may then direct the workflow team to communicate outcomes as appropriate to other staff or committees of the College, including the Academic Council if appropriate.

Within the operations of the College, workflow teams are in practice a function of day-to-day line management. The work undertaken within the teams is of limited scope and does not have any substantive impact on the College's governance or decision-making structures as set out in the Quality Assurance Manual.

Where a project entails cross-divisional work of a more complex or long-term nature, a committee will be established. For example, a Teaching, Learning & Assessment Committee was formally established and workflow groups have been established to uphold academic governance. Committees are established to facilitate the operation of the shared services model set out in Section 2.3.6 of the Terms of Reference for Board of Directors within the Innopharma Education Quality Assurance Manual.

Where the work has implications pertaining to academic standards or quality, an ad hoc committee will be established by the Academic Council in accordance with its functions and responsibilities as set out in Section 2.4.4.2 of the Terms of Reference for Academic Council within the Innopharma Education Quality Assurance Manual.

#### **4.1.7 Related Legislation, Regulation or Guidelines**

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Assessment and Standards, Revised 2013 (QQI).
- Employment Equality Acts 1998 – 2015
- Disability Act 2005
- Data Protection Act 2018
- Code of Practice for Provision of Programmes of Education and Training to International Learners 2015 (QQI).
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).

## 4.2 Procedure for Development of New Policies and Procedures (and/or Amendment to Existing Policies and Procedures)

QA Area (s)	<ul style="list-style-type: none"> <li>Programmes of Education and Training</li> <li>Governance and Management of Quality</li> <li>Documented Approach to QA</li> </ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for the QAEF

### 4.2.1 Procedure

1. The need for a new policy/procedure or amendment to an existing policy/procedure is identified. This may be identified in the course of cyclical review of the Quality Assurance and Enhancement Framework or in response to other events, for example:
  - Issues raised by internal stakeholders relating to any policy and procedure.
  - A change in the regulatory environment.
  - The outcome of an internal or external Quality Assurance event.
  - Developments within the College.
2. The Head of Quality Assurance and Admissions consults with key staff members to develop a draft of the new policy/procedure, or the amendment to an existing policy/procedure, and invites consultation and feedback on the draft from staff within the College as appropriate. This step may be repeated until the draft is considered ready. The final draft is prepared using the QAEF policy or procedure template as appropriate.
3. The Head of Quality Assurance and Admissions submits the final draft to the approving body accompanied by a statement that outlines the following in relation to the new policy/procedure, or amendment to an existing policy/procedure:
  - The reason for the draft's development and submission for approval.
  - The consistency of the draft with the overall Quality Assurance and Enhancement Framework.
  - Any regulatory considerations.
  - Any resource requirements, including implications for staff training.
  - Any implications for individual roles/responsibilities in the College.
  - A plan for the implementation and communication of the contents of the draft that is appropriate to its scale and impact, which may be minor or major.

- The final draft is considered by the approving body, the outcome of which may be a decision to approve, propose changes or not approve. If approved, the Head of Quality Assurance and Admissions moves forward with the implementation/communication plan as outlined in step 3. If the approving body proposes changes, these are undertaken by the Head of Quality Assurance and Admissions, and steps 2 & 3 are repeated.

### 4.3 Procedure for Ongoing Review of QAEF Documentation

QA Area (s)	<ul style="list-style-type: none"> <li>Programmes of Education and Training</li> <li>Governance and Management of Quality</li> <li>Documented Approach to QA</li> </ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for the QAEF

#### 4.3.1 Procedure

- The Head of Quality Assurance and Admissions develops an internal quality review schedule that is appropriate to the academic calendar and ensures each area within the QAEF is reviewed at least once in the coming two year period.
- The schedule is submitted for approval by the Academic Council and the Board of Directors.
- Provision is included in the schedule for policies and procedures to be reviewed in advance of the nominated time period as a result of any of the following:
  - Changes to relevant regulation, accreditation requirements or legislation.
  - The outcomes of external QA events (for example, QQI QA or Validation panels).
  - Issues raised by staff or students in the College community in relation to a particular policy or procedure.
- The Head of Quality Assurance and Admissions implements the review schedule, engaging staff from across the organisation (teaching, administrative, operations and learner support) as appropriate to assist in monitoring and review of policies and procedures that relate to their roles. The process of review encompasses the following:
  - Ensuring the text is up to date and aligned to the current regulatory context.
  - Analysing whether the policy or procedure is implemented as written.

- Considering whether the policy or procedure is of ongoing relevance and use to the College.
- Evaluating whether improvements or edits could improve the policy or procedure and its implementation.

5. If changes are proposed, these are submitted to the relevant approving body for consideration and decision following the *Policy for the QAEF* and the *Procedure for Development of New Policies and Procedures and/or Amendment to Existing Policies and Procedures*. Approval processes and approving bodies are identified in those documents.

#### 4.4 Control Sheet

Policy and Procedure Title	Documented Approach to QA
Responsible Officer(s)	Director of Academic Programmes
Issuance Date	27 <sup>th</sup> June 2020
Effective Date	27 <sup>th</sup> June 2020
Last Revision Date	October 2019
Supersedes	1.1
Next Revision Date	June 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

##### 4.4.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Programmes	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Programmes	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	Responsibilities for this policy have been included; Policy Principles have been updated and Job Titles have been updated. The Policy and Procedure have been updated to reflect the QAEF	Director of Academic Programmes	Academic Council

## 5. Programmes of Education and Training

### 5.1 Policy for Development, Approval and Validation of Programmes

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Governance and Management of Quality</li><li>Documented Approach to QA</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
Policy Owner	Director of Academic Affairs

#### 5.1.1 ESG Standard: Design and Approval of Programmes

*Institutions should have processes for the design and approval of their programmes. The programmes should be designed so that they meet the objectives set for them, including the intended learning outcomes. The qualification resulting from a programme should be clearly specified and communicated and refer to the correct level of the national qualifications framework for higher education and, consequently, to the Framework for Qualifications of the European Higher Education Area.*

The College is committed to providing a quality learning experience for its learners, and therefore the quality of its programmes is of fundamental importance. Rigorous processes for programme approval, validation, monitoring and review exist to ensure that programmes are relevant, informed by stakeholder engagement, of an appropriate academic standard, and that they continue in good standing over time.

This Section sets out the policies underpinning all programme development at the College.

#### 5.1.2 Purpose

The purpose of this policy is to ensure that programmes are developed consistently and in accordance with Quality and Qualifications Ireland (QQI) requirements. It also ensures that programmes are developed with appropriate regard to the resources required to deliver them when validated by QQI.

#### 5.1.3 Scope

This policy applies to all programmes developed and delivered by the College.

Programmes may lead to major awards or minor awards or special purpose awards.

Programmes will be developed at levels 5 to 8 in the National Framework of Qualifications (NFQ).

#### 5.1.4 Policy

Programmes at the College are designed to satisfy the Council of Europe's four major purposes of higher education:

1. Preparation for the labour market.
2. Preparation for life as active citizens in democratic societies.
3. Personal development.

#### 4. The development and maintenance of a broad, advanced knowledge base.

All programmes will be developed with a view to their validation by QQI.

The steps in the approval process are designed to reinforce the separation of functions between the Board of Directors, the executive (Executive Management Team and Chief Executive) and the academic units of governance (Academic Council and Programme Development Group), while also demonstrating the required interaction between them. Programmes will be developed to ensure that successful learners will achieve the standard expected at the designated level. This will be measured in achievement of stated Minimum Intended Programme Learning Outcomes (MIPLOs) appropriate to the level.

All programmes developed by the College, in line with this policy, will be placed on the NFQ. All programmes are developed for validation in accordance with the quality assurance procedures outlined in this Manual.

Programmes will be designed to ensure that the National Policy on Access Transfer and Progression is adhered to and that there are articulation and progression routes within the College or, alternatively, that arrangements can be made for such routes with named educational institutions and programmes.

In general, all programmes developed shall be in line with the College's Strategic Plan, in place at the time of development. Programme development is informed by consultation with stakeholders such as sectoral interest groups, prospective employers, national and European policy makers and learners.

Programmes will be developed by Programme Development Groups, led by an appropriately qualified academic with oversight from the Head of Quality Assurance and Admissions. Programmes will be delivered and supported by appropriately qualified staff as outlined in the [Section 6](#) of this Manual.

All programmes as validated by QQI, will fall to be reviewed at least every 5 years and re-validation sought if appropriate.

Project management of the programme development process is the responsibility of the Head of Quality Assurance and Admissions of the College.

##### **5.1.5 Responsibility**

- The **Board of Directors** has the following responsibilities:
  - At stage 2 of the development process, for approving the financial investment required by a new programme proposal, , on the advice of the Academic Council,.
  - At stage 3 of the development process, for deciding whether to send the final completed proposal to QQI, seeking validation, on the advice of the Academic Council.
  - Following validation by QQI, and on the advice of the Academic Council, for determining whether and when to commence the programme.
- The **Executive Management Team** is responsible for reviewing the rationale and business case elements for the development of all new programmes proposed, as set out in the Initial Feasibility Stage of new programme development (section 5.2.2). The Executive Management Team is responsible for completing this review prior to the submission of a new programme proposal for approval to the Academic Council. It shall convey its decision in this regard to the Board of Directors.

- The **Academic Council** is responsible for approving new programme proposals, following approval on the rationale and outline business case by the Executive Management Team, making recommendations to the Board of Directors regarding academic resource requirements as needed, appointing Programme Development Groups, monitoring the work of these and approving all final programme documentation prior to their submission to QQI for validation, following approval by the Board of Directors
- The **Head of Teaching and Learning** is responsible for assisting the **Director of Academic Programmes** and the Programme Development Group in preparing programme documentation for submission.
- The **Director of Academic Affairs** is responsible for communications with QQI, in respect of the operation of this policy and its associated procedures.

#### **5.1.6 Related Legislation, Regulation or Guidelines**

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Policies and criteria for the validation of programmes of education and training 2017 (QQI)
- Policy and Criteria for Making Awards 2014 (QQI)
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
- Assessment and Standards, Revised 2013 (QQI).
- Policy for Determining Awards Standards – QQI, 2014
- NFQ Awards Standards
- European Credit Transfer and Accumulation System (ECTS) User Guide –2015
- International Standard Classification of Education (ISCED) – UNESCO, 2011.

## 5.2 Procedure for Development & Approval of Programmes

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Governance and Management of Quality</li><li>Documented Approach to QA</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
Policies this Procedure relates to	Policy for Development, Approval and Validation of Programmes

### 5.2.1 Procedure

Programme proposals may emerge from a range of sources within the College. Proposed programmes will be developed over three stages:

1. Initial Programme Feasibility
2. Development to Stage of Pre-external Review
3. Development to Completion and Submission to QQI.

### 5.2.2 Stage 1 - Initial Programme Feasibility

This stage of development is carried out by the programme proposer(s). It examines the feasibility of the programme, paying particular attention to its strategic fit and the education and training rationale for the proposed programme. This stage also checks that the proposed programme is viable, both academically and financially.

In this phase, outline programme learning outcomes are developed, and a benchmarking process undertaken. This information is captured in a New Programme Proposal Template with the following structure:

1. Table of Contents
2. Programme details (NFQ Level, Total ECTS Credits and Standards Used)
3. Rationale for the Proposed Programme
4. Fit with Innopharma's Strategic Plan
5. Details of Benchmarking Exercise Conducted
6. Stakeholder Engagement
7. Outline Teaching and Learning Strategy, inclusive of Blended Learning
8. Access, Transfer and Progression
9. Outline Programme Learning Outcomes
10. Details of projected resource requirements.

The completed template is submitted to the Executive Management Team together with an indicative timetable for development. The Executive Management Team shall consider the rationale and business case and associated risk and mitigation measures for the proposed programme and decide **either**:

- to approve it to be sent to the Academic Council (AC) for consideration  
**or**
- refer it back to the proposer seeking further information/amendments  
**or**
- decline to approve it.

Should the Executive Management Team approve the proposal to be sent to the Academic Council, it shall attach a commentary on the completed template with that approval.

The Executive Management Team shall inform the Board of Directors of its decision.

### **5.2.3 Stage 2 - Development to Pre-external Review**

Following approval by the Executive Management Team, the Academic Council shall consider the proposal and following approval, it shall establish a Programme Development Group, with advice from the Director of Academic Programmes and the Head of Quality Assurance and Admissions. During this phase, the Programme Development Group will further develop the proposal in line with the appropriate QQI template and guidelines, referred to in the policy document above. This development phase will include refined programme learning outcomes (MIPLOs), curriculum structure with module learning outcomes (MIMLOs) and teaching, learning and assessment strategy, as outlined in QQI's Core Validation Criteria

The Programme Development Group should also consider the viability of all modes of study and of delivery at this point.

The programme at this stage should also have indicative costs associated with delivering the programme, in terms of equipment, materials and human resources.

This stage culminates in the production of a fully developed draft programme document.

The Programme Development Group shall also update the original New Programme Development Template, with the following revised structure:

1. Table of Contents
2. Programme details (NFQ Level, Credits, Standards Used and delivery mode)
3. Rationale for the Proposed Programme
4. Fit with Innopharma's Strategic Plan
5. Details of Benchmarking Exercise Conducted
6. Stakeholder Engagement
7. Teaching and Learning Strategy, inclusive of Blended Learning
8. Access, Transfer and Progression
9. Developed Programme Learning Outcomes (MIPLOs)
10. Module Learning Outcomes (MIMLOs)

11. MIPLOs mapped to particular level on NFQ and chosen Standards
12. Reference to Section of programme document where MIMLOs are mapped to MIPLOs
13. Module details and Syllabi
14. Assessment Strategy and Indicative Schedule
15. Indicative Costs including capital, materials and human resources.

The completed draft programme document, accompanied by this document, is referred to the Programme Development Committee of the Academic Council, which shall review the proposal and report to the Academic Council in a meeting of that body.

The Academic Council shall review the proposal and decide **either**:

- to approve it to be sent to the Board of Directors for funding approval
- or
- refer it back to the Programme Development Group for further development

In the case of a proposal being submitted to the Board of Directors for outline funding approval that body shall consult with the Executive Management Team.

Following funding approval, the final stage of development shall be commenced.

#### **5.2.4 Stage 3 - Development to Completion and Submission to QQI**

The Director of Academic Affairs, acting on behalf of the Academic Council, shall commission a report on the proposed programme from an external independent subject matter expert. This person will examine the proposal draft programme document and complete a report in accordance with a template with the following structure:

- *External Subject Matter Expert's Report*

**Proposed Programme Title:**

**Name and Institution of the Subject Matter External Specialist:**

Please provide detailed feedback under the following headings:

1. Demand from Employers and support from industry and other stakeholders
2. Demand from Learners
3. Appropriateness of the Award title/level
4. Overall Balance of Learner Workload
5. Appropriateness of Minimum Intended Programme Learning Outcomes
6. Appropriateness of Minimum Intended Module Learning Outcomes
7. Appropriateness of Teaching and Learning methodologies, inclusive of Blended Learning
8. Appropriateness of proposed delivery mode(s)
9. Appropriateness of the Assessment Strategies

The completed report will be sent by the Director of Academic Affairs to the Programme Development Group for its consideration and any appropriate amendments to the programme shall be made by that group, in accordance with the recommendation in the

report. A document showing how the Subject Matter Expert's recommendations have been addressed should also be prepared and together with the Subject Matter Expert's report, included as an appendix to the programme document.

The Programme Development Group will also refine the indicative costs estimated in the earlier stage of development.

The following documentation will then be forwarded to the Programme development Committee of the Academic Council for review:

- Final revised programme document, including the report from the SME and the response of the Programme Development Group to this.
- The final cost estimates.

That Committee shall make a recommendation to the Academic Council.

The Academic Council shall review the proposal and decide **either**:

- to approve the final submission and to resolve that it be sent to the Board of Directors for approval to apply to QQI for validation.  
**or**
- refer it back to the Programme Development Group for further development

Having reviewed the proposal, and the recommendation of the Academic Council, the Board of Directors shall decide whether to send the proposal to QQI seeking validation

If the Board of Directors approve sending the proposal to QQI, the Board of Directors shall arrange for the payment of the appropriate fee and direct that all required documentation be forwarded to QQI, following which that body's processes will be initiated and a validation event arranged.

Should the Board of Directors not approve sending the proposal to QQI, it shall outline its reasons for this decision to the Academic Council.

The College may decide to convene a 'mock panel' in advance of the site visit by the QQI panel of assessors.

### **5.2.5 Response to QQI Validation Report and Conditions/Recommendations**

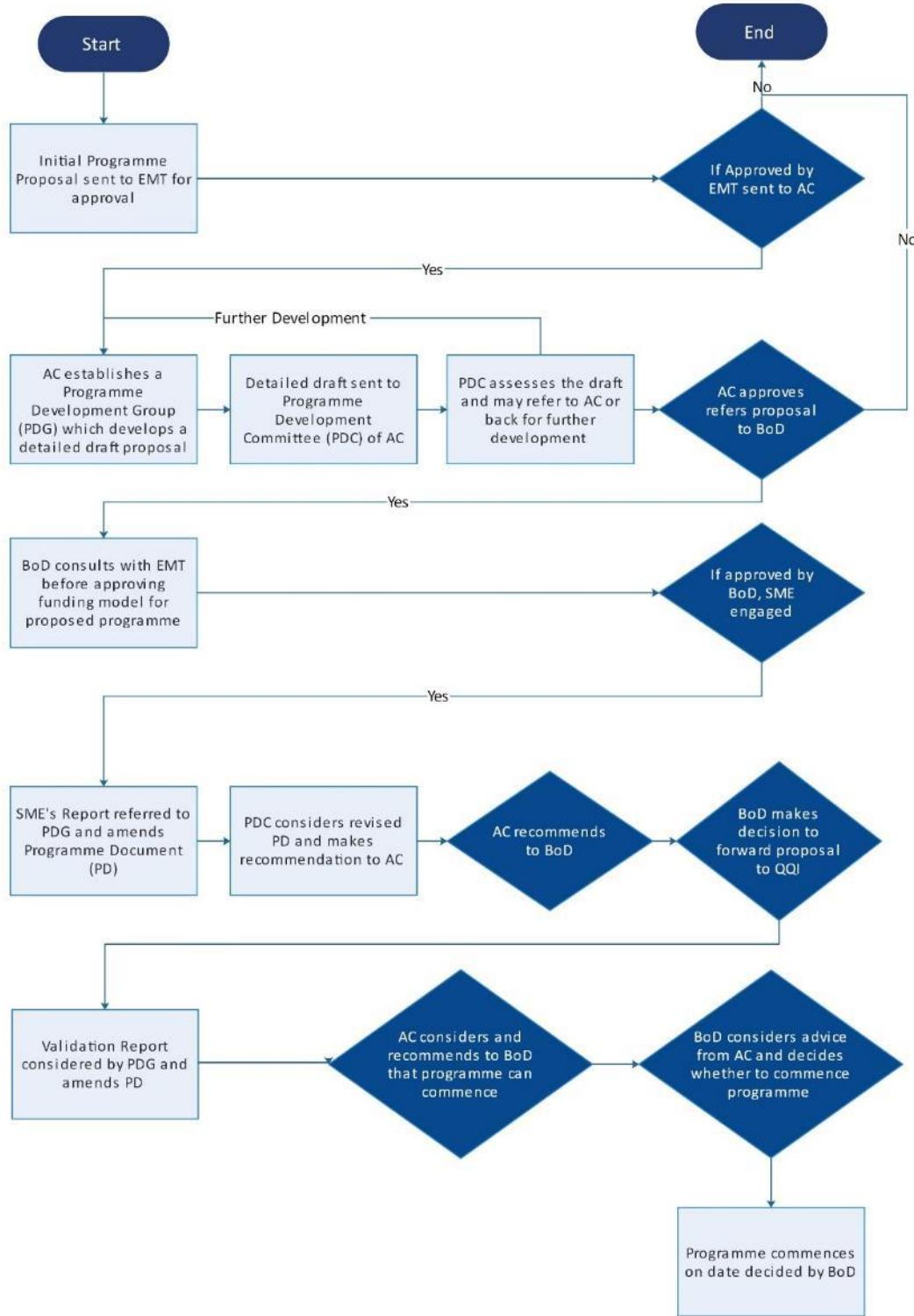
Following receipt of the QQI Validation Report, it shall be referred to the PDG for action. The PDG shall amend the programme document to comply with any conditions and shall consider any recommendations in the Report.

Following this, the amended programme document, together with details of how the conditions and recommendations have been addressed, shall be forwarded to the Academic Council for consideration.

Following its review, the Academic Council will decide whether to make a recommendation to the Board of Directors to commence the programme and at what time.

It shall also forward the revised programme document, and any further information required, to QQI.

The Director of Academic Affairs is responsible for communications with QQI in relation to programme validation and for ensuring that Certificates of Programme Validation are received.



**Flow Chart of Programme Development Process**

### **5.2.6 Criteria for Blended Learning (Synchronous and Asynchronous Only)**

For specific criteria to be addressed in the development of blended learning programmes (including synchronous and asynchronous modes), see **Appendix 1: Criteria for Blended Learning**.

## **5.2 Control Sheet**

<b>Policy and Procedure Title</b>	<b>Programme Development, Approval and Validation</b>
Responsible Officer(s)	Director of Academic Programmes
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	27 <sup>th</sup> June 2020
Supersedes	2.0
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### **5.2.6 Revision History**

<b>Revision</b>	<b>Approval Date</b>	<b>Revision Description</b>	<b>Originator</b>	<b>Approved by</b>
New Policy	Sept 2019	New policy	Director of Academic Programmes	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Programmes	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	Inclusion of an External Subject Matter expert report; Inclusion of a Flow Chart of Programme Development Process; Job Titles updated	Director of Academic Programmes	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Additional text has been included to provide clarity on the roles of the AC, EMT and BOD relating to programme Development	Director of Academic Programmes	Academic Council
Version 4.0	09 January 2026	Addition of an appendix outlining considerations specific to blended learning programmes.	Head of Teaching and Learning	Academic Council

## 5.3 Policy for Monitoring, Review and Re-validation of Programmes

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
Policy Owner	Director of Academic Programmes

### 5.3.1 ESG Standard:

#### ESG Standard 1.9: On-going Monitoring and Periodic Review of Programmes

*Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.*

#### ESG Standard 1.10: Cyclical External Quality Assurance

*Institutions should undergo external quality assurance in line with the ESG on a cyclical basis.*

The procedures and guidelines outlined below will guide all staff and learner representatives involved in the ongoing monitoring of programmes. This monitoring process relates to the programme as a whole and not to the progress of individual learners on these programmes.

### 5.3.2 Purpose

The purpose of this policy is to set out clear principles for ongoing review of programmes, resulting in minor changes and including re-validation as part of its quality assurance mechanism.

### 5.3.3 Scope

This policy applies to all QQI programmes. It therefore applies to all staff involved in the update and review of programmes within the College.

### 5.3.4 Policy

It is the policy of the College to carry out regular programme monitoring and review, based on a process of self-evaluation to inform:

- Changes to Validated Programmes
- Review and Re-validation of Programmes

While major programmatic reviews and re-validation occurs normally every 5 years, the College is committed to ongoing and periodic monitoring and review of its programmes and recognises that the environment in which its programmes are delivered is constantly evolving. The College therefore recognises that programme teams may from time to time identify changes that are needed to ensure the ongoing currency and relevance of its programmes.

The Academic Council will adjudicate on requests from Programme Boards to make **minor modifications** to programmes.

- *Minor modifications are defined as follows:*
- Changes to content of a programme that do not impact on the module or programme learning outcomes.
- Adjustments to an assessment task/method that are consistent with the approved assessment strategy and learning outcomes, and consistent with the approved programme schedule.
- Other minor changes that do not affect the learning outcomes of modules or programmes.

The College does not allow major modifications to be made to existing programmes, between scheduled quinquennial programme reviews.

- *Major modifications are defined as follows:*
- Changes to programme titles or approved programme schedules.
- Changes to module or programme learning outcomes.
- Changes to NFQ level.
- Addition of new modules or awards.

### 5.3.5 Responsibility

QA is the responsibility of every staff member in the College.

- The **Director of Academic Programmes** is responsible for managing and ensuring the quality of academic delivery and processes in accordance with the College's policies and procedures as approved by the Academic Council.
- The **Programme Lead** has responsibility with the Programme Board for individual programmes.
- The **Director of Academic Affairs** is responsible for reviewing and evaluating the effectiveness of programme monitoring processes on a regular and systematic basis.
- The **Head of Quality Assurance and Admissions** is responsible for assisting the Programme Lead to update, as necessary, programme documents or records.

### 5.3.6 Related Legislation, Regulation or Guidelines

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Policies and criteria for the validation of programmes of education and training 2017 (QQI)
- Policy and Criteria for Making Awards 2014 (QQI)
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
- Assessment and Standards, Revised 2013 (QQI).

- Policy for Determining Awards Standards – QQI, 2014
- NFQ Awards Standards
- European Credit Transfer and Accumulation System (ECTS) User Guide –2015
- International Standard Classification of Education (ISCED) – UNESCO, 2011.

## 5.4 Procedure for Monitoring, Review and Re-validation of Programmes

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
Policies this Procedure relates to	Policy for Monitoring, Review and Re-validation of Programmes

### 5.4.1 Procedure

These procedures encompass the following:

1. Programme Monitoring
2. Changes to Validated Programmes
3. Review and Re-validation of Programmes
4. QQI Provider Monitoring Process

### 5.4.2 Ongoing Monitoring of Programmes

The College is committed to the ongoing monitoring of programmes. This is carried out through the Programme Boards and reported to the Academic Council by way of an Annual Programme Report.

The results of this ongoing monitoring inform requests for minor changes to programmes (see Changes to Validated Programmes below) as well as informing the Review and Re-validation of Programmes (see below)

The Programme Board conducts an annual review of the following information:

- Programme admissions data
- External Examiner Reports – reviewed by Director of Academic Programmes
- Anonymised Module data:
  - Registered learners, for the purposes of reconciling data
  - Pass rates and statistics
  - Module Attendance data
  - Submission Data (continuous assessment)
  - Completion rates
- Anonymised Programme Data (per stage):
  - Registered learners
  - Withdrawals/deferrals
  - Stage pass rate
  - Stage completion

- Retention (progression from stage to stage within programme)
- Award Statistics
- Learner Feedback

Data or reports relating to each agenda item are circulated and discussed at least at one of the three Programme Board meetings held in the academic year; reports are circulated in advance to ensure adequate opportunity for considered feedback by members.

On completion of the academic year, the Annual Programme Report and Programme Action Plan (Ref: QAR 1) are prepared and agreed by the Programme Board. These are sent to the Academic Council for information and approval. The Programme Action Plan is distributed to all relevant staff for information and action; it is maintained and updated by the Programme Lead. The Director of Academic Programmes has responsibility to ensure that outcomes of the Annual Programme Report inform quality enhancement and improvements in the College.

Programme data such as registration data, completion data and award classification distribution and trends, are prepared by the office of the Director of Academic Affairs and appended to the External Examiners Form where they can be considered by the External Examiner when preparing their annual report.

#### **5.4.3 Changes to Validated Programmes**

It is the responsibility of the teaching teams to review, on a regular basis, the currency of material delivered in the module. It is the responsibility of the Programme Board to review the effectiveness of teaching and learning strategies, the assessment strategy, currency of reading lists etc., and to make recommendations for improvements and recommend changes to modules.

**Minor changes** to programmes are defined in the policy statement. Proposals for any such changes are made to the Programme Board using the Minor Changes to Programme Approval form (Ref: Associated Form 1) and are subject to the approval of the Academic Council and recorded by the Director of Academic Affairs.

**Major Changes** to programmes are defined in the policy statement and may only be implemented through a validation process.

#### **5.4.4 Review and Re-validation of Programmes**

The College is subject to statutory external review of QA under the Qualifications and Quality Assurance (Education and Training) Act, 2012 on a cyclical basis. It is required to consider seeking revalidation of programmes in advance of the expiry of the duration of enrolment as indicated on the Certificate of Validation.

#### **5.4.5 Revalidation of Academic Programmes**

Revalidation is defined as 'validation by the awarding body of a programme that has emerged or evolved from a programme that had been previously validated'. It is a two-phase process:

1. review and evaluation of the programme as it has been implemented
2. updating and revision of the programme, addressing any identified deficiencies and taking opportunities for improvement

Revalidation benefits from the availability of evidence from historic provision of the programme. There will be quantitative and qualitative information concerning the effectiveness of the programme including the data acquired and analysed over the lifetime of the programme; learner enrolment data; retention and completion data; graduate

progression into employment or other educational programmes; and evaluations of the programme by learners, academic staff and employers.

Revalidation must be completed in advance of the expiry of the duration of enrolment as indicated on the Certificate of Validation, which is typically five years. Notwithstanding this, a programme may be revalidated where it has reached a point where it needs to be substantially modified or updated to an extent that the result is effectively a new programme.

Annual programme monitoring and review feeds into preparation for programme revalidation.

The main steps in an application for revalidation are:

1. Self-evaluation of the programme.
2. Revised programme document, showing proposed changes to programme.
3. Application to QQI.
4. Independent evaluation of the self-evaluation process and the revised programme, in consultation with QQI.
5. Determination of the application by QQI.

Preparation for revalidation is the responsibility of the faculty and led by the Programme Lead or Programme Leads where there is more than one programme. Where there is a suite of similar programmes they may be evaluated together for the purpose of revalidation, provided this does not compromise the quality of the self-evaluation or independent evaluation processes.

The revalidation process must demonstrate and provide evidence that the revised programme continues to address the QQI validation criteria.

Programme(s) for revalidation should follow the process used for programme development - the same approval process and associated responsibilities are the same.

#### **5.4.6 Self-Evaluation of the Programme**

A Revalidation Team is appointed by the Director of Academic Programmes and led by the Programme Lead. The self-evaluation includes a thorough analysis of the programme structure and content, learning outcomes, learner services and relevant data and stakeholder feedback collected over the lifetime of the programme.

Stakeholders are identified and methods for collecting relevant feedback are established, which includes surveys, focus groups, interviews, etc. The data is analysed and informs the self-evaluation.

The Director of Academic Affairs is responsible for supplying the following information to the Director of Academic Programmes in advance of the self-evaluation:

- Learner enrolment data.
- Attrition and completion data.
- Graduate progression into employment or other educational programmes.
- Evaluation of the programme by learners.
- Evaluation of the programme by lecturers.
- Evaluation of the programme by employers.
- External Examiners' reports.

**Self-Evaluation in preparation for revalidation comprises:**

- Analysing the effectiveness and efficiency of each validated programme, including details of learner numbers, retention rates and success rates.
- Investigating trends in module pass rates.
- Reviewing the development of the programme in the context of the requirements of employers, industry, professional bodies, the Irish economy and international developments.
- Evaluating the response of the College to market requirements and educational developments.
- Evaluating the feedback mechanisms for learners and the processes for acting on this feedback.
- Evaluating the physical and virtual facilities and resources provided for the provision of the programmes.
- Evaluating the formal links which have been established with industry, business and the wider community in order to maintain the relevance of its programmes.
- Evaluating feedback from employers of graduates of the programme and from those graduates.
- Reviewing any research activities in the field of learning under review and their impact on teaching and learning.
- Evaluating projections for the following five years in the programme(s)/field of learning under review.
- Seeking to provide an appropriate evidence base to facilitate consideration by a QQI panel to revalidate the relevant programmes.

The above information must be fully and effectively used in the self-evaluation of the proposed (revised) programme against QQI's validation criteria. Findings from the self-evaluation process inform the review of the programme. The outcome may be that the programme is no longer relevant and should be retired or that the programme remains relevant and competitive and that it should be updated and submitted for revalidation.

**5.4.7 Application for Revalidation to the Awarding Body**

The Director of Academic Affairs is responsible for coordinating the revalidation process and the Programme Lead is responsible for preparing the self-evaluation report overseen by the Director of Academic Programmes.

The process is outlined in Policies and Criteria for the Validation of Programmes of Education and Training – QQI Nov 2017, Section 13.

All applications for revalidation must provide the information required for new programme validation using the QQI validation template together with:

- Proposed terms of reference for the independent evaluation report.
- Documentation demonstrating that the prerequisites are established i.e.
  - Established procedures for QA under Section 28 of the 2012 Act

- Established procedures for access, transfer and progression under Section 56 of the 2012 Act
- Compliance with Section 65 in respect of arrangements for the protection of learners in the 2012 Act.
- The updated Programme Document and supporting documentation.
- The College's evaluation report (using the evidence collected and analysed during the lifetime of the programme).
- Evidence of PEL arrangements.

It is important to note that the programme documentation, the College's evaluation report, and where applicable, the independent evaluation report, must address the applicable validation criteria and use and include evidence acquired from providing the programme.

#### **5.4.8 Independent Evaluation of the Programme**

An independent Peer Review Group is established by the College, in consultation with QQI, comprising experts from relevant fields of learning. These experts should be capable of making national and international comparisons having regard to the specific suite of programmes. At a minimum, it comprises the following:

- Chair – experienced in higher education and training, preferably with knowledge of revalidation.
- A secretary.
- Academics (minimum two) experts in relevant field of learning.
- Representatives from industry or a relevant profession.
- A learner representative.

It is essential that the panel members are free from any real or apparent conflicts of interest. Refer to 'Considerations for independent evaluators in QQI Validation Processes (including conflicts of interest matters)' – QQI May 2017. QQI will agree, in consultation with the Director of Academic Programmes and Director of Academic Affairs, the composition of the independent panel, and the terms of reference for the revalidation. The panel is supplied with the 'Roles, Responsibilities and Code of Conduct for Reviewers and Evaluators' – QQI and an Independent Evaluation Report (Independent Evaluation Report) template. The functions of the Peer Review Group include:

- Studying the Self-Evaluation Report.
- Visiting the provider to meet with teaching staff, learners (past and present where possible), administrative staff, employers and any other category of internal and external stakeholders.
- Clarification and verification of details in the Self-Evaluation Report.
- Considering how well the identified aims and objectives of the College are being met.
- Consideration of the proposed revised programme in the context of all other information provided and recommending acceptance or otherwise of the proposals.
- Considering the QA arrangements which affect the programmes under review.

- Presenting its findings at the end of the visit.
- Preparing an Independent Evaluation Report on the findings of the Peer Review Group, to include recommendations for the provider in respect of the programme or suite of programmes under review.
- Providing a separate re-validation report, for each programme under consideration, in accordance with the QQI standard programme validation report.

The Independent Evaluation Report, produced by the Peer Review Group, addresses the quality of the provision, and makes recommendations for improvement and/or change based on a combination of the Self-Evaluation Report and findings during the site visit and meetings with relevant stakeholders.

The Independent Evaluation Report and the Revalidation Report together with a formal response and an implementation plan is prepared by the Director of Academic Affairs with the Director of Academic Programmes and Head of Faculty. The implementation plan addresses the findings and recommendations in the Independent Evaluation Report. It should contain specific achievable actions with measurable outcomes and the date by which outcomes should be realised.

Where necessary, specific detail on the phasing in of changes proposed and where transitional issues arise, how these should be addressed.

The process of decision making by the Academic Council and the Board of Directors will mirror the procedures outlined in the latter stages of [Section 5.2, Procedure for Development & Approval of Programmes.](#)

The Independent Evaluation Report, implementation plan and a formal request for validation is forwarded to QQI for consideration. The Self-Evaluation Report and Independent Evaluation Report reports, together with the related implementation plans are published at this stage.

#### **5.4.9 Determination of the Application by QQI**

QQI will make a determination based on the findings of the process, the Independent Evaluation Report and the College response. The programme may be revalidated, revalidated with conditions or not revalidated.

## 5.5 Control Sheet

<b>Policy and Procedure Title</b>		<b>Policy for Monitoring, Review and Re-Validation of Programmes</b>
Responsible Officer(s)		Director of Academic Programmes
Issuance Date		27 <sup>th</sup> June 2020
Effective Date		27 <sup>th</sup> June 2020
Last Revision Date		October
Supersedes		1.1
Next Revision Date		June 2022
Designated Reviewers		Board of Directors, Executive Management Team, Academic Council
Scope		All programmes

### 5.5.1 Revision History

<b>Revision</b>	<b>Approval Date</b>	<b>Revision Description</b>	<b>Originator</b>	<b>Approved by</b>
New Policy	Sept 2019	New policy	Director of Academic Programmes	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Programmes	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	The Policy Name has been re-worded; Responsibilities of senior staff have been included; Independent Evaluation of the Programme has been incorporated	Director of Academic Programmes	Academic Council

## 5.6 Policy for Access, Transfer and Progression

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

### 5.6.1 ESG Standard:

#### ESG Standard 1.4

*Institutions should consistently apply pre-defined and published regulations covering all phases of the learner “life cycle”, e.g. learner admission, progression, recognition, and certification.*

### 5.6.2 Purpose

The purpose of this policy is to set out the principles underpinning Access, Transfer and Progression at the College, in alignment with the requirements of the Qualifications and Quality Assurance Act (2012), as per QQI’s 2015 policy restatement.

### 5.6.3 Scope

This is an overarching policy that establishes principles applied to all programmes of education and training at the College. Within that scope, procedures are programme specific.

### 5.6.4 Policy

- Definitions*

**Access** – refers to the process by which learners may commence a programme of education and training, having received recognition for the knowledge, skill or competence required.

- Initial Access** – refers to a learner commencing at the initial stage of a programme.
- Advanced Entry** – refers to a learner commencing at a post-initial stage of a programme.

**Transfer** – refers to the process by which learners may transfer from one programme of education and training to another programme, having received recognition for knowledge, skill and competence acquired.

**Progression** – refers to the process by which learners may progress from one programme of education and training to another programme of a higher level.

### 5.6.5 Policy statement

#### Access

The College is committed to providing fair, equitable and consistent access to all applicants to its programmes, and will ensure the following:

- The policy and all admissions arrangements are clear and accessible.
- Decisions regarding the allocation of places on programmes are timely and transparent.
- All applicants are treated in a fair, equal and consistent manner.
- Appropriate arrangements will be in place to facilitate an appeals process.
- For every programme, prospective learners have available statements of the knowledge, skill and competence needed as a basis for successful participation.
- Mechanisms will be in place to facilitate Recognition of Prior Learning (RPL) (See [Policy 5.7](#)).

#### Transfer and Progression

The College is committed to identifying, where available, any transfer and progression routes into and onwards from all programmes leading to awards in the framework. Where these are found to exist, any particular attainments required to facilitate access to a programme leading to an award at the next level will be specified. Where appropriate and feasible, necessary adaptations will be made to programmes to facilitate participants in making successful transitions.

Annual transcripts of performance will facilitate transfer to other programmes or institutions. The European Diploma Supplement will enable graduates to demonstrate competence to employers and facilitate credit transfer between institutions and/or jurisdictions.

### 5.6.6 Responsibility

- The **Academic Council** is responsible for approving the Access, Transfer and Progression opportunities set out in programme specific procedures by Programme Development Teams.
- The **Director of Academic Programmes** has ultimate responsibility for the implementation of policy and procedure pertaining to Access Transfer and Progression.
- The **Programme Lead** is responsible for assisting the Head of Faculty in the implementation of policy and procedure specific to the programme they are responsible for.
- The **Head of Quality Assurance and Admissions** is responsible for monitoring and maintaining the overall alignment of the College's policy and procedures pertaining to Access, Transfer and Progression to QQI's guidelines and policy statements.
- The **Head of Quality Assurance and Admissions**, in consultation with the Head of Faculty and Programme Lead has responsibility for reviewing admission standards and procedures, for considering the fairness and consistency of their application, and for overseeing the administration of the College's admissions system on behalf of the Academic Council.

- The **Admissions Office** is responsible for overseeing the admission of learners to programmes under the oversight of the Registrar.
- The **Registrar** is responsible for ensuring that all QQI entry and enrolment conditions are complied with.

#### **5.6.7 Related Legislation, Regulation or Guidelines**

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Policies and criteria for the validation of programmes of education and training 2017 (QQI)
- Policy and Criteria for Making Awards 2014 (QQI)
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
- Assessment and Standards, Revised 2013 (QQI).
- Policy for Determining Awards Standards – QQI, 2014
- NFQ Awards Standards
- European Credit Transfer and Accumulation System (ECTS) User Guide –2015
- International Standard Classification of Education (ISCED) – UNESCO, 2011.

## 5.7 Procedure for Access, Transfer and Progression

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for Access, Transfer and Progression

### 5.7.1 Procedure

Every programme at the College will have clear entry requirements set out and approved at validation. Entry requirements will describe the:

- Minimum prerequisite learning (knowledge, skill and competence) required to access the programme.
- Prerequisite learning for access (or transfer) to higher stages of the programme.
- The minimum English language competence required for participation in the programme.
- The minimum Mathematics, or other specific competence (where relevant), required for participating in the programme.
- Any special requirements as noted in the approved programme document (e.g. a precursor award in a particular discipline for admittance to a programme at a higher level in the NFQ).
- Any programme-specific Recognition of Prior Learning (RPL)/ Recognition of Prior Experiential Learning (RPEL) criteria arrangements for entry, exemptions from modules, advanced entry and direct access to the award ([Section 5.9](#)).

### 5.7.2 Recruitment of Learners

- *Marketing of Programmes*

Before each intake, a marketing campaign is planned in order to generate awareness and to attract learners to study at the College. A typical marketing campaign consists of the following:

- Digital and offline advertising activity throughout the year with campaigns executed leading up to the commencement of an academic intake.
- Attendance at regional exhibitions.
- Open days organised prior to the commencement of an academic intake and focused on a group of programmes or learners.

The Marketing Manager, in consultation with the Head of Faculty, is responsible for the generation of promotional material which supports the provision of information through the website and other media, while also supporting the College's presence at exhibitions and fairs. All promotional material is subject to the College policy on Public Information and approved by the Director of Academic Affairs.

The College reserves the right to cancel a programme of study where there are insufficient numbers to run a viable programme. In such circumstances, applicants will be notified that

the programme is not to run, and the College will organise a refund of any payments made to the College according to the College Refund Policy. All offer letters will clearly state that the programme will run dependent on numbers.

The College is committed to ensuring that all applicants who have paid a deposit will have that deposit refunded in full as soon as it is known that the programme will not run.

- *Full-time Learners*

The target learners for a new programme will inform the College's decision on the preferred modality for learner recruitment. For example, in the case of full-time undergraduate programmes that lead to major awards where the target learners are in the main mature learners, application will be made directly to the College. By contrast, in the case such programmes where the target learners are in the main school leavers, the College may decide to have applicants apply through the CAO system.

For CAO applicants, entry will be based on leaving certificate point scores, or equivalent, with offer and acceptance processing being managed by the CAO.

Mature applicants (those at the age of 23 or higher on January 1st of the year of the course of entry) are required to complete the College application form, attach copies of all relevant secondary or third level qualification certificates and transcripts and/or training certificates and submit these along with a summary of previous work experience. It is not necessary for mature students to satisfy minimum academic requirements. Such applicants will be interviewed by admissions staff and the Programme Lead to determine their suitability for the chosen programme, their motivation for the subject discipline and for the chosen mode of study, and to assess their potential to succeed.

- *Part-time Learners*

Part-time learner applicants are required to complete the College application form, attach copies of all relevant secondary or third level qualification certificates and transcripts and/or training certificates and submit along with a summary of previous work experience. Such applicants will be interviewed by admissions staff and the Programme Lead to determine their suitability for the chosen programme, their motivation for the subject discipline and for the chosen mode of study, and to assess their potential to succeed.

The Director of Academic Affairs Office is responsible for ensuring each application is rigorously evaluated and a decision is made and sent to the applicant. All admissions are subject to the approval of the Head of Quality Assurance & Admissions.

- *Applications from Persons with Disabilities*

Aligned to the admissions policy of fair, equal and consistent treatment of all applicants, the College is committed to a policy of reasonable accommodation to meet individual needs and enable full access and participation for all learners with specific needs. The College may refer to the Association for Higher Education Access and Disability for advice if required. All applicants with a disability or other specific needs should declare those requirements at the application stage, as this is to ensure that the College can evaluate any additional supports required and if reasonable accommodation can be made. Once accepted and registered on a programme the learner can access the disability support or reasonable accommodations via Student Affairs.

### **5.7.3 Applications for Admission with Advanced Standing (Transfer)**

Applicants transferring from cognate programmes may be considered under these arrangements for access, transfer and progression, in straightforward cases. Depending on the degree of complexity of the application, it may be preferable to treat such applications under the associated RPL policy ([Section 5.7](#)).

There are two categories of access with advanced standing:

1. Direct entry where a learner is exempt from one or more complete stages.
2. Module exemption where a learner is considered for exemption from a module or modules comprising part of a stage.

Credit will not be awarded for exempted modules or stages in order to avoid granting double credits for the same learning; such modules will be denoted 'exempt' on the learner's transcript and European Diploma Supplement.

Individual module exemptions are only considered for learners on part-time undergraduate programmes. Exemptions are agreed when an admission is being evaluated prior to registration. Exemptions are not considered at the Award Stage or for programmes of less than 60 ECTS such as Minor or Special Purpose Awards.

Transfer from one programme to another (other than progression programmes) in the College will be judged on a case-by-case basis, taking into account required knowledge, skill and competence required for successful participation in the new programme.

#### **5.7.4 Progression**

Progression to another programme of education and training is generally on the basis of successful completion of a stage or an award, as determined by the receiving programme or institution. The College will facilitate any progression applications to other institutions through the provision of transcripts and references as may be required. Progression following graduation to higher level awards in the College, elsewhere in Ireland or abroad will be further facilitated by providing the graduate with the European Diploma Supplement. This will be catered for within the Student Information System.

#### **5.7.5 Appeal**

An applicant is entitled to seek a review of an admissions decision, if they are not satisfied. An applicant may only seek this review on the following grounds:

1. Incorrect process. Specific evidence of irregularity in the College's application assessment process must be provided.
2. Specified/stated grounds where the College's decision was based on misinterpretation of data or information provided as part of the application process.

False or vexatious appeals will not be considered.

Requests for a review must be made in writing to the Registrar's Office within 10 days of the decision being communicated. The request must be accompanied by all relevant and supporting documentation and a fee of €50, to be refunded only if the review is successful. The grounds for review will be considered by the Director of Academic Affairs and evaluated by another senior staff member, who was not involved in the original decision. The outcome of the review will be communicated in writing to the applicant normally within 10 days of receipt.

If the applicant remains dissatisfied, they may seek to appeal through the College's formal Appeals Procedure in [Section 3.9](#). The fee for such an appeal is €100, refundable only if the appeal is successful.

### **5.7.6 Learner Registration**

Once an applicant has formally accepted an offer and paid the required fee or deposit the applicant is provided with details of the programme on which they will be enrolled, complete the registration process, attend induction, be supplied with timetables and any other information. The applicants are formally registered with the College and enrolled on a programme and associated modules in the Student Information System.

### **5.7.7 Learner Induction**

Each registered learner undergoes an induction programme which includes an introduction to the learner, Innoskills (Moodle) access, learner supports, the role of the class representative, library, career services and facilities. (Ref: Supporting Document 6)

### **5.7.8 Deferring Admission**

An applicant in receipt of an offer who does not wish to take up their place may apply for a Deferral of Admission and this must be received by the registration date given for that intake. Deferrals are not indefinite, and an offer will expire within one year or by the revalidation date of the programme, whichever is the shorter. Deferred applicants must be made aware that admission is subject to the availability of the programme and capacity.

## 5.8 Policy for Recognition of Prior Learning (RPL)

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Programmes

### 5.8.1 ESG Standard:

#### ESG Standard 1.4

*Institutions should consistently apply pre-defined and published regulations covering all phases of the learner “life cycle”, e.g. learner admission, progression, recognition, and certification.*

### 5.8.2 Purpose

The purpose of this policy is to set out the principles of Recognition of Prior Learning underpinning access and advanced entry, in alignment with the requirements of the Qualifications and Quality Assurance Act (2012), as per QQI’s 2015 policy restatement.

### 5.8.3 Scope

This policy applied to QQI programmes leading to awards recognised in the National Framework of Qualifications.

### 5.8.4 Policy

Recognition of Prior Learning (RPL) is a process that allows learners gain admission to a programme of study, advanced entry to a programme of study or to gain exemptions/credit from part of a programme based on demonstrated learning achieved prior to admission. The College recognises that learners may have gained relevant knowledge, skills and competencies prior to the commencement of a programme of study. The College, through its RPL policy and procedure, recognises appropriate prior learning so that learners do not have to cover topics already mastered, whether this mastery has come through prior study, work or life, or any combination of the three. The College acknowledges that learning can be acquired from a range of learning experiences, including accredited, non-accredited, formal and informal learning. In line with the National Framework of Qualifications (NFQ), the College aims to recognise all learning achievements by facilitating RPL.

- Definitions*

The term RPL incorporates both the Recognition of Prior Certified Learning (RPCL) and the Recognition of Prior Experiential Learning (RPEL).

- Recognition of Prior Certified Learning (RPCL):** This is where an applicant has already been awarded certification for a formal programme taken at another Institution (in Ireland or abroad). This learning may entitle the applicant entry onto a programme, exemptions from some elements of a programme or advanced entry onto a programme of study.
- Recognition of Prior Experiential Learning (RPEL):** This involves the awarding of credit for learning gained from experience i.e. learning that has not previously been academically accredited. In this case, the candidate must prove that the required

learning outcomes have been achieved. This evidence can then be used to support a claim for admission onto a programme of study, exemption from some elements of a programme or credit. As a general principle, recognition is given for learning and not for experience per se.

### **5.8.5 Policy Principles**

The following guidelines apply in the implementation of RPL within the College.

- Through its RPL processes the College recognises learning which has occurred before admission onto a programme or to the relevant stage of a programme of study irrespective of mode or place of learning.
- In seeking recognition under RPL, prior learning must be evidenced through a medium that is appropriate to the particular learning outcomes.
- The focus of the College's RPL process will be on the achievement of learning, or the outcome of that learning, rather than the experience of learning.
- Prior certified learning may entitle the candidate to exemptions on a programme, not credits.
- Learning which has been previously accredited is not ascribed credit twice.
- Exemptions or credits for prior experiential (non-certified) learning may be awarded on the basis of demonstrated learning which shows that a candidate has achieved specified learning outcomes relevant to the programme of study.
- Recognition will normally be given for complete modules only and where all of the learning outcomes of a module have been achieved.
- The College must ensure that academic standards comparable to those attained on programmes by traditional mode will be maintained and applied throughout the RPL process.
- Exemptions are granted where prior learning has not previously been awarded credit under the European Credit Transfer System (ECTS).
- In the case where a candidate presents with a qualification that was achieved outside of Ireland, the qualification will be assessed using the NARIC Ireland Qualifications Recognition database to establish equivalency.
- Exemptions / advanced entry can only be granted prior to or/at commencement of a module or stage.
- Exemptions are not available on every programme of study available at the College. Where such an exception occurs, clear information will be provided via the programme documentation available to applicants and learners and on the College website.

### **5.8.6 Assessment of Application for RPL**

When considering an application for RPL, the assessor will make an assessment of the evidence of learning against the following criteria:

- authenticity – that the learner actually completed what is claimed in the proposal and that the evidence relates to the applicant's own efforts and achievements;

- sufficiency – that there is sufficient evidence to demonstrate fully the achievement of the learning claimed;
- validity – that there is an appropriate match between the evidence presented and the learning being demonstrated and that the evidence is valid and reliable;
- currency – that learning is sufficiently recent to allow the learner to benefit from the proposed course or the learner has kept up-to-date with recent developments;
- directness – that the learning was specific and can be identified and categorised;
- quality – that learning reached a level to allow the learner to benefit from the proposed course.

#### **5.8.7 RPL Committee**

The College shall establish an RPL Committee to consider recommendations from assessors on applications for recognition of prior learning. The Committee shall comprise the following:

- i. Chair: Director of Academic Programmes.
- ii. Head of Faculty.
- iii. Appropriate Programme Lead.
- iv. Head of Quality Assurance and Admissions.

The quorum for a valid meeting shall be three members.

#### **5.8.8 Responsibility**

- The **Academic Council** is responsible for approving the RPL opportunities set out in programme specific procedures by Programme Development Teams.
- The **Admissions Office**, in consultation with the Director of Academic Programmes and Programme Lead has responsibility for reviewing admission standards and procedures, for considering the fairness and consistency of their application, and for overseeing the administration of the College's admissions system on behalf of the Academic Council.
- The **Admissions Office** makes recommendations to Director of Academic Affairs on the admission standards and procedures which either approves or amends those recommendations.
- The **Admissions Office** is responsible for overseeing the admission of learners to programmes under the oversight of the Director of Academic Affairs.
- The **Director of Academic Affairs** is responsible for ensuring that all awarding body entry and enrolment conditions are complied with.
- The **Head of Faculty** is responsible for evaluating applicants' academic achievements to determine that they have met the academic entry criteria.

#### **5.8.9 Related Legislation, Regulation or Guidelines**

Core Statutory Quality Assurance Guidelines 2016 (QQI).

Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).

Policies and criteria for the validation of programmes of education and training 2017 (QQI)

Policy and Criteria for Making Awards 2014 (QQI)

Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).

Assessment and Standards, Revised 2013 (QQI).

Policy for Determining Awards Standards – QQI, 2014

NFQ Awards Standards

European Credit Transfer and Accumulation System (ECTS) User Guide –2015

International Standard Classification of Education (ISCED) – UNESCO, 2011.

Principles and Operational Guidelines for the Recognition of Prior Learning in Further and Higher Education and Training 2005 (QQI)

QQI Policy Restatement: Policy and Criteria for Access, Transfer and Progression in Relation to Learners for Providers of Further and Higher Education and Training 2015.

## 5.9 Procedure for Operation of RPL Policy

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Governance and Management of Quality</li><li>Documented Approach to QA</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for Recognition of Prior Learning (RPL)

### 5.9.1 Procedure

Responsibility for submitting applications for the Recognition of Prior Learning rests with individual applicants. Potential RPL applicants seeking to access a programme in the College, through RPL, are invited to a preliminary meeting with the relevant Programme Lead to discuss the requirements for RPL entry. The Head of QA and Admissions will advise the applicant of the minimum standards that must be evidenced and explain the RPL process to the applicant. Should the applicant wish to proceed, they must complete a detailed RPL application. The completed RPL application form must be accompanied by details and evidence of prior learning.

### 5.9.2 Prior Certified Learning

Evidence of learning must be presented by the applicant in the form of official transcripts of results and the associated syllabi accompanied by relevant supporting documentation. Recognition of prior certified learning is evaluated by the Director of Academic Programmes or (Programme Lead), who will take into account the learner's academic record, course/programme of study, syllabus, course description, learning outcomes, number of contact hours, forms of assessment(s), NFQ level of qualification awarded (or equivalency).

### 5.9.3 Prior Experiential Learning

Where experiential learning is involved applicants need to present evidence of learning that demonstrates the achievement of learning outcomes of the relevant programme module(s). Candidates must demonstrate the appropriate academic level of learning as determined by the Director of Academic Programmes. This will normally involve candidates demonstrating that they understand the theory as well as the practical learning elements of a module.

### 5.9.4 The Process of RPL

- Information regarding RPL shall be available on the College website and learner handbook.
- The applicant contacts the Admissions Office with their intention to apply for RPL. Learner completes relevant application form which provided through the Admissions Office. Application forms for RPL should be completed and submitted to the Admissions Office at least 4 weeks before the commencement of the programme/module.
- For Recognition of Prior Certified Learning (RPCL), applicants must submit a copy of their certificate that documents the prior learning and also a description of the module(s) / programme(s) already completed (i.e. learning outcomes, assessment techniques, duration of study etc). This should be included with their initial application.

- For Recognition of Prior Experiential Learning (RPEL), applicants must prepare a portfolio of evidence based on the learning outcomes of the module they seek RPL for. The College will provide advice on the preparation of the Portfolio, through its RPL mentoring support system.
- In both RPCL and RPEL applications, the assessor should make a recommendation on the application within 10 working days and forward a report to the Programme Lead. The Programme Lead will consult with the Director of Academic Programmes and prepare a recommendation for consideration by the College's RPL Committee. The RPL Committee will make a final decision on the application.
- The decision of the RPL Committee will be communicated in writing to the applicant. The applicant has the right to appeal the decision. The appeal must be made within 5 working days of receiving the outcome.
- A maximum of 50% of credits may be exempted for non-award stages of programmes. No credit exemptions may be awarded for Award stages.

### 5.9.5 Recognition for Prior Certified Learning (RPCL)

Prior Certified Learning is where an applicant has already been awarded a qualification for a formal programme taken at an institution or training organisation. This prior learning may be recognised on the National Framework of Qualifications and may entitle the applicant to:

- Admission to a programme.
- The award of advanced academic standing.
- The award of exemptions from some parts of a programme.

The applicant is required to provide the relevant syllabus and a transcript of results. The assessor, appointed by the Admissions Office, in consultation with the Programme Lead, will have regard to the criteria listed under '*Assessment of Application for RPL*' in the Policy Statement. They will base their decision to grant this exemption or advanced academic standing on the following:

- **Comparison of learning outcomes:** The assessor should compare the learning outcomes of the prior certified learning to the learning outcomes of the module(s)/programme the applicant is seeking the exemption(s) in. If the assessor believes the learning outcomes are sufficiently similar, then an exemption may be awarded. It is at the discretion of the assessor to decide what is sufficiently similar.
- **Currency of Prior Certified Learning:** The Prior Certified Learning must have been achieved in a comparatively appropriate time frame (in some instances this may be in the last 3 years, 5 years or 10 years – dependent on the learning achieved) i.e. computing learning 10 years ago is of limited benefit today on a current programme– psychology outcomes may be more timeless.
- **Foreign Qualifications:** Applicants seeking RPCL for foreign qualifications should contact QQI to have their qualifications aligned with the appropriate Irish qualification.

### 5.9.6 Guidelines for Recognition of Prior Certified Learning

- It is the applicant's responsibility to apply for the RPCL. Applicants must submit their claim on the relevant form. This form must be submitted to the Admissions Office at least 4 weeks before the commencement of the programme/module. Applicants must also include certificates, results, programme details and where possible learning outcomes of modules completed.
- The applicant may be required to attend an interview with the assessor.
- Prior certified learning may entitle the candidate to exemptions on a programme, not credits. As this certified learning has already received credit at another institution, the applicant does not receive credits for it again, but recognition in the form of exemptions. No grade will be awarded to the applicant for the certified learning.
- The assessor should make a recommendation to the Programme Lead regarding the RPL application within 10 working days of application. Assessors have the right to recommend that exemptions be granted with conditions (e.g. certain research is carried out, attendance at certain workshops etc.).
- The Programme Lead will consult with the Director of Academic Programmes and prepare a recommendation for consideration by the College's RPL Committee. The RPL Committee will make a final decision on the application.
- The decision of the RPL Committee will be communicated in writing to the applicant. The Applicant has a right to appeal this decision, in accordance with the procedure in Section 5.8.9 [Appeal](#) below.
- When Prior Certified Learning is accepted as the basis for granting an exemption on a programme of study, further application using the same learning for the granting of further exemptions in the same programme will not be considered.
- Some programmes may require a limitation on the volume of exemptions or on the type of learning that may be exempt due to requirements of state or professional bodies.

### **5.9.7 Recognition of Prior Experiential Learning (RPEL)**

This involves the awarding of credit for learning from experience. In this case, the candidate must demonstrate that the learning experience has occurred by producing a Portfolio of Evidence to support the claim for access, exemption or credit (in some instances the assessor may decide to use an alternative method of assessment, e.g. project or examination). The College will provide advice on the preparation of the Portfolio, through its RPL mentoring support system. It should be pointed out to the applicant that this may prove to be an onerous and time-consuming procedure.

As a general principle, credit is given for learning, not for experience per se. The portfolio of evidence must be written in such a way that the matching of the knowledge, skills and competencies of the module learning outcomes to the prior learning is clearly demonstrated. The portfolio which the applicant presents will be based on the learning outcomes of the module(s)/ programme he/she seeks credits for. Evidence contained in the portfolio may include:

- References
- CV (e.g. Europass CV)
- Job Descriptions and experiences

- Details of any training completed
- Certificates for qualifications, training courses etc.
- Sample work (e.g. drawings, minutes from meetings, business plan etc)
- Evidence from the applicant's personal life
- Published work
- Professional licenses/registrations or membership of professional organisations
- Acknowledged accomplishments
- Relevant recreational activities or hobbies

### **5.9.8 Guidelines for Recognition of Prior Experiential Learning**

- It is the learner's responsibility to apply for RPEL. Applications are made to the Admissions Office. Applicants must submit their claim on the relevant form. This form must be submitted at least 4 weeks before the commencement of the programme/module.
- The Admissions Office, in consultation with the Director of Academic Programmes, will appoint a suitably qualified assessor to assess the portfolio of evidence prepared by the RPL applicant. Assessors must satisfy themselves that the learning gained matches the minimum standard of the learning outcomes on the module for which the credits is being sought. The assessor responsible must have received training on RPL before he/she can assess the portfolio. When assessing portfolios, it is important to consider the currency of the prior learning. It must be achieved within a suitable time frame – for example within the last 3-5 years, in the case of IT related programmes.
- The applicant may be required to provide verification from previous or current employers that the experience stated has been achieved by the applicant. Learning outcomes should facilitate the RPL assessment process. They must be written in a format that allows the applicant to provide evidence that he/she possesses the relevant knowledge, skills and competencies associated with the module/programme.
- As part of the assessment, applicants may also be interviewed by the assessor.
- Applicants should receive a grade for their portfolio of evidence which carries equal weight to modules taken in the conventional method. Assessors must satisfy themselves that the assessment methods used to determine the standard of the experiential learning gained be equivalent to assessment methods applied to conventional applicants. Assessors have the right to recommend that credits be granted with conditions e.g. certain research is carried out, attendance at certain workshops etc.
- The assessor should make a recommendation to the Programme Lead regarding the RPL application within 10 working days of application. Assessors have the right to recommend that exemptions be granted with conditions (e.g. certain research is carried out, attendance at certain workshops etc.).
- The Programme Lead will consult with the Director of Academic Programmes and prepare a recommendation for consideration by the College's RPL Committee. The RPL Committee will make a final decision on the application.

- The decision of the RPL Committee will be communicated in writing to the applicant. The Applicant has a right to appeal this decision, in accordance with the procedure in Section 5.8.9 [Appeal](#) below.

#### **5.9.9    Review and Appeal**

The applicant has the right to seek a review of the RPL Committee's decision, if they are not satisfied.

An applicant may only seek this review on the following grounds:

3. Incorrect process. Specific evidence of irregularity in the College's application assessment process must be provided.
4. Specified/stated grounds where the College's decision was based on misinterpretation of data or information provided as part of the application process.

False or vexatious appeals will not be considered.

Requests for a review must be made in writing to the Director of Academic Affairs Office within 10 days of the decision being communicated. The request must be accompanied by all relevant and supporting documentation and a fee of €50, to be refunded only if the review is successful.

The grounds for review will be considered by the Director of Academic Affairs and evaluated by the Director of Academic Affairs or another qualified assessor, who is not involved in the original decision. The outcome of the review will be communicated in writing to the applicant normally within 10 days of receipt.

If the applicant remains dissatisfied, they may seek to appeal through the College's formal Appeals Procedure in [Section 3.8](#). The fee for such an appeal is €100, refundable only if the appeal is successful.

#### **5.9.10    Validation**

All RPL recommendations and decisions are subject to audit by the Admissions Office.

## 5.10 Control Sheet

<b>Policy and Procedure Title</b>		<b>Access, Transfer and Progression</b>
Responsible Officer(s)		Director of Academic Affairs
Issuance Date		4 <sup>th</sup> September 2020
Effective Date		4 <sup>th</sup> September 2020
Last Revision Date		27 <sup>th</sup> June 2020
Supersedes		2.0
Next Revision Date		September 2022
Designated Reviewers		Board of Directors, Executive Management Team, Academic Council
Scope		All programmes

### 5.10.1 Revision History

<b>Revision</b>	<b>Approval Date</b>	<b>Revision Description</b>	<b>Originator</b>	<b>Approved by</b>
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Affairs	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	The RPL procedure has been included into the QAM; inclusion of RPL Committee; Clarity on the roles and responsibilities of College staff responsible for this policy	Director of Academic Affairs	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Section 5.10 has been update to remove the text: <i>“All RPL decisions must be validated and signed off by the Director of Academic Affairs”</i>	Director of Academic Affairs	Academic Council

## 6. Staff Recruitment, Management and Development

### 6.1 Policy for Staff Recruitment, Management and Development

QA Area (s)	<ul style="list-style-type: none"><li>• Staff Recruitment, Management and Development</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

#### 6.1.1 ESG Standard: Teaching Staff

##### **ESG Standard 1.5**

*Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of staff.*

##### **6.1.2 Purpose**

The purpose of this policy is to set out the principles for fair and transparent recruitment, management and development of staff at the College, in alignment with QQI's Core Statutory QA Guidelines. These inform associated procedures.

##### **6.1.3 Scope**

This policy applies to all part-time and full-time staff at the College, inclusive of those holding teaching, administrative, management or support roles.

##### **6.1.4 Policy**

- *Policy statement*

A strategic priority within the Innopharma Education 2020 – 2025 Strategic Plan is 'our people and structures'. The College is committed to sustaining a high-quality and supportive working environment that reflects the core values of College.

- Excellence
- Integrity
- Diversity
- Innovation
- Collaboration
- *Recruitment*

Attracting an excellent team of academic and non-academic staff committed to quality service provision is a key strategic objective for the College.

- The College is committed to implementing clear, transparent and fair processes for staff recruitment, and setting conditions of employment that recognise the importance of teaching.
- The College is committed to the selection of employees in a consistent and professional manner in accordance with the Employment Equality Acts (1998 – 2015), which does not discriminate on grounds of gender, marital status, family

status, sexual orientation, religious belief, age, disability, race or membership of the traveller community.

- The College is committed to the avoidance of any real or perceived conflict of interest. Therefore, company personnel involved in the hiring process, will avoid interviewing and/or making hiring decisions which involve family members, relations or friends.

- *Persons Employed to Teach Learners*

The College has established the following criteria for the appointment of academic staff. A lecturer is required to have a qualification above the level at which they are being appointed to teach, ideally the minimum academic criteria are set at:

- An honours degree in a relevant Level 8 programme (NFQ), or equivalent in a discipline relevant to programmes.
- Three years' relevant post-qualification experience.
- Excellent communication and presentation skills.

- *Desirable:*
- A qualification in teaching and learning.
- Postgraduate qualification.
- Relevant teaching, course design, and/or research experience.
- Supervision of projects at undergraduate level and possibly postgraduate level.
- Specific specialised experience.

#### **6.1.5 Induction and Management**

The College is committed to promoting a work environment and organisational culture that is inclusive, dynamic and team oriented. To ensure this, the College is committed to ensuring the following:

- All new staff undertake a general induction. Academic and programme administration staff additionally undertake an academic induction as per [6.3 Procedure for Induction and Management of Staff](#).
- All staff are provided with a job description that includes individual responsibilities and accountabilities, which is understood by the individual staff member and their manager and is regularly reviewed.
- All staff participate in an appraisal process annually, which reviews performance and sets future goals, objectives and development plans in the context of evolving operational responsibilities and career development.

#### **6.1.6 Staff Development**

The College is committed to the provision of opportunities for Continuing Professional Development (CPD) of all staff. Opportunities for CPD may occur internally or externally and are enhancement-focused. Although indicative activities may overlap, CPD is distinct from

Management of Staff Performance, which takes place within a more supervisory and potentially remedial context.

CPD for all staff is actively promoted by the College's leadership and management. Examples of CPD activities that the College may support include, but are not limited to, the following:

- Participation in internal training modules, workshops or seminars;
- Attendance at externally facilitated webinars, workshops, conferences or industry events;
- Membership or affiliation of the College community to professional bodies in the sector;
- Mentoring and coaching of junior staff;
- Observation of teaching by senior colleagues;
- Peer observation schemes;
- Accredited and non-accredited learning.

Support for CPD may entail:

- Time release;
- Payment for hours spent engaged in CPD activities;
- Full/partial financial support as appropriate.

To ensure that the allocation of the College's resources to CPD remains closely aligned to the College's strategy and mission, and that decision-making is conducted in a fair, transparent and appropriate manner, staff are required to follow the associated [6.4 Procedure for Staff Applications for Continuing Professional Development Support](#).

As the College's resources are not unlimited, the allocation of support for CPD funding always entails a consideration of factors including:

- The strategic value of the proposed activity to the College;
- The cost of the proposed activity;
- The potential impact of the proposed activity on the quality of learning and teaching, learner learning and the learner experience;
- The appropriateness of the proposed activity to career stage of the relevant staff member(s);
- The potential for benefits/learning from the proposed activity to be shared/disseminated within the College community by the relevant staff member(s);
- The workplace behaviour and performance of the relevant staff members(s);
- The length of time the relevant staff member has been employed by the College.

#### **6.1.7 Responsibility**

- The **Head of Quality Assurance and Admissions** is responsible for monitoring and maintaining the overall alignment of the College's policy and procedures pertaining to Staff Recruitment, Management and Development to QQI's guidelines and policy statements.
- The **Director of Academic Programmes** is responsible for the collection, review and monitoring of staff and learner feedback in relation to appraisal of teaching performance and initiating any necessary actions to address issues or concerns arising from feedback.

- The **Director of Academic Affairs** is responsible for recruitment, appointment and induction of staff in the Operations branch of the College. This includes Administrative Staff.
- The **Director of Academic Affairs** and **Director of Academic Programmes** are jointly responsible for the recruitment, appointment and induction of faculty staff. This includes all staff employed in teaching and learner support roles.
- The **Candidate** is responsible for ensuring all information submitted to the College in their CV and Application is up to date, accurate and verifiable.
- The **Academic Council** is responsible for approving policy and associated procedures pertaining to staff development, making recommendations to the **Board of Directors** on resource allocation for staff development, and delegating appropriate functional responsibility for managing staff development to the **Director of Academic Affairs** and the **Director of Academic Programmes**.

#### **6.1.8 Related Legislation, Regulation or Guidelines**

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- The Employment Equality Acts (1998 – 2015)

## 6.2 Procedure for Recruitment of Staff

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for Staff Recruitment, Management and Development

### 6.2.1 Procedure

1. The decision to recruit an employee is made by the Board of Directors on the recommendation of the Executive Management Team, in response to an identified need within the College. The needs of the organisation are reviewed annually as part of the planning process or more frequently if required.
2. When the need for a new resource is identified a job description is created by HR. This includes responsibilities and accountabilities and outlines the minimum qualification requirements along with personal skills and experience.
3. The HR function in the College identifies appropriate internal personnel to participate in an interview board and facilitate the recruitment process through the review of applications and the interview process.
4. All CVs received based on the job criteria are reviewed and shortlisted by the Interview Board to identify potentially suitable candidates for interview.
5. The decision to hire a candidate is made by consensus of the interviewers. Candidates are ranked in terms of suitability and the process proceeds to offer stage with the most suitable candidate.
6. Selection is based on merit and those who are successful demonstrate their suitability for appointment according to predetermined job-related selection criteria which is consistently applied throughout the recruitment process. The application of the College's Equality and Diversity policy also includes accommodating as much as possible the special needs of individuals to facilitate their participation in the recruitment and selection process.
7. When a suitable candidate is identified relevant references are checked and authenticated copies of academic transcripts are requested.
8. Once pre-hiring activities are completed successfully, a proposal that an offer of employment be extended to the preferred candidate is prepared for the Board of Directors.
9. Should the Board of Directors agree to appoint the person an offer of employment is made, verbally and then in writing.

10. All employees are invited to commence employment with the College subject to a probationary period of 6 months.
11. Once accepted, an employee HR file is created including CV, Copy of signed contract & copy of academic transcripts. (Sample Contract Ref: QAR 2)

### 6.3 Procedure for Induction and Management of Staff

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for Staff Recruitment, Management and Development

#### 6.3.1 Induction

It is the responsibility of the **Director of Academic Affairs** with support from **HR Manager** to ensure all new staff undertake a general induction that includes:

- Introduction to the College including background, ethos, structures, strategies and plans.
- Academic and administration procedures and regulations (including the College's Equality and Diversity policy).
- Overview of the IT and communications systems.
- Overview of health and safety requirements.

In addition, it is the responsibility of the **Director of Academic Programmes** to ensure all academic and programme administration staff undergo an academic induction that covers:

- Roles and responsibilities of academic and administration staff.
- QA Policies and Procedures.
- Other relevant material from awarding bodies.
- Learner supports available.
- Staff development opportunities.
- Programme Document and Approved Programme Schedule.
- Introduction to the Virtual Learning Environment.
- Introduction to Teaching, Learning and Assessment at the College.
- Introduction to Staff Handbook which includes but not limited to the Learner Charter, Standards for Blended Learning, Assessment and Standards, Reasonable Accommodation, Academic Misconduct, Dealing with Complaints & Disciplinary Breaches.

Academic staff with limited teaching experience are assigned a mentor from the academic faculty to support them in the first academic year and provide guidance on pedagogy and assessment. This may include observation of teaching by the mentor.

#### 6.3.2 Management

The staff appraisal process supports the cyclical review of performance of roles, the achievement of goals and objectives, and the implementation of staff development plans. It also focuses on future goals, objectives and development plans in the context of evolving operational responsibilities and career development.

Each member of staff will typically have:

- A job description that includes individual responsibilities and accountabilities, which is understood by the individual staff member and their manager.
- Individual goals and objectives.
- Development plans if needed in support of the achievement of these goals.

Each member of staff will participate annually in a formal appraisal with their manager. This will include:

- A review of the staff member's job description;
- A review of the staff member's performance against the job description;
- A review of progress toward individual goals and objectives set at the previous meeting;
- Discussion of goals and objectives for the coming year in the context of the College's Strategic Plan and the individual's work area;
- Discussion of possible CPD activities for the coming year.

Informal reviews are carried out to review progress and updates based on evolving business plans and objectives.

## 6.4 Procedure for Staff Applying for Continuing Professional Development Support

QA Area (s)	<ul style="list-style-type: none"><li>• Staff Recruitment, Management and Development</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for Staff Recruitment, Management and Development

### 6.4.1 Procedure

1. The staff member applying for CPD support is encouraged to seek advice and input on their proposed application informally from their manager prior to submitting a formal application.
2. The staff member applying for CPD sends a written request to their manager outlining the following:
  - I. The specific nature of the CPD they wish to engage with (e.g. formal study, industry event or conference attendance; this should include dates, locations and other practical information);
  - II. The specific nature of the support requested from the College (e.g. allocated time, financial support, mentoring);
  - III. The potential value/benefit of the CPD to the staff member as an individual;
  - IV. The potential value/benefit to the College as a community.
3. The staff member's manager considers the application, referring to the criteria outlined in the [Policy](#) for Staff Recruitment, Management and Development.
4. Where the request has *no or negligible* resource implications the relevant manager may approve the request as they deem appropriate, and communicate the outcome directly to the staff member.
5. Where the request has significant resource implications, for academic staff the relevant manager brings the request to the **Academic Council** (for recommendation). All requests are sent to the **Executive Management Team** (for approval) along with the manager's recommendation to approve or not approve the request.
6. A decision is reached, and the outcome communicated to the staff member by their manager.
7. Where an application is approved, this may be conditional. Any conditions will be communicated to the staff member at the same time the outcome is communicated. *An example of a condition would be: attendance at a conference being sponsored by*

*the College is conditional to the staff member facilitating a CPD session for peers based on learning from that conference after their return.*

## 6.5 Policy for Equality

QA Area (s)	<ul style="list-style-type: none"><li>• Staff Recruitment, Management and Development</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

### 6.5.1 ESG Standard: Teaching Staff

#### **ESG Standard 1.5**

*Institutions should assure themselves of the competence of their teachers. They should apply fair and transparent processes for the recruitment and development of staff.*

#### 6.5.2 Purpose

- *Overview and Objective*

The College recognises the educational and organisational benefits of having a diverse community of staff and students and continues to build and maintain an inclusive environment which promotes equality, values diversity and respects the rights and dignity of all.

The College is committed to a culture where equality is embodied in non-discrimination towards all employees, applicants for employment, and students. To this end, the College aims to ensure that all individuals (employee, potential employees and students) are treated fairly and equally, with dignity and respect irrespective of: Gender, Civil Status, Family Status, Sexual Orientation, Religion, Age, Disability, Race or Membership of the Traveller Community.

- *Objectives of Equality Planning*

The purpose of the Equality Policy is to promote an affirmative place of learning and work that provides for equal opportunities for all current, future and potential staff and learners and where their dignity is protected and respected at all times.

- *Recruitment and Selection of Staff*

Selection is based on merit, qualifications, abilities, skills, knowledge and attitude to perform a job effectively, efficiently and to the standards required now and into the future. Successful candidates must successfully demonstrate their suitability for appointment according to predetermined job-related selection criteria which is consistently applied throughout the recruitment process. The application of the Equality Policy also includes accommodating as much as possible the special needs of individuals to facilitate their participation in the recruitment and selection process.

- *Responsibility*

The College is committed to the active implementation of equality. College senior management have responsibility for ensuring the implementation of the policy in the workplace and promoting a culture that supports the policy.

- *Role of Staff*

All staff have an important role to play in ensuring equality throughout the College and have a particular responsibility to engender respect for difference and to accommodate diversity. College staff are required to support the College's commitment to maintaining a work and academic environment free of harassment and bullying.

The College recognises that harassment and bullying can severely damage working conditions. Neither will be tolerated in the activities of the College.

- *Equality Induction*

All staff are familiarised with the Equality Policy at their induction. All staff will receive any updates that are made to this policy to ensure its effective and consistent implementation.

## 6.6 Control Sheet

<b>Policy and Procedure Title</b>	Staff Recruitment, Management and Deployment
Responsible Officer(s)	Director of Academic Affairs / HR Manager
Issuance Date	27 <sup>th</sup> June 2020
Effective Date	27 <sup>th</sup> June 2020
Last Revision Date	May 2024
Supersedes	1.1
Next Revision Date	June 2025
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 6.6.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	The procedure for CPD applications has been included; Procedures for Recruitment and Induction have been incorporated to the QAM	Director of Academic Affairs	Academic Council

## 7. Teaching, Learning and Assessment

### 7.1 Policy for Teaching, Learning and Assessment

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Governance and Management of Quality</li><li>Documented Approach to QA</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policies Owner	Director of Academic Programmes

#### 7.1.1 ESG Standard 1.3: Student-centred Learning, Teaching and Assessment.

*Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.*

#### 7.1.2 Teaching, Learning & Assessment Strategy

##### Introduction

The overarching Teaching, Learning and Assessment (TLA) Strategy of the College ensures that our core practices are aligned with the achievement of our five-year Strategic Plan, and the Mission and Vision of the College.

With regard to programmes of education and training:

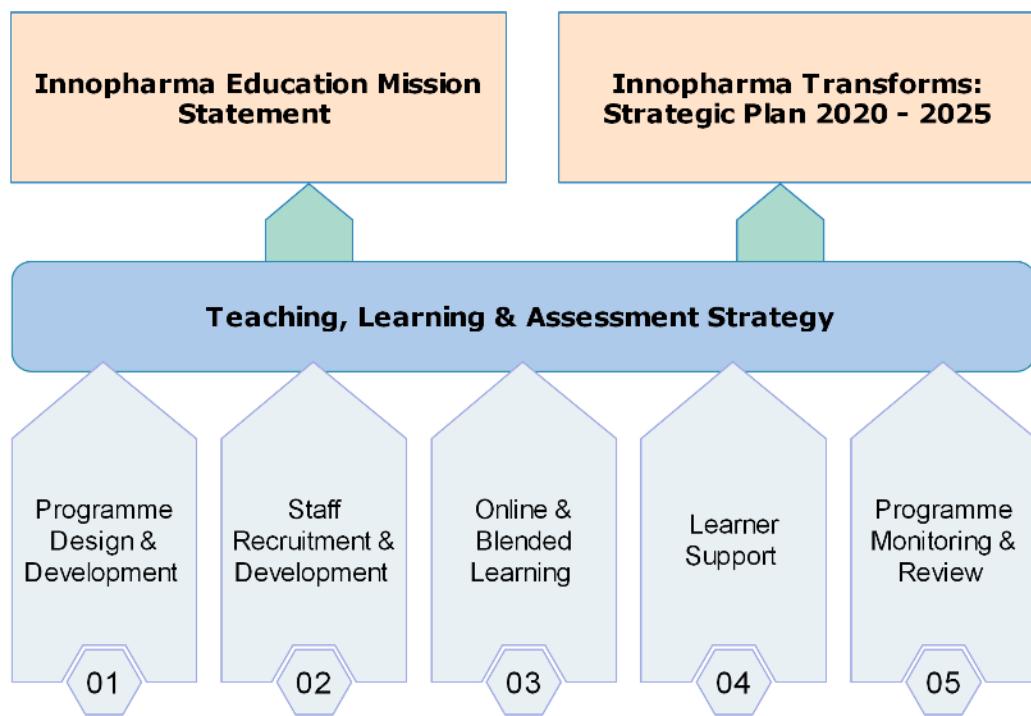
- Any programme proposed for validation by the College will be accompanied by a programme specific TLA strategy (see criteria 17.9 & 17.10 of QQI's *Policy and Criteria for the Validation of Programmes of Education & Training*, 2017).
- All programme specific TLA strategies will be developed with reference to this overarching strategy.
- As the College operates using blended modes of programme delivery, both the College's TLA strategy and programme specific TLA strategies are informed by best practice in blended and online pedagogy and instructional design<sup>11</sup>.
- The College's overarching TLA Strategy has been developed with regard to QQI's *Core Statutory Quality Assurance Guidelines* (2016) and *Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes* (2018).
- The Quality Assurance and Enhancement Framework (QAEF) of the College is integral to the TLA strategy. While all aspects of the QAEF support implementation of the strategy, the most directly relevant dimensions of QA are represented in Section 7.2 below.

<sup>11</sup> QQI (2018) *Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes* (4.1.1)

### 7.1.3 Representation of the Integrated Teaching, Learning & Assessment Strategy Innopharma Education Mission Statement

Our mission is to contribute value to our society by *re-skilling, up-skilling* and *life-skilling* our learners, enabling them to grow personally and professionally and build a better future for all.

(*Innopharma Transforms: Strategic Plan 2020 – 2025*)



### 7.1.4 Integration of the QAEF to the TLA Strategy

The QAEF provides the foundation for the effective realisation of the Learning and Teaching strategy within the College.

### 7.1.5 Programme Design and Development

QAEF processes encompass all activities contributing to design and development of the curriculum at both module and programme level. Learning design within the programme curriculum is learner-centred and takes into account the profiles and changing needs of learners. Programme development entails input from subject experts, industry representatives, educational technologists and learning designers. The programme development process therefore ensures that technology is used appropriately, and in the service of pedagogy (see guideline 4.1.4 of QQI's Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes). Related QAEF documents include:

## 5.1 Policy for Development & Approval of Programmes

## 5.2 Procedure for Development & Approval of Programmes

### **7.1.6 Staff Recruitment and Development**

QAEF processes ensure the recruitment of high calibre teaching staff, and provision of strategically aligned Continuing Professional Development (CPD) for all staff engaged in teaching or academic support. CPD facilitated by the College takes account of the specific needs of staff with regard to the blended and online delivery modes of the College programmes. Opportunities for CPD are facilitated internally, and staff are additionally supported to pursue external CPD opportunities, such as attendance at conferences or undertaking further studies, on a case-by-case basis. Related QAEF documents include:

#### 6.1 Policy for Staff Recruitment, Management & Development

#### 6.2 Procedure for Recruitment of Staff

#### 6.3 Procedure for Induction and Management of Staff

#### 6.4 Procedure for Staff Applications for Continuing Professional Development Support

### **7.1.7 Online & Blended Learning (Including Asynchronous)**

QAEF processes ensure that all staff engaged in teaching or academic support are required to undertake a minimum level of VLE training and participate in professional development in blended and online pedagogies. Minimum standards for online content and curriculum ensure the consistency of the learning experience across modules. The ongoing enhancement of the College's pedagogic approaches is supported by the Learning and Teaching function of the College. This function coordinates learning design resources, assesses potential platforms and tools for use in the College and monitors/evaluates use of current platforms and tools. Related QAEF documents include:

- 7.3 Standards for Blended Learning at College
- 7.3.3 Standards for Online Content & Curriculum
- 7.3.4 Standards for Learner Induction and Supports
- 7.3.5 Standards for Staff Development and Training
- 7.4 Procedure for Assessment, Use and Monitoring of Platforms and Tools
- 7.5 Policy for IT Security

### **Learner Supports**

QAEF processes ensure that all learners are inducted to the Virtual Learning Environment (VLE) of the College and provided with a high level of technical support and guidance in the course of their studies. Online and blended pedagogies are learner-centred, promoting interaction and facilitating the development of an online learning community. Related QAEF documents include:

- [3. Our Learner's Charter and Associated Policies and Procedures](#)
- [10.1 Policy for Learner Supports](#)

### **7.1.9 Programme Monitoring and Review**

QAEF processes ensure ongoing monitoring and review activities are undertaken that provide insights to the learner experience within the College's programmes, including the quality of teaching and curriculum. Feedback is collected from learners on all aspects of their experience at the College, inclusive of the VLE, on-site classes and programme support services including the efficacy of online learning support, and the onboarding process. Staff working in online learning support roles are able to provide real time feedback to teaching staff pertaining to synchronous learning, as well contributing to overall programme monitoring. This is supplemented by the collection of feedback from teaching staff and other stakeholders in relation to programme delivery, and data on learner retention, outcomes and completion. All of these indicators are reviewed by Programme Boards, which recommend and implement improvements approved by the Board or the Academic Council.

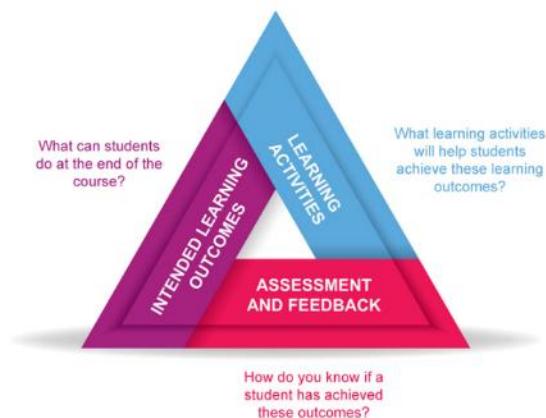
- [5.5 Policy for Monitoring, Review and Re-validation of Programmes](#)
- [5.5 Procedure for Monitoring Review and Re-validation of Programmes](#)

## 7.2 Priority Areas

### 7.2.1 Priority 1: Approaches to Learning, Teaching and Assessment

All teaching, learning and assessment practices at the College are *Constructively Aligned*<sup>12</sup>. There are three dimensions essential to the concept of constructive alignment.

1. **Intended Learning Outcomes (ILOs):** These articulate what learners will be able to do upon successful completion of each module and programme.
2. **Assessment:** The assessment strategy for each module and programme is derived from the ILOs. Assessment must provide learners with an opportunity to demonstrate their achievement of the ILOs.
3. **Learning Activities:** The learning activities within a module and programme are chosen to facilitate learners acquiring, developing and practicing the knowledge, skills and competences they need to achieve the ILOs, and to be able to demonstrate this through the assessment process.



ILOs for all modules and programmes within the College are formulated with reference to the Irish National Framework of Qualifications (NFQ) and the Generic and Specific Awards standards published by QQI.



All learning and teaching practices at the College are firmly grounded in a learner-centred approach, with an emphasis on developing transversal skills such as critical thinking, problem-solving and independent learning within the learning journey. Learner-centred instruction emphasizes the facilitative role of teachers and the uniqueness of learners. It

<sup>12</sup> Biggs, J.B. & Tang, C. (2011). *Teaching for Quality Learning at University*. Buckingham: Open University Press/Society for Research into Higher Education. (Fourth edition)

encourages the fostering of successful interpersonal relationships between teachers and learners, and an appreciation and respect for diversity and difference<sup>13</sup>.

Formative assessment and feedback are integral to the process learning and reflect the emphasis on learner-centeredness that underpins teaching and learning in the programme. Feedback processes at the College are intended to situate the learner at the centre of the process, emphasizing opportunities for learners to seek and use feedback, and develop self-evaluative judgement over time<sup>14</sup>.

#### *7.2.1.1 Priority 1 Actions*

- Module and programme development will be undertaken regarding the principles of Constructive Alignment. Programme development teams will be provided with appropriate training and development in constructively aligning the curriculum, including writing effective ILOs.
- ILOs will be used as the basis on which decisions are made regarding specific assessment methods and approaches to learning and teaching within individual modules and programmes.
- Guidance will be provided to academic staff and module teams in relation to assessment design. That guidance will have regard to the principles of Constructive Alignment, and to the College's agreed minimum standards for communication of assessment (i.e. assessment briefs and related materials) to learners. The latter will be developed by the Teaching and Learning function within the College and approved by the Academic Council.
- Guidance will be provided to academic staff and module teams in relation to the form and timeliness of formative and summative feedback to learners, and with regard to the College's agreed minimum standards for provision of feedback to learners. The latter will be developed by the Teaching and Learning function within the College and approved by the Academic Council.
- Programme Boards will consider the extent to which ILOs are being achieved, and the extent to which the communication of assessment and provision of feedback within modules are aligned to the College's minimum standards for each.

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<sup>13</sup> McCabe, A. & O'Connor, U. (2014) Student-centred learning: The role and responsibility of the lecturer. *Teaching in Higher Education* 19 (4). Pp. 350-359.

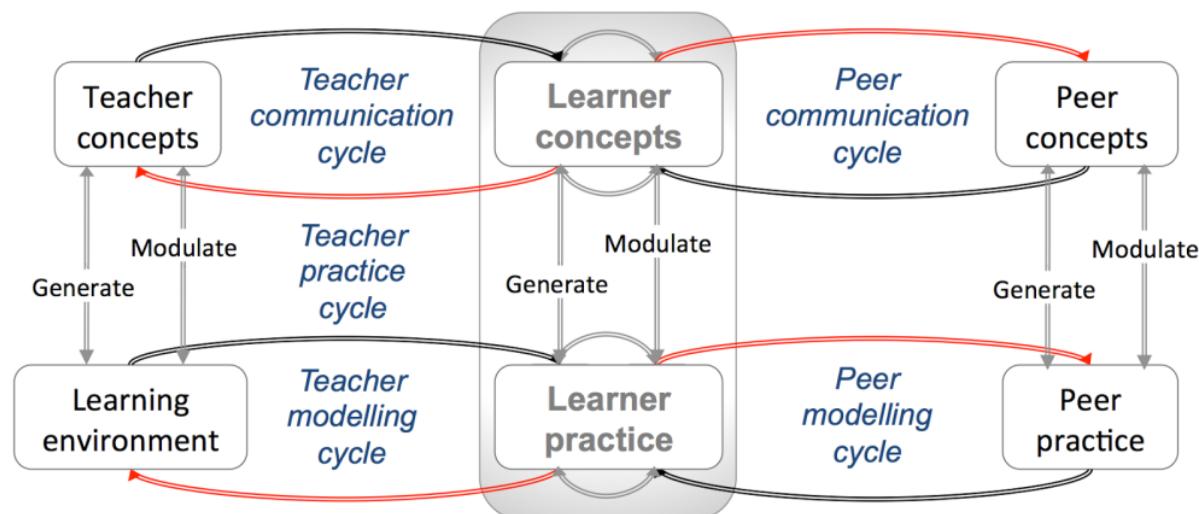
<sup>14</sup> Boud, D. & Molloy, E. (2012) *Feedback in Higher and Professional Education: Understanding it and doing it well*, Routledge.

## 7.2.2 Priority 2: Learning Design & Learning Technologies

Programmes and modules at the College are designed specifically for blended and online delivery. Therefore, they are designed using frameworks for learning design that are appropriate to these delivery modes. The College Teaching and Learning function engages learning design expertise with experience in the higher education context to facilitate this. At an institutional level, learning design at the College is informed by the pedagogic theory of Laurillard's Conversational Framework<sup>15</sup>, which proposes six learning types:

- Acquisition
- Inquiry
- Discussion
- Practice
- Collaboration
- Production

Laurillard's framework provides explicit guidance for the appropriate selection of learning technologies to facilitate distinct forms of learning. Learning technologies are assessed with regard to how appropriate they are to the learning activities required to achieve the ILOs of a module or programme. The use of technology and choice of learning platforms at the College is therefore "subject-led rather than technology-led" and "ensures that technology is in the service of pedagogy"<sup>16</sup>.

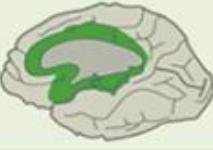


The Conversational Framework (Laurillard, 2002)

Within this, the College is additionally committed to applying the principles of Universal Design for Learning (UDL) within its learning design. UDL fosters inclusivity and supports diverse learners with a range of needs and preferences to succeed. The foundational principles of UDL are represented below.

<sup>15</sup> Laurillard, D. (2002) Rethinking University Teaching: A Conversational Framework for the Effective Use of Learning Technologies, 2<sup>nd</sup> Edition, Routledge.

<sup>16</sup> QQI (2018) Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes (4.1.4).

Multiple Means of Engagement	Multiple Means of Representation	Multiple Means of Action/Expression
<p>Stimulate motivation and sustained enthusiasm for learning by promoting various ways of engaging with material.</p> 	<p>Present information and content in a variety of ways to support understanding by students with different learning styles/abilities.</p> 	<p>Offer options for students to demonstrate their learning in various ways (e.g. allow choice of assessment type).</p> 

#### 7.2.2.1 Priority 2 Actions

- Programmes and modules will be designed for blended and online delivery in a manner that is consistent with the priorities and objectives of the College’s Strategic Plan 2020 – 2025, the Teaching, Learning and Assessment Strategy and QQI’s (2018) Statutory Guidelines for Providers of Blended Learning Programmes.
- Online content will be subject to informed peer review and evaluated with reference to the minimum standards of the College.
- The minimum standards for online content and all quality assurance processes and documentation associated with blended and online delivery will be regularly reviewed, and, if required, updated via the College’s established processes for amendment or updated to the QAEF (see Section [4.3 Policy for Ongoing Review of QAEF Documentation](#))
- New platforms and tools will be assessed by the Teaching and Learning and IT functions of the College with reference to a set established criteria, and with regard to the pedagogies they are required to support and enable.
- Planning, development and evaluation of the appropriate infrastructure and resources to support the College’s reliable and high-quality provision of blended and online learning will be ongoing. Formal planning and evaluation activities will take place, at a minimum, annually.
- Learners will be clearly informed regarding the details of any hardware or software required to enable access to or participation in College programmes (see Section [12 Policy for Public Information and Communication](#)).

### 7.2.3 Priority 3: Lifelong Learning

Lifelong learning, which promotes the continuing development of knowledge, skills and competences throughout an individual's career, is central to the ethos of the College. We accept that "*learning is all about change, and change drives learning*"<sup>17</sup>. Our mission is to enable our learners to grow personally and professionally. As the majority of our learners are mature, we are cognisant of the fundamental principles of adult education and andragogy in our approaches to teaching and learning, and our curriculum design.

1. Adults need to be involved in the planning and evaluation of their instruction.
2. Experience provides the basis for the learning activities. As adults, learners bring significant past experience (including mistakes) to the classroom which should form the basis for learning activities.
3. Adults are most interested in practical subjects that have immediate relevance and impact to their work or personal life.
4. Adult learning is problem-centred rather than content-centred (or memorisation oriented)<sup>18</sup>.

We prepare our graduates to succeed by ensuring their skills are relevant to the dynamic and rapidly shifting context of high-tech manufacturing. The College is committed to supporting learners in their development of transversal skills, for example, problem-solving, communication and creativity. The College will approach this through a range of curricular and co-curricular measures.

#### 7.2.3.1 Priority 3 Actions

- Our programmes will be industry informed and developed in response to future skills needs. The curriculum will attend to the importance of lifelong learning for our learner cohorts, and this will be reflected in the programme teaching and learning strategies.
- ILOs will be derived from the relevant Awards Standards and the NFQ, and will have regard to the lifelong learning focus of the College
- Work preparation modules will be embedded within the written curriculum of our programmes. These will be guided by the College's dedicated professional business coaches and allow each learner to develop and implement an individual career strategy.
- Career focused supports and resources will be available and promoted to learners within the VLE, and will provide learners with assistance in practical tasks such as structuring and building a CV, or preparing for interviews.
- Our programmes will be developed for regional, blended and part-time delivery to enable mature learners to balance the demands of study with their work and family commitments, and to foster widened participation.

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<sup>17</sup> London, M. (2011) *The Oxford Handbook of Lifelong Learning*, Oxford.

<sup>18</sup> Knowles, M.S. (1980) *The modern practice of adult education: From pedagogy to andragogy*, Cambridge.

- Our programmes will be industry aligned, and feature guest lectures by industry experts, site visits and work placements.
- Our teaching and learning will have regard to the principles of adult education in learning design and in all interactions with learners.

#### **7.2.4 Priority 4: Staff Training & Development**

The College is committed to the provision and support of strategically aligned Continuing Professional Development for all staff and has processes within the QAEF to facilitate this (see 6.1.3). All staff in teaching, academic and learner support roles will be offered training and development opportunities that are directly relevant to their jobs.

##### *7.2.4.1 Priority 4 Actions*

- A comprehensive academic induction will be formalised and made mandatory for all staff in teaching, academic and learner support roles. This will include an introduction to the VLE and the College's TLA Strategy (including blended learning).
- A programme for staff development in Learning, Teaching and Assessment at the College will be developed. This will place emphasis on blended and online learning pedagogies and the principles of learning design.
- Both full-time and part-time lecturing staff who do not hold a recognised teaching qualification will be required to complete the College's Learning, Teaching and Assessment development programme.
- In addition to full-time staff, our part-time faculty, online teaching assistants and similar categories of staff will be provided with opportunities to participate in training and CPD activities.
- A formal mentoring system will be established within the College to support academic staff with limited experience in teaching, or in teaching in a comparable context.
- The College will engage actively with national and international Communities of Practice in Teaching and Learning, including (within Ireland) the National Forum for the Enhancement of Teaching and Learning and AHEAD.

## 7.3 Standards for Blended Learning (Including Asynchronous)

### 7.3.1 Definition

**Blended Learning:** “The integration of classroom face-to-face learning experiences with online learning experiences” (Garrison and Kanuak, 2004, p.96). This definition has been adopted by QQI (2018, p.3) in the Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes.

Blended learning at Innopharma Education refers to the strategic combination of face-to-face, synchronous online, and asynchronous learning experiences to optimise learner engagement, flexibility, and achievement of learning outcomes.

While our original model emphasised on-campus and synchronous online delivery, we are now enhancing our provision to include fully asynchronous components. These self-paced modules—developed using tools such as Articulate Rise—are designed to support independent learning, allow flexibility in study scheduling, and maintain academic rigour through structured content, embedded assessments, and interactive elements.

All delivery modes (on-site, synchronous, and asynchronous) are underpinned by a consistent QA framework, aligned with QQI’s Blended Learning Guidelines (2023), ensuring parity of experience and outcome across all formats.

### 7.3.2 Overview

Programmes of Education and Training at the College are purposefully designed for delivery in a flexible, blended mode. Blended delivery modes are appropriate to the needs and preferences of the College’s learners, who are typically (though not exclusively) mature, part-time and regionally located learners. Programmes and modules utilise a blend of asynchronous, synchronous and face-to-face learning modes. The relative weighting of these modes within individual modules is decided on the basis of “the most effective and efficient means to support learners in achieving intended learning outcomes”<sup>19</sup>.

The decision to deliver the College’s programmes in blended modes is central to the College’s Strategic Plan 2020 – 2025, and the institutional Teaching, Learning and Assessment Strategy. QQI’s guidelines caution that “provision that was originally designed for a face-to-face learning environment may be poorly adapted for learners”<sup>20</sup>. Historically, the College has not delivered programmes in an exclusively face-to-face learning environment. Therefore, the college is unencumbered by systems, processes or curriculum designed for that context. Instead, the College has the distinct advantage of operating solely, and by design, as a blended learning provider. Programme Leads and academic staff within the College have considerable experience in the development and delivery of QQI validated programmes within the context of its current collaborative provision arrangements.

The College’s capacity plans in relation to learner support services, administrative systems and IT have been developed specifically for blended learning provision. Further, the College engages learning designers and educational technologists in the curriculum development process, enabling close collaboration between this function and academic subject specialists. This enables the College’s

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<sup>19</sup> QQI (2018) Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes (p.6).

<sup>20</sup> QQI (2018) Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes (p.8).

programmes to be developed in a subject-led, learner centred manner, in which technology is in the service of pedagogy, as per QQI's guidelines.

Innoskills (Moodle) and Zoom form the basis of the College's VLE. Innoskills (Moodle) is used extensively for all programme offerings in course management, content creation and delivery, communication and collaboration.

Innoskills (Moodle) allows lecturers to develop and select appropriate online content and learning resources for learners, and enables learners to access this in a controlled, secure environment. It encourages communication and collaboration in learning tasks, thus encouraging cooperation and adding to the learning experience of the learners. Forum activities in Innoskills (Moodle) are used by lecturers, staff and learners for online discussions which promote collaborative working, engagement and interactivity with all members of the group. Innoskills (Moodle) is also used to manage continuous assessment and feedback. All assignments are required to be submitted in soft copy via the relevant Innoskills (Moodle) page and through the relevant plagiarism detection software where appropriate.

Zoom is an interactive on-line training delivery platform which can incorporate tests to evaluate knowledge and retention during synchronous delivery, promote learner engagement through small-group interaction with breakouts and live chat facilities, and offers Whiteboard Sharing for enhanced delivery.

The College takes a proactive approach to reviewing new tools and resources that may be used to enhance programme delivery. The College's procedure for the assessment, use and monitoring of platforms and tools ensures that potential new technologies are carefully evaluated to determine whether they are reliable, secure and aligned to pedagogic objectives prior to use, and that opportunities for staff to test these are planned and controlled.

To ensure the quality, consistency, academic integrity and learner experience across all delivery formats of blended learning, the College adheres to the following standards for blended learning, inclusive of asynchronous components and has developed minimum standards for online content and learning resources, learner induction/supports and staff development/training.

### **Additional Standards for Asynchronous Delivery**

The following standards apply to the design, delivery, and monitoring of blended learning at Innopharma Education. In addition to established practices for onsite and synchronous online learning, these standards explicitly cover our emerging use of fully asynchronous learning components.

<b>1.</b>	<b>Alignment with Programme Outcomes</b>	All asynchronous content must be mapped directly to validated learning outcomes, ensuring equivalency with face-to-face and synchronous delivery.
<b>2.</b>	<b>Instructional Design Standards</b>	Asynchronous materials are developed using structured, modular approaches and interactive tools (e.g., Articulate Rise) that promote learner engagement, autonomy, and active learning.

<b>3.</b>	<b>Assessment Integrity</b>	Assessments delivered asynchronously must include clear guidance, authentic task design, and mechanisms for academic integrity and learner authentication.
<b>4.</b>	<b>Learner Engagement &amp; Monitoring</b>	Asynchronous delivery includes regular touchpoints such as automated check-ins, reflective prompts, and engagement analytics reviewed by programme teams.
<b>5.</b>	<b>Accessibility and Inclusivity</b>	All asynchronous materials meet accessibility standards (e.g., WCAG 2.1), include alternative formats where needed and are comparable with assistive technologies.
<b>6.</b>	<b>Tutor Presence and Feedback</b>	Tutor presence is maintained through discussion boards, scheduled asynchronous feedback, and optional live support, ensuring learners feel connected and supported.
<b>7.</b>	<b>Technology Reliability</b>	Platforms used for asynchronous delivery (e.g., Innoskills, Articulate Rise) are tested for reliability, device compatibility, and user experience prior to deployment.
<b>8.</b>	<b>Learner Readiness and Orientation</b>	Asynchronous learners receive specific onboarding resources and guidance on managing self-paced study, digital tools, and communication expectations.
<b>9.</b>	<b>Continuous Improvement</b>	Learner feedback and performance data are routinely analysed to improve asynchronous design and delivery in line with quality enhancement processes.

### 7.3.3 Standards for Online Content and Learning Resources

The College's minimum standards for its online content and learning resources have been derived from QQI's guidelines and the College's own TLA Strategy. These may be supplemented and augmented as appropriate over time, utilising the processes within the QAEF for ongoing review of QAEF documentation. The Programme Lead, in consultation with the Head of Faculty, is ultimately responsible for the implementation of the College's Standards for Online Content and Learning Resources.

*All content items and learning resources within the College's VLE and supported platforms must:*

<b>1</b>	Be subject to quality review by an appropriately informed peer (e.g. subject matter & learning design expertise) prior to integration to the platform.
<b>2</b>	In the case of Open Educational Resources (OERs), be of sufficient quality, accurate and current.
<b>3</b>	Cite copyright and licensing status appropriately for any third-party content.
<b>4</b>	Be integrated with other content items and learning resources to enable learner achievement of the ILOs.
<b>5</b>	Reflect the learner-centred pedagogy of the College.
<b>6</b>	Be accessible (e.g. utilise alt text and captioning, reflect the design principles of UDL).
<b>7</b>	Be 'owned' by an academic department and Programme Lead.
<b>8</b>	Engage learners in activities that enable them to test and monitor their progress at appropriate points in their learning.
<b>9</b>	Be presented in a clearly defined relationship to learning activities or materials encountered in the face-to-face learning environment.
<b>10</b>	In the case of interactive items, be preceded or accompanied by clear protocols for the management of online interaction for both learners and staff and be monitored by appropriately trained staff.
<b>11</b>	In the case of text items developed within the College, be written in plain language. Specifically, text items for learners should: <ul style="list-style-type: none"><li>• Use an active rather than a passive voice wherever possible (i.e. 'we do something' rather than 'something is done').</li><li>• Be brief and specific.</li><li>• Avoid use of jargon and acronyms (unless these are being explained or are appropriate to the context of use).</li></ul>
<b>12</b>	Be spell checked and proofread prior to publication.
<b>13</b>	Be accompanied by links to clear information regarding the availability of relevant academic supports and general pastoral support for learners of the College, and the appropriate communication channels for these.
<b>14</b>	Reflect culturally diverse perspectives that are free of bias.



### 7.3.4 Standards for Learner Induction and Supports (Blended Learning)

The College's minimum standards for learner induction and supports in blended learning have been derived from QQI's guidelines and the College's own TLA Strategy. These may be supplemented and augmented as appropriate over time, utilising the processes within the QAEF for ongoing review of QAEF documentation.

*All learners within the College must:*

	Standard	Responsibility
1	<p>Be informed prior to enrolment of the level and nature of the support available. This will include information pertaining to:</p> <ul style="list-style-type: none"> <li>• The blend of learning that will be experienced within a specific programme (i.e. the proportion of online asynchronous, online synchronous and face-to-face learning; the extent to which learning is autonomous, collaborative or supported).</li> <li>• The realistic commitment required from a learner to successfully complete the programme.</li> <li>• Pre-knowledge or technical skills a learner requires to successfully complete the programme.</li> <li>• The hours when academic, technical and pastoral supports are available and the nature of these supports.</li> <li>• Details of any hardware or software required to enable access to or participation in College programmes, and mechanisms to test hardware.</li> <li>• Mandatory attendance or participation requirements for specific aspects of the programme, where these exist.</li> <li>• Terms and conditions relevant to a specific programme (e.g. specified timings for synchronous learning or assessment, regulations pertaining to re-assessment opportunities).</li> </ul>	The Director of Academic Affairs
2	<p>Be systematically inducted to the College's VLE and integrated platforms following admission. This induction must include information pertaining to:</p> <ul style="list-style-type: none"> <li>• Overall layout and navigation of the VLE.</li> <li>• Location of contact lists for academic, administrative and technical queries within the College.</li> <li>• Availability of online technical support and contact information.</li> <li>• Location of essential learner support information, policies and procedures within the VLE.</li> </ul>	IT Specialist

	<ul style="list-style-type: none"> <li>• Features and functions of the VLE.</li> <li>• Location of self-help user tutorials for specific features and troubleshooting.</li> <li>• General protocols for communicating online, which promote dignity, courtesy, and respect for diversity.</li> <li>• Communication channels used within the VLE and the College.</li> </ul>	
3	<p>Be systematically inducted to learning in blended and online modes. This induction must include information pertaining to:</p> <ul style="list-style-type: none"> <li>• Overall expectations and standards.</li> <li>• Strategies for successful blended and online learning.</li> <li>• Academic support services and resources available online, including those relevant to academic integrity and the avoidance of plagiarism.</li> <li>• Online library access and associated resources and supports.</li> </ul>	Programme Manager
4	<p>Have access to comprehensive information regarding their programme of study, to include:</p> <ul style="list-style-type: none"> <li>• ILOs and teaching, learning and assessment methods for each module and for the programme overall.</li> <li>• Schedules for the submission and assessment of work.</li> <li>• Information on how their performance will be assessed, and the relative weighting of assessment tasks.</li> <li>• Information on how timely formative feedback will be provided to them in the online Sections of the programme.</li> <li>• Information about the quality assurance processes in place to ensure that assessed work conducted through online activity is appropriately attributed to the learner.</li> <li>• Lists of learning resources available.</li> <li>• Module and programme specific contacts (academic, administrative, technical).</li> </ul>	Head of Faculty
5	Have access, within a reasonable time frame, to technical support for asynchronous learning activities.	IT Manager
6	Have access, in real time, to technical support during synchronous learning activities.	IT Manager

7	Have the opportunity to provide feedback to the College, both routinely and ad hoc, on their experience of using the VLE and integrated platforms.	Programme Lead
8	Be provided with information in advance of commencement on how their personal data will be used, for instance, in relation to the monitoring of learner engagement with the VLE and integrated platforms.	The Director of Academic Affairs

### 7.3.5 Standards for Staff Development and Training (Blended Learning)

The College's minimum standards for staff development and training in blended learning have been derived from QQI's guidelines and the College's own TLA Strategy. These may be supplemented and augmented as appropriate over time, utilising the processes within the QAEF for ongoing review of QAEF documentation.

*All staff in academic, teaching and learner support roles within the College must:*

	Standard	Responsibility
1	Undertake a general and an academic induction upon commencing employment with the College (see <a href="#">6.3 Procedure for Induction and Management of Staff</a> ).	Director of Academic Programmes
2	Within the academic induction, be introduced to: <ul style="list-style-type: none"> <li>The Virtual Learning Environment (VLE) of the College.</li> <li>The Teaching, Learning and Assessment Strategy of the College (inclusive of Blended Learning)</li> </ul>	Director of Academic Programmes
3	Complete a suite of in-house Blended Learning training modules within a time frame agreed with their manager.	Head of Faculty
4	Participate in bespoke training and development activities for Technology Enhanced Learning.	Head of Teaching and Learning
5	Participate in general professional development training regarding up-to-date methodologies and trends, alongside training specifically directed towards FET and HE.	Head of Teaching and Learning
6	Ensure their contributions to the development of curriculum within the College comply with minimum standards for online content and learning resources and associated processes.	All staff in academic, teaching and learner support roles
7	Observe protocols for communication with learners and facilitation of online discussions.	All staff in academic, teaching and

		learner support roles
<b>8</b>	Strive to facilitate a safe, inclusive, accessible and reliable online learning environment which reflects the Core Values of the College (Excellence; Integrity; Diversity; Innovation; Collaboration) and the principles established in the College's Policy for Equality (see <a href="#">Section 6.5</a> )	All staff

## 7.4 Procedure for Implementation of Blended Learning Standards

<b>QA Area (s)</b>	<ul style="list-style-type: none"> <li>Teaching and Learning; Blended Learning</li> </ul>
<b>Applies to</b>	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
<b>Policies this Procedure relates to</b>	Teaching, Learning and Assessment Strategy Standards for Blended Learning

### 7.4.1 Procedure

The College's procedure for the implementation of Blended Learning Standards has been derived from QQI's guidelines and the College's own TLA Strategy. This procedure and criteria listed within it may be adapted as appropriate over time, utilising the processes within the QAEF for ongoing review of QAEF documentation.

### 7.4.2 Implementation of Standards for Online Content and Learning Resources

The Programme Lead, in consultation with the Head of Faculty, is ultimately responsible for the implementation of the College's Standards for Online Content and Learning Resources (OCLR).

- OCLRs may comprise of internally authored/created text, graphics, audio or multimedia or externally sourced OERs of appropriate quality, or a combination of both.
- Permission to approve and publish OCLR specific to an academic module or programme lies with the relevant Programme Lead and/or Head of Faculty.

Academic and teaching staff may author, create or source OCLRs:

- in response to a request by the Programme Lead
- in response to a request by the Head of Faculty
- independently, to propose their use within an academic module or programme

Academic and teaching staff are responsible for:

- facilitating and managing learner interaction in the online environment

- responding to learner queries and providing timely feedback on work submitted by learners
- development of OCLR (either commissioned or independently proposed)
- requesting approval and publication of OCLR from the Programme Lead or Head of Faculty
- if requested to do so, providing peer review of OCLR with reference to the College's standards in this area

### **Key Steps**

1. The staff member responsible for the OCLRs places these in draft and unpublished form within the College's VLE.
2. The staff member responsible for the OCLR item(s) notifies the Programme Lead or Head of Faculty, requesting review and approval.
3. The Programme Lead or Head of Faculty arranges for review and feedback from (a) an appropriate subject matter expert (this may, where appropriate, be undertaken by the Programme Lead or Head of Faculty) and (b) the Learning Design function within the College.
4. After feedback emerging from the review process, the Programme Lead or Head of Faculty may:
  - a. Approve and publish the OCLRs
  - b. Make or arrange for minor amendments to the OCLRs before proceeding to approve and publish the OCLRs
  - c. Refuse to approve the OCLRs, providing feedback to the staff member responsible

N.B. Under normal circumstances, OCLRs to be used within a specific academic module will be reviewed, approved and published prior to the commencement of that module. In some instances, for example, in response to learner requests and to facilitate a responsive approach to curriculum delivery, a decision may be made to publish additional OCLRs during the delivery of a module.

#### **7.4.3 Standards for Learner Induction and Supports**

The Director of Academic Affairs is responsible for overseeing the provision of information to learners as per Section (1) of the Standards for Learner Induction and Supports. This responsibility is outlined within the College's [Policy for Public Information and Communication](#).

The Director of Academic Affairs is further responsible for ensuring as per Section (8) of the Standards for Learner Induction and Supports that learners are provided in advance of commencement with information on how their personal data will be used.

The Learner Support Coordinator is responsible, in consultation with the Director of Academic Affairs, the Director of Academic Programmes and other relevant personnel, for overseeing the systematic induction of learners to the College's VLE and integrated platforms as per Sections (2) and (3) of the Standards for Learner Induction and Supports. This induction includes, but is not limited to, essential learner support information, self-help user information, protocols for communicating online.

The Programme Lead and Head of Faculty are responsible for ensuring as per Section (4) of the Standards for Learner Induction and Supports that learners have access to comprehensive information regarding their programme of study. This includes, but is not limited to, ILOs and teaching, learning and assessment methods for each module and for the programme overall, information pertaining to the submission and assessment of work, and specific contact information for academic, administrative and technical staff.

The IT Manager is responsible for ensuring as per Sections (5) and (6) of the Standards for Learner Induction and Supports that learners have access to technical support for asynchronous learning activities (within a reasonable time frame) and synchronous learning activities (in real time).

The Programme Lead is responsible for ensuring as per Section (8) of the Standards for Learner Induction and Supports that learners have the opportunity to provide feedback to the College, both routinely and ad hoc, on their experience of using the VLE and integrated platforms.

#### **7.4.4 Standards for Staff Development and Training**

The Director of Academic Programmes is responsible for ensuring as per Sections (1) and (2) of the Standards for Staff Development and Training that all staff in academic, teaching and support roles within the College undertake a general and academic induction that introduces them to the VLE and the TLA Strategy of the College, inclusive of Blended Learning.

The Head of Teaching and Learning is responsible for ensuring as per Sections (3) and (4) of the Standards for Staff Development and Training that all staff complete a suite of in-house Blended Learning training modules and participate in bespoke training and development activities for Technology Enhanced Learning.

All staff in academic, teaching and learner support roles in the College, guided by the Programme Lead and Head of Faculty, are responsible for ensuring as per Sections (5) and (6) their contributions to the College comply with minimum standards for OCLRs and that their communication and interaction with learners observes College protocols.

All staff in all roles, inclusive of academic, teaching, learner support, administration, leadership and management, are jointly responsible as per Section (7) of the Standards for Staff Development and Training for striving to facilitate a safe, inclusive, accessible and reliable online learning environment which reflects the [Core Values of the College](#) and the principles established in the College's [Policy for Equality](#).

## 7.5 Procedure for Assessment, Use and Monitoring of Platforms and Tools

QA Area (s)	<ul style="list-style-type: none"><li>Teaching and Learning; Blended Learning</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Teaching, Learning and Assessment Strategy Standards for Blended Learning

### 7.5.1 Procedure

The College's procedure for the assessment, use and monitoring of platforms and tools has been derived from QQI's guidelines and the College's own TLA Strategy. This procedure and criteria listed within it may be adapted as appropriate over time, utilising the processes within the QAEF for ongoing review of QAEF documentation.

### 7.5.2 Assessment of Potential Platforms and Tools

Potential new technologies are carefully evaluated and tested by the College to determine whether they are reliable, secure and aligned to the pedagogic objectives of a module or programme prior to their use. Opportunities for staff to test new technologies are planned and controlled. If a decision is made by the College to adopt and support a new technology, staff and learner training will be facilitated.

- A new technology may be identified and proposed for use by any member of staff. In many instances, proposals may emerge from the Learning Design function within the College.
- New technologies will be assessed by the Senior Teaching and Learning Co-Ordinator and at least two members of academic staff (nominated by the Director of Academic Programmes) with regard to the following criteria, as appropriate to their role within the organisation:
  - The nature of pedagogic activity that the technology facilitates, and the extent to which it is likely to be used within the College's programmes.
  - The extent to which the technology differentiates from, overlaps with or duplicates the function of existing supported technologies.
  - The ease of integration with existing supported technologies.
  - The security and reliability of the technology, and the risks associated with its use.
  - The accessibility of the technology for users with disabilities or special needs.
  - The costs associated with the technology.
  - Any other factors deemed relevant or important.

- If a high level of agreement is reached, a formal proposal to adopt and support the technology may be tabled at the Academic Council by the Director of Academic Programmes.
- Where adoption of the technology has cost and resource implications, the Academic Council, if approving the proposal, may table a recommendation to either the Executive Management Team or Board of Directors (depending on the required investment) for decision.

### 7.5.3 Use and Monitoring of Platforms and Tools

The effectiveness of the platforms and tools used by the College is continually monitored and reviewed, utilising feedback from learners and academic staff. There are a number of mechanisms in place to facilitate this.

- Feedback is routinely sought from learners regarding their experience at the College. This encompasses feedback on programme curricula and delivery via the VLE, quality of teaching, quality and availability of support services and effectiveness of administration.
- Additional feedback from learners regarding their experience of the College VLE and integrated platforms, including issues related to blended and online delivery, may be provided via the class representative system, and the inclusion of learner representatives on the Academic Council.
- Academic and teaching staff are able to provide feedback and raise any concerns pertaining to the VLE and integrated platforms on an ongoing basis. Additionally, Programme Annual Review provides an opportunity for academic and teaching staff to make formal input.
- All synchronous online delivery is supported by the College's Online Teaching Support who are able to raise issues and concerns on an ongoing basis.
- The Academic Council will review an annual report on learning technologies supported by the College provided by the IT Manager and Learning Design function within the College.

## 7.6 Policy for IT Security

The purpose of the IT Department is to provide suitable information technology and educational resources (including educational technology and any VLE provided as required by the College, identified at programme development and agreed at validation).

It is the responsibility of the Programme Lead and Head of Faculty to identify and specify the IT and computing requirements for programme delivery.

The IT department is responsible for the provision and the management of sustainable computing facilities accessible to staff and learners.

The IT department works with academics and the Education Management Committee to systematically upgrade hardware and software in line with technical developments and advise the College on more effective tools and methodologies to enhance the learner experience.

IT support services are available at all time during class delivery. Helpdesk support is available for students and lecturers during normal office hours.

The IT Manager is responsible for maintaining a comprehensive list of IT and computing resources. The IT Manager is also responsible for ensuring that all software is properly licensed and copyright protocols are respected. Other responsibilities include firewalls, backups, etc.

Details of backup and recovery are given in Section 11.12 [Data Backup and Recovery](#).

## 7.7 Policy on the Use of Automated Assessment

QA Area (s)	Teaching, Learning and Assessment
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

### Purpose

The purpose of this policy is to outline the principles governing the use of Automated Assessment in Module and Programme Assessment Strategies.

### Scope

This policy applies to all Innopharma Education programmes inclusive of those delivered under collaborative provision arrangements, excepting where this policy directly conflicts with the QA procedures of a collaborative partner.

This policy applies to assessed tasks, the outcomes of which constitute some percentage of students' final grades for a module.

This policy does not apply to the use of ungraded tests, quizzes or activities that may be made available to students to facilitate formative feedback or enable them to monitor their own learning or progress.

### Policy

Automated Assessment strategies utilize technology to test learner knowledge or understanding of a subject area. The use of Automated Assessment<sup>1</sup> is increasing across the higher education sector and is associated with numerous benefits. Automated Assessment can be used to:

- Effectively and efficiently assess knowledge-based learning outcomes;
- Reduce lecturer workload;
- Enhance the speed and volume of formative feedback students obtain.

However, there are challenges associated with Automated Assessment that need to be carefully managed.

- Overuse may lead to an overemphasis on declarative knowledge (demonstrated through recognition or recall of facts, definitions, theory);
- Overuse may deemphasise procedural knowledge (demonstrated through the application of knowledge in skills-based and contextualised tasks);
- Automated Assessment tasks may lack face validity for learners due to the lack of authenticity associated with the question types and testing conditions;
- The platforms and systems associated with Automated Assessment must be carefully monitored and managed to ensure that the assessment process runs smoothly and is fair, transparent and accessible.

Acknowledging both the benefits and challenges associated with Automated Assessment tasks, this policy has been developed to guide their implementation within the College's modules and programmes.

The use of Automated Assessment tasks within the College's programmes must:

- Be demonstrably aligned to the learning outcomes of a module;
- Be proportionate in volume and weighting to non-automated assessment tasks for the same module;
- Be appropriate to the NFQ Level of the module/programme stage;
- Be carefully planned and administered;
- Allocate a sufficient amount of time that will enable learners to make a reasonable attempt at completion of all question items;
- Utilize practices designed to protect academic integrity;
- Be developed with reference to best practice principles.

In practice, this means that Automated Assessment tasks will typically:

- Adhere to the College's guidelines on proportionality for NFQ Level;
- Be subject to fixed scheduling, which is subject to change only pending consultation with the Head of Assessment & IT manager and in agreement with the student cohort;
- Be accompanied by clear communication to students and an opportunity for a standard 'dummy run' quiz in which students can orient themselves to the process.
- Use randomisation ('shuffle') functionality;
- Use sequential navigation;
- Not utilize negative marking practices;
- Use questions developed with reference to College guidance notes (where these are available) and which have been reviewed by an Informed Peer<sup>2</sup>;
- Be subject to Technical Approval<sup>3</sup> confirming that the task is setup correctly and linked to a question bank from the IT Manager or delegated IT personnel.

#### **Automated Assessment - Guidelines on Proportionality to NFQ Level**

NFQ Levels	% of Total Marks for Module
5	Dependent on module
6	Not more than 40% (over 2 tasks)
7 - 9	Not more than 20%

\* Automated Assessments weighted outside these guidelines should be discussed and agreed with the Programme Lead and Head of Teaching and Learning.

### Automated Assessment – Guidelines on Timing

Type of Question	Timing per Question	Timing
Standard MCQ	1 minute per question	Allow an additional 5 minutes as a buffer before the test closes to account for variance in internet speeds & other issues.
Item Flipped MCQ	90 seconds per question	
Multi-logical MCQ	2 minutes + per question	

\*Timings are indicative and should be discussed and agreed with the Programme Lead or Head of Teaching and Learning.

### Responsibility

- **Teaching and Learning** is responsible for communicating the implementation of the College’s Policy on the Use of Automated Assessment to teaching staff and facilitating appropriate development and support activities.
- The **Head of Assessment** is responsible for monitoring the implementation of the Policy within the assessment calendar.
- The **Programme Lead** is responsible for monitoring the implementation of the Policy within Programme teams.
- The **Director of Academic Programmes**, supported by the relevant **Head of Faculty** and **Programme Lead** is responsible for ensuring that programme assessment strategies are constructively aligned, appropriate to the NFQ Level of the programme and comply with the principles stated within this policy.

### Procedure for Developing and Implementing Automated Assessments

#### *Development*

1. The lecturer identifies their intention to use an entirely or partially Automated Assessment within a module assessment strategy.
2. The lecturer notifies the Head of Assessment and Programme Lead of this intention within communications regarding the overall module assessment schedule and agrees the schedule for this prior to the semester start date.
3. The Head of Assessment ensures the overall assessment schedule for the semester is included within the timetable and shared with the IT Manager.
4. If new question items are to be developed and used,
  - a. the lecturer identifies an Informed Peer to review those question items *OR* requests that the Programme Lead identifies an Informed Peer.
  - b. The lecturer *OR* the Programme Lead ensures the availability of the Informed peer to review new question items.
  - c. The lecturer prepares the new question items and shares these in preview mode with the Informed Peer, copying the Programme Lead not less than 2 weeks prior to the commencement of the semester.
  - d. The Informed Peer completes a review, notifying the lecturer of any queries or errors found within a period of one week.
5. If question items are being drawn from a question bank and have previously been reviewed, step 4 can be omitted.

#### *Implementation*

6. The lecturer must provide learners with specific information regarding the scheduled date and time at which the automated assessment will take place at the start of the semester. This information must be included:
  - a. During the first teaching session of the semester
  - b. In summary within the Module Orientation section in Innoskills/Moodle
  - c. In detail within the Assessment section in Innoskills/Moodle
7. The lecturer must provide learners with access to a non-assessed 'dummy' task prior to the scheduled assessment to ensure all learners have sufficient opportunity to (re)familiarise themselves with the platform and functionality. The task should, insofar as is possible, model the format of the questions that will be used in the actual automated assessment task. A minimum of three sample questions should be provided. This will minimize anxieties caused by lack of familiarity with the platform or task type for learners during the Automated Assessment task.

8. The lecturer, assisted by IT as required, must ensure the following:
  - a. The 'shuffle' function is used (1) for questions and (2) within questions (randomising the order of responses). This protects the integrity of the assessment task by ensuring different learners sitting the test concurrently encounter the questions and responses in a different sequence.
  - b. The 'free navigation' function is not used and 'sequential navigation' is selected. This protects the integrity of the assessment task by ensuring learners are not able to go back and change answers (which enables a 'workaround' of the shuffle function).
  - c. Under the timing settings, the option to have open attempts submitted automatically should be selected. This ensures no attempts are lost in the case of learners who have not completed at the end of the allocated time for the assessment task.
  - d. Under the review options, only the options that allow learners to review the answers (providing automated feedback) after the quiz is closed should be ticked.
  - e. There is no use of Negative Marking Practices within any of the question, or the task as a whole;
  - f. All learners are made aware of all of the above in communications (oral and written) about the assessment task. Template text to inform learners of these conditions is provided in an appendix to this procedure.
9. The lecturer must contact the IT department not less than two weeks prior to the assessment task being delivered for IT sign off.

**Note:** This step safeguards against errors caused due to technical missteps. It does not safeguard against errors in content or the matching of questions to answers. The latter is the responsibility of the lecturer and informed peer and is provided for in Step 4.

### Guidance Notes - Writing Good MCQs

Several decades of research on cognition and learning has provided us with clear guidelines on how to write 'Good MCQs', or MCQs that will act as a fair, transparent and effective method for assessing learner knowledge. These guidance notes summarise and exemplify best practice in this area.

Lecturers on Innopharma Education programmes are strongly encouraged to make use of these guidance notes when writing MCQs. A list of additional helpful resources is provided at the foot of this document.

### Parts of an MCQ

Which of these foods contains the highest amount of vitamin C per 100g? Stem

- a) Brussel Sprouts
- b) Oranges
- c) Kiwi Fruit
- d) Kale

#### Answer Key

Response  
s  
(includes  
correct  
answer)

- a) Brussel Sprouts
- b) Oranges
- c) Kiwi Fruit
- d) Kale

Distractors  
(incorrect  
answers  
only)

#### Feedback Key

- e) Brussel Sprouts (85mg per 100 grams)
- f) Oranges (53mg per 100 grams)
- g) Kiwi Fruit (93mg of Vitamin C per 100 grams)
- h) Kale (120 mg of Vitamin C per 100 grams)

#### Feedback

You can find more information about the vitamin C content in different types of foods in chapter 10 of our course textbook. There is a useful summary table to help you study on page 93.

#### Study Help

## Using MCQs to Test Foundational Knowledge

### Standard MCQs

### *Writing the Stems*

- Generally, use complete question forms, e.g.,  
*Which of these foods contains the highest amount of vitamin C?*
- Where possible, avoid partial sentences/fill in the gaps, e.g.,  
*The highest amount of vitamin C is found in \_\_\_\_\_*
- Avoid negative stems or questions, unless they are absolutely essential to a specific content item and learning outcome, e.g.,  
*The highest amount of vitamin C isn't found in...*

Negative stems or questions are known to be more difficult to understand, particularly when a student is under pressure during an exam.

- Always avoid double negatives, e.g.,  
*Which of these options is **n't** **un**expected?*  
*Which person is **not** **un**able to act?*  
*Which process is **n't** going to be **un**successful?*

### *Writing the Responses*

- Write a consistent number of possible responses for each question, e.g., choose from 3 - 4 options.
- Write possible responses of a consistent length and format, e.g., use a similar amount of words or grammatical structure for each.
- Use clear, concise language.
- Be careful to vary the position of the correct response, ensuring it is not frequently positioned in one place, e.g., usually the third answer.
- Be careful to include only one correct or clearly best choice answer.
- Avoid using 'all of the above' or 'none of the above' as learners can easily achieve the correct answer with incomplete knowledge, e.g., if they know that 2 options are correct and are not sure about the other two.

### *Writing the Distractors*

- All of the distractors should be reasonably plausible. This is because implausible distractors that are 'obviously wrong' reduce test validity. Questions that use implausible distractors are testing 'common sense' more than actual knowledge.

### **Item Flipped MCQs**

In a standard MCQ, the test-taker typically only has to recognize one piece of information or a specific instance/definition of a concept or problem that is presented in the stem.

#### *Education Example 1*

Which of the following best describes what is meant by ‘formative assessment’?

- A. Is based on the student’s attitudes, interests and values
- B. Is designed primarily to evaluate learning
- C. Is usually high-stakes
- D. Provides information to modify teaching and learning\*

Source: <https://scholarworks.umass.edu/cgi/viewcontent.cgi?article=1355&context=pare>

A flipped item changes this pattern by requiring a test-taker to examine an instance (typically in a scenario) in the stem. They then have to identify the concept or principle being instantiated from the list of options.

#### *Education Example 2*

A teacher uses a strategy called Thumbs Up, Thumbs Down with her students. This illustrates the use of:

- A. Affective assessment
- B. Formative assessment\*
- C. Diagnostic assessment
- D. Summative assessment

Source: <https://scholarworks.umass.edu/cgi/viewcontent.cgi?article=1355&context=pare>

This raises the level of cognition, by moving up a level from simple knowledge recognition (the first example) to a level that requires comprehension of the concept when it is presented in context (the second example).

*Recommended for NFQ Level 6.*

## Using MCQs to Test Higher Order Thinking

### **Multi-logical MCQs**

These questions require learners to apply more than one piece of knowledge, concept or principle to select the best answer, which is why they are often referred to as ‘multi-logical’.

To write a multi-logical question, formulate a succinctly written scenario or problem, followed by a question. To answer the question, learners must need to interpret the

scenario or problem and apply more than one piece of knowledge, concept or principle to choose the best answer (otherwise it is just a long-winded but regular MCQ).

Multi-logical questions are often used to test the application of knowledge for clinical or diagnostic purposes:

*Veterinary Science Example:*

A 4 year-old intact female Maltese dog has anorexia, fever, severe trembling, and stiffness of the limbs three weeks post partum. Which of the following is the most appropriate emergency therapy?

- A. Intramuscular calcium chloride
- B. Intravenous calcium gluconate
- C. Intravenous dexamethasone
- D. Intravenous 50% glucose
- E. Oral calcium lactate

Source: [https://it.umn.edu/sites/itumn.umn.edu/files/writing\\_effective\\_multiple\\_choice\\_exams\\_c\\_petersen\\_5\\_18.pdf](https://it.umn.edu/sites/itumn.umn.edu/files/writing_effective_multiple_choice_exams_c_petersen_5_18.pdf)

*Nursing Science Example*

A nurse is making a home visit to a 75 year old male who has had Parkinson's disease for the past five years. Which of the following has the greatest implication for this client's care?

- A. The client's wife tells the nurse that the grandchildren have visited for over a month
- B. The nurse notes that there are numerous throw rugs throughout the client's home
- C. The client has a towel wrapped around his neck that the wife uses to wipe her husband's face
- D. The client is sitting in an arm chair, and the nurse notes that he is gripping the arms of the chair

Source: <https://scholarworks.umass.edu/cgi/viewcontent.cgi?article=1355&context=pare>

Note: Multi-logical questions are hard to write and should always be carefully considered and subject to review by an informed peer.

*Recommended for NFQ Levels 7 – 9.*

### **Useful Resources**

Brigham Young university [14 Rules for Writing Multiple-Choice Questions](#)

Vanderbilt University [Writing Good Multiple Choice Test Questions](#)

The eLearning Coach [10 Rules for Writing Multiple Choice Questions](#)

Scully (2017) [Constructing Multiple-Choice Items to Measure Higher-Order Thinking](#)

The University of Texas at Austin [Writing Good Multiple-Choice Exams](#)

## 7.8 Policy for Managing Group Assessment

<b>QA Area (s)</b>	Teaching, Learning and Assessment
<b>Applies to</b>	Staff and Learners
<b>Policy Owner</b>	Director of Academic Programmes

### Purpose

The purpose of this policy is to outline the principles governing the management of group assessments within the College.

### Scope

This policy applies to all QQI validated programmes.

### Policy

#### Context

A strategic priority within the Innopharma Education 2020 – 2025 Strategic Plan is ‘Our Delivery’. Within this priority, the College has committed to formally integrating the development of transversal skills for lifelong learning within the Teaching, Learning and Assessment (TLA) strategy.

The College will therefore ensure that transversal skills are represented in the Intended Learning Outcomes of all programmes. In keeping with the principles of Constructive Alignment, the achievement of these outcomes will be evidenced within the assessment strategies of those programmes. Diverse formats and modes of assessment will be used to facilitate the achievement of this objective.

#### Group Assessment Tasks

For the purposes of clarity, this policy defines group assessment tasks as:

Tasks that are assigned to designated groups of students to be completed collaboratively, which are assessed and contribute to a % of the students’ overall grade for the module. The College recognises that group assessment tasks are a particularly powerful mechanism for fostering the development of transversal skills and are increasingly used in higher education for this purpose.

Used appropriately, group assessment tasks:

- Facilitate learner development of skills intrinsic to teamwork, including communication, negotiation, time management, leadership, problem-solving, conflict resolution and interpersonal skills.
- Foster collaborative and peer supported learning; build peer relationships and reduce learner isolation.

Moreover, group assessment tasks may additionally:

- Increase the authenticity of a task by mirroring team projects within a workplace.
- Enable learners to engage in a more expansive or broadly scoped task than would be feasible individually.

- Facilitate opportunities for learners to reflect and learn from the process of the task (self-regulation) and engage in peer and self-evaluation activities (reflecting an Assessment AS Learning approach).

However, it is recognised that group assessment tasks:

- Are complex to design and evaluate.
- May be unpopular with students.
- May be impacted by poor group dynamics and conflicts.
- May at times require teaching staff to intervene and engage in mediation activities.
- Are not appropriate to all modules/to demonstrate all learning outcomes.
- Must balance measures of group and individual contributions within the grading strategy in the interests of fairness.

Acknowledging these challenges, the College takes the position that group assessment tasks make a valuable contribution to the overall TLA strategy. The College has therefore developed the principles below to guide the implementation of group assessment tasks within modules and programmes.

It should be noted that these principles are not designed to provide detailed guidance on specific group assessment task designs, outcomes or processes. Those decisions should be made locally by academic staff at module and programme level in consultation with Programme Leads. Additional support can be accessed as required from the Head of Faculty, Head of Teaching and Learning and Head of Assessment.

The principles are designed to mitigate the risks associated with group assessment tasks. They will reduce common challenges associated with group assessment tasks and safeguard minimum standards of fairness and equity in the overall assessment strategy for programmes.

### *Principles for the Implementation of Group Assessment Tasks*

#### General

1. In any one semester on any programme, a learner may experience no more than two group assessment tasks in total (one for a part-time schedule). Where possible, these should be scheduled to occur during different stages of the semester.
2. Under normal circumstances, groups will be randomly assigned by lecturers or programme leads rather than self-selecting.

#### Grading

3. No group assessment task within any module may be weighted at more than 50% of the total grade for that module.
4. All group assessment tasks will have components of the grade that are awarded individually (and may differ between group members) in addition to the component of the grade that is awarded to the group (and is the same for all group members).

5. The component of the grade that is awarded individually should represent no less than 20% of the total grade for the group assessment task.
6. The component of the grade that is individual will be awarded on the basis of:
  - a. The individual's agreed contribution to the group task.  
*or*
  - b. Peer and self-assessment of the individual's contribution.  
*or*
  - c. Some combination of a) and b).

#### Management of Groups

7. Groups will be required to agree the basic principles of how they will work together (frequency of meetings, modes of communication, division of responsibilities, interim targets and deadlines) prior to commencing work on their task.
8. Groups may request the assistance of the lecturer or a representative of the College to mediate or intervene in a group at the invitation of individual members or the group as a whole. In all cases, this should occur subsequent to efforts made by the group members to resolve problems independently and in a constructive manner.
9. Groups may, in extreme circumstances, apply to their lecturer to expel a group member on the basis of non-participation, non-contribution or in the event of other serious grievances. In such an occurrence, this must occur during (and not after) the submission of the group assessment task.
10. Group members have the right to escalate via the College's established complaints and appeals processes.

#### Responsibility

- The **Director of Academic Programmes**, is responsible for ensuring academic staff are aware of the Policy for Managing Group Assessment.
- The **Head of Faculty and Programme Lead** are responsible for overseeing, the implementation of the Policy for Managing Group Assessment within an academic programme.
- **Lecturers** are responsible for implementing assessment processes in keeping with the principles outlined in the Policy for Managing Group Assessment.
- **Learners** are jointly responsible for the submission of group assessment tasks, and individually responsible for completing tasks associated with self and peer evaluation to facilitate timely grading and feedback.

#### Related Legislation, Regulation or Guidelines

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Assessment and Standards, Revised 2013 (QQI).

## 7.9 Policy and Procedure for Venue Approval

QA Area (s)	• Teaching, Learning and Assessment		
Applies to	<input checked="" type="checkbox"/>	Staff only	
	<input type="checkbox"/>	Learners only	
	<input type="checkbox"/>	Staff and Learners	
Policy Owner	Director of Academic Affairs and Registrar		

### Purpose

The purpose of this policy is to outline the principles governing the selection, monitoring and review of venues used for the purposes of teaching and assessment by the College.

### Scope

This policy applies to all QQI validated programmes.

### Policy

A strategic priority within the Innopharma Education 2020 – 2025 Strategic Plan is ‘Our Delivery’. Within this priority, the College undertakes to ‘Ensure learners in all allocations and modes have access to a well-supported, high-quality and flexible learning experience that enables them to realize their full potential’.

Learners within the College are typically, but not exclusively, mature, regionally located and undertaking study part-time. To enable those learners to participate, programmes are usually validated for delivery in one or more regional location in addition to Innopharma Education’s Sandyford campus in Dublin.

Within the scope of its activities, the College may from time to time identify an opportunity to deliver a programme at an additional location that was not specified within the original application for validation of that programme to QQI. In such a case, prior to initiating marketing or recruitment activities, the College will:

- Identify potential venues following the procedure set out within the College’s QA documentation for Approval, Review and Monitoring of Venues.

and

- Seek approval for differential validation for any proposed additional location and venue from QQI.

The College is committed to ensuring the quality of all venues that are used in the delivery of its programmes of education and training to ensure their continuing adequacy and effectiveness. The College selects venues that meet the following criteria:

- All venues must be purpose built or appropriately equipped/fitted for education and training purposes and provide optimal physical environments for learning. They should, at a minimum, provide:
  - Teaching rooms suitable for the group size and class format
  - Appropriate break-out and small group working spaces
  - Capacity to regulate temperature, ventilation and lighting

- Access to IT equipment (e.g. hardware, software, projection, WiFi)
- Full accessibility for wheelchair users and staff/learners with limited mobility
- All venues must be located within reasonable proximity of public transport and car parking facilities.
- All venues must have sufficient health and safety provision, including fire exits and first aid arrangements.
- All venues must provide free access to appropriate facilities for comfort and human needs (e.g. drinking water, refreshments).
- All venues must have public liability insurance or equivalent to cover the use of the venue by a third party and the staff and learners attending the venue.

Wherever possible, the College will seek to utilize facilities owned or managed by education and training providers that have had their QA procedures approved by QQI.

As per QQI's Core Statutory Quality Assurance Guidelines (see Section 5.4.d) the College is also committed to regularly reviewing the venues used for the delivery of the College's programmes. Review and monitoring will be undertaken within the College's Procedure for Monitoring, Review and Re-validation of Programmes, with outcomes from this process included within Annual Programme Reports.

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## Responsibility

- The **Head of Quality Assurance and Enhancement** is responsible for monitoring the implementation of the College's Policy and associated Procedure for the Approval, Review and Monitoring of Programme Delivery Venues.
- The **Director of Academic Programmes**, supported by the relevant **Head of Faculty** and **Programme Lead** is responsible for the collection, review and monitoring of staff and learner feedback in relation to programme delivery venues.
- The **Director of Academic Affairs and Registrar** is responsible for overseeing, where required, the implementation of any Health and Safety requirements or training associated with programme delivery venues.
- The **Director of Academic Affairs and Registrar** is responsible for managing applications to QQI for the approval of any additional venues for a programme's delivery within the validation period of that programme.
- **All Staff and Learners** are responsible for personally observing any Health and Safety requirements, rules or regulations associated with programme delivery venues.
  - The **Academic Council** is responsible for approving new venues in relation to their adequacy for a planned teaching and/or assessment activity.
  - The **Executive Management Team** is broadly responsible for managing the College's resources to ensure that appropriate venues are available to ensure the quality of delivery to learners and for making recommendations to the **Board of Directors** where required.

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## Related Legislation, Regulation or Guidelines

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).

## 7.10 Control Sheet

<b>Policy and Procedure Title</b>	Teaching, Learning and Assessment
Responsible Officer(s)	Director of Academic Affairs
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	18 <sup>th</sup> June 2021
Supersedes	4.0
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 7.7.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Programmes	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Programmes	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	This policy has had a significant revision to include the TLA strategy being incorporated to the QAM; Integration of the QAEF to the TLA Strategy; significant review of Blended Learning to include a number of standards; Procedure for Assessment, Use and Monitoring of Platforms and Tools has been included	Director of Academic Programmes	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Section 7.3.3 provides greater clarity on the responsibility held by the Programme Lead to ensure the standards of online content and learning resources are met. Section 7.4 (Procedure for Assessment, Use and Monitoring of Platforms and Tools) has been renamed to section 7.5 and a significant procedure 7.4 has been included on the Procedure for Implementation of Blended Learning Strategy.	Director of Academic Programmes	Academic Council
Version 4.0	17 <sup>th</sup> December 2021	Policy for managing group assessment included in Teaching, Learning and Assessment policies	Director of Academic Programmes	Academic Council
Version 5.0	18 <sup>th</sup> June 2021	Inclusion of a new section 7.7 – Policy and Procedure on Automated Assessment	Director of Academic Programmes	Academic Council

Version 6.0	09 January 2026	Expanded definition of blended learning to include asynchronous delivery. Addition to the Standards of Blended Learning that cover content design, accessibility, assessment regarding Asynchronous learning. Lecturer Upskilling now includes a supporting checklist to guide decision-making around delivery mode at module level.	Head of Teaching & Learning	Academic Council
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## 8. Assessment and Standards

### 8.1 Policy for Assessment and Standards

QA Area (s)	<ul style="list-style-type: none"> <li>Programmes of Education and Training</li> <li>Governance and Management of Quality</li> <li>Documented Approach to QA</li> </ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

#### 8.1.1 ESG Standard 1.3: Student-centred Learning, Teaching and Assessment

*Standard: Institutions should ensure that the programmes are delivered in a way that encourages students to take an active role in creating the learning process, and that the assessment of students reflects this approach.*

#### 8.1.2 Purpose

The purpose of this policy is to set out the principles underpinning Assessment of Learners at the College, in alignment with QQI's Assessment and Standards, 2013 and the Core Statutory QA Guidelines.

The policy recognises that prospective and enrolled learners at the College are diverse and may at times require reasonable accommodations and additional supports to facilitate their full and equitable participation in the programmes delivered by the College.

It includes Marks and Standards governing assessment on College programmes that lead to QQI awards.

#### 8.1.3 Scope

This policy applies to all QQI validated programmes. This policy and the associated Marks and Standards apply to all members of faculty and support and administrative staff at the College who have contact with learners.

#### **8.1.4 Policy for Assessment**

This policy should be read in conjunction with [Section 7](#) (Teaching and Learning) of this Manual. The type(s) of assessment employed and their contribution to the overall grade are decided as part of the Programme Teaching, Learning and Assessment Strategy during Programme Design and Validation.

College programmes leading to QQI awards are governed by QQI's Assessment and Standards, revised 2013, the College's Marks and Standards and the approved programme schedule of the programme in question. Any special regulations are articulated on the approved programme schedule as part of the validation process and are communicated to learners at the outset of their studies and as part of the assessment brief.

All lecturing staff involved in designing, implementing and grading assessments in the College are familiar with the specified assessment tools and techniques and are supported in developing their skills, knowledge and practice in respect of assessment.

The College's assessment regulations, Marks and Standards and QA policy reflect best practice as articulated in guidelines of the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG), 2015.

The ESG sets out the basic principles underpinning assessment as follows:

*'The assessment of students is one of the most important elements of higher education. The outcomes of assessment have a profound effect on students' future careers. It is therefore important that assessment is carried out professionally at all times and that it takes into account the extensive knowledge which exists about testing and examination processes. Assessment also provides valuable information for institutions about the effectiveness of teaching and learners' support.'*

QQI's Assessment and Standards elaborates on these principles under six themes, which the College adheres to in its Teaching, Learning and Assessment Strategies:

1. Learners are responsible for demonstrating their achievement.
2. Assessment supports standards based on learning outcomes.
3. Assessment promotes and supports effective learning and teaching.
4. Assessment procedures are credible.
5. Assessment methods are reviewed and renewed as necessary to adapt to evolving requirements.
6. Learners are well informed about how and why they are assessed.

#### **8.1.5 Programme Assessment Schedule**

It is College policy that a schedule of assessment be provided for all programmes. The assessment schedule will include:

1. The allocation of marks between Continuous Assessment (CA) and the final examination.
2. The number of CA elements and the associated weighting.
3. The type of CAs i.e. practical, report, presentation etc.
4. Whether the CA is group or individual.
5. The submission date for each CA element.

6. The method of repeating the assessment (i.e. exam only, CA only or both CA and examination).

The Assessment Schedule for the academic year is agreed by the Programme Board before teaching begins. The agreed Assessment Schedule is communicated to all learners during induction and made available on the VLE.

### 8.1.6 Definitions

QfI's Assessment and Standards offers the following definitions for the components of assessment:

#### 8.1.6.1 *Summative Assessment:*

Aims to determine if (or sometimes the extent to which) a set of specified learning outcomes has been attained by a person and (typically) their entitlement to academic credit. It normally contributes to learner's results for a module or a programme. It includes results from continuous assessment, project work, oral assessment, written examinations etc.

#### 8.1.6.2 *Formative Assessment:*

Supports the learner in attaining specified learning outcomes. It does not normally penalise error, or credit achievement. 'Formative assessment is concerned with how judgements about the quality of learner responses (performances, pieces, or works) can be used to shape and improve the learner's competence by short-circuiting the randomness and inefficiency of trial and error learning'. Formative assessment supports learning and should therefore involve formative feedback. It is an essential part of any programme of education and training.

## 8.2 External Examiner Policy

External Examiners are appointed who are recognised experts in their subject areas and are from institutions with excellent academic reputations. The College works closely with External Examiners to assure standards, to enhance teaching, learning and assessment and to support programme development.

The External Examining Process Precepts:

- External examining is a QA mechanism employed by the College that supports public confidence in academic qualifications.
- The external examining process offers an objective interface: a principal outcome of external examining is the introduction of an independent element into the procedures for the assessment of learners.
- An external examiner is an independent expert who is a member of the broader community of practice within the programme's field of learning and whose accomplishments attest to their likelihood of having the authority necessary to fulfil the responsibilities of the role.
- The scope of operation of the External Examiner is agreed with the College. It may be extended, for example, to provide advice and guidance to the programme team. An external examiner may be invited to comment on the design, structure and content of a programme and its constituent components.
- An External Examiner's term of appointment is sufficiently long to allow them to assess trends, and sufficiently short to provide diversity and maintain the required level of independence.

### **8.2.1 Role of External Examiners**

The role of the External Examiner is to assure academic standards and the quality of teaching, learning and assessment. The External Examiner confirms that the academic standards of modules and the awards to which they lead are consistent with the academic outcomes specified and are comparable to those achieved in the subject nationally. The process assures the fairness, validity and rigour of assessment. Feedback provided by the External Examiner facilitates the academic departments to enhance teaching, learning and assessment and the overall learning experience.

The External Examiner undertakes to:

- a) Acknowledge receipt of examination and assessment material.
- b) Review all drafts of Examination papers/Assessment Briefs for 100% CA modules, marking schemes, worked solutions, etc. External Examiners shall have the right to make such suggestions, criticisms, and propose amendments as they deem appropriate.
- c) Review a representative sample of examination material presented by learners, including borderline cases. The sample, which should be drawn on a basis agreed between the Internal and External Examiner(s), should include sufficient material to enable the External Examiner(s) to form a judgement as to the appropriateness of the marking at all levels of classification.
- d) Probe the actual attainment of learners (actual programme learning outcomes) using information agreed with and supplied by the College.
- e) Compare and contrast both the Minimum Intended Programme Learning Outcomes and the actual attainment of learners with the relevant awards standards, with the NFQ, and with corresponding data from other programmes in the same discipline in other higher education institutions in Ireland and internationally.
- f) Determine whether the applied procedures for assessment are valid, reliable, fair and consistent.
- g) Review the appropriateness of the programme assessment strategy and the assessment procedures and, flowing from this, consider subsidiary module assessment strategies.
- h) Review key assessment tasks prior to their assignment in light of the programme and module assessment strategies and learners' prerequisite learning. Where key tasks include key continuous assessment tasks, it might not be feasible to review them prior to assignment, but they should still be reviewed by the External Examiner.
- i) Attend at least one Examination Board annually, ideally that examination board when stage progression decisions are made. In any event, they must attend the award stage examination board. Before such examination boards commence, the external examiners must:
  - a. Review borderline cases.
  - b. Agree with the respective Internal Examiner(s) the proposed final marks for consideration by the appropriate Examination Board.
- j) Report findings and recommendations to the College and QQI as appropriate.

### **8.2.2 Extent of the External Examiner's Authority**

The External Examiner does not mark or remark assessments; their primary role is to verify that standards are achieved.

Where an External Examiner determines that a mark or series of marks is not appropriate, they liaise with the Internal Examiner and Programme Lead. Where there is an issue with the Internal Examiner not agreeing with the External Examiner then the Head of Faculty or Director of Academic Programmes are informed and will attempt to facilitate a resolution. In very exceptional circumstances the Director of Academic Programmes may appoint a senior academic, independent of the College to arbitrate. This process will be managed by the Director of Academic Affairs Nominating External Examiners

The Programme Lead identifies potential External Examiners, reviews their experience against the criteria and liaises with them to determine their willingness to act as an External Examiner. The Head of Faculty then nominates them for appointment and provides the Director of Academic Programmes with a rationale for the nomination and a CV of the proposed examiner. Where the Director of Academic Programmes endorses the nomination and is satisfied that it meets the criteria for appointment, the application is forwarded to the Academic Council to approve the nomination for appointment by it, or by the awarding body, where appropriate.

The nominated employee must have completed a conflict of interest declaration form before he/ she can be considered for appointment (Section 15 [Conflict of Interest Policy](#))

### **8.2.3 Appointment of External Examiners**

At least one independent expert External Examiner is appointed for each award programme. The appointment is for three years. In some cases, normally to provide continuity in an examining team where appointments were made concurrently, the tenure of one External Examiner per programme may be extended for an additional year, subject to Director of Academic Affairs approval, on behalf of the Academic Council.

External Examiners are expected to attend all Examination Boards, at a minimum one per programme per annum.

If there are several External Examiners as members of a programme examining team, they are assigned, by agreement, to a module or group of modules as determined by the Head of Faculty.

All external examiners will be provided with an induction session which will outline their role and responsibilities relevant to the programme they are acting as external examiner on. A distinction will be made for training purposes between external examiners working on further education and higher education programmes.

The College reserves the right to recommend termination of an External Examiner's appointment at any time. This will be a decision made by the Academic Council and may be presented in writing to QQI with the reason for termination such as non-engagement with the agreed process.

Payment to External Examiners is made on receipt of their annual report.

### **8.2.4 The Criteria for the Appointment of External Examiners**

Prior to its appointment of an External Examiner, the Academic Council must be satisfied that the proposed External Examiner:

- a) Possesses academic and professional qualifications that are appropriate to the discipline, programme or subject to be examined and at a minimum; and should not, unless in exceptional circumstances, be below the level of qualification to be awarded on the basis of the examinations in question.

- b) Has appropriate academic standing and expertise and has sufficient academic experience to adjudicate on comparability of standards.
- c) Has the capacity to discharge their duties in good time and is not examining at multiple centres.

Where an External Examining team is appropriate, it is expected that that expertise will be complementary. In such cases representation from industry or a relevant professional body may be appointed to provide additional insight, provided that they are supported by an academic member of the team.

An individual who has retired, but who remains active in academic life and continues to engage in teaching, research or other academic activities relevant to the external examiner role, is eligible for appointment as an External Examiner.

External Examiners may **not** be selected from:

- College staff
- Staff who have worked in or have had a significant relationship with the College within the last five years
- The same institution, or constituent College of a merged institution, as their predecessor unless there is an adequate reason acceptable to the Academic Council.

An External Examiner who has acted previously should not normally be re-appointed until at least five years have elapsed since their previous appointment.

Once formally appointed, the Director of Academic Affairs will confirm their appointment, dates, role and responsibilities, in writing. The Director of Academic Programmes is responsible for ensuring the External Examiner and Programme Team are properly inducted in the external examining process. The Programme Lead is responsible for ensuring that the External Examiner has sight of all assessment material, as agreed and in good time before the assessment date. The Director of Academic Programmes is responsible for ensuring the External Examiner is supplied with all assessment materials required.

### **8.2.5 External Examiners Reports**

On completion of the assessment process and after the final External Examination Board for a stage or award each External Examiner will produce an annual report and submit it to the Director of Academic Affairs. The objective of the report is to satisfy the Academic Council that:

- The External Examiner was provided with sufficient information in good time to discharge their duties effectively.
- The assessment process complies with the College policies and regulations.
- The assessment strategy and assessment instruments are fit for purpose.
- The marking was fair, consistent and transparent.
- The quality of the learner work is comparable to other institutions nationally.
- The External Examiner is satisfied that previous recommendations were properly considered, and any issues have been resolved.

In addition, the External Examiner provides specific feedback regarding the assessment to the lecturers and makes recommendations as appropriate.

All External Examiner Reports are reviewed by the Programme Team, the Director of Academic Programmes and the appropriated Head of Faculty. The Head of Faculty compiles

a response to the External Examiner acknowledging comments and providing a response in respect of recommendations made. This response is endorsed by the Director of Academic Programmes and sent to the External Examiner. Copies of all External Examiner Reports and responses must be kept by the Director of Academic Affairs to ensure the recommendations are properly considered and are implemented where appropriate. Where the External Examiner has an issue with the institutional management of the assessment process then the Director of Academic Affairs compiles an additional response. The External Examiner may make a confidential report directly to the President where it is deemed necessary. On completion of the process the Director of Academic Affairs compiles a summary of all External Examiner comments, recommendations and actions from the reports for information to the Academic Council.

The College will publish the names and affiliation of all External Examiners and make External Examiner Reports available to staff, learners, stakeholders and awarding bodies.

### **8.3      Conflict of Interest**

Persons will not be appointed as examiners, external examiners and invigilators where there is any foreseen possibility of conflict of interest. Even the appearance of conflict of interest, where none exists, can damage the credibility of the person selected in this process. Any person involved in the assessment process must be familiar with the College's Conflict of Interest Policy, detailed in [section 15](#).

The instances listed below are given as examples. They are not intended to comprise an exhaustive list of situations where a conflict of interest might arise.

- A staff member with access to an examination paper with a personal link or professional association to one or more learners sitting the examination, that might influence his/ her ability to be objective.
- Where a staff member is also a learner of the College.
- Persons who have potential future conflict of interest.

The Director of Academic Affairs will make appropriate arrangements to safeguard the integrity of the assessment process; in the case of any doubt, advice should be sought in advance from the Director of Academic Affairs.

Since cases can arise where the possible appearance of a conflict of interest is not generally known, the primary responsibility for disclosing such a possibility rests on the prospective independent evaluator.

Prospective individuals involved in the assessment process are required to declare any relevant interests and potential conflicts of interest prior to appointment. If there are no relevant interests or conflicts this should be declared, by completing the conflict of interest declaration in Appendix 15.B

Where a potential conflict of interest emerges after appointment, they should inform the College without delay.

## **8.4 POLICY FOR REASONABLE ACCOMMODATION AND ADDITIONAL SUPPORTS**

The College is committed to facilitating fair, equitable and accessible participation in learning and assessment for learners with disabilities, learning differences or medical conditions of a temporary or ongoing nature. Accordingly, the College will make Reasonable Accommodations and provide Additional Supports for learners as far as is reasonably practicable. Learners and prospective learners at the College are encouraged to disclose any specific or additional needs to the College's representatives in order to facilitate this. The College and its staff will at all times strive to provide a supportive and inclusive learning environment.

The College does not have the expertise or capacity to undertake medical or psychological assessments, or to determine the supports required to accommodate the needs of learners who seek reasonable accommodations or additional support (defined as actions taken to alleviate substantial disadvantage due to disabilities, learning differences or medical conditions). Therefore, the College will, under normal circumstances, require learners seeking reasonable accommodations or additional supports to provide documentation from a medical consultant, educational psychologist or appropriately qualified expert (this requirement is exercised at the discretion of the College). This documentation should include recommendations regarding the form or nature of the accommodations or supports required.

Following the disclosure of specific or additional needs to the College by a learner, the allocation of reasonable accommodations and additional supports will be guided by the following principles:

### **8.4.1 Principles Guiding Reasonable Accommodation & Additional Support**

- Reasonable Accommodations and/or Additional Supports remove disadvantages.
- Reasonable Accommodations and/or Additional Supports do not provide advantages.
- The College reserves the right to require that appropriate evidence of a disability, learning difference, medical condition or other form of disadvantage be submitted by the learner before committing to the facilitation of Reasonable Accommodations and/or Additional Supports.
- The College reserves the right to decide what is reasonable.
- Reasonable Accommodations and/or Additional Supports cannot, under normal circumstances, be applied retrospectively.
- Reasonable Accommodations for assessment activities will be restricted to the minimum changes/amendments required and will not dilute the standard of learning to be obtained.
- All learners, including those requiring Reasonable Accommodations, must demonstrate attainment of learning outcomes in order to pass.
- Where Reasonable Accommodations and/or Additional Supports are deemed practicable and reasonable, they will be provided by the College. Within reasonable

limitations, the College will strive to provide these at no additional cost to the learner. Examples of accommodations and supports are:

- Extra time in assessment
- Spelling/Grammar waiver
- Advance access to learning materials and course readings
- Changes to font types or sizes
- Changes to the assessment/examination environment
- Use of assistive technology

## **8.5 Procedure for Supporting Learners Applying for Reasonable Accommodation**

Definitions & terms:

### **8.5.1 Disability**

The Disability Act 2005 refers to: “disability”, in relation to a person, means a substantial restriction in the capacity of the person to carry on a profession, business or occupation in the State or to participate in social or cultural life in the State by reason of an enduring physical, sensory, mental health or intellectual impairment.” Substantial restriction means a restriction that is permanent (or likely to be permanent) which results in significant difficulty in communication, learning or mobility and means that the person has a need for services to be provided on a continuous basis.

### **8.5.2 Reasonable Accommodation**

Reasonable accommodation can be defined as “any action that helps alleviate a substantial disadvantage. [It] is a facility outside the mainstream provision to allow the [learner] with a disability to participate fully, and without an educational disadvantage in comparison with his/her peers” (Mullan & Treanor, 2013).

There are other occurrences when Reasonable Accommodations will be required, for example due to an incident / accident or other emergency reason. These instances are managed separately, under the Mitigating Circumstances policy.

### **8.5.3 Procedure:**

1. A person enquires about a programme. They are sent information about the programme along with an online application form. The application form contains a tick box for disability disclosure:
  - “I will require additional support/reasonable accommodations throughout the duration of this programme due to a diagnosed disability/learning difficulty” – YES/NO
  - “If YES, please provide brief details of potential supports required throughout the programme”

2. Learner Support Coordinator consults with the Director of Academic Affairs on a case-by-case basis and liaises with Programme Managers. Applicants and learners will be supported by the College as far as is reasonably practicable.
3. Programme Managers have overview of applicants that have indicated a disability/learning difficulty. Application process continues, eligibility is assessed, and an offer is made (if relevant). Once the offer is accepted, the Learner Support Coordinator is informed and follows up with the learner to begin the registration process for reasonable accommodations.

*If the College cannot reasonably accommodate a disability*

- The applicant will be notified at the earliest possible opportunity, before they accept an offer (if offer is made), to allow them to pursue other applications

*If disclosure is made after registration*

- The learner will be supported by the College as far as is reasonably practicable

*If the learner has no Proof of Diagnosis*

- Advice on how this might be obtained if information is available
- Advice on general supports that can be accessed (for example, within Innoskills/Learner Hub/Library)

*If an applicant/learner would like to appeal the decision made by the College*

- They can do so, following the Policy and Procedure for Appeals as outlined in the Quality Assurance Manual

4. Learner Support Coordinator issues a welcome email including:
  - Brief overview of application process
    - i. Welcome call
    - ii. Submission of Form and Proof of Diagnosis
    - iii. Follow up Needs Assessment meeting
  - Link to pre-Needs Assessment online form where the learner will:
    - i. Read the Reasonable Accommodations Policy (see Appendix II)
    - ii. Sign the Declaration of Consent to Disclose and Share Disability Information form (see Appendix I)
    - iii. Upload relevant Proof of Diagnosis (see Appendix III)
  - Link to AHEAD online resources and supports
4. Once the learner submits Proof of Diagnosis & Declaration of Consent to Disclose and Share Disability Information, the Learner Support Coordinator schedules a Needs

Assessment Meeting. This will preferably take place in person or on a video call but can be conducted by telephone if required.

6. The Needs Assessment Meeting takes place, facilitated by the Learner Support Coordinator or another appropriately trained/qualified member of staff.

The purpose of the Needs Assessment is to:

- i. Understand the impact of the learner's disability on their study within a specific programme (modules, classes, timetable, assessment methods)
  - ii. Check what (if any) specific impacts the learning environment (physical/virtual) may have on the learner
  - iii. Ascertain what (if any) supports the learner has previously received in an educational environment and what supports they think they might need
  - iv. Ascertain what familiarity the learner has with relevant assistive technologies and identify training that may be helpful
  - v. Explain the nature of the support provided for learners with disabilities and how the process will work, including that an Individual Learning Support Plan will be issued to the learner within 4 weeks of the Needs Assessment Meeting
  - vi. Explain how to contact the Learner Support office and who other key individuals are who can offer support throughout the programme (including Librarian, Programme Manager, Learner Support Coordinator)
7. An Assistive Technology session is offered and completed, if learner agrees to it, introducing some of the accessibility features on Innoskills and other resources, technologies and information that can help throughout the programme.
8. An Individual Learning Support Plan is generated by the Learner Support Coordinator, summarising:
  - Approval of Supports/Accommodations by Innopharma Education
  - Potential Impact of Disability on Studies (not disclosing the disability)
  - Specific Accommodations Approved
  - General Supports Available
  - Contact Details of Key Staff Members
9. The Learner Support Coordinator will seek approval of the Individual Learning Support Plan from the Director of Academic Affairs.
  - *If the Individual Learning Support Plan is not approved by the Director of Academic Affairs:*

Amendments are made as necessary

10. The Individual Learning Support Plan is issued to the learner, copying the Head of Assessment.

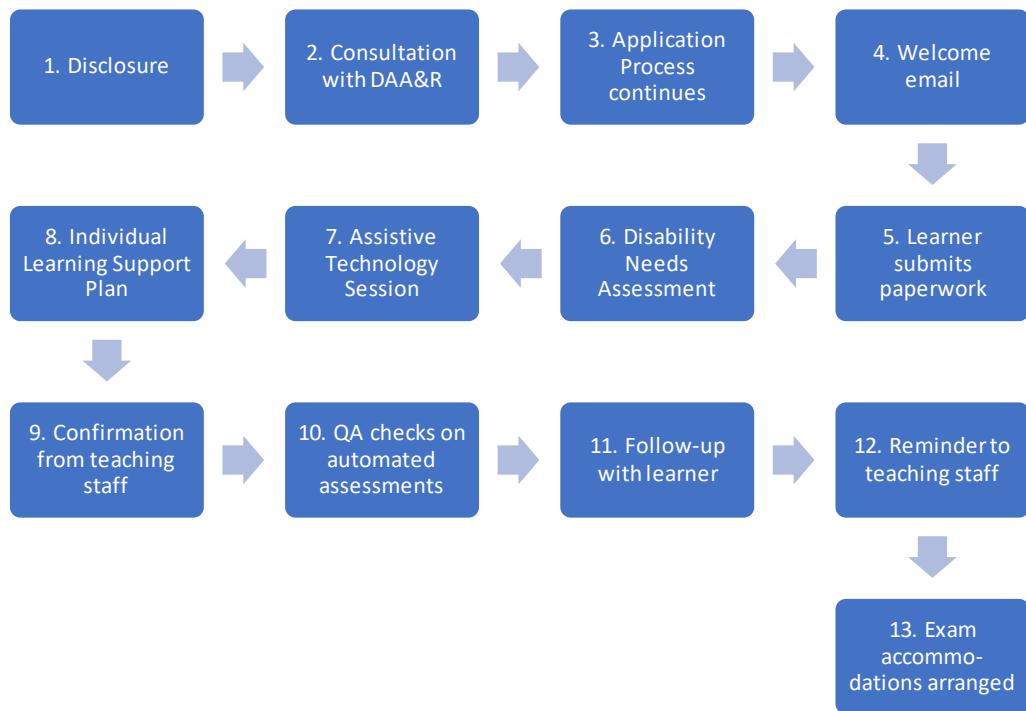
#### **Each Semester**

11. Individual Learning Support Plans are emailed to relevant teaching staff, on a need-to-know basis, copying the Head of Assessment and including:
  - A request for confirmation in terms of implementing the accommodations as specified in the Individual Learning Support Plan
  - A referral to Head of Assessment/TLA Committee/IT Specialist for any support needed to implement plan

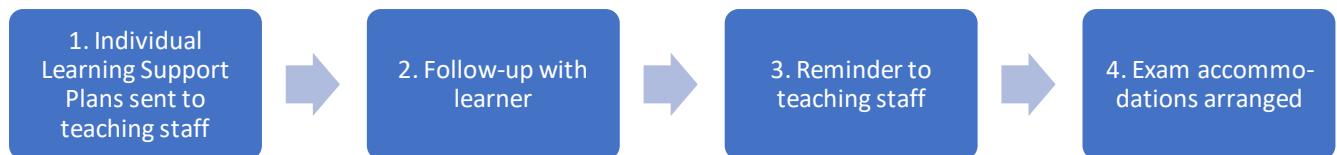
*If confirmation is not received, Programme Lead is notified for direct follow up with teaching staff.*

12. Supporting staff that carry out QA checks on automated assessments will be informed of relevant reasonable accommodations in order to ensure that accommodations are adhered to in every type of assessment.
13. Learner Support Coordinator follows up with learners by email or phone over weeks 7 – 10 of their programme to check on:
  - General progress/welfare
  - Effectiveness of supports/assistive technologies in place
  - Preparedness for final assessments
14. Learner Support Coordinator issues a reminder email to relevant teaching staff that Individual Learning Support Plans may require accommodation. The reminder is issued at the beginning of the new semester.
15. Learner Support Coordinator liaises with the Head of Assessment in relation to exam accommodations, no sooner than 4 weeks prior to the commencement of the examinations cycle.

#### **PROCESS MAP OF PROCEDURE FOR SUPPORTING LEARNERS APPLYING FOR REASONABLE ACCOMMODATION**



Actions each Semester



## 8.6 Policy for Moderation

The College has developed processes to ensure that assessments are fair, consistent and capable of resolving the standards of knowledge, skill and competence established at validation for the award. In pursuance of this, it has developed moderating processes. These moderating processes are twofold:

1. Major summative assessments proposed by the internal examiner are subject to review by the Programme Lead, before being forwarded to the external examiner for review.
2. Assessment outcomes are internally moderated by faculty and externally reviewed, by external examiners. This element of moderation is where a second internal examiner (moderator) will consider a sample of assessments from a first marker to assure that the appropriate mark has been awarded, thus helping to ensure the quality and reliability of marking standards. Variation in grading between the first

examiner and the moderator is discussed between the two in order to reach agreement.

## **8.7 Policy for Internal Verification**

Internal Verification is the process by which Innopharma FET assessment policies and procedures relating to planning, managing, and operationalising all aspects of assessment practices are internally verified, i.e. monitored by staff. The overall purpose of the Internal Verification process is to ensure that a provider is monitoring its own systems and procedures regarding assessment from planning of assessment to finalising results, ensuring that there is adequate learner evidence, and that results, and grades are correctly calculated and recorded (Quality Assuring Assessment – Guidelines for Providers, Version 2 Revised, QQI 2018)1 .

Internal verification of assessment procedures and assessment results takes place on a sampling basis.

The outcome of the internal verification process is an internal verification report. This report will be available to the external examiner and examinations board and will provide an auditable trail for QQI monitoring.

This procedure applies to all further education and training programmes provided by Innopharma education.

The Internal Verifier(s) systematically checks that Innopharma Education's assessment procedures have been applied consistently and verify the accuracy of provisional assessment results.

The following main steps will be employed:

1. Check that the Innopharma assessment procedures were adhered to, ensuring the following:
  - a. Assessment procedures have been applied consistently across all assessment activities
  - b. Learning has been assessed using the techniques and instruments as indicated in the validated programme
  - c. Assessment results are documented and recorded as per Innopharma procedures
2. Monitor all submitted portfolios through systematic checks of evidence presented as follows:
  - a. All evidence should be available for all learners presented for an award
  - b. Evidence has been generated as per the technique identified in the validated programme and using appropriate instruments as indicated in the validated programme
  - c. Assessment results are available for each learner
  - d. Marks are totalled, and percentage marks are calculated correctly on a sample basis
  - e. The percentage marks and grades awarded are consistent with QQI grading bands
3. Produce an Internal Verification report
  - a On a sample of learners the internal verifier will:
    - check marks are totalled and percentage marks calculated correctly
    - check marks are transferred correctly from learner evidence to learner marking sheet/record
    - check percentage marks and grades allocated are consistent with QQI grading bands

- note errors and record corrections made
- identify any irregularities, notify appropriate assessor and take corrective action if required as per agreed procedures
- complete an internal verification report per award per programme.

The role of the External Examiner for FET is to review Internal Verification reports and to authenticate the findings/outcomes.

## **Sample of Internal verifier report:**

INTERNAL VERIFICATION REPORT					
<b>Number of assessors for whom assessment were sampled</b>					
<b>Number of learners per sample</b>					
<b>Semester</b>					
<b>Programme name</b>					
<b>Modules included</b>					
	Is the documentation sample verified correct Y/N	Is sufficient & reliable evidence available for all learners sampled Y/N	Was the evidence in line with assessment techniques/weighting as per validated programme document Y/N	Have marks been correctly totalled and grades awarded inline with FET requirements Y/N	Comments/Points of action if No
Award					

## 8.8 Policy for Academic Misconduct

### 8.8.1 Definition of Academic Misconduct

The College defines the serious academic offence of Academic Misconduct as:

- The possession, use or attempted use of unauthorised material, books, notes, electronic aids or other materials in an examination.
- Obtaining access to an examination paper content ahead of its authorised release.
- Unauthorised collusion, i.e. either aiding or obtaining aid from another candidate or any other person, where such aid is not explicitly permitted in the assignment.
- Acting dishonestly in any way, whether before, during or after an examination or other assessment so as to either obtain or offer to others an unfair advantage in that examination or assessment.
- Deliberate plagiarism in any assessment, defined as direct copying of text, images and other materials (electronic or otherwise) from a book, article, fellow learner’s work/assignment, handout, web page, artificial intelligence generated material or other source without proper acknowledgement.

### **Severe academic misconduct** includes:

- Any case where a learner has previously been penalised for academic misconduct.

- Taking notes into or using any unauthorised device in an examination, even if they are not used.
- Impersonating another person during an examination or arranging for another person to impersonate any individual during an examination.
- Purchasing material from 'essay sites' to submit as own work.
- Misconduct within a dissertation or thesis of a taught postgraduate programme.
- Where the College suspects that any of the underlying data used by the learner has been either falsified or fabricated.

### **8.8.2 Plagiarism Policy**

Plagiarism is a serious offence and consists of submitting work which includes parts from sources which are not acknowledged. The approach of the College is to:

- Make it very clear to learners what plagiarism is and ensure learners have access to guides and other resources to facilitate understanding and awareness of plagiarism
- Actively work to prevent plagiarism through the use of software and the provision of assessment guidelines.
- Provide a clear framework for dealing with cases of plagiarism.

The College defines plagiarism as:

*The act of presenting as your own, the words or ideas of someone else, whether published or not, without proper acknowledgement, within one's own work.*

There are several forms of plagiarism, which could occur within all modes of assessment (including examination):

- Direct copying of text, images and other materials (electronic or otherwise) from a book, article, fellow learner's work/assignment, handout, web page, artificial intelligence generated material or other source without proper acknowledgement.
- Programme Leads will ensure that plagiarism is explained to students at learner induction. In addition, academic staff members are responsible for re-enforcing students' understanding of plagiarism. Departments will, in conjunction with the library function, ensure that appropriate training in citation and citation software is provided to students. The College will provide training for academic staff in:
  - 1) Assessment design to avoid plagiarism; and
  - 2) Use of software for detecting plagiarism to both detect plagiarism and to foster awareness of plagiarism with the emphasis on how to avoid it.

Individual assignments may have specific requirements. The College actively supports the prevention of plagiarism by ensuring that all students are fully informed about plagiarism, and its serious consequences. Both Academic staff and students have access to software for detecting plagiarism.

### **8.8.3 Academic Misconduct Committee**

The Director of Academic Programmes reviews all academic misconduct cases presented to them and makes a judgement if there is a *prima facie* case to answer. If they determine there is a case to answer, they shall convene a meeting of the Academic Misconduct Committee.

The Academic Misconduct Committee has the following composition:

- I. Chair: Director of Academic Programmes.

II. Members: Two members of academic staff not involved in the assessment of the learner.

A member of the Office of the Director of Academic Affairs in attendance as recording secretary.

#### **8.8.4 Academic Misconduct Process:**

The table below details the steps to be taken should academic misconduct be suspected.

Process Stage	Action and Details
<b>Initial Stage</b>	<ul style="list-style-type: none"><li>• Lecturer sets deadline for assessment.</li><li>• Clear Instructions on task and how to complete it are given.</li></ul>
<b>Lecturer: Suspect Misconduct</b>	<ul style="list-style-type: none"><li>• Discussion on academic integrity/honesty— what it is in the context of this assessment.</li><li>• Inform Programme Lead.</li><li>• Informal conversation with student to establish facts; programme lead can attend.</li></ul>
	<ul style="list-style-type: none"><li>• If no misconduct but poor academic practice, paper graded as normal, no record maintained, and student completes Academic Integrity training.</li></ul>
	<ul style="list-style-type: none"><li>• If issue persists, informs student of policy and next steps.</li></ul>
	<ul style="list-style-type: none"><li>• Lecturer grades the work (Day 1).</li></ul>
<b>Formal Referral</b>	<ul style="list-style-type: none"><li>• Lecturer completes academic misconduct form and submits to librarian via email within 2 days of informal conversation.</li><li>• Inform Programme lead/DAP of enquiry into alleged misconduct.</li><li>• Access to assessment and any other relevant information to be provided.</li><li>• CC DAP &amp; head of Assessment on email.</li></ul>
<b>Librarian Analysis</b>	<ul style="list-style-type: none"><li>• Librarian undertakes an analysis of the assignment and reports findings to lecturer, DAP, and head of Assessment within 3 days.</li></ul>
	<ul style="list-style-type: none"><li>• Librarian uses a consistent review list and Turnitin to make assessment.</li></ul>
<b>DAP Judgement</b>	<ul style="list-style-type: none"><li>• DAP decides if there is a case to answer.</li><li>• If no case, no further action and no record maintained of investigation.</li></ul>

	<ul style="list-style-type: none"> <li>• If yes, Academic Misconduct committee is convened.</li> </ul>
	<ul style="list-style-type: none"> <li>• Student notified of investigation, nature of misconduct, and link to policy; they have the right to reply and attend the hearing (5 DAYS).</li> </ul>
	<ul style="list-style-type: none"> <li>• if the learner denies the allegation, they are invited to attend the Academic Misconduct Committee Hearing</li> </ul>
<b>Academic Misconduct Committee Hearing</b>	<ul style="list-style-type: none"> <li>• Committee consists of DAP plus 2 members of academic staff.</li> </ul>
	<ul style="list-style-type: none"> <li>• Learner has the right to attend the hearing plus one witness.</li> </ul>
	<ul style="list-style-type: none"> <li>• If they do not respond, the hearing proceeds without them.</li> </ul>
	<ul style="list-style-type: none"> <li>• Committee judges level of misconduct (intent, extent, level, location, time with college) and penalty based on a clear matrix.</li> </ul>
<b>Committee Findings</b>	<ol style="list-style-type: none"> <li>1. There is no case to answer.</li> </ol>
	<ol style="list-style-type: none"> <li>2. Poor academic practice is found.</li> </ol>
	<ol style="list-style-type: none"> <li>3. Academic misconduct is found.</li> </ol>
	<ol style="list-style-type: none"> <li>4. Serious academic misconduct is found.</li> </ol>
<b>Potential Penalties</b>	<ul style="list-style-type: none"> <li>• Caution and guidance/advice on plagiarism.</li> </ul>
	<ul style="list-style-type: none"> <li>• Require resubmission of assessment with no penalty.</li> </ul>
	<ul style="list-style-type: none"> <li>• Require resubmission with mark capped at 40%.</li> </ul>
	<ul style="list-style-type: none"> <li>• Resit all examinations in a series for capped mark.</li> </ul>
	<ul style="list-style-type: none"> <li>• Suspension.</li> </ul>
	<ul style="list-style-type: none"> <li>• Expulsion.</li> </ul>

### 8.8.5 Responsibility

- The **Academic Council** is responsible for approving this policy and associated procedures pertaining to assessment and delegating appropriate responsibility to the Examination Board.

- The **Director of Academic Programmes** and the **Director of Academic Affairs** with the help of the **Programme Lead** has responsibility for the implementation of policy and procedure pertaining to Assessment in the context of a specific programme.
- The **Head of Quality Assurance and Admissions** is responsible for monitoring and maintaining the overall alignment of College policy and procedures pertaining to Assessment to QQI's guidelines and policy statements.

### **8.8.6 Related Legislation, Regulation or Guidelines**

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Assessment and Standards – QQI, Revised 2013.
- Quality Assuring Assessment Guidelines for Providers – QQI, Revised 2013.
- Effective Practice Guidelines for External Examining – QQI, Revised 2015.
- The Policy, Guidelines and Procedures for the Granting of Reasonable Accommodations in Examinations to Students with Disabilities - Disability Advisors Working Network.

#### **8.8a Artificial Intelligence Policy**

Generative AI is a type of artificial intelligence that can learn from and mimic large amounts of data to create content such as text, images, music, videos, code, and more, based on inputs or prompts.

This policy has been developed to ensure the responsible, ethical and effective use of AI across all academic activities at Innopharma Education. It aims to provide clear guidance for teaching, academic staff and learners on the appropriate integration of AI, safeguard academic integrity, and support innovation while addressing potential risks and challenges. As there is potential for academic misconduct arising from the use of artificial intelligence, the Innopharma Education Academic Misconduct Policy ([section 8.8 of the QA Manual](#)) will continue to apply to all cases, including those involving AI.

#### **Scope and Purpose**

The purpose of this policy is to outline the AI Assessment Scale (AI AS) framework in respect of Innopharma Education use of AI in assessment.

- Innopharma Education has specific responsibilities to staff and learners. These include ensuring:
  1. **Currency and Relevance:** Ensuring that teaching, learning, and assessment approaches remain current and relevant, so that graduates are equipped for

careers in their chosen fields. Where AI is already in use across industry, graduates must be prepared to engage with the relevant tools and practices appropriately.

2. **Knowledge and Competence:** Supporting staff and learners to be well-informed, knowledgeable, and competent in the ethical use of emerging AI systems. This includes understanding AI's capabilities as well as the challenges it poses, such as bias and transparency, environmental impacts, data privacy concerns, intellectual property issues, and risks of copyright infringement.
3. **Academic Integrity:** Upholding academic integrity so that qualifications reflect the genuine knowledge, skills, and competencies of graduates. This involves protecting the credibility and value of awards by ensuring that AI is not used in ways that undermine fair achievement.
4. **Informed Decisions:** Enabling teaching and academic staff to make informed choices about the appropriate use of AI for learning and assessment. To deliver high-quality and relevant education, staff must carefully evaluate the potential impact of AI—both positive and negative—on programme and module-level learning outcomes.

## 8.9 Use of AI in assessment: Artificial Intelligence Assessment Scale (AIAS) Framework \*

\* The description and scale provided here is a version of Perkins, M., Furze, L., Roe, J. and MacVaugh, J., 2024. *The Artificial Intelligence Assessment Scale (AIAS): A framework for ethical integration of generative AI in educational assessment*. *Journal of University Teaching and Learning Practice*, 21(06). It has been adapted for use in Innopharma Education.

Listed below are the levels of AI that may be chosen by a lecturer in an assignment to give learners clarity on what constitutes acceptable AI use in an assignment.

Note the level you choose does not incorporate the levels leading to it i.e. Level three does not necessarily include level 0, 1 or 2. It is not cumulative. AI use at all levels is expected to be declared by the learner.

### 8.9.1 Levels of AI Use

- *Level 0: All AI Prohibited*

The use of any AI tool is not permitted for any part of an assessment. This includes closed book and time-bound examination settings.

- *Level 1: AI for Idea Generation, Structure, and Research*

At Level 1, AI tools may be used at the planning stage of an assignment.

#### Examples of Level 1 activities:

- **Collaborative brainstorming:** Learners use AI to generate ideas or solutions to problems. These ideas are discussed, filtered, and refined collaboratively by learners.
- **Structural outlines:** Learners use AI to create structured outlines for their work.
- **Research assistance:** AI suggests topics, areas of interest, or sources that may be useful for research.

All AI use must be declared at Level 1.

- *Level 2: AI Assisted Editing*

At Level 2, learners can use generative AI for refining, editing, and enhancing the language or content of their original work.

#### Examples of Level 2 Activities:

- **Grammar, punctuation, and spelling:** AI can identify and correct errors in grammar, punctuation, spelling, and syntax.
- **Word choice:** AI can suggest more precise or varied terms to improve clarity and expression.
- **Structural edits:** AI can help rephrase sentences for clarity while preserving the original meaning.

All AI use must be declared at Level 2.

- *Level 3: AI for Partial Task Completion*

At Level 3, learners are permitted to use generative AI to perform specific menial or mechanical tasks within an assignment that do not directly fulfil the core learning outcomes but support the overall task completion.

#### Examples of Level 3 Activities:

- **Data formatting:** AI tools can be used to organize, structure, or convert data into the required format for reports or presentations.

- **Summarising sources:** AI can generate concise summaries of background research, academic articles, or technical documentation to assist information comprehension.
- **Basic calculations or repetitive tasks:** AI may perform routine numerical calculations, conversions, or generate repetitive content that does not require critical thinking.
- **Template generation:** AI can assist in creating templates which learners subsequently personalise or critically develop.

All AI use must be declared at level 3.

- *Level 4: AI Task Completion with Human Evaluation*

AI is used to complete certain elements of the task (to express part of the learning outcomes), with learners providing discussion, analysis, or commentary on the AI-generated content.

This level requires critical engagement with AI-generated content and evaluating its output. You will use AI to complete specified tasks in your evaluation assessment.

Examples of Level 4 Activities:

- **Critical analysis:** Learners use AI-generated text, data, or summaries and provide their own assessment of its accuracy, strengths, limitations, or implications.
- **Discussion and commentary:** Learners add informed commentary or explanation on the AI-produced sections, explaining how they relate to the broader assignment goals.
- **Evaluation of AI output:** Learners critique the reliability, bias, or ethical considerations of the AI content used within their work.
- **Integration and synthesis:** Learners combine AI-generated parts with their own original work, demonstrating understanding and academic rigor.

All AI use must be declared at Level 4.

- *Level 5: Custom – As defined by lecturer*

At Level 5, learners are permitted to use generative AI tools throughout the entirety of an assessment task, either at their own discretion or as suggested by the instructor.

Assessments at this level may specify or recommend particular generative AI tools, or may allow learners to select tools of their choice.

This level is appropriate for tasks where the use of generative AI is integral to achieving the learning outcomes, or where the skills and knowledge being assessed are not dependent on the exclusion of AI assistance. Level 5 is also designed to encourage the exploration of generative AI as a collaborative and creative partner

Custom level use should be explicit in the assignment brief and available at all times for learners.

Examples of level 5 Activities:

- **Co-creation:** Learners may work within broad themes or parameters, iteratively developing content using a variety of generative AI tools and modes.
- **GenAI exploration:** Learners are encouraged to use multiple generative AI tools to investigate a wide range of ideas, styles, or solutions, including the ethical and practical implications of AI in the relevant domain.
- **Real-time feedback loop:** Learners may continuously engage with generative AI tools to refine and adjust their work as the task progresses, directly influencing the final outcome.
- **GenAI products:** Learners are permitted to produce finished products or artefacts using generative AI throughout the process, such as complete software applications, written works, or artworks.
- **Image generation:** Learners can use AI image generation tools to create original visual content as part of a broader assessment project, such as designing scientific posters, infographics, or visual representations of complex biopharmaceutical processes.

All AI use must be declared at level 5.

#### **Requirements:**

- Learners must maintain transparency regarding their use of generative AI tools, including documenting the tools used and the nature of their contribution to the final product. Human editorial oversight is expected to ensure the quality, relevance, and ethical use of AI-generated content.
- All AI use must be declared.

### Scale Chart

Level	Name/Description	Permitted AI Use	Example Activities
<b>0</b>	All AI Prohibited	No AI tools allowed for any part of assessment, including exams.	None
<b>1</b>	AI for Idea Generation, Structure, Research	AI can be used at planning stage: brainstorming, feedback, structuring ideas.	Outlines, topic brainstorming
<b>2</b>	AI Assisted Editing	AI can refine, edit, or enhance language/content of original student work.	Grammar checks, rephrasing
<b>3</b>	AI for Partial Task Completion	AI may perform menial/mechanical tasks, not directly contributing to learning outcomes.	Data formatting, summarising sources
<b>4</b>	AI Task Completion with Human Evaluation	AI completes certain elements of task; learners must analyse, discuss, or critique AI-generated content.	Critiquing AI-written sections
<b>5</b>	Custom: As Defined by lecturer	AI tools can be used throughout the task according to specific lecturer guidance.	Collaborative AI co-creation of research reports, multi-tool AI exploration, AI-assisted data analysis and interpretation

The above levels of AI use are available for lecturers to select in advance, providing learners with clear guidance on what AI use is acceptable for each assignment. Lecturers will specify which of these categories apply to a particular assignment. It is important that lecturers explicitly include or exclude each category rather than assuming that any unmentioned categories are permitted.

The assignment brief must clearly outline the permitted categories of AI use. For Level 5 (Custom – As Defined by Lecturer), lecturers are required to explicitly specify how generative AI tools may be used throughout the assessment. This includes detailing which AI tools are permitted or recommended, the ways in which learners may engage with these tools, and any mandatory requirements for transparency, documentation, and human editorial oversight.

Clear guidance must be provided to ensure learners understand the scope and boundaries of AI use for the assignment.

Teaching and academic staff setting assignment briefs and coding their permissible level should do this in consultation with the Head of Assessment or designee to ensure a high level of competency and appropriateness.

Any AI use category not explicitly permitted should be considered prohibited.

**Misuse of AI:** If it is determined that a learner has used an AI tool in any way that is not permitted by the chosen level, then they will be subject to the disciplinary procedures listed in the Academic Integrity and Misconduct policy regarding the misuse of AI in assignments.

## Specific Responsibilities

These responsibilities are shared by all staff and learners to different degrees of participation.

### Innopharma Education Responsibilities

- Resource Provision:** Innopharma Education is committed to supporting staff in navigating the evolving landscape of artificial intelligence by providing access to up-to-date information resources and regular professional development opportunities. The College will actively invest in upskilling staff, ensuring they are well-informed about the latest advancements, best practices and ethical considerations related to AI. This ongoing commitment will empower staff to confidently integrate AI into their teaching, research and administrative roles, ultimately enhancing the quality of education and services provided to our learners.
- Consultation:** The College will consult with staff, learners, and industry/employment representatives to understand the priorities and impact of the use of AI in Higher Education and society.
- Academic Integrity Culture:** The College prioritises an Academic Integrity culture, embedding it in all levels of the institution.
- AI Assessment Scale Maintenance:** The College commits to ensuring the availability and maintenance of an AI Assessment Scale to inform learners regarding the extent (if any) to which AI can be used to inform or assist assessments.

## Staff Responsibilities

1. **Decision on AI Use:** Academic staff will decide the level of AI use for each of their assignments and communicate this to learners, including through the assignment brief in conjunction with the Head of Assessment or designee.
2. **Clarity and Consistency:** Academic staff to provide clarity, frequently and consistently, for staff and learners in relation to the scale of AI use and AI misuse in any given assessment, and in each associated assignment brief.
3. **AI AS Framework Implementation:** Academic staff will use the AI Assessment Scale (AI AS) framework to make informed choices about the agreed use or misuse of AI at the level of module-based assessments and communicate this to all learners and staff.

## Learner Responsibilities

1. **Academic Integrity:** Learners must embrace Academic Integrity as a key element of their education path. Academic integrity is the commitment to, and demonstration of, honest and moral behaviour in an academic setting by any learner.

## Lecturer Responsibilities

1. **Embracing Academic Integrity:** Lecturers must embrace Academic Integrity as a key element of the education they are providing.
2. **Training and Engagement:** Lecturers will participate and engage in training and opportunities to better understand and apply AI ethically and academically.
3. **Communication:** Lecturers must communicate the standard that learners are being held to. This includes making sure that learners understand the relevant AI Assessment Scale (AI AS) framework for each of their assessment briefs. It also includes communicating the consequences of allowed use and/or misuse of AI, including the Academic Integrity and Misconduct policy process in Innopharma Education.

## Monitoring & Review

The implementation of this policy will be monitored and reported to the Academic Council.

This policy will be reviewed before each semester for accuracy and any updates in policy.

## Resources

- [Innopharma Education QA Manual](#)
- [NAIN Generative AI Guidelines for Educators, 2023](#),
- [NAIN Academic Integrity Guidelines 2021](#).
- [Generative AI in Higher Education in Teaching & Learning: Policy Framework. HEA, 2025.](#)

- [Generative AI in Higher Education in Teaching & Learning: Principles for Ethical AI Adoption. HEA, 2025.](#)

### **8.9.2 Appendix to Artificial Intelligence Assessment Scale (AIAS)**

Lecturers should make learners aware of the following whenever they are using AI tools:

- **Verification of AI Output:** AI tools are known to hallucinate; they can provide false or misleading information. Learners should check and verify the output to determine if it is correct.
- **Copyright Concerns:** AI tools are also known to return copyrighted material with certain prompts. This may inadvertently trigger a plagiarism check if not careful. It is advisable to keep the content the AI is assisting with to a minimum at all times.
- **Environmental Impact:** Be mindful of the greenhouse gas emissions from AI use and, where possible, favour energy-efficient tools and practices.
- **Ethical Considerations:** Learners should not act on AI-generated suggestions without first evaluating the ethical implications and potential consequences, as accountability for actions rests with the learner, not the AI.

## 8.10 Control Sheet

<b>Policy and Procedure Title</b>	Assessment and Standards
Responsible Officer(s)	Director of Academic Affairs
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	27 <sup>th</sup> August 2021
Supersedes	4
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 8.10.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Programmes	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Programmes	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	Minor Changes to reflect change in Job Titles	Director of Academic Programmes	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Section 8.4 (Paragraph 1 and 2) has been amended to make provisions supports for a temporary or an ongoing nature	Director of Academic Programmes	Academic Council
Version 4	27 <sup>th</sup> August 2021	Academic Misconduct Flow chart added to policy	Director of Academic Programmes	Academic Council
Version 5	14 <sup>th</sup> December 2021	Procedure for application of Reasonable Accommodation incorporated to policy	Director of Academic Affairs	Academic Council

## **9. Marks and Standards**

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### **9.1 Introduction**

This Marks and Standards Section complies with QQI's *Assessment and Standards, Revised 2013*, and specifically reflects QQI's Sectoral Conventions for Assessment.

The document reflects the College's policy in respect of Assessment and Standards and describes how this policy and associated assessment regulations and academic procedures are implemented for all College programmes leading to QQI awards.

The Marks and Standards section does not replace the Quality Assurance Manual or other policies and procedures relating to assessment but rather complements them.

Examiners must familiarise themselves with the Marks and Standards and the QA Manual and learners are strongly advised to become familiar with the essential procedures as they apply to their studies.

The document is subject to review and, from time to time, may be revised and updated with the approval of the Academic Council.

The assessment of learning is a complex process. In the context of College programmes, assessment of learners entails appropriately and experienced qualified persons making inferences about a learner's knowledge, skills or competence. This is always based on appropriate evidence, and evaluations are criterion-referenced, meaning they are made with reference to pre-defined standards.

The College is committed to operating assessment methods that:

- Are fair and consistent and align with relevant award standards determined by QQI.
- Are effective in measuring the students' attainment of the intended learning outcomes.
- Provide feedback to the learner enabling the learner to improve their performance.
- Contribute positively to the total learning experience and in particular to achieving the intended learning outcomes.
- Encourage creativity and originality where appropriate.

### **9.2 Approved Programme Schedule**

The Approved Programme Schedule defines the programme structure approved at validation. It details, for each stage, the modules, and combinations thereof, validated by QQI for that programme.

In the context of Marks and Standards, the Schedule shows the credits, total learner effort and weighting of each element of assessment, for each module. It will also include any special conditions of validation.

## **9.3 Precepts for Assessment**

The fundamental precepts for assessment are:

### **9.3.1 Learners**

Learners are responsible for:

- Demonstrating their achievement of the learning outcomes.
- Undertaking assessment in a fair and honest manner.

### **9.3.2 Assessment methods:**

- Support credible evaluations of the achievement of learning outcomes.
- Support effective teaching and learning.
- Are regularly reviewed and improved.
- Are valid, fit for purpose and reliable.
- Incorporate reasonable accommodations.

### **9.3.3 Assessment processes:**

- Are transparent and easily accessed by learners and other stakeholders.
- Are clearly communicated to learners within a programme.
- Are equitable and reflect QQI's guidelines.
- Are subject to internal moderation and external authentication.
- Include procedures to facilitate learners seeking a recheck, review or appeal of an assessment decision.

## **9.4 Principles of Assessment**

The College manages its assessment processes based on the precepts above and applies the following principles:

- Assessment is an integral part of programme design and is constructively aligned with the programme/module learning outcomes.
- Assessment opportunities support standards based on learning outcomes.
- Assessment is fit for purpose, authentic, relevant and varied.
- There are clear and consistent assessment criteria prepared by the examiner and these are provided to the learner at the time the assignment is set.
- Assessment is transparent.
- Assessment is valid, reliable and free from bias.
- The assessment framework facilitates the learner's learning and informs and supports learner progression.
- The assessment process is inclusive and equitable.
- Learners are provided with opportunities to demonstrate the extent to which they have achieved the programme learning outcomes.
- Learners are provided with feedback on assessment that is timely and promotes learning and facilitates improvement.

- The management of assessment is efficient, especially regarding the amount and timing of assessments, taking into account learner workloads and allows time for learner reflection.
- The processes for appeals are straightforward, clearly communicated and executed in an efficient and timely manner.
- The staff development policy and strategy supports the College's policy to ensure that all staff involved in the assessment of learners are competent to undertake their responsibilities.

## 9.5 Responsibilities for Assessment

### 9.5.1 The Academic Council

The Academic Council has overall formal responsibility for formative and summative assessment. These regulations are subject to the approval of the Academic Council. The College's Assessment Strategy is subject to the approval of the Academic Council.

The Examination Board has the final decision regarding assessment results. The Academic Council is responsible for monitoring the overall assessment process and ensuring issues are addressed and good practice is sustained. The Academic Council receives and reviews the minutes of the Examination Boards, the Examinations Reports, which contains details on any trends or anomalies in assessment, External Examiners Reports, Progression and Retention Report and Annual Programme Monitoring Reports and other such reports or audits that it deems necessary to discharge its responsibilities for summative assessment.

The Academic Council approves External Examiner nominations for appointment by the College.

### 9.5.2 Director of Academic Affairs

The Director of Academic Affairs has executive responsibility for the overall management of assessment and conduct of examinations and is tasked with ensuring the effective implementation of policies and procedures approved by the Academic Council.

The Director of Academic Affairs is responsible for ensuring all learners are properly registered for the examinations and resit examinations as appropriate and ensuring that processes covering reasonable accommodation, mitigating circumstances, academic misconduct and appeals are implemented.

The Director of Academic Affairs office is responsible for handling, managing and recording assessment data and compiling and maintaining the Examination Board broadsheets.

The instruction for 'Regulations for the Management of Assessment and the Conduct of Examinations' includes:

- The organisation of examinations.
- Mechanisms to ensure security of assessment material, including examination papers and scripts.
- Arrangements for the archiving and retention of learner assessment data including, transcripts, the relevant curricula and such information as is required to facilitate the issue of a Diploma Supplement, subject to the College's Data Retention Schedule.

### 9.5.3 Director of Academic Programmes

The Director of Academic Programmes is responsible for the College's teaching, learning and assessment strategies that provide a framework within which programme and module

assessment strategies are developed and to ensure that these strategies are current and informed by best practice.

The Director of Academic Programmes is responsible for ensuring that assessment is conducted within the QA Framework.

The Director of Academic Programmes is responsible for ensuring the Examiners Meetings and the Examination Boards are conducted in accordance with these regulations.

#### **9.5.4 Head of Faculty**

The Head of Faculty has overall responsibility for managing programme level assessment. This includes the development of the programme assessment strategy prior to validation, the implementation of that strategy by ensuring academic staff are assessing modules in accordance with the Approved Programme Schedule; and ensuring that academic staff fulfil their obligations in respect of marking and providing feedback to learners.

The Head of Faculty is responsible for the monitoring and analysis of learner performance to initiate enhancement activities and for liaising with external examiners to facilitate improvement.

#### **9.5.5 Programme Leads**

Programme Leads are responsible for consulting with the teaching and assessment team to ensure coordination of all module assessment strategies. It is their role to ensure that the module assessment is aligned with the overall programme assessment strategy, to ensure the teaching team select appropriate assessment instruments to assess the learner's achievement of the learning outcomes and to determine strategies for reassessment. The teaching team is also responsible for ensuring that the policy and procedures governing assessment are properly observed, such as security of examination material and responding to external examiners

The Programme Lead is also responsible for approval of draft examination papers, or other major elements of summative assessment, before being forwarded to the external examiner, for review.

#### **9.5.6 Internal Examiners**

The role and responsibilities of internal examiners is as follows:

- Submit draft examination papers/assessment briefs for 100% CA modules, together with appropriate marking schemes and worked solutions to numerical questions involving quantitative data, to the appropriate programme lead for review.
- Following approval by the programme lead, to forward the draft assessments and associated documentation to the External Examiner(s), in good time.
- Take account of all suggestions, criticisms, or amendments proposed by the External Examiner(s).
- Submit examination papers and marking schemes, as approved by the External Examiner(s), to the Director of Academic Programmes, or to the person nominated thereby for this purpose.
- Retain all examination material in a secure manner and ensure that all communications in relations to examinations by telephone, email, are consistent with GDPR guidelines.
- Upload their results for all exam components to the Learner Management System (LMS).

- Participate in the post assessment moderation process with colleagues by making available a sample of assessments to a colleague for review.
- Make available all examination and assessment material for scrutiny as required by the External Examiner(s).
- Consult with the External Examiner(s) prior to the meeting of the Examination Board, and to agree the marks proposed to be awarded.
- Attend all meetings in relation to examination process and the meeting of the Examination Board.
- Be available to meet with learners, either in person or on-line, by appointment to discuss assessment performance.
- Participate as required in the Review/Recheck process.

Internal Examiners are normally required to meet, as a group, in the days prior to the Examination Board to review and discuss their findings; ensure that they are accurate; and prepare the draft broadsheet of results for presentation to the Examination Board.

## 9.6        External Examiner Policy

The College appoints External Examiners to assure standards, to enhance teaching, learning and assessment and to support programme development. See section 8.2 [External Examiner Policy](#)

## 9.7        Learners

Learners must familiarise themselves with:

- Assessment schedule for their programme.
- Penalties for work submitted late.
- Procedures for seeking a CA deadline extension.
- Assessment criteria used to mark submitted work.
- Guidelines for referencing.
- Plagiarism Policy.

Learners will be briefed on their responsibilities during induction and have access to the relevant information via the VLE/Website throughout their studies. This communication will be managed by the relevant Programme Lead.

Furthermore, learners must:

- Ensure that they are correctly registered on programmes.
- Ensure that they are correctly registered for examinations.
- Attend examinations, class tests, practical etc.
- Complete all CA work as required.
- Notify the Director of Academic Programmes (or their nominee) in writing of reasons for absence from class tests, practical etc. (supplying relevant documentary evidence).

- Notify the Director of Academic Programmes (or their nominee) in writing of compassionate circumstances that have impeded their examination/assessment performance.
- Comply with any programme board requirements for (i) receipting work, (ii) seeking deadline extensions, and (iii) referencing.
- Retain a copy of submitted work.

It is the responsibility of learners to check the date, time and venue for each of their examinations and learners must adhere to Examination Guidelines.

Any candidate who fails to attend for an examination, who arrives late, or who leaves early for any reason other than they have completed the examination, is required to send a written explanation to the relevant Programme Lead and as appropriate complete the Examinations Deferral Form.

## 9.8 Conflict of Interest Policy

All persons involved in the examination/assessment process must be aware of the College's Conflict of Interest policy. See Section 15 [Conflict of Interest Policy](#)

## 9.9 Registration for Assessment

Learners who are registered with the College are automatically registered for the examination for the programme on which they are enrolled. Maximum registration periods for a programme are normally:

Programme Duration/Minimum Registration Period (Years)	FT/PT	ECTS	Maximum Registration Period (Years)
2	FT	120	5
3	FT	180	5
4/5	PT	180	8
4	FT	240	6
5/6	PT	240	9
1	FT	60/90	4
2	PT	60/90	5

Figure 8.1: Registration Period (Note: exceptions apply for learners with exemptions)

Where a learner's registration period expires, including periods of deferral, they are notified and formally withdrawn at the next Examination Board for that programme. Where a learner has failed a module, they will be automatically registered for the next available sitting until they have exhausted sittings (maximum of four attempts), unless formal arrangements have been made under the policy for Reasonable Accommodation.

## 9.10 Deferrals

A learner may be granted a deferral of an examination, a module, or a stage under the Reasonable Accommodation Policy. In cases where a deferral has been granted, the learner will be recorded as deferred for that examination and the subsequent attempt will be

treated as a first sitting for the purposes of progression and award calculations. Any marks already awarded for completed module components in that module will be carried forward.

## **9.11 Policy for Reasonable Accommodation and Additional Supports**

The College is committed to facilitating fair, equitable and accessible participation in learning and assessment for learners with disabilities, learning differences, medical conditions or temporary support needs, and will make Reasonable Accommodations and provide Additional Supports for learners as far as is reasonably practicable. Details of the relevant policy are included in Section 8.4 [Policy for Reasonable Accommodation and Additional Supports](#).

## **9.12 Mitigating Circumstances**

Learners should seek advice and support offered by the College via the Learner Support Coordinator in circumstances where an assessment is missed, or their performance may have been adversely affected due to a health or compassionate grounds. In the case of missing an assignment deadline, the learner must notify the lecturer who will direct them to the Programme Lead who may arrange for an extension or advise the learner to apply for consideration of mitigating circumstances. Where a learner has not communicated with the College staff a late penalty will be applied.

In the case of an examination where a learner knows in advance that they are going to miss the examination, they must apply to the Office of the Director of Academic Affairs for authorised absence from the examination via a formal application for the consideration of mitigating circumstances.

In the case of missing an examination due to an unforeseen circumstance or being taken ill during an examination, then the learner must apply for the consideration of mitigating circumstances as soon as they are well enough to return to College. In cases of an ongoing issue, a learner may apply for a deferral or an alternative assessment or additional supports in cases involving temporary injury or disability. An alternative assessment will be aligned to the same learning outcomes and be of the same standard as the original assessment.

### **9.12.1 Application for Consideration of Mitigating Circumstances**

To apply for consideration the learner is required to fill out the Request for Mitigation Form available from the Examinations Office and submit it to that office with all relevant paperwork. The form is screened for eligibility by the Examinations Office and if it is deemed valid will be passed to the Director of Academic Affairs for consideration, prior to the appropriate Examination Board. Where there is a suite of examinations at the same time, a learner may not select to take some and present mitigation for others, unless there were special circumstances. Where a learner is taken ill or unforeseen circumstances arise just before or during an examination the invigilator should be notified, and the circumstance recorded in the Invigilator's Report. The learner may fill out the Mitigating Circumstances Form on their return. In all cases of a medical nature, medical certification will be required – such certification must be issued by recognised practitioners and dated at the time of the illness and not be retrospective. Where a learner presents at an examination, they have deemed themselves fit to take that examination. The Director of Academic Affairs Director of Academic Programmes and Head of Faculty will meet to consider those applications that

the Director of Academic Affairs has approved for the consideration of mitigating circumstances.

They determine:

- If the circumstances presented were exceptional and may have affected performance.
- The degree to which the performance may have been affected.
- The actions taken to mitigate the effect on performance.

The typical outcomes where a case is upheld are:

- The learner is allowed to defer the examination.
- Penalties for late submission may be lifted or reduced.
- Consideration will be made in respect of borderline cases, where there is other evidence the learning outcomes have been achieved.

In all cases, the nature of the mitigating circumstances is confidential, and the Examination Board is provided with only sufficient information to discharge its duty. The Programme Lead will note the decision and liaises with the Office of the Director of Academic Affairs to update the LMS. All applications for reasonable accommodations and mitigating circumstances are recorded and an overall, anonymised, analysis is included in the Director of Academic Affairs Examination Report to the Academic Council.

Deferrals are not indefinite and learners who defer an examination must take that examination at the next available sitting or apply to renew the deferral. The learner's registration status must also be taken into consideration.

#### **9.12.2 Extensions and Late Submission of Assessed Coursework**

A learner may apply for an extension to the deadline for an element of continuous assessment under the College's policy for reasonable accommodation. Extensions are considered only where a written application is submitted to the lecturer in advance of the deadline with supporting evidence as to why the extension is warranted (e.g. medical certificate). Extensions to coursework may be approved by the Programme Lead who will consult with the Head of Faculty as appropriate. Technical problems, such as computer failure or viruses, are not deemed legitimate reasons for late submission or non-submission of work. The only exception is if the College's system for submission of coursework is not operating and in those cases a report will be sent from IT to the Office of the Director of Academic Affairs and Head of Faculty to ensure learners are not disadvantaged.

If an extension has not been granted and work is submitted after the extended due date, late submission of assignments is penalised as follows:

- 10% penalty for assignments submitted within three days of the submission deadline. (e.g. a grade of 50% would become  $(50*0.9) = 45.0\%$ )
- 20% penalty for assignments submitted within one week (seven days) of the submission deadline. (e.g. a grade of 60% would become  $(60*0.8) = 48.0\%$ )

Later submissions, i.e. after one week, will not normally be accepted. Learners are expected to retain a copy of all submitted coursework.

#### **9.13 Preparation and Marking of Assessment**

The responsibility for the assessment of learners is within the Faculty.

- The Module Leader is responsible for managing assessment processes at the module level supported by the Programme Lead and Head of Faculty.
- The External Examiner provides public reassurance as they review the assessment process and safeguard standards.

The Head of Faculty and Director of Academic Programmes are responsible for the appointment of appropriately qualified Module Leaders and recommending appropriately qualified External Examiners for appointment by the Academic Council and/or awarding bodies.

Internal Examiners should prepare draft examination papers/assessment briefs for 100% CA modules, together with appropriate marking schemes and worked solutions to numerical questions involving quantitative data and submit these to the appropriate programme lead for review. The Programme Lead should consult with the internal examiner, in a collegiate manner, with a view to arriving at an agreed draft, which will be submitted to the external examiner. In the event of a disagreement, the Director of Academic Programmes will be asked to intervene, and their decision is final.

### **9.13.1 Marking Principles**

The College uses a criterion referenced marking system. Each module is marked by the Internal Examiner(s) against a set of agreed criteria informed by the appropriate awards standards and set out in a published marking scheme. Marks are awarded as specified in the appropriate Approved Programme Schedule, relating to the validated programme, as published in the Student Handbook and are provisional until they have been verified and agreed at the Examination Board which ultimately makes decisions regarding awards.

Marks are awarded on the basis of an individual's performance. Assessment determines a learner's individual achievements of the intended learning outcomes. Marks are expressed as percentages.

To ensure validity and reliability of assessment staff undertake staff development activities in teaching and assessment. Strategies to support staff in the assessment process include peer review of both teaching and assessment. Moderation and Double-blind marking support these development activities.

### **9.13.2 Marking Processes**

For individual, high-stakes assessment instruments the Module Leader must provide a grading scheme to the External Examiner prior to the approval of the assessment task. All assessment instruments are marked according to the agreed grading scheme and aligned to the relevant grade criteria. Marks are included on the assignment or script and are clearly annotated.

### **9.13.3 Feedback**

For assessment to be effective 'as and for' learning, formative, timely and personalised feedback is essential. Feedback provides a transparent evaluation of the learner's performance regarding the assessment and is benchmarked against published criteria. Internal Examiners:

- Must ensure that they supply considered, personalised and formative feedback.
- Must supply feedback in a timely manner after the agreed submission date unless otherwise agreed with the Programme Lead and learners are notified.
- May use generic feedback to highlight common successes and problems; this should be delivered as soon as marking is complete and in a classroom setting.

The Regional Programme Administration Team support the Internal Examiners by:

- Facilitating communication and distribution of examination material between examiners, moderators and External Examiners where appropriate.
- Monitoring the submission of coursework as part of the learner success and academic retention strategy and support the Internal Examiners.

## 9.14      **Moderation and Double Marking**

### 9.14.1    **Policy**

The College has developed processes to ensure that assessments are fair, consistent and as part of this it has developed a Policy for Moderation. See Section 8.5 [Policy for Moderation:](#)

### 9.14.2    **Procedure for Post Examination Moderation**

The programme team takes a random sample of the grades for moderation. The sample chosen will include at least one example of work from the percentage bands, 30-39, 40-49; 50-59; 60-69; 70-79; Above 80. All borderline grades shall also be included.

The moderator reviews the application of the marking scheme against the learner effort by the original marker to ensure consistent and fair assessment. Variation in grading between the first examiner and the moderator is discussed between the two in order to reach agreement. In some cases, it may be necessary to engage the Director of Academic Programmes or the Programme Lead in the discussion, to determine the final grade that will be presented to the Examination Board.

The Director of Academic Programmes has the final decision on moderation of a grade, subject to the Board of Examiners.

Where double marking is required such as in postgraduate projects or dissertations, the College uses double-blind marking to ensure reliability. The Internal Examiners mark independently of each other and fill out individual feedback sheets. On completion of the process the markers consult and arrive at an agreed mark. Where agreement cannot be reached, or the individual marks differ by more than 10%, the Programme Lead will work with the Internal Examiners to facilitate resolution.

Procedures for the management of assessment, including preparing assignment specifications and communicating provisional results can be found in the guidelines for Regulations for the Management of Assessment and the Conduct of Examinations.

## 9.15      **Responsibilities for Preparation and Marking**

### 9.15.1    **Module Leader's Responsibilities**

The lecturer responsible for teaching and assessing a module is termed Module Leader for the purposes of the academic administration of a module. Normally there is one lecturer per module but where a module has more than one lecturer, then one lecturer is assigned responsibility for coordinating the assessment and other academic administrative functions. The Module Leader is responsible for:

- The preparation and coordination of all assessment instruments for that module.
- Consulting with the teaching team in advance of the commencement of teaching, ensuring the preparation of examination papers in good time and ensuring the paper is moderated before it is submitted to the external examiner.

- The security of the examination paper as it is prepared and submitted to the Director of Academic Affairs office.
- Ensuring the assessment material is marked and the provisional results are uploaded to the LMS.
- Ensuring the learners are supplied with feedback within the published timescales and that scripts and assignments are sent to the Office of the Director of Academic Affairs for verification.
- Liaising with the External Examiner regarding content, learning outcomes and standards.
- Ensuring that they themselves are familiar with all assessment policies and procedures and be able to advise learners regarding reasonable accommodation.
- Taking account of feedback from the External Examiner.
- Monitoring assessment trends, completing a Module Review and Development Form (Ref: Associated Form 2) and feeding into the appropriate Programme Board.
- Ensuring that the assessment is managed in accordance with instructions laid out in the Regulations for the Management of Assessment and the Conduct of Examinations.

#### **9.15.2 Material for External Examiner**

All examinable material is available to external examiners. However, as a matter of procedure, a sample of at least 10% of assessment material is sent to the External Examiner prior to the Examination Board in good time to allow the examiner to respond in advance of the Examination Board.

Criteria for the selection of material to be sent to External Examiner:

- The sample should contain examples of all assessment instruments contributing to the final assessment mark for that module.
- The sample should represent at least 10% of the cohort, but no fewer than 3 learners' work.
- The sample should include a sample of failed work and borderline cases with examples from the middle of each classification.

All learner work that contributes to the overall final assessment should be available on request to the External Examiner. Where practical demonstrations are assessed, and where they represent a significant component (i.e. >25%) of a module then a representative sample of these may be recorded.

#### **9.15.3 Broadsheets**

All marks are recorded in the LMS and presented to the Examination Board on formal broadsheets.

- The Programme Lead is responsible for checking that all module marks have been properly uploaded to the LMS in advance of the Internal Examination Board.
- The Programme Administration Team provides an additional final verification of the inputted data prior to the submission of the module data to the Office of the Director of Academic Affairs via the LMS.
- The Office of the Director of Academic Affairs is responsible for:
  - Compiling and maintaining the Examination Board broadsheets.

- Ensuring that the system is populated with all registered learners for that module and that the broadsheet includes the module calculation as per the appropriate Approved Programme Schedule.
- Updating the broadsheet to reflect agreed outcomes from the Examination Board.

## 9.16 Examination Boards

### 9.16.1 Internal Examiners Meeting

An Internal Examiners Meeting is convened at the completion of every stage of a programme. Results are presented to this meeting, verified by the programme Lead. The purpose of the meeting is to give the Internal Examiners an opportunity to:

- Review and discuss their findings.
- Consider overall trends in module marks, averages etc.
- Review the overall profile of learners.
- Ensure that the results presented are complete and accurate.
- Prepare the draft broadsheet of results for presentation to the Examination Board.

The Internal Examiners Meeting may influence, but not compel, assessors to review their assessment findings. Marks are not changed at this meeting unless they are factually incorrect. Where there may be, for example, a module with a grade distribution which is persistently and significantly inconsistent with others, it will be investigated and if mitigation is required this will be discussed with the Examining Team and External Examiner and a solution proposed if appropriate. Any adjustments proposed are recommended to the Examination Board. No changes to marks are made at the Internal Examiners Meeting. This meeting is chaired by the Head of Faculty or Director of Academic Programmes. An External Examiner may attend this meeting, by invitation, or at their own request. This meeting is minuted and the minutes made available to the External Examiners and Examination Board as required.

### 9.16.2 Examination Board

The Examination Board is convened at the completion of every stage in a programme to consider all assessment findings, including the findings of repeat/supplemental assessment and to determine assessment results for each of the learners presented.

The Examination Board has the final decision regarding assessment results.

Assessment results presented to the Board have been marked, verified and samples seen by the External Examiner. The Examination Board considers overall trends in module outcomes and then considers each learner's profile to determine progression or an award.

The Examination Board is chaired by the Head of Faculty or Director of Academic Programmes and follows the Internal Examiners Meeting. It is a formal board convened to make determinations regarding progression or awards.

The Examination Board considers overall trends in module marks, averages, etc. before reviewing individual performance. Where issues, such as anomalies or evidence of significant systematic bias, raised at the Internal Examiners meeting have been addressed and when the Examination Board is satisfied that there are no further issues then the learners' individual performances are considered.

The Academic Council receives minutes of the Examination Boards, External Examiner Reports and receives an Examination Report from the office of the Director of Academic Affairs.

### **9.16.3 Preparation for an Examination Board**

The dates of the Examination Board are agreed by consultation with the External Examiners and communicated to all members in good time.

The Examination Board is supplied with:

- The programme assessment strategy and Approved Programme Schedule.
- A draft broadsheet of results, complete with all verified marks.
- A short report on trends in module marks.

### **9.16.4 Examination Board, Frequency of Meetings, Membership and Quorum**

The Examination Board comprises:

- Chair: Head of Faculty or Director of Academic Programmes or nominee as required
- Only (and all) Internal Examiners who have a role in the assessment of the programme
- External Examiners
- Programme Lead and Head of Faculty.

To be quorate there should be:

- A sufficient number of the programme's assessors present to deliberate competently upon the assessment findings presented.
- At least one External Examiner present where awards are to be decided.

The Chair will determine if the Examination Board is quorate and if not, the Examination Board must be reconvened.

There may be rare and exceptional circumstances where an External Examiner is unable to attend the Examination Board. Arrangements will be made for virtual attendance. In exceptional cases where they have examined the assessment findings and agree with the recommendations recorded on the draft broadsheet of results and still cannot attend, they may provide a written report to be read out at the Examination Board by the Director of Academic Programmes.

Where an External Examiner becomes incapacitated during their term of office, or unable to attend the Examination Board owing to unforeseen circumstances, a replacement External Examiner will be appointed.

### **9.16.5 Post Examination Board**

On completion of the Examination Board, the broadsheet is signed by the members of the Examination Board and retained by the College in compliance with the College's Data Protection and Record Management Policy. The office of Director of Academic Affairs is responsible for maintaining these records.

The LMS is updated to reflect the outcome of the Examination Board. The signed broadsheets are sent to QQI by the Director of Academic Affairs office.

Transcripts are issued from the LMS when formally released by the Director of Academic Programmes. The Director of Academic Affairs signs the academic transcripts and the Director of Academic Programmes oversees the publication of results on the College Innoskills (Moodle) and by post.

A preliminary report on the examination process, including minutes of the Examination Boards and External Examiners Reports, where available shall be sent to the Academic Council as soon as practicable after the examination board meetings.

A more comprehensive report, as detailed in section 14 of this Manual is furnished to the Academic Council at the designated time.

The minutes of the Examination Meeting are retained by the Office of the Director of Academic Affairs and subject to the College's Data Protection and Record Management Policy.

#### **9.16.6 Confidentiality**

The proceedings and deliberations of meetings of Boards of Examiners are strictly confidential. Excepting legitimate reporting requirements, no person who has attended or observed a meeting of a board of examiners may disclose to any other person a decision of the board or any document, information or opinion considered, conveyed or expressed at the meeting.

#### **9.16.7 Examination Board Decisions – Assessment Regulations**

The Examination Board is formal and deliberative. Decisions regarding progression and awards are made at the Examination Board in the presence of External Examiners. The Examination Board should satisfy itself that the learners' work has been appropriately marked and classified, that the prescribed learning outcomes have been attained and that the assessment regulations as described in this document are applied alongside any special regulations as recorded in the Approved Programme Schedule.

Where there are decisions to be made requiring academic judgement such as borderline cases for awards or, in rare cases, the readjustment of a module mark to mitigate a systematic trend that may indicate a bias (positive or negative) then the Chair attempts to arrive at a decision by consensus. Where a consensus cannot be reached, the majority ruling is taken. No one member of the Examination Board has more influence than another.

Where there is disagreement, the minutes should reflect the deliberation and the outcome without identifying those involved.

In the unusual event that an adjustment has had to be made to compensate for a significant systematic error, a supporting rationale is to be recorded in the minutes so that the Programme Board and the Academic Council are informed for the purpose of monitoring and follow-up.

All trends are reflected in the office of the Director of Academic Affairs' Examination Report to monitor trends in retention, progression and awards and benchmarked against other providers where the data is available for the purposes of comparison and vigilance against any tendency toward grade inflation.

#### **9.16.8 Examination Board Decisions Regarding Progression**

Each assessment and module is marked as a percentage. The pass mark on higher education (i.e. Level 6 – 8) programmes for modules is 40%, unless otherwise stated in the Approved Programme Schedule or Programme Specification.

The pass mark on further education programmes (FET) for modules is 50%.

A pass in a module is a positive statement of achievement of the stated Minimum Intended Module Learning Outcomes. A learner may not reattempt a module they have passed with the intention of achieving a better mark.

#### **9.16.9 Stage Progression**

A percentage point average system is used, this is defined as the credit- weighted mean of the percentage values for the constituent modules. The percentage point value is the same

as percentage except for marks below 35 where it is zero. A candidate must pass all modules in a stage to progress to the next stage of the programme with the following exceptions:

- a) Where exemption from part of the programme has been agreed on admission.
- b) Where the Examination Board permits a pass by compensation, higher education (Level 6-8) only.
- c) Where in exceptional circumstances a candidate is permitted to progress carrying failed modules (credit deficit) to be passed during the subsequent stage.

Where a candidate has failed or is just below pass in each of a string of independent modules in the same stage, the results are reinforced and compensation or trailing with credit deficit is not appropriate.

#### **9.16.10 Pass by Compensation (Higher Education (Level 6-8) only)**

Where a learner has marginally failed to demonstrate attainment of the minimum intended module learning outcomes, a pass by compensation may be allowed subject to the following conditions:

- a) The learner has been assessed for all stage modules and no module in the stage has been failed outright (i.e. <35%).
- b) The results of all modules in the stage are from first attempts, in the case of full-time learners, the results are from the same sitting.
- c) Up to one third of the credit for the stage: e.g. 20 credits in a 60-credit stage, can be compensated.
- d) To apply the compensation rule, the stage aggregate of credit-weighted excesses of percentage marks (>40) is greater than or equal to twice the stage aggregate of credit-weighted deficits of marks (<40).

Compensation may be applied only to enable a learner to pass a stage (at the award stage, a learner who passes by compensation remains eligible for honours, etc.).

Compensation does not change the result of the modules passed in that way. When reporting module passes by compensation, the actual result is returned, e.g. 37%, along with an indication that the module pass has been granted by compensation. Pass by compensation does not preclude an honours award.

#### **9.16.11 Progression with Credit Deficit**

In exceptional circumstances a candidate may be permitted to progress to the next stage of a programme carrying a failed module(s). This is subject to any special regulations for that programme reflected in the Approved Programme Schedule or Programme Specification, and is considered on a case by case basis using the following criteria:

- a) The failed modules are no more than 16% of a stage (10 ECTS of a typical 60 ECTS stage).
- b) The candidate has demonstrated, as determined by the Examination Board, an otherwise strong performance across the stage that would indicate a reasonable expectation of achieving the minimum intended learning outcomes for the failed module in addition to the workload in the subsequent stage.

Where this is allowed, the candidate must retrieve the failed module(s) within the next stage. The additional workload cannot be used as mitigation for further accommodation.

#### **9.16.12 Reassessment**

Where a candidate fails to pass an examination or assessment component the following may apply:

- a) The candidate is required to re-sit the failed component of the module. The marks for all other complete components are carried forward.
- b) The candidate is required to retake the full module; this includes attendance and all coursework. Previous marks awarded for completed components are not carried forward.
- c) The candidate is required to re-sit stage, i.e. resit certain elements of the stage, previous marks for completed components awarded are carried forward at the discretion of the Examination Board which will also determine the attendance requirements.
- d) The candidate is required to repeat stage, i.e. repeat the full stage of a programme with attendance; previous marks awarded in that stage are not carried forward.

There is a maximum of four attempts for a module, i.e. two iterations of the module. Where a candidate does not pass a core module at the last attempt they are withdrawn and deemed to have failed the programme. Where a candidate has exhausted sittings on an elective module the module may be substituted with an alternative elective.

Reassessment instruments are prepared, by the examiner, in advance of the Examination Board and re-assessments are not the same as the original assessment.

When a candidate has passed all of the modules in a stage the Examination Board allows them to progress to the next stage or at the final stage determines an award.

Where a candidate has demonstrated extremely poor performance by failing the majority of modules with low marks the Examination Board may decide, at its discretion, to terminate the registration of the candidate and remove them from the programme. In this case, the candidate is deemed to have failed the programme. The Examination Board should ensure consistent treatment of all candidates in these cases.

#### **9.16.13 Suspension and Withdrawals**

A candidate may be suspended or withdrawn from a programme for disciplinary reasons such as Severe Academic Misconduct or a penalty determined by the Student Disciplinary Committee. A candidate may elect to withdraw from a programme at any time.

#### **9.16.14 Examination Board Decisions Regarding Awards**

The Examination Board reviews the overall profile of the candidates to determine the classification of an award. All major awards which have a volume of at least 60 ECTS are classified.

#### **QQI's Revised Sectoral Convention 3 on Determination of Award Classification 2022:**

Calculation of the award classification shall be based on the credit-weighted mean value of the allowable grades (i.e. those that contribute to the classification) for modules of a specific programme which has been validated by QQI or by a recognised institution for the purpose of making the award.

A learner may claim exemption from a module whose grade would otherwise contribute to the award classification, provided that he or she can demonstrate the attainment of the relevant knowledge, skill and competence. In cases where the attainment cannot be graded fairly and consistently, only an unclassified award shall be available.

Procedures for exemption and/or pass by compensation shall not compromise national standards for awards.

When a module whose grade is designed to contribute to the determination of an award classification is failed on the first attempt, the maximum achievable grade shall be capped at Pass for any and all subsequent attempts and the capped grade shall be used in the determination of the award classification which is not capped at Pass.

Classification is determined by the appropriate Examination Board and is informed by the award calculation. A borderline zone is determined around classification boundaries to allay the effects of measurement uncertainty and to ensure that the award is based on an academic decision and not merely on computation. Borderline is defined as within 1% of a classification boundary, unless otherwise stated in the Approved Programme Schedule or Programme Specification.

In such cases the Examination Board should discuss the merits of the candidate and whether the mark accurately reflects the candidate's achievement. A candidate may drop a classification as well as be promoted, in each case the rationale for promotion or demotion is documented. When the Examination Board decision has been made to change a mark, the broadsheet is adjusted by the Office of the Director of Academic Affairs to reflect that decision.

Criteria to assist in determining the outcome of borderline cases for undergraduates:

- Within 1% (percentage point average) of the classification boundary.
- Demonstrate continued improvement over the programme in respect of the Minimum Intended Programme Learning Outcomes.
- Have the greater number of modules (adjusted for credit weighting if appropriate) in the higher classification.

In some very exceptional circumstances, and with the agreement of the Chair and External Examiners, a learner may be called for a viva voce. The learner must be given adequate notice and be informed of the learning outcomes to be determined. The viva voce is undertaken by the Module Leader and one External Examiner. A nominee of the Director of Academic Affairs chairs the viva voce.

#### **9.16.15 Percentage Point Values (PPA) and Corresponding Award Classifications Higher Education**

Table 8.1: Percentage Point Values and Corresponding Award Classifications

<b>Classification Higher Certificates (Level 6) and Ordinary Bachelor's Degrees (Level 7) awards</b>	<b>Percentage Point Value (PPA) boundary values</b>	<b>Description</b>
Distinction	70%	Indicative descriptor: Achievement includes that required for a Pass and in most respects is significantly and consistently beyond this
Merit Grade 1	60%	Indicative descriptor: Achievement includes that required for a Pass and in many respects is significantly beyond this

Merit Grade 2	50%	Indicative descriptor: Attains all the minimum intended programme learning outcomes
Pass	40%	Definitive descriptor: Attains all the minimum intended programme learning outcomes

<b>Bachelor's Degrees (Level 8) awards</b>	<b>PPA Boundary Values</b>	<b>Description</b>
First Class Honours	70%	Indicative descriptor: Achievement includes that required for a Pass and in most respects is significantly and consistently beyond this
Second Class Honours	60%	Indicative descriptor: Achievement includes that required for a Pass and in many respects is significantly beyond this
Second Class Honours Grade 2	50%	Indicative descriptor: Attains all the minimum intended programme learning outcomes
Pass	40%	Definitive descriptor: Attains all the minimum intended programme learning outcomes

<b>Classification of Postgraduate Diploma (Level 9)</b>	<b>PPA Boundary Values</b>	<b>Description</b>
Distinction	70%	Indicative descriptor: Achievement includes that required for a Pass and in most respects is significantly and consistently beyond this
Merit	60%	Indicative descriptor: Achievement includes that required for a Pass and in many respects is significantly beyond this

Pass	40%	Definitive descriptor: Attains all the minimum intended programme learning outcomes
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Classification of Taught Master's Degrees (Level 9)	PPA Boundary Values	Description
First Class Honours	70%	Indicative descriptor: Achievement includes that required for a Pass and in most respects is significantly and consistently beyond this
Second Class Honours	60%	Indicative descriptor: Achievement includes that required for a Pass and in many respects is significantly beyond this
Pass	40%	Definitive descriptor: Attains all the minimum intended programme learning outcomes

## 9.17 Percentage Point Values (PPA) and Corresponding Award Classifications Further Education

Classification Further Education Certificates (Level 5)	Percentage Point Value (PPA) boundary values	Description
Distinction	80% +	Indicative descriptor: Achievement includes that required for a Pass and in most respects is significantly and consistently beyond this
Merit	65% - 79%	Indicative descriptor: Achievement includes that required for a Pass and in many respects is significantly beyond this
Pass	50% - 64%	Definitive descriptor: Attains all the minimum intended programme learning outcomes
Referred	Less than 50	Did not demonstrate the minimum intended learning outcomes

## 9.18 Embedded Awards

Where a learner is registered for an award and exits from that award before completing it, they may be made an alternative award subject to the following conditions:

- a) There is an embedded award validated for that programme.
- b) The learner has successfully completed all modules required for that award and accumulated sufficient ECTS in the modules of the embedded awards.

The award may be classified as outlined in Table 8.1 as appropriate.

This is only accessed by learners who enrol on a principal programme and exit early but have been assessed as having met the requirements for the lower NFQ level award.

## 9.19 Procedures for Reviewing an Examination Board Decision

The College procedures comprise a hierarchy of decision-making whereby the decision taken at any stage may be changed at the next proximate stage, without referral backward and in which the decision-making entity at any particular stage has full powers in relation to any decision brought before it.

### 9.19.1 Definitions

- QQI's Assessment and Standards defines a **Recheck** as '*the administrative operation of checking the recording and the combination of component scores for a module and/or stage'*
- QQI's Assessment and Standards defines a **Review** as '*the re-consideration of the assessment decision, either by the original assessor or by other competent persons*'. The College defines 'assessment decision' in this regard as referring to the decisions of an Examination Board. The College also allows the Director of Academic Affairs to initiate a review in relation to the examination process, where significant information comes to light following the examination cycle, that might have had a material impact on the process.
- The College defines an **Appeal** in this context as the re-consideration by the Appeal Board of the outcome of a review.

### 9.19.2 Procedure for Viewing Scripts

Recognising the ruling of the European Court of Justice (ECJ) that exam scripts constitute personal data, all learners are offered the opportunity to discuss their examination scripts with the internal examiner. This process takes place by appointment, not later than three working days after the date of the publication of results. The discussion may be conducted face-to-face or virtually and is designed to give the learner the opportunity to discuss with the examiner the rationale for the awarding of marks. Learners are encouraged to exercise this option before requesting a recheck or review.

Learners may not be accompanied and may not remove any examination material.

If the learner believes that there is an arithmetical error on the examination script, they should invoke the Recheck process.

### 9.19.3 Procedure for Seeking a Recheck

A candidate wishing to have the marks awarded for a particular module (or modules) re-examined should seek a recheck of the relevant module(s). A recheck is defined as the administrative operation of checking the recording and the combination of component scores for a module and/or stage.

Only a written request for a recheck made on the Learner recheck form; signed by the learner; and submitted to the Head of Assessment will be considered. The form is available on the VLE.

The candidate can supply details that they believe will help expedite the recheck. The College will complete all rechecks within five working days where recheck requests have been received by the Director of Academic Affairs (or their nominee) not later than five working days after the examination results have been published. The recheck will be coordinated by the appropriate Programme Lead and carried out by the internal examiner. The fee for a recheck shall be refunded in the event of a successful recheck. The Examinations Office will inform the candidate in writing of the outcome of the recheck. The Examinations Office will prepare an annual report on rechecks which will be reviewed by Academic Council.

#### **9.19.4 Procedures for Seeking a Review**

A candidate wishing to have the marks awarded for a particular module (or modules) re-examined should seek a review of the relevant module(s). The grounds on which a review may be sought are as follows:

A request for a review will only be considered on the following grounds:

1. Procedural irregularity: Where there is evidence of substantive irregularity in the conduct of the assessment process.
2. Extenuating circumstances –
  - a) A prior circumstance emerged of which the Examination Board was not aware.  
or
  - b) An extenuating circumstance of which the Examination Board was aware but had not considered because the submission was deemed too late.

Seeking a review disputing the academic judgment of the Examiners is not allowed.

The College will endeavour to complete all reviews within 10 working days where review requests have been received by the Head of Assessment not later than 10 working days after the examination results have been published.

1. Only a written request for a review made on the Learner Review form and signed by the person concerned will be considered. The form is available on the VLE.
2. The candidate must supply evidence in support of their request.
3. Formal processing of reviews of examination matters will be carried out having due regard to the schedule of meetings of the Academic Council and the annual conferring date.
4. The fee for a review shall be refunded in the event of a successful review.

The Director of Academic Affairs shall appoint a senior academic staff member, who was not involved in the decision under review, to act as chair and convenor of the Review Board.

The Review Board is constituted as follows:

- The Chair
- 2 experienced members of the lecturing staff, nominated by the Director of

Academic Affairs neither of whom participated in the original Examination Board Meeting.

- 1 chair of an Academic Council committee, who has not participated in the original Examination Board Meeting.
- A learner representative, normally a class rep from another cohort.

The Head of Assessment will act as Secretary to the Review Board.

The Review Board shall consider requests for review received and shall in the first instance decide whether a review should proceed. Where a review proceeds, the Review Board may request information, for example, from the Director of Academic Programmes or the Director of Academic Affairs Office to expedite the review. The relevant Programme Lead and the Office of the Director of Academic Affairs will compile the information necessary for the Review Board to complete its task. The relevant Programme Lead will be available to clarify any matters addressed to them by the review board with a view to assisting it in reaching a final resolution.

The Review Board shall consider the evidence presented to it and decide the outcome of the review. In carrying out a review, the Review Board may consult with such persons, as it deems appropriate. The Review Board may require that a re-marking of a script be undertaken by an alternate qualified examiner, who shall liaise with the extern examiner. In situations where a partner organisation has a role in the assessment process (e.g. work placements) the Review Board may consult with that partner organisation in reaching its conclusion.

All decisions of the Review Board will be by majority vote. In the event of a tie, the Chair will have a casting vote. The candidate and the Programme Lead will be informed by the Examinations Office in writing. A candidate dissatisfied with the outcome or conduct of a review process may appeal the decision of the Review Board.

The Examinations Office will prepare an annual report on reviews which will be reviewed by Academic Council.

#### **9.19.5 Procedures for Seeking an Appeal**

The candidate may appeal the outcome of a review within four working days following receipt of the decision of the review board. The appeal must be based on one or more of the following grounds and must include evidence backing up the claim:

1. The College did not follow an established procedure in the making of a decision.
2. Circumstances or information of which the original decision-making body was not aware when its decision was taken, and a valid, substantiated reason why that information was not made available by the *appellant* (the person making the appeal).
3. Evidence of substantive bias by one or more of the decision-makers in arriving at a decision.

The following exclusions *do not* constitute grounds for an appeal:

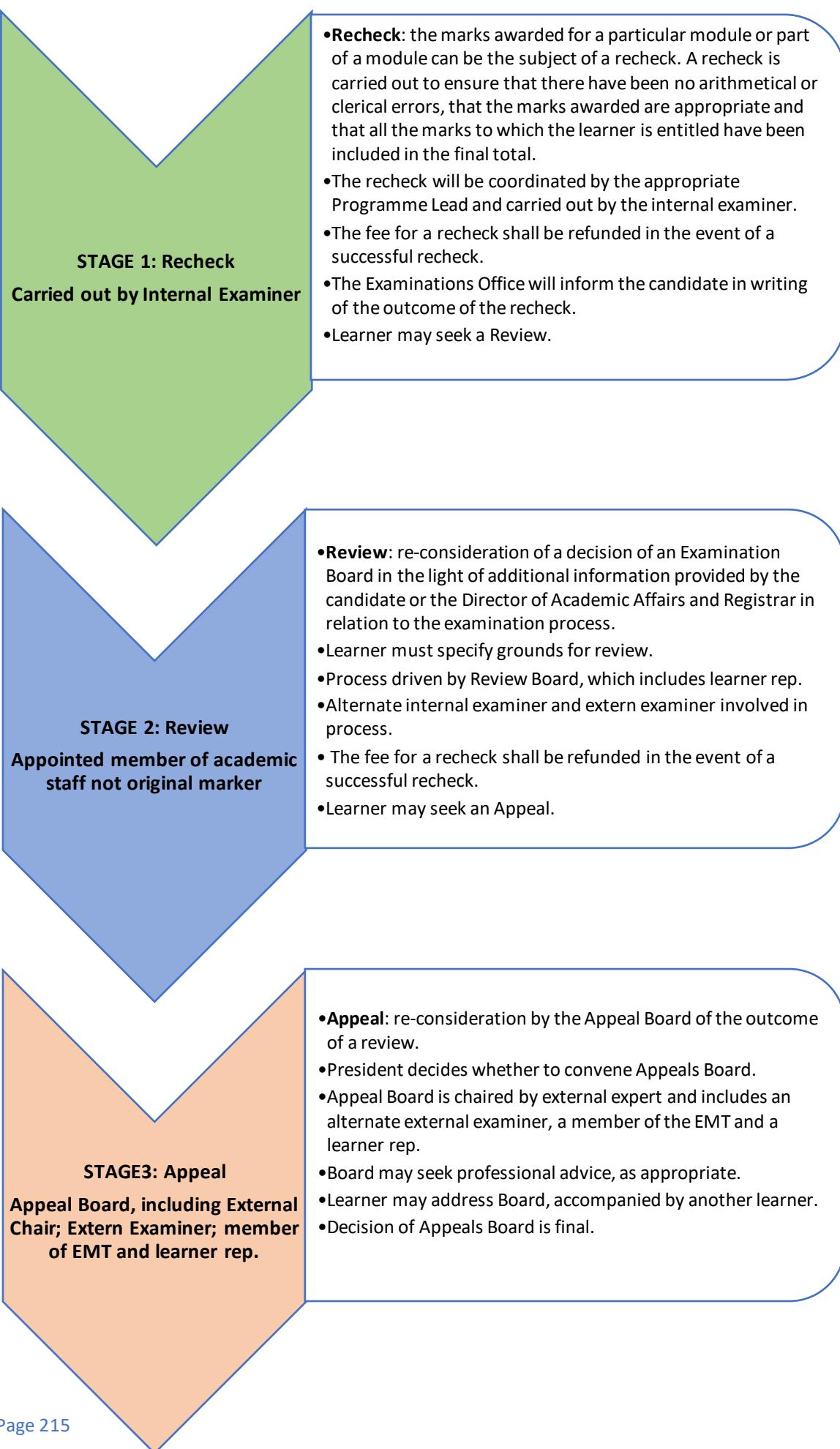
1. Disagreement with an academic decision in respect of assessment.
2. Disappointment with the result of an assessment or an opinion that a higher mark should have been obtained.
3. Complaints about persons or procedures, which must be addressed in the first instance under the College's complaints policy and procedure.

4. Reopening of a matter that has already been decided on in a previous appeals process.

The introduction of new material that could have been included in the submission for the review shall not be a valid ground for appeal.

In the event where significant information comes to light following the completion of a review, that might have had a material impact on the result, the Director of Academic Affairs may seek to have an appeal conducted in respect of a review.

The detailed policy and procedure for an appeal is described in Section 3.8 [Policy for Appeals](#).



## 9.20 Academic Misconduct Policy

The College regards Academic Misconduct as a serious academic offence. Details of the policy are shown in Section 8.6 [Policy Relating to Academic Misconduct](#).

### 9.20.1 Procedure for Dealing with Cases of Plagiarism

Incidents of alleged or suspected plagiarism should be reported to the relevant Programme Lead in writing. A meeting with the academic member of staff, the learner concerned, and the Programme Lead takes place where the learner is given the chance to explain.

If, in the judgement of the Programme Lead, a satisfactory explanation has been given, caution and further guidance/advice on plagiarism can be given to the student. If no satisfactory explanation is given, then the plagiarism disciplinary procedures are commenced.

**Poor academic practice** is handled at faculty level. It may arise from a lack of understanding of academic protocols or a misunderstanding of expected academic conventions of the discipline. However, a *prima facie* case for **academic misconduct** exists if:

1. There is any indication that the learner intended to gain an unfair advantage or had the intention to deceive the examiner.
2. The learner had already been found guilty of a similar offence of poor academic practice and could therefore be reasonably expected to have familiarised themselves with the academic practice of the discipline.

In all cases where poor academic practice or academic misconduct is found the learner must undergo training in good academic practice, including information literacy classes.

Where plagiarism or collusion is suspected the examiner must mark the work and then present a case for an investigation of academic misconduct. The case may include reference to plagiarism detection software, but it should be noted that whilst such software supports the detection of plagiarism, it does not prove it and therefore cannot be the sole reason for an allegation of academic misconduct. Where the case is supported by the Head of Faculty it is referred to the Director of Academic Programmes.

Where cheating in an examination is suspected, the invigilator records the incident in the Invigilator's Report. On completion of the examination, the issue is brought to the attention of the Director of Academic Programmes who will determine if there is a case to answer.

### Investigation of Alleged Cases of Academic Misconduct

The Director of Academic Programmes reviews all academic misconduct cases presented and makes a judgement if there is a *prima facie* case to answer. If they determine there is a case to answer, they shall convene a meeting of the Academic Misconduct Committee. The Office of the Director of Academic Programmes informs the learner of the allegation of academic misconduct and invites them to that meeting.

The composition and membership of an Academic Misconduct Committee is set out in this policy.

In judging the level of academic misconduct (minor, moderate, serious), the Academic Misconduct Committee will consider the following criteria:

1. The student's intent. If there is evidence of a deliberate attempt to deceive, to disguise plagiarism, this is considered very serious.

2. History of academic misconduct, i.e. more serious for a repeated offence.
3. The extent of the plagiarism, i.e. considerable textual plagiarism or plagiarism of critical ideas is considered serious.
4. The level of academic study, i.e. plagiarism by a learner on a level 8 programme is considered more serious than a learner on level 6.
5. Location of the plagiarism. More serious in the core part of the assessment / argument/ conclusions, less so in the background or appendix.
6. Time the learner has spent studying at the College.
7. The Assignment in question. i.e. Plagiarism on a dissertation is considered more serious than plagiarism in a minor assignment

The learner involved in the alleged academic misconduct incident may, if they wish, have another learner enrolled at the College accompany them to this meeting.

Each case will be considered individually, taking into account the particular circumstances. The aim is always to educate the learner on the seriousness of this offence and prevent it happening in the future.

The Committee reviews the case and the evidence, interviews the learner, and determines an outcome.

Possible outcomes include:

1. There is no case to answer
2. Poor academic practice is found
3. Minor academic misconduct is found
4. Moderate academic misconduct is found
5. Serious academic misconduct is found.

The outcome is recorded on the learner record unless there is some mitigating factor determined by the Academic Misconduct Committee. Where there is no case to answer, no record is kept.

In the case of poor academic practice, it is advised that learners are directed to take information literacy classes.

Possible penalties for **minor or moderate academic misconduct** may include:

1. Caution and guidance / advice on plagiarism;
2. Require resubmission of assessment with no penalty;
3. Require resubmission of assessment with mark capped at 40% for that assessment.

Penalties for any minor and moderate academic misconduct are retained on the learner record for the duration of the programme.

Students who are found to have committed either poor academic conduct, minor or moderate academic misconduct shall have details of the breach excised from their learner record on completion of their programme.

Possible penalties for **serious academic misconduct** may include:

- Resubmission of the work as a second attempt with a capped mark.
- Resit an examination for a capped mark.
- Resit all examinations in a series for capped mark.
- Suspension.
- Expulsion.

Where a case of serious Academic Misconduct is found, it should be recorded on the learner's permanent record.

Where the outcome of an Academic Misconduct Committee meeting is pending at the Examination Board, the broadsheet should reflect 'Pending' against the learner status.

The Director of Academic Programmes will report annually to Academic Council on the number of Plagiarism cases and the penalties applied.

### **9.20.3 Appeals**

Appeals against the decision of an Academic Misconduct Committee are heard by an Appeal Board, established in accordance with the provisions of Section 3.8 [Policy for Appeals](#).

## **9.21 Plagiarism Detection Software**

Text-matching software is commonly used as a screening tool for work submitted for assessment, and it may also be used as an educational tool. The software can be used:

- Formatively, to facilitate discussion about good academic practice, correct citation techniques and identify learners in need of extra support at an early stage;
- As a deterrent to plagiarism; and
- As a detection tool.

The College recognises that there is a clear distinction between the academic and disciplinary aspects of using these tools. In alignment with the principles of fairness, consistency and transparency in assessment, the College applies such software as a matter of course to all assignments. Information about plagiarism and good academic practice is introduced in induction material and classroom activities.

It is the responsibility of the Programme Lead to ensure all learners understand that on submission of their assignments the software is used to assist the detection of plagiarism. In line with the Data Protection Policy, no personal information may be included in the submission, and learner numbers and module codes are used to identify learners.

The College recognises the limitations of using plagiarism detection software, for example:

- The software may be limited in detecting matches to sources not available on the internet, or search password-protected essay banks
- Failure to detect work which is copied by translation from a non-English source.
- Failure to detect matching images, including graphs and mathematical equations inserted as images etc.

In many cases the software highlights correctly cited references or innocent matches.

Therefore, examiners must carefully review originality reports to assess whether the work does contain plagiarism; the software does not obviate the need for careful checking of the report to distinguish between innocent matches and plagiarism.

Where plagiarism is suspected the assessor may, as matter of judgement, invoke the Academic Misconduct procedures.

The assessor will determine the extent of the learner's contribution and award marks appropriately. This may result in a lower mark than may otherwise have been the case. However, no marks may be deducted. Marks may only be deducted as an outcome of an Academic Misconduct Committee.

## **9.22 Awards and Conferring**

### **9.22.1 Awards and Parchments**

Awards are determined at meetings of an Examination Board.

The examination broadsheet is signed by the Examination Board and retained by The College. Final results are submitted to QQI, in the case of QQI submitted to the QBS system, then awards may be made. QQI may have an observer at the Examination Board; the Office of the Director of Academic Affairs is responsible for sending QQI a schedule of Examination Board dates annually.

Parchments are prepared by QQI and issued at a conferring ceremony arranged and managed by the office of Director of Academic Affairs.

### **9.22.2 Conferring Protocols**

The conferring protocol is informed by the relevant awarding body. The wording for the awards is subject to approval by QQI and is signed off annually. Robes and hoods comply with QQI guidelines which advise on the colour of gowns, epitogues, hoods and caps to be worn.

### **9.22.3 European Diploma Supplement**

On successful completion of their studies, learners are entitled to receive a Diploma Supplement. The Diploma Supplement facilitates the academic and professional recognition of qualifications (diplomas, degrees, certificates etc.).

This Diploma Supplement follows the model developed by the European Commission, Council of Europe and UNESCO/CEPES. The purpose of the supplement is to provide sufficient independent data to improve the international 'transparency' and fair academic and professional recognition of qualifications (diplomas, degrees, certificates etc.).

The Diploma Supplement provides additional information regarding the learner's award which is not available on QQI parchments such as the skills and competencies acquired and entry requirements and access opportunities to the next stage of education.

It is designed to provide a description of the nature, level, context, content and status of the studies that were pursued and successfully completed by the individual named on the original qualification to which this supplement is appended. It should be free from any value judgements, equivalence statements or suggestions about recognition. Information in all eight sections should be provided. Where information is not provided, an explanation should be given as to the reason why. This is provided by the Director of Academic Affairs' office.

## 9.23 Control Sheet

<b>Policy and Procedure Title</b>	Marks and Standards
Responsible Officer(s)	Director of Academic Affairs
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	30 <sup>th</sup> September 2022
Supersedes	2.0
Next Revision Date	September 2023
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 9.23.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Affairs	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	There are significant revisions to include incorporating all procedures relating to Marks and Standards to the QAM; Greater clarity on the Responsibilities for Assessment in the College; Moderation has been incorporated to the policy	Director of Academic Affairs	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	<p>There have been significant revisions to this section:</p> <p>Section 9.11 now makes specific reference to temporary and non-medical circumstances.</p> <p>9.18.1 Provides greater clarity on when the Director of Academic Affairs may initiate an appeal.</p> <p>9.18.2 has been updated to reflect the ruling of the European Court of Justice (ECJ) that exam scripts constitute personal data, all learners are offered the opportunity to discuss their examination scripts with the internal examiner.</p> <p>9.18.4 has been updated to include: The Director of Academic Affairs shall appoint a senior academic staff member, who was not involved in the decision under review, to act as chair and convenor of the Review Board and clarifies that a candidate dissatisfied</p>	Director of Academic Affairs	Academic Council

		<p>with the outcome or conduct of a review process may appeal the decision of the Review Board.</p> <p>Clarification on the event where the Director of Academic Affairs may initiate an appeal has been provided.</p> <p>Section 19.1 – Procedure for dealing with cases of Plagiarism has been revised.</p>		
Version 6.0	30 <sup>th</sup> September 2022	Minor grammar amendments	Director of Academic Affairs	Academic Council

## 10. Supports for Learners

### 10.1 Policy for Supports for Learners

QA Area (s)	Programmes of Education and Training Governance and Management of Quality Documented Approach to QA
Applies to	<input type="checkbox"/> Staff only <input checked="" type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
Policy Owner	Learner Support Coordinator & College Librarian

#### 10.1.1 ESG Standard 1.6: Learning Resources and Student Support

*Standard: Institutions should have appropriate funding for learning and teaching activities and ensure that adequate and readily accessible learning resources and learner support are provided.*

#### 10.1.2 Purpose

The College recognises the need to balance the requirement for higher education, promoting self-directed learning and development with the provision of a nurturing and supportive learning environment that enables and empowers learners to attain their potential. The College requires all learners to demonstrate a commitment to their studies through high level attendance, strong in-class and on-line participation, and appropriate engagement with assessment activities. The College will support this through its commitment to the provision of appropriate academic and other supports, that are fit for purpose, to learners to facilitate them successfully completing their studies.

#### 10.1.3 Scope

This policy applies to all learners registered on programmes in the College.

#### 10.1.4 Policy

The College is committed to providing all learners with a fair, accessible and supportive learning environment which allows them to study effectively and with minimum disruption. This is done through careful consideration of learner needs, which are routinely monitored through ongoing learner feedback.

This document outlines the systems and resources available to all learners enrolled at the College, which are routinely monitored, reviewed and updated. The College is committed to ensuring that all resources are fit for purpose, accessible, and that learners are aware of the services available to them.

#### 10.1.5 Equality and Diversity Policy (Learners)

The College values and promotes intercultural diversity, multiculturalism, and social integration. It supports an enriched international education experience for all members and stakeholders.

The College acknowledges its responsibilities and duties as an employer, and as an academic service provider, under the Employment Equality Acts 1998-2015, and therefore does not

unlawfully discriminate on nine grounds, including gender, civil (marital) status, family status, sexual orientation, religion, age, disability, race or membership of the Traveller community.

The College regards equality as a critical component of QA which is aimed at improving the quality of education and academic and support services provided, while ensuring the maintenance of academic standards.

All College staff and learners are responsible for ensuring that they comply with this policy and that equal opportunity principles are respected across the College.

The College's specific commitment to educational equality includes:

- Promoting equality of access to all education programmes in the College.
- Continuing to develop, through the provision of appropriate support mechanisms, optimum individual educational attainment, as measured by completion rates, examination performance and progression.
- Promoting equality and fairness in the treatment of learners in interactions with College staff, within the learner body, in the conduct of assessments, and in the provision of academic and support services.
- Promoting equality of participation in positions of leadership and responsibility within the learner body.

#### **10.1.6 Learning Environment and Academic Support**

The College is dedicated to creating a positive, safe and supportive learning environment, providing learners with reasonable access to support services and routinely serviced facilities. The College monitors and acts upon learner feedback in relation to this on an ongoing basis.

- *Induction*

Induction is arranged to introduce College facilities, processes, supports and procedures, followed by programme specific induction arranged by the Programme Lead. The information will include induction to the virtual learning environment as well as details of rights and obligations of learners under the Learner Charter and the associated Code of Conduct.

Induction is designed not only to facilitate exchange of information but to provide a welcoming atmosphere, provide learners with the opportunity to familiarise themselves with their surroundings and meet other learners. An induction must also be arranged for any learners accessing the programme with advanced entry.

The College is considering the development of a fully online induction module so learners can attend in person or complete online, and always have access to that module as a reference point.

- *Student Handbook*

All learners are provided with a Student Handbook covering all relevant information for the programme on which they are enrolled. It is the responsibility of the Programme Lead to produce a handbook for their programme.

The Director of Academic Affairs approves the wording for the key information including:

- Whether or not a programme leads to an award and the name of the awarding body.
- The title of the award, whether it is recognised in the NFQ and if so, the award type and NFQ level.

- Programme opportunities for transfer or progression.
- Details of the PEL arrangements in place.

The Student Handbook is supplied at induction. It is also made available to the learner through the learner portal. Other relevant information includes:

- College Facilities.
- Internet Access Policy (Section 10.1.6.4 [Internet Access and Internet usage policy](#)).
- Supports available to learners including academic, pastoral and medical/counselling supports.
- Deferral Procedures.
- Reasonable Accommodations.
- Our Learners' Charter.
- Student Code of Conduct.
- Complaints Procedure.
- Disciplinary Procedure.
- Appeals Procedure.
- Assessment regulations, including Marks and Standards.
- Assessment briefs and other such relevant information.

The Student Handbook is reviewed and updated annually by the Admissions team and formally approved by the Director of Academic Affairs to ensure completeness and accuracy.

- *Access to Information*

All learners have a right to request access to information relevant to their time in the College. Information is provided to registered learners to ensure they can access relevant learner supports, understand their rights and responsibilities, as laid out in the Learner Charter (Section 3 [Our Learners' Charter and Associated Policies and Procedures](#)) and ensure they can make informed decisions.

Sources of such information should be accessible, accurate, timely, current and comprehensive.

- *Internet Access and Internet usage policy*

The aim of this Policy is to ensure that learners can benefit from Internet access provided by the College, when on campus. Internet use and access is considered to be a study resource and privilege.

Internet access is provided as an educational resource to assist with study. As such, the College cannot commit to providing unlimited internet access at all times. Learners should confine themselves to accessing relevant and necessary material to support their studies. In the event that learner Wi-Fi access is unavailable due to external or internal issues, the College does not accept liability.

Learners may use the facility's Wi-Fi to access the Internet on their own devices. Learners are responsible for their own devices and to ensure that appropriate anti-virus and firewall software is in place to protect their devices. The College is not responsible for damage to

devices or for any security breaches or other issues encountered as a result of learners accessing third-party websites on their own devices.

In particular:

- All sites and downloads may be monitored and/or blocked if they are deemed to be harmful and/or not productive to business.
- As per the Student Code of Conduct, the posting of discriminatory, harassing, or threatening messages or images relating to learners, staff or any other personnel, whether via the College Wi-Fi connection, or in any other capacity and from any other venue is unacceptable and will lead to immediate and severe disciplinary action.

Unacceptable activities include, but are not limited to:

- Using the Wi-Fi access to perpetrate any form of fraud, and/or software, film or music piracy;
- Stealing, using, or disclosing someone else's password without authorisation;
- Downloading, copying or pirating software and electronic files that are copyrighted or without authorisation;
- Sharing confidential material, trade secrets, or proprietary information outside of the organisation;
- Hacking into unauthorised websites;
- Sending or posting information that is defamatory to the company, its products/services, colleagues and/or customers;
- Introducing malicious software onto the company network and/or jeopardising the security of the organization's electronic communications systems;
- Sending or posting chain letters, solicitations, or advertisements not related to business purposes or activities;
- Passing off personal views as representing those of the organisation.

- *Information Technology and Computer Services*

The purpose of the IT Department is to provide suitable information technology and educational resources (including educational technology and any VLE provided as required by the College, identified at programme development and agreed at validation).

It is the responsibility of the Programme Lead and Head of Faculty to identify and specify the IT and computing requirements for programme delivery.

The IT department is responsible for the provision and the management of sustainable computing facilities accessible to staff and learners.

The IT department works with academics and the Executive Management Team to systematically upgrade hardware and software in line with technical developments and advise the College on more effective tools and methodologies to enhance the learner experience.

IT support services are available at all time during class delivery. Helpdesk support is available for learners and lecturers during normal office hours.

The IT Manager is responsible for maintaining a comprehensive list of IT and computing resources. The IT Manager is also responsible for ensuring that all software is properly licensed and copyright protocols are respected. Other responsibilities include management of firewalls, backups, etc.

- *Virtual Learning Environment (VLE)*

The College takes a proactive approach in its use of virtual learning technologies. Innoskills (Moodle) and Zoom form the basis of our VLE. Innoskills (Moodle) is used extensively for all programme offerings in course management, content creation and delivery, communication and collaboration.

It is the responsibility of all lecturers to:

1. Comply with the minimum standards for online content included in the Blended Learning Strategy (7.3).
2. Upload module guides including assessment schedule and key submission dates prior to commencement of a programme.
3. Upload all lecture material or other class content before each lecture.

It is the responsibility of the Programme Lead to ensure all content is available on Innoskills (Moodle).

Forum activities in Innoskills (Moodle) are used by lecturers, staff and learners for online discussions which promote collaborative working, engagement and interactivity with all members of the group.

The use of Innoskills (Moodle) allows lecturers to provide and display content and allows users to access the content in a controlled, secure environment. It encourages communication and collaboration in learning tasks, thus encouraging cooperation, and adding to the learning experience of the learners.

Innoskills (Moodle) is used to manage continuous assessments and feedback. All assignments are required to be submitted in soft copy via the relevant Innoskills (Moodle) page and through the relevant plagiarism detection software where appropriate.

Zoom is an interactive on-line training delivery platform which can incorporate tests to evaluate knowledge and retention during the delivery, promote learner engagement through small-group interaction with breakouts and live chat facilities, and Whiteboard Sharing for enhanced delivery.

## 10.2 Academic Supports

### 10.2.1 Retention Strategy

The policy for the provision of academic supports is aligned to the College's retention strategy.

A significant element of the College's retention strategy is to ensure learners attend lectures and tutorials, in either face-to-face or through synchronous or asynchronous delivery mode. In this context, attendance means physical attendance at lectures or agreed registered attendance online. It is the responsibility of the Regional Programme Administration Managers to coordinate the formal recording of attendance.

Where a learner is not attending regularly, they will be contacted by the Regional Programme Administration Manager. In the event that a learner has not attended six or more consecutive classes, does not have mitigating circumstances and does not engage with the Regional Programme Administration Manager, it may be necessary to formally withdraw them from the programme. This process is implemented by the Programme Lead, in consultation with the Director of Academic Programmes.

Attendance records and trends are reviewed at Programme Boards for analysis and action if appropriate, and are included in the Programme Monitoring Report to the Academic Council.

### 10.2.2 Meeting with Academic Staff

The lecturers, Programme Lead, Head of Faculty and Regional Programme Administration Manager are available to meet with learners by appointment.

### 10.2.3 Additional Tutorial Support

In addition to timetabled tutorial sessions and where a need has been identified, the Regional Programme Administration Manager liaises with the Head of Faculty to organise formal tutorial support where learners can come together to work on particular areas in more detail. This tutorial support is particularly relevant to support learner retention. Additional tutorials on request, may be provided by the College in advance of reassessment opportunities, to support learners' potential assessment success, and ultimately their retention and progression.

### 10.2.4 Support for the prevention of Academic Misconduct

It is the policy of the College to ensure all learners are aware of what academic misconduct is, how it can be avoided and the penalties if learners were to engage in academic misconduct which undermines teaching, learning and assessment. This is communicated at induction and refreshed at the start of each academic year.

Details of the College policy in respect of Academic Misconduct is shown in Section 8.6 [Policy Relating to Academic Misconduct](#).

It is the responsibility of the Director of Academic Affairs to ensure that there is adequate information supplied in respect of academic misconduct to both staff and learners.

The College hosts an anti-plagiarism software support package which learners can access through the Student Information System prior to the submission of their assessment material through Innoskills (Moodle). This facilitates a learner to reflect on the content of their assessment item and the associated referencing before final submission.

The College uses TurnItIn which is integrated with Innoskills (Moodle).

### 10.2.5 Library and Information Services

It is the responsibility the College Librarian , reporting to Director of Academic Affairs, to ensure the provision of library and information services to support teaching, learning and assessment, based on the requirements of the validated programmes. These need to be fit for purpose, relevant, current, comprehensive, accessible to all learners and enhance the learning environment. The Innopharma Library supports learners & staff at Innopharma in a variety of ways. All students have access to the Innopharma online library through which they can access information and supports on topics including academic writing, information literacy, referencing and academic integrity.

Learners also have access to a curated suite of high-quality open access resources which includes books and journals as well as links to grey literature sources including dissertations and government websites. The Innopharma library also collects, preserves and disseminates key academic outputs of the institution through our institutional repository.

The Innopharma Library catalogue provides access to ebooks which students can access 24/7. Innopharma Library also supports students through regular workshops focusing on topics related to academic & study skills; these are recorded and available for students to watch back at any time. The library participates in inductions where all new students are introduced to the librarian and the wide range of supports available to them. The librarian is also available to take part in lectures on request should lecturers feel that students need additional support on topics such as referencing for example. Students can also avail of one-to-one support with the librarian through Zoom and can also contact the library service via email and phone.

### **Library Services**

Objectives of the library service are to:

- Identify and provide access to the learning resource services required to support the learning, teaching and assessment activities of the College.
- Manage those resources efficiently and effectively.
- Maintain effective links with staff of the College to understand and, where necessary, respond to changes in education, approaches to learning, and corporate policy.
- Continuously monitor, review and enhance the provision of library and information services.
- Provide information and training to learners on Evaluating information, Plagiarism and Referencing.

It is the responsibility of the Programme Leads to ensure all lecturers provide the library with updated reading lists for each of the taught modules. It is the responsibility of the library function to review the collection and to maintain a comprehensive list of all library

and learning resources for review. Library staff liaise closely with faculty and administrative staff to ensure learners the highest possible standard of teaching and learning support.

### **11.2.6 Library Collection Development Policy**

#### **1. Purpose**

This Collection Development Policy (CDP) provides guidelines for the systematic selection, acquisition, maintenance and de-selection of information resources to support the mission of Innopharma Education. The collection is designed to facilitate teaching, learning, assessment and research across all Innopharma run programmes.

#### **2. Scope**

The Innopharma Library is a fully digital (online) library. The scope of this policy pertains exclusively to the selection, licensing and management of all digital resources, including subscribed commercial content, open-access materials and content housed in the Institutional Repository. Programmes run in association with collaborative partners (e.g. Griffith College, TU Dublin) are out of scope; collaborative partners manage resource needs for these programmes through their libraries.

#### **3. Collection Priorities and Subject Coverage**

Subject coverage collection development is intrinsically linked to the College's programme portfolio. The primary collection focus is on disciplines within:

- Pharmaceutical Science
- MedTech/Medical Device Technology
- Food Science and Technology
- Digital Transformation and associated technologies (e.g., Data Analytics, AI)
- Quality Assurance and Regulatory Affairs
- General academic and research skills (e.g., Academic Writing, Referencing, Information Literacy).

#### **4. Formats and Types of Material**

The collection is developed around the principles of digital-first and Open Access (OA) promotion, ensuring all resources are accessible via the College's Virtual Learning Environment (VLE) and Library Management System (LMS).

##### **4.1. E-books and Digital Texts**

- **Description:** Core and supplementary course readings; reference works; specialised professional texts.
- **Selection Criteria:** Priority is given to titles with multi-user licensing models to ensure concurrent learner access. Emphasis is placed on texts that directly support module learning outcomes.

#### **4.2. E-Journals and Subscribed Databases**

- **Description:** Full-text journals, periodicals, and industry-specific databases.
- **Selection Criteria:** Must provide current, peer-reviewed, and industry-relevant research. Subscriptions are selected based on subject relevance and cost.

#### **4.3. Open Access (OA) Resources**

- **Description:** Open Educational Resources (OERs) and Open Access (OA) journal and book collections (e.g., via DOAJ, Open Textbook Library).
- **Selection Criteria:** OA resources are actively sought and catalogued to maximise resource availability and cost-effectiveness, provided they meet the quality standards for authority and currency.

#### **4.4. Institutional Repository (DSpace Content)**

- **Description:** The College's own intellectual output, including faculty and student publications, student theses/dissertations, conference presentations and posters, internal academic reports and the *Innopharma Insights* Journal.
- **Selection Criteria:** Content is included following College policy on the submission of graduate research and faculty publications, primarily focused on preservation and dissemination.

#### **4.5. Library Guides and Workbooks**

- **Description:** Internally produced digital resources focused on essential academic skills, software training (e.g., Turnitin, Zotero) and information literacy.
- **Selection Criteria:** Developed by the College Librarian to fill instructional gaps and directly support the academic activities of Innopharma Education.

#### **1.6 Instructional Videos and recorded workshops**

- **Description:** Internally produced video content, including recordings of library workshops (e.g., academic skills, referencing, software training), specialised video tutorials.
- **Selection Criteria:** Content is included to supplement or replace synchronous instruction. Emphasis is placed on recordings that directly address identified learner needs or instructional gaps, with a formal review process for recordings older than 2 years to ensure continued relevance.

### **5. Selection Criteria and Procedures**

#### **5.1. General Selection Criteria** All resources are evaluated based on the following criteria:

- **Relevance:** Direct correlation to the curriculum, learning outcomes and research interests of the College.
- **Authority and Quality:** Authoritativeness of the author(s), publisher or source; evidence of peer review for scholarly material.
- **Currency:** Timeliness and up-to-date nature of the information, particularly in rapidly evolving fields.

- **Accessibility:** Compatibility with the College's systems (VLE, LMS) and adherence to universal design and accessibility standards.
- **Cost and Licensing:** Favourable Total Cost of Ownership (TCO) for subscription/licensing models, with preference for perpetual access rights where feasible.

## 5.2. Selection Process

- **Librarian-Led Selection:** The College Librarian is responsible for the final selection and acquisition of resources based on budget, collection balance and curriculum needs.
- **Faculty Recommendations:** Programme Managers and Lecturers are actively encouraged to submit recommendations via a formal resource request process. These requests must clearly demonstrate alignment with specific module learning outcomes.
- **Student Recommendations:** Learner suggestions are considered where they align with the collection profile.

## 6. Collection Maintenance (De-selection and Review)

**6.1. Continuous Review** The digital collection is subject to continuous review by the College Librarian. Subscriptions and licenses are reviewed annually to ensure continued relevance, usage levels, and cost-effectiveness.

**6.2. De-selection (Weeding)** Resources may be de-selected or excluded from core collections based on the following:

- **Obsolescence:** Information that is significantly outdated or superseded, particularly in highly technical and regulatory fields.
- **Licence Lapse:** Non-renewal of subscriptions due to cost, alternative resources becoming available (especially OA), or a shift in curriculum focus.

## 7. Responsibilities

The College Librarian holds primary responsibility for implementing this policy, including selection, acquisition, review and reporting to the Academic Council.

Programme Managers and faculty provide input via formal requests aligned to learning outcomes.

## 8. Monitoring and Review

The implementation of this policy will be monitored and reported to the Academic Council.

This policy will be reviewed before each academic year for accuracy and any updates in policy.

### 10.3 Non-Academic Supports

Student Affairs, headed by the Learner Support Coordinator, is responsible for the provision of pastoral care, disability support services, procurement of counselling services, and learner events.

The Learner Support Coordinator is available as an advisor to the Academic Council and its committees.

#### **10.3.1 Pastoral Care**

For the purposes of this Quality Assurance Manual, pastoral care is defined as the range of learner supports and services that are provided for learners' emotional, psychological, and spiritual wellbeing.

It is the responsibility of all College staff to support where possible, the pastoral care and wellbeing of learners. Lecturers, Academic staff and Regional Programme Administration Managers are particularly well placed to observe behaviour in the learning environment that might indicate that a learner is in need of support. The College is committed to providing relevant and timely pastoral support.

Learners may approach or be referred to the Learner Support Coordinator to identify relevant supports.

#### **10.3.2 Disability Support Services and Reasonable Accommodations**

In general, disability support requirements should be identified by applicants at the time of their admission to the programme to ensure the College can evaluate any additional supports required in order to make reasonable accommodation. Once registered on a programme the learner can access the disability service or Reasonable Accommodations via Learner Support services.

The College's detailed policy and procedures for seeking reasonable accommodation is included in the College's Assessments and Standards in Section 8.4 of this Manual ([Policy for Reasonable Accommodation and Additional Supports](#)).

Where not identified on admission, any disabilities, specific needs or any ongoing issue that may affect performance should be declared to the Learner Support Coordinator as soon as practical. The Learner Support Coordinator is responsible for identifying supports and coordinating with the appropriate staff to ensure reasonable and adequate supports are in place.

To register for Reasonable Accommodations the Learner Support Coordinator will record the application and liaise with the Director of Academic Affairs to approve. The Learner Support Coordinator will then liaise with academic staff to ensure classroom and examinations supports are implemented where appropriate.

#### **10.3.3 Health Services including Counselling Services**

Student welfare, including mental health, is considered a top priority at the College. Innopharma has a formal agreement with Laya Healthcare for the provision of Counselling Services to all learners. Learners can avail of the first 6 sessions at no cost. Services are available 24/7, 365 days per year and can take place online or face to face at the many centres located throughout Ireland. Counselling services can be accessed directly by learners and are completely confidential and available in multiple languages.

The College encourages any learner who is experiencing difficulty or distress during their time in the College is encouraged to avail of these services. The services operate on a self-referral basis. Details of the service will be included in the Student Handbook.

#### **10.3.4 Careers Service**

The College provides extensive information and guidance to learners regarding careers. The process starts with initial career information being presented to an applicant at the application stage. The College believes this is an important input into the applicant's

decision-making process around the suitability of the programme for them and potential career options.

During induction learners are made aware of the Career Support that will be an integral part of their programme of study. All learners will be able to avail of support to help meet their career planning, job search, career development and management. The Regional Programme Administration Managers and Programme Leads will be responsible for ensuring that all learners receive regular updates on further study opportunities, regional job vacancies, internship and work placement opportunities, and relevant career events. In addition to in-class and individual mentoring, the College has an on-line portal which will support learners in providing additional information on CV and cover letter writing, job interviews and assessments.

The College regularly invites guest lecturers from professional bodies, industry and recruitment to support learners and graduates career aspirations; to facilitate their engagement with employers and professional bodies, and to also consider post-programme progression options. This also enables the College to promote its programmes to employers of graduates.

The College plays an active role in monitoring the career progress of the graduates. Regional Programme Administration Managers are responsible for communicating employment outcomes to the Programme Leads at regular intervals throughout and post completion of the programme.

## 10.4 Learner Representation

### 10.4.1 Class Representative System

A class representative is an enrolled learner elected to facilitate communication between staff and learners regarding programme matters and academic support and provides another point of contact for learners.

At the beginning of each academic year, class representatives for each stage of each programme are elected by the class under the supervision of the relevant Regional Programme Administration Manager to ensure fairness but not to influence selection. There should be at least one class representative per stage of a programme, and they will continue as class representative until the end of the stage, usually one academic year. Once elected, class representatives are trained and supported through the Learner Support Coordinator. A student representative sits on various committees including Programme Boards, the Academic Council and any appropriate committees (Refer to Section 2.4.2 Academic Council Composition and Membership). They represent learners and ensure that they are involved in the decision-making processes of the College.

- *Class Representative Meetings*

There is normally one class representative meeting per semester for each programme. These are arranged in advance of the relevant programme board and to ensure maximum attendance from the class representatives. The availability of part-time learners, where appropriate, is considered. A call for agenda items is issued by the Regional Programme Administration Manager in advance of the meetings and learners are required to feed issues back through their Regional Programme Administration Managers to inform the agenda. The agenda for the meeting is posted on Innoskills (Moodle) prior to the meeting and emailed to all attendees.

The function of the class representative meeting is to facilitate communication between learners and staff within the College; to provide a forum in which learners may raise any concerns they may have about teaching or related matters within the College; to provide feedback on issues addressed; to identify and disseminate examples of good practice; to provide documentary evidence of the participation of learners in the QA and development of programmes delivered by the College and to facilitate learner participation in periodic reviews of the College provision of academic programmes, with a view to improving quality. Issues raised at the class representative meetings are recorded and considered by the Regional Programme Administration Manager and may feed into the Annual Programme Review. The agenda of the Class Representative meeting includes these standard agenda items:

- Membership.
- College Update.
- Student Affairs Update.
- Issues invited from each programme by stage.
- Academic / Facilities and support issues.
- Positive initiatives / good practices.
- Revalidation / other reviews as appropriate.
- Other Issues.

#### **10.4.2 Related Legislation, Regulation or Guidelines**

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Policies and criteria for the validation of programmes of education and training 2017 (QQI)
- Policy and Criteria for Making Awards 2014 (QQI)
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
- Assessment and Standards, Revised 2013 (QQI).
- Policy for Determining Awards Standards – QQI, 2014
- NFQ Awards Standards
- European Credit Transfer and Accumulation System (ECTS) User Guide –2015
- International Standard Classification of Education (ISCED) – UNESCO, 2011.

## 10.5 Control Sheet

Policy and Procedure Title	Supports for Learners
Responsible Officer(s)	Head of Quality Assurance and Admissions
Issuance Date	21 <sup>st</sup> October 2022
Effective Date	27 <sup>th</sup> June 2020
Last Revision Date	October 2019
Supersedes	5.0
Next Revision Date	June 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 10.5.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Affairs	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	Reflects the introduction of the Learner Charter; Provides greater clarity for the learner of Academic and Non-Academic supports; Job titles have been updated; The Head of QA and Enhancement has responsibility for this policy	Head of Quality Assurance and Enhancement	Academic Council
Version 6.0	21 <sup>st</sup> October 2022	Policy reflects change of practice from GoToTraining to Zoom, Moodle to InnoSkills (Moodle). Updated to reflect current library services and Counselling services which have been implemented	Head of Quality Assurance and Admissions	Academic Council

## 11. Information and Data Management

### 11.2 Policy for Information and Data Management

QA Area (s)	<ul style="list-style-type: none"><li>Information and Data Management</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

#### 11.2.1 ESG Standard: Information Management

##### **ESG Standard 1.7**

*Institutions should ensure that they collect, analyse and use relevant information for the effective management of their programmes and other activities.*

##### **11.2.2 Purpose**

The purpose of this policy is to set out the principles underpinning the College's management of Data for the purposes of:

- Ensuring the College collects, analyses and uses relevant data to facilitate informed decision-making and the enhancement of the internal quality assurance system.
- Ensuring the College's collection, storage, processing and retention of data falls under the EU's General Data Protection Regulation (GDPR) and fulfils the College's obligations under GDPR and Irish legislation pertaining to data protection.

##### **11.2.3 Scope**

This is an overarching policy, and it applies to all staff, faculty, associate faculty and third parties that may be involved in the College's use of Data.

##### **11.2.4 Policy Statement**

The College will ensure that decision-making is informed by the analysis of reliable information and data, and that this process supports the College's quality enhancement agenda. The information gathered for this purpose will reflect the context and mission of the College.

The College is committed to only collecting and processing data for purposes that are lawful, fair and necessary for the purposes of programme provision or the fulfilment of the College's legal obligations. The College respects the privacy and Data Protection rights of its students, staff, and any other persons whose data it holds, and commits to complying with its obligations under all relevant legislation. The College processes data lawfully, for specified purposes.

Processing shall be considered lawful only if and to the extent that at least one of the following applies:

- the data subject has given consent to the processing of his or her personal data for one or more specific purposes;

- b) processing is necessary for the performance of a contract to which the data subject is party or in order to take steps at the request of the data subject prior to entering into a contract;
- c) processing is necessary for compliance with a legal obligation to which the controller is subject;
- d) processing is necessary in order to protect the vital interests of the data subject or of another natural person;
- e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller;
- f) processing is necessary for the purposes of the legitimate interests pursued by the controller or by a third party, except where such interests are overridden by the interests or fundamental rights and freedoms of the data subject which require protection of personal data, in particular where the data subject is a child.

Data will be stored safely and securely by the College, in a format suitable to processing. Data will be disclosed solely to the subject of the data and individuals authorised to process the data. Data retention will adhere to the College's Data Retention Schedule and data will be retained for no longer than is necessary for legal, administrative, financial or historical purposes.

Risk assessments are an essential part of data protection. The College produces Data Risk Assessment Reports. These Reports:

- Identify threats that could breach GDPR and thus indirectly affect the College's reputation and assets.
- Identify and rank the value, sensitivity, and criticality of data by determining the level of risk that data carries if threatened
- Apply cost-effective actions to mitigate or reduce the risk

Areas included are:

- College IT systems.
- College Website and Social Media Platforms.
- Online Learning Platforms
- Data Processing Systems and Operations

The College does not require all staff members to be experts in relation to data protection legislation. However, the College will ensure that all staff receive sufficient training to be able to recognize data protection issues they may encounter in the course of their duties and respond appropriately. It is the responsibility of all employees and authorised agents of the College to ensure they have the competence, training and experience to comply with the data protection policy and procedures outlined in the College's QA Manual.

### **11.2.5 Responsibility**

- The **Director of Academic Affairs** is responsible for overseeing the activities of the appointed Data Protection Representative and has responsibility for ensuring the Information and Data Management policy and procedures of the College are implemented.
- The **Director of Academic Programmes** is responsible for the preparation of reporting templates and ensuring that data used for reporting, monitoring and benchmarking is robust, transparent and traceable.
- **All Staff, faculty and associate faculty** are responsible for the implementation and execution of the policy and associated procedures.
- **All Students and Staff** are responsible for reporting any suspected breaches of their personal data to the Data Protection Representative.

### **11.2.6 Related Legislation, Regulation or Guidelines**

- The Data Protection Act 1998 (The Principal Act)
- The Data Protection (amendment) Act 2003
- The Data Protection Bill 2017, and any subsequent published Act
- Data Protection Act 2018
- The General Data Protection Regulation (GDPR) 2018
- ePrivacy Directive 2019
- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Policies and criteria for the validation of programmes of education and training 2017 (QQI)
- Policy and Criteria for Making Awards 2014 (QQI)
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).

## 11.3 Procedure for Analysis of Key Performance Indicators

<b>QA Area (s)</b>	<ul style="list-style-type: none"> <li>• Information and Data Management</li> </ul>
<b>Applies to</b>	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
<b>Policies this Procedure relates to</b>	Policy for Information and Data Management

### 11.3.1 Procedure

The following reports, authored as indicated, are routinely produced to inform analysis and decision-making processes, and provide the College with a clear view of levels of achievement against Key Performance Indicators.

Report	Author	Frequency	Proposed By	Approved By
Admissions Report	Director of Academic Affairs (Head of Admissions)	Per Semester	Admissions Office	Academic Council
Examinations Report	Registrar	Per Semester	Director of Academic Affairs	Academic Council
External Examiners Overview Report	Director of Academic Programmes	Annually	Programme Board	Academic Council
Progression and Retention Report	Registrar	Annually	Programme Board	Academic Council
Learner Feedback Report	Head of Faculty	Per Semester & Annually	Programme Board/ Class Reps Meeting	Academic Council
Alumni Report	Director of Academic Programmes	Annually	Director of Academic Programmes	EMT
Annual Programme Monitoring Report	Programme Director	Annually	Programme Board	Academic Council
Resources and Facilities	Director of Academic Programmes	Annually	Director of Academic Programmes	EMT

## 11.4 Procedures for Data Protection

QA Area (s)	<ul style="list-style-type: none"><li>Information and Data Management</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for Information and Data Management

### 11.4.1 Definition

**Personal data** is information relating to an identified or identifiable natural person ('data subject'). An identifiable natural person is one who can be identified, directly or indirectly, by name, an identification number, location data, or an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person.

### 11.4.2 Data Protection Management

The College will assign the management of personal data to a Data Protection Representative. The role will entail:

- Coordinating training to inform staff, faculty and associate faculty of the College of their obligations under GDPR.
- Coordinating the monitoring of compliance to GDPR with the assistance of external consultants and management as required.
- Alerting the Executive Management Team when Data Protection Privacy Impact Assessments are required.
- Reporting on matters related to Data Protection to the Executive Management Team.

### 11.4.3 Training

The College will implement a training programme covering data protection generally and the areas that are specifically relevant to the college.

#### Executive Management

The College will ensure all members of the management team are educated about their requirements under GDPR and the possible impact of non-compliance for the College. The College will identify key senior management personnel to support the data protection compliance programme.

#### General Staff

The College will ensure all staff, faculty and associate faculty are provided with a training programme covering data protection generally and the areas that are specifically relevant to their jobs. The College will ensure refresher training is provided when required.

Attendance at all training courses will be recorded.

### 11.4.4 Privacy by Design

The College will adopt internal Technical and Organisational Measures to meet the principles of privacy by design and data protection by default. The College will implement technical and organisational measures by: -

- Implementing pseudonymisation and encryption where feasible
- Data Minimisation
- Risk Management
- Integrating data privacy into IT policies, Data Retention and Deletion Policy
- Providing data subject transparency and access
- By developing access controls for confidentiality which provide that only personal data which is necessary for each specific purpose of the processing is processed during the retention period as informed to the data subject
- By developing access controls (roles-based) which provide that personal data is not made accessible to more individuals than necessary for the purpose
- Providing an audit trail of the access controls
- Ability to restore availability of and access to data in the event of an incident
- Regular test of the effectiveness of security measures

The College will take all reasonable steps to ensure that appropriate security measures are in place to protect the confidentiality of both electronic and manual data. Security measures will be reviewed periodically and where necessary, having regard to the technology available, the cost and the risk of unauthorised access.

Employees must implement all organisational security policies and procedures,

- use of computer passwords,
- automatic screensavers,
- locking filing cabinets,
- clean desk policy,
- data minimisation and paperless policy.

Employees must play their part in ensuring its Data Subjects' confidentiality. They must adhere to the following data protection principles:

- Process data fairly, lawfully and transparently.
- Keep data only for specified, explicit and legitimate purpose.
- Process data only in ways which are compatible with the purpose(s) for which it was given.
- Ensure data is accurate and up-to-date.
- Ensure data is adequate, relevant and limited to what is necessary for the purpose for which it was given.
- Keep data safely and securely.

- Retain personal data for no longer than is necessary for the purpose for which it is processed and in line with the College data retention policy.
- Employees must not disclose personal data, except where necessary in the course of their employment, or in accordance with law.
- They must not remove or destroy personal data except for lawful reasons and with the permission of the organisation.

Any breach of the data protection principles is a serious matter and may lead to disciplinary action up to and including dismissal. If employees are in any doubt regarding their obligations, they should contact the data protection guidelines the Data Protection Representative.

#### **11.4.5 Data Privacy Impact Assessment (DPIA)**

The College will carry out privacy impact assessments where a type of processing is likely to result in a high risk for the rights and freedoms of data subjects in the following cases but not limited to this list: -

- in the event of a systematic monitoring of a publicly accessible area
- in the context of profiling on which decisions are based that produce legal effects
- in the event of implementing new IT which infringes on the data subject's rights
- in the event there is a change to the risks posed by the processing operations to personal data

The College will have in place a process for determining whether a Data Privacy Impact Assessment (DPIA) is required. A DPIA will be embedded in all Business Cases presented to management for any proposed new projects.

If a DPIA is required, the following process will be conducted: -

- a systematic description of the processing operations and purposes of the processing
- an assessment of the necessity and proportionality of the processing operations
- an assessment of the risks to the rights and freedoms of data subjects
- if appropriate may seek the views of the affected data subjects
- measures envisaged to address the risks

The College will consult the Supervisory Authority (Data Protection Commissioner) if a DPIA result is of a high level of risk where the College cannot take measures to mitigate this risk.

#### **11.4.6 Demonstrating Consent**

The College will have an audit trail for consent. This will demonstrate that consent was given when relying on consent as grounds for processing personal data. Given the nature of the services offered consent is predominately relied on prior to engagement letters signed by the learner at the enrolment stage.

Consent is recorded from all data with a clear record of what each individual data subject consented to.

#### **11.4.7 Demonstrating Compliance to the data protection principles**

The College will document all the current processing activities to provide a Personal Data Register Data Protection Register identifying: -

- Service Department and Service line
- Data Class and Data Category
- Process Name
- Purpose for processing
- Controller/Processor/Both/Joint Controller
- Data Owners
- Lawful basis
- Data Accuracy Process
- Process Map where available
- Format of Data
- Recipients of Data
- Data shares internally and lawful bases provided
- Transfer methods
- Location of Data storage
- Retention Periods
- Data Access Controls
- Risk Management
- Transfers to Third Countries
- External Processor

The College will update its current policies and procedures to ensure compliance to the principles.

#### **11.4.8 Records to be maintained as a Data Controller**

The College will: -

- clearly identify where personal data is processed within the company, including by third party processors.
- provide the name and contact details of the College's Data Protection Representative and any joint controller.
- use the Personal Data Register to record details of:
  - the purposes of the processing.
  - a description of categories of data subjects and personal data.
  - the categories of recipients of personal data.
  - the details of transfers to third countries.
  - the time limits for erasure of different categories of data.
  - a general description of technical and organisational security measures taken.

#### **11.4.9 Records to be maintained as a Processor**

The College will use the Personal Data Register to record the following details in respect of any partner (controller)

- name and contact details of the partner (controller) on behalf of which it is processing.
- categories of processing.
- transfers of data to a third country or international organization.
- general description of the technical and organisational security measures.

As part of data accuracy, the College will keep information relating to the contracts that they are responsible for up-to-date and accurate.

## 11.5 Joint Controller Agreements

In circumstances where the College and another organisation determine the purposes for which and the way the personal data is processed, each party will be a controller and will be liable for the entirety of any damage to a data subject, unless they can prove they were not in any way responsible for the event giving rise to the damage.

The College will ensure that there is a clear attribution of data protection responsibilities between joint controllers and that this information is made available to data subjects through privacy notices or other means so that a controller will be able to show it was in no way responsible for the event giving rise to the damage if this is the case.

The College will ensure that contract negotiators are aware of the default position of each controller being liable for the entire damage to a data subject if it is in any way responsible for the event giving rise to the damage and include appropriate cross indemnification.

Once our applicants become students of the College, the College will share their information with TU Dublin and Griffith College and Springboard where necessary and appropriate.

All Data Subjects will be made aware of the College relationship with Springboard, TU Dublin and Griffith College. To ensure transparency for our Data Subjects we have a Code of Conduct which students must read and sign.

### 11.5.1 The Code of Conduct - includes

- A section for them to advise them of the data sharing between TU Dublin and Griffith College and it explicitly refers them to the College, TU Dublin and Griffith College Privacy Policy for further information should they want to read it.
- A notice to advise that at each class we will circulate a sign-in sheet for them to record their attendance on.
- We would also refer our data subjects to the privacy policies of the 3<sup>rd</sup> parties with whom we share their personal data.

- Technological University Dublin <https://www.it-tallaght.ie/gdpr>
- Griffith College <https://www.griffith.ie/offices/data-protection>

### 11.5.2 Processors

For all their partners who are legal entities. The College as a processor will ensure: -

- to implement Technical and Organisational Measures (TOM) to safeguard the personal data.
- not to appoint sub-processors without the consent of the controller.
- to notify breaches to the controller.

- to cooperate directly with the Supervisory Authority.
- to assess any intra-group processor agreements and make amendments to include minimum requirements and if necessary, to keep liability limited towards the group's main establishment or service companies.

## 11.6 Budget

The College will allocate an annual budget for data protection compliance.

## 11.7 Reporting

Staff are required to report any data breaches to the Data Protection Representative as soon as the data breach is discovering (regardless of the timing of the discovery, including the day of the week and time of the day).

The Data Protection Representative will report to all staff any new changes to GDPR and any cyber threats or attacks as this information becomes known. The College will also provide staff with steps to take to avoid this occurring to the College.

The Data Protection Representative will report to management monthly on: -

- Internal incidences reported.
- Internal breaches.
- GDPR improvements implemented.
- Status of current projects on GDPR.
- Awareness and training process.
- Relevant external breaches reported.
- Updates to compliance.
- DPIA's.

The Data Protection Representative will assess all data breaches reported in line with the data breach policy and if such a breach requires reporting to the Supervisory Authority, this will be approved by management.

## 11.8 Data Protection: Organisation

### 11.8.1 11.7.1 Definitions

**Data** – Information, which is stored electronically, on a computer, or in certain paper-based filing systems. This includes IT systems and CCTV systems.

**Data Subjects** - For the purposes of this document includes all living individuals about whom the College holds personal data.

**Personal Data** – Data relating to a living individual who can be identified from the data (or from that data and other information that is in, or likely to come into the possession of the data controller). Personal data can be factual (such as a name, address or date of birth) or it can be an opinion (such as a performance appraisal).

**Data controllers** – The individuals or organisations who control and are responsible for keeping and use of data.

**Data users** – Employees whose work involves using personal data. Data users have a duty to protect the information they handle by following the College's data protection security policies at all times.

**Processing** – Performing any operation or set of operations on data including: -

- Obtaining, recording or keeping data.
- Collecting, organising, storing, altering or adapting the data.
- Retrieving, consulting or using the data.
- Disclosing the information or data by transmitting, disseminating or otherwise making it available.
- Aligning, combining, blacking, erasing or destroying the data.

**Sensitive personal data** – Information about a person's racial or ethnic origin, political opinions, religious or similar beliefs, trade union membership, physical or mental health condition or sexual life, criminal convictions or the alleged commission of an offence. Sensitive personal data can only be processed under strict conditions and will usually require the express consent of the person concerned.

#### **11.8.2 Data Protection Principles**

Anyone processing personal data must comply with the eight enforceable principles of good practice. These provide that personal data must be: -

##### **a) Obtained and processed fairly**

GDPRs are intended not to prevent the processing of personal data, but to ensure that it is done fairly and without adversely affecting the rights of the data subject. The data subject must be told who the Data Protection Contact is, the purpose for which the data is to be processed by the College and the identities of anyone to whom the data may be disclosed or transferred. For personal data to be processed lawfully, certain conditions must have been met. These may include, among other things, requirements that the data subject has consented to the processing, or that the processing is necessary for the legitimate interest of the data controller or the party to whom the data is disclosed. When sensitive personal data is being processed, more than one condition must be met. In most cases the data subject's explicit consent to the processing of such data will be required.

##### **b) Kept only for one or more specified, explicit and lawful purposes**

Personal data may only be processed for the specific purposes notified to the data subject when the data was first collected or for other purposes specifically permitted by GDPR. This means that personal data must not be collected for one purpose and used for another. If it becomes necessary to change the purpose for which the data is processed, the data subject must be informed of the new purpose before any processing occurs. Any employee personal data collected by the College is used for ordinary Human Resources purposes. Where there is a need to collect employee data for another purpose, the College will notify the employee of this and where it is appropriate will get employee consent to such processing.

##### **c) Used and disclosed only in ways compatible with these purposes**

Personal data should only be collected to the extent that it is required for the specific purposes notified to the data subject. Any data which is not necessary for that purpose should not be collected in the first place.

**d) Kept safe and secure**

The College and its employees must ensure that appropriate security measures are taken against unlawful or unauthorised processing of personal data, and against the accidental loss of, or damage to, personal data.

GDPR require the College to put in place procedures and technologies to maintain the security of all personal data. Personal data may only be transferred to a third-party data processor if the third party has agreed to comply with those procedures and policies or has adequate security measures in place.

The following must be maintained: -

- Confidentiality – Only people authorised to use the data can access it. The College will ensure that only authorised persons have access to an employees' personal file and any other personal or sensitive data held by the College's employees are required to maintain the confidentiality of any data to which they have access.
- Integrity – Personal data is accurate and suitable for the purpose for which it is processed.
- Availability – Only authorised users should be able to access the data if they need it for authorised purposes

Security Policy / Procedures include: -

- Secure lockable desks and cupboards. – Clear desk policy, all desks and cupboards remain locked when not in use. Personal information is always considered confidential and treated with extra precautions, ensuring no one can see work that contains the same.
- Methods of disposal. – Paper documents must be shredded. All removable media should be wiped and physically destroyed when no longer required.
- Equipment – Data users should ensure that individual monitors do not show confidential information to passers-by and that the screen saver starts as soon as their PC is unattended.

**e) Kept accurate, complete and up to date**

Personal data must be accurate and kept up to date. Information which is incorrect, or misleading is not accurate, and steps should be taken to check the accuracy of any personal data at the point of collection and at regular intervals afterwards. Inaccurate or out-of-date data should be destroyed. Employees should ensure that they notify the Data Protection Contact and College Administration of any relevant changes to their personal information

so that it can be updated and maintained accurately. Examples of relevant changes to data would include a change of address.

**f) Adequate, relevant and not excessive**

**g) Retained for no longer than is necessary for the purpose or purposes for which it was collected**

Personal data should not be kept longer than is necessary for the purpose. For guidance in relation to data retention employees should contact their manager. The College has various legal obligations to keep certain employee data for a specified period. In addition, the College may need to retain personal data for a period to protect its legitimate interests.

**h) Provided to data subjects as requested**

Data must be processed in line with data subject's rights. Data subjects have a right to: -

- Request access to any data held about them by the Data Controller.
- Prevent the processing of their data for direct marketing purposes.
- Ask to have inaccurate data amended.
- Prevent processing that is likely to cause or distress to themselves or anyone else.

### **11.8.3 Dealing with Subject Access Requests**

A formal request from a data subject for information that the College holds about them must be made in writing. Any employee who receives a written request in respect of data held by the College should forward it to the Data Protection Representative.

Under the EU General Data Protection Regulation (GDPR) Article 15, data subjects have the right to access and obtain a copy of any personal data held on them by an organization. Data Access Requests (DAR) also known as Subject Access Requests (SAR) may be made verbally or in writing. According to GDPR, any data requests made must be acted upon **“without undue delay”** and completed within 28 days from the date of the request. Where the College has received a verbal or written request for data access the following specific steps must be followed in order to ensure the request is dealt with appropriately and in an effective manner.

The Data Access Request process is coordinated by the Data Protection Representative (DPR). The ultimate responsibility to conduct a search and collation of non-sensitive or organizational data following a request, resides with the DPR, who may as part of this process delegate or task fellow employees to complete parts of this process.

Note: DPR must satisfy themselves as to the comprehensive completion of this process.

### **11.8.4 Steps in the Data Access Process**

1. Receipt of a Data Access Request.

2. From the date the request is received, the College has 28 days to respond to and complete the request in full.
3. The request is immediately forwarded to the College's Data Protection Representative and to the GDPR department email: [gdpradmin@Innopharmalabs](mailto:gdpradmin@Innopharmalabs)
4. The DPA creates a file for the data access request in the GDPR folder and the data request is recorded.
5. DPR Contacts Data Subject and Confirms Request
6. No later than 2 days from the request being made, the DPR is to contact the data subject and confirm the request as well as outlining to the data subject the process for dealing with the request and advise that the College has 28 days to complete the action. At this point, the data subject should also be made aware of the existence of their right to request from the College rectification or erasure of any data held on them by the College.

#### **11.8.5 DPR Coordinates Data Search**

- The DPR to conduct and coordinate the search of the College's data base systems. Employees may be delegated specific tasks to assist in the process.
- All data sources both soft and hard copy, must be included in the database systems review and searched thoroughly for any data pertaining to the data subject.
- Employees to send this data back on to the DPA.

#### **Hard Copy**

- Hard copy data may be stored on desks and in cabinets and include the following:
  - Invoices, delivery dockets, vendor details, non-disclosure agreements, business contracts, engineering reports, lead forms, personal notebooks.

#### **Soft Copy**

- Zoho - CRM, Campaign, Sales IQ
- II-Server - shared folders, personal folders, backup server
- Microsoft Exchange, Sharepoint, One Drive – shared folders, personal folders
- Personal Laptops
- Mobile phones
- External storage devices
- Employees will be asked to perform a Windows document search on one drive and locate any relevant data files which are then sent back to the DPA.

- *Restrictive or Sensitive Data*

Where data pertaining to the data subject resides in documents with other information of a sensitive or restrictive nature, such as Confidentiality Agreements or where personal details pertaining to another individual are also contained, then such information in that document is redacted. Such a decision would be up to the judgement and discretion of the DPA to make the call. In the case where any information in a document is redacted, a legitimate reason must be provided.

- *DPA to collate data*

On receipt of all relevant data files, the DPA to compile the data in single coherent document and a copy sent to the data subject no later than 28 days from the date of the request.

- *File All Request Details and Correspondence*

All communication and documentation relating to the data subject's request should be filed in relevant folder for audit trail purposes and for future reference if necessary.

- *Obtain Acknowledgment from Data Subject After Completion*

Every reasonable effort is made to obtain acknowledgment from the data subject that the request is completed to their satisfaction.

#### **11.8.6 Policy Review**

This data protection notice will be reviewed from annually to take into account changes in the law and the experience of the notice in practice.

#### **11.8.7 Providing Information Over the Telephone**

Any employee dealing with telephone enquiries should be careful disclosing any personal information held by the College over the phone. The employee should: -

- Check the identity of the caller to ensure that information is only given to a person who is entitled to that information
- Suggest that the caller put their request in writing if the employee is not sure about the identity of the caller and in circumstances where the identity of the caller cannot be verified
- Refer the request to their manager and/or the Data Controller for assistance in difficult situations. No employee should feel forced into disclosing personal information.

### **11.9 Data Protection: Employees**

#### **11.9.1 HR What are your rights under data protection law?**

You have the following rights under data protection law, although your ability to exercise these rights may be subject to certain conditions. It may be still lawful for us to continue processing your information even where you have withdrawn your consent, if one of the other legal bases is applicable.

- the right to receive a copy of and/or access the personal data that we hold about you, together with other information about our processing of that personal data;
- the right to request that any inaccurate data that is held about you is corrected, or if we have incomplete information you may request that we update the information such that it is complete;
- the right, in certain circumstances, to request that we erase your personal data;

- the right, in certain circumstances, to request that we no longer process your personal data for particular purposes, or object to our use of your personal data or the way in which we process it;
- the right, in certain circumstances, to transfer your personal data to another organisation;
- the right to object to automated decision making and/or profiling; and
- the right to complain to the Data Protection Commissioner.

#### **11.9.2 Review of HR GDPR**

This data protection notice will be reviewed from time to time to take into account changes in the law and the experience of the notice in practice.

#### **11.9.3 Further information**

If you have any queries in relation to this data protection notice, or if you have any concerns as to how your data is processed, please contact your Manager.

#### **11.9.4 Data Retention Policy with Respect to Employee Records**

This policy and schedule has been put in place to ensure that personal data is only retained for as long as is necessary for the purpose for which it was given to the organisation. The policy ensures respect for the data privacy of employees, lessens the risk of a data breach and aims to prevent loss of personal data.

Employees are obliged to have a clear awareness of the data retention policy and, where they are responsible for relevant data, to implement the retention periods set out below.

Recruitment related data	Contact details, date of birth, curriculum vitae, work and educational history, referee names, interview notes, related documentation etc	Individuals have 12 months to refer a complaint to the Workplace Relations Commission under the Employment Equality Acts 1998-2015, therefore this documentation will be retained for at least 12 months from the date the position is filled in order to defend any claim to the WRC.
Terms and conditions of employment	Personal data contained in contracts of employment and all related documentation	<p>The Terms of Employment (Information) Act 1994-2012 provides that an employee's terms and conditions of employment must be retained for the duration of the employment and 1 year thereafter.</p> <p>The statute of limitations provides that a claim for breach of contract may be brought up to 6 years from the date of breach. Plaintiffs have 1 year from the commencement of proceedings on a defendant.</p>

		Therefore, all contractual and related documentation will be retained for the duration of employment and 7 years from the termination or expiration of the contract.
Working time records	Weekly working hours, annual leave and public holidays, rest breaks, PPS numbers, statement of duties, name/address of each employee, copy of employment contract, copy of any notices given to employee about starting and finishing times and notice of additional working hours.	The Organisation of Working Time Act 1997 and related regulations provide that working time records must be retained for a minimum 3 years from the date of creation.
Payslips		The National Minimum Wage Act 2000 provides that payslips must be retained for at least 3 years from the date of their making.
Employee payroll and tax records		To comply with Revenue requirements all employee and tax records be retained for 7 years from the end of the financial year following termination of employment to the end of any enquiry by the Revenue Commissioners.
Employment Permit Records	Duration of employment, remuneration details, employment permit details	The Employment Permits Act 2003-14 provides that employment permit records must be retained for 5 years or a period equal to the duration of employment.
Parental Leave/force majeure leave records	Commencement of leave, duration of leave, manner in which leave was taken, notices and employee signatures	The Parental Leave Acts 1998 and 2006 provide that records must be retained for 8 years from the date of the leave. Notices in relation to the leave must be retained for 12 months.
Paternity leave records	As above	The Paternity Leave and Benefits Act 2016 provides that records of the leave taken must be retained for 8 years.
Carer's Leave Records	As Above	The Carers Leave Act 2001 provides that records of the leave taken must be retained for 8 years. Notices in relation to the leave must be retained for 3 years.

Records of employees under 18 years of age	Written permissions from parent/guardian, name, date of birth, starting and finishing times of work, pay details	The Protection of Young Persons (Employment) Act 1996 provides that records must be retained for at least 3 years
Medical Records	Sick leave certificates, occupational health assessments and any other records relating to sick leave.	The College recommended to keep for 7 years
Email and internet usage	Emails stored in an employee's email inbox and data relating to an employee's internet browsing history.	IT have access to employee's emails where necessary in the interest of the business.
CCTV usage	The College has closed circuit television cameras located on the ground floor of the College in the lobby beside the elevator and the reception area. This is necessary in order to protect against theft or pilferage, for the security of staff and organisation property. Access to the recorded material will be strictly limited to authorised personnel. Please refer to the CCTV policy for further details.	CCTV Policy states that all recordings are maintained on a weekly basis. This is necessary in order to protect against theft or pilferage, for the security of staff and organisation property. Access to the recorded material will be strictly limited to authorised personnel.

All retention periods set out above are subject to the data protection principles applicable to the personal data contained in records.

#### **11.9.5 Extension of retention periods**

The retention periods set out above may be extended in exceptional circumstances including where records are required by the organisation to defend any legal claims taken against it or on receipt of appropriate advice.

#### **11.9.6 Security of data**

The organisation will take all reasonable steps to ensure that appropriate security measures are in place to protect the confidentiality of data being destroyed in line with this retention policy.

### **11.10 Data Retention: Students**

The College retains personal data indefinitely for all past and active students in accordance with our legitimate business needs, except if specifically requested by the data subject to remove their data from our records, in which case we will action this request in accordance to our data deletion procedure.

For those subjects who are coming to us via Springboard, the College have a statutory obligation to report to Springboard on these subjects regarding their academic and employment status/outcomes, therefor even if a data deletion request is made there will be information we must hold as part of our legal obligations, we will also hold the data to support the data deletion request.

### **11.10.1 The personal data we collect from you**

#### *Enquiries and leads*

When you request information or make enquiries about any of our services or programmes, we may use the personal data you provide in order to fulfil your request or respond to your enquiry. So that we can provide you with the information, courses, programmes or services, you have requested, we collect and store certain information about you, including your name, telephone number, e-mail address, postal address and educational background when you ask for information about our courses or study materials. It is in our legitimate interests to use your personal data in this way so that you receive the information you have requested.

#### *Applications and Enrolments*

If you are applying or enrolling as a student, we may collect the following personal data about you:

- Personal contact details such as name, title, addresses, telephone numbers, and personal email addresses.
- Date of birth.
- Gender.
- Nationality and country of residence.
- Education history.
- Employment history (if applicable).
- Personal Public Service (PPS) number (if applicable).
- Official Photo Identification
- Credit card or other payment information in order to process your payments.

This information will be used by us to perform the contract we have entered into with you.

We may also collect information about your academic experience and progression. This is in order to fulfil our contract with you but it is also in our legitimate interests to use this personal data in order to monitor the provision of our service to you.

We may also collect personal data about your health in order to make appropriate arrangements and reasonable adjustments for you regarding your welfare or attendance. We use this information in order to perform our contract with you and in order to comply with our legal obligations.

We also may collect from you emergency contact information, such as the telephone number or email address for a friend or family member. By submitting such data to us, you represent to us that you have obtained consent from your emergency contacts to provide us their information for this purpose.

#### *Marketing*

Where you have explicitly consented to do so, we may use your personal data to:

1. Inform you of new information that we believe may be of interest to you and the programme area(s) you have shown the interest in; and/or
2. Invite you to Open Events or Information Sessions relevant to your programme(s) of interest.
3. If you would prefer that we do not send such communications to you, please follow the opt-out links on any marketing message or contact us using the contact details in this Privacy Notice.

#### *Internal business purposes*

We also may use your personal data for our internal business purposes. This is in our legitimate interests in order to operate as a business and monitor and improve the services we provide. Where possible we will anonymise this information. Please contact us using the contact details in this Privacy Notice if you would like more information.

#### *Automated technologies or interactions.*

As you interact with our website, we may automatically collect technical data about your equipment, browsing actions and patterns. We collect this personal data by using cookies and other similar technologies. Please see our cookie policy on our website for further details.

#### *If you fail to provide personal data*

Where we need to collect personal data by law, or under the terms of a contract we have with you and you fail to provide that data when requested, we may not be able to perform the contract we have or are trying to enter into with you (for example, to provide you with goods or services). In this case, we may have to cancel a product or service you have with us but we will notify you if this is the case at the time.

#### **When and how we share your personal data with others**

We may share your personal data with third parties where required by law, where it is necessary to perform a contract or where we have a legitimate interest in doing so. We will need to use your data to perform our obligations and exercise our rights under agreements made with you and to inform you of feedback and exam results.

**Awarding Bodies:** We provide certain personal information collected by us, including PPS numbers, to Quality and Qualifications Ireland (QQI) and other Awarding Bodies to allow them to process students' results through their systems Privacy Statement.

Such third parties may include the following:

- **Our service providers:** We may share your personal data with other companies that perform certain services on our behalf. These services may include legal, financial and accounting advice, processing payments, providing customer service and marketing assistance, performing business and sales analysis and supporting our website and IT functionality. These service providers may be supplied with or have access to your personal data solely for the purpose of providing these services to us

or on our behalf. Innopharma Education is the data controller and will remain accountable for your personal data.

- Your employer or potential employer: We may share your personal data with your employer or potential employer with whom we have a contract relating to your programme of study. This may include attendance and exam results.
- Awarding Bodies: We provide certain personal information collected by us, including PPS numbers, to Quality and Qualifications Ireland (QQI) and other Awarding Bodies to allow them to process students' results through their system.
- Public Health Officials: We are obliged to provide contact information to the Department of Health and/or the Health Service Executive for the purpose of contact tracing in the event that a case of COVID-19 or another infectious disease is reported amongst the Innopharma community.
- Others: We may share your personal information with other third parties such as in the context of the possible sale of our business. We may also need to share your personal data in order to permit us to pursue available remedies or limit damages we may sustain.

#### **11.10.2 Innopharma Education – Data Retention Schedule**

This retention schedule provides a guideline on how long Innopharma Education records should be retained under the current Records Management Policy. This Schedule ensures that information is kept as long as necessary and takes account of our responsibility to be compliant with the Data Protection Act. When retention periods for records have expired, documents should be reviewed in accordance with the college's Retention and Destruction policy, which has been included in this schedule. Where a retention period has expired electronic documents will be deleted and hard copies of documents will be confidentially shredded.

Where it is believed that there is justification to retain the data longer than indicated, then explicit reasons should be documented for doing so in consultation with the head of department or line manager.

#### **Head of Academic Affairs Office**

Document/record	Retention period	Action	Responsible
General Information Files containing a wide range of materials pertinent to the operation and interest of the Registrar's office.	Indefinitely		Director of Academic Affairs
Minutes of Meetings	Indefinitely		Director of Academic Affairs
New course approvals, process and reports	Indefinitely		Director of Academic Affairs
Circular letters and Government Reports	Indefinitely		Director of Academic Affairs

Documents and correspondence relating to litigation or disputes which have been completed or settled.	7 years	Delete all electronic files. /Shred hard copies	Director of Academic Affairs
Prospectus, Student Handbooks, Graduation Booklets	Indefinitely		Director of Academic Affairs
Programmatic Review Documents/Institutional Reviews	Indefinitely		Director of Academic Affairs
Disciplinary Committee Minutes	7 years after completion of event.	Delete all electronic files. /Shred hard copies	Director of Academic Affairs
Student Discipline Records -Major Offences	Duration of programme + 7 years, if a matter of public importance may be kept longer.	Delete all electronic files. /Shred hard copies	Director of Academic Affairs

#### Academic Council

Document/record	Retention period	Action	Responsible
Signed minutes of meetings and backup material of Academic Council meetings, details of its sub committees and working groups.	7 years	Delete all electronic files. /Shred hard copies	Secretary of Academic Council
General correspondence	3 years	Delete all electronic files. /Shred hard copies	Secretary of Academic Council
Approved programme schedules	indefinitely		Secretary of Academic Council

### Education Management Committee

Document/record	Retention period	Action	Responsible
Signed & Approved minutes of meetings and supporting documentation	7 years	Delete all electronic files. /Shred hard copies	Secretary of Education Management Committee

### Quality Assurance Enhancement Office

Document/record	Retention period	Action	Responsible
Minutes of meetings of academic council sub-committees, backup materials	7 years	Delete all electronic files. /Shred hard copies	Head of Quality Assurance
Procedure & guideline document master copies and approval records	7 years	Delete all electronic files. /Shred hard copies	Head of Quality Assurance
Collaboration Agreements etc.	Permanent		Head of Quality Assurance

### Admissions

Document/record	Retention period	Action	Responsible
Direct Applications - (Unsuccessful/Not accepted) & opt out of Marketing.	18 months	Delete all unsuccessful applications from Zoho	Admission Coordinator
Direct Applications - (registered)	Duration of programme + 3 years	Removing from Zoho	Admission Coordinator
Registration Forms	Duration of programme + 3 years	Removing from Zoho	Admission Coordinator
Learner Personnel files including those of withdrawn learners.	Duration of programme + 2 years	Removing from Zoho	Admission Coordinator
Learner Statistics – academic/progression/career outcomes	Indefinitely		Admission Coordinator
Student records relating to tuition fees	Duration of programme + 3 years	Removing from Zoho	Admission Coordinator

Learner Record Forms	Duration of programme + 2 years	Remove from Zoho	Admission Coordinator
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### Registrations

Document/record	Retention period	Action	Responsible
Basic Student Registration details	indefinitely, unless the student raises an objection to same		Admission Coordinator
Medical Cert/Absence record	Duration of programme + 3 years	Delete all electronic files. /Shred hard copies	Admission Coordinator Admission Coordinator
I.D. Card Record	Duration of study	Delete all electronic files. /Shred hard copies	Admission Coordinator
Graduation In Absentia payment file	Indefinitely		
Course Timetabling Record	2 Years	Delete all electronic files. /Shred hard copies	Admission Coordinator

### Examinations

Document/record	Retention period	Action	Responsible
Minutes of internal meeting	7 Years	Delete all electronic files. /Shred hard copies	Examination's office
Examinations papers & associated solutions	Indefinitely		Examination's office

deferral, withdrawal and applications for transfer course	Duration of programme + 3 years	Delete all electronic files. Removal from Zoho	Examination's office
Student Discipline Records -Major Offences	Duration of programme + 3 years	Removal from Zoho	Examination's office
Examination scripts	1 year following the Autumn repeat cycle of the year in which the exam was held.	Shred Hard Copy Scripts and Delete Electronically held assessments.	Examination's office
Assessment results - broadsheets	Indefinitely		Examination's office
Examination results - individual module sheets provided by external and internal examiners	Indefinitely		Examination's office
Examination Appeals documentation	3 years after the student ceases to be a registered student at the College provided no litigation is initiated during that period.	Delete from Record and One drive	Examination's Office
General correspondence	2 years after the student ceases to be a registered student of the College	Delete from Record and One drive	Examination's Office
External Examiner report & Records of exam board meetings Assessment results	Indefinitely		Examination's office
Conferring records	Indefinitely		Examination's office
Invigilator C.V.'s	18 months	Delete Electronic Copies & Shred hard copies	Examination's office
Repeat Exam Application records	Duration of programme + 2 years	Delete Electronic Copies	Examination's office

Requests for Transcripts/Parchments	6 months from completion of task	Delete Electronic Copies	Examination's office
Student records including academic outcomes.	Indefinitely		Examination's office

### Student Services

Document/record	Retention period	Action	Responsible
Minutes of meeting	Indefinitely		Student Services Coordinator
Student information relating to support/library enrollment/general.	2 years after the student ceases to be a registered student of the College.	Delete Electronic Copies	Librarian
Student correspondence – emails/letters	2 years after the student ceases to be a registered student of the College.	Delete Electronic Copies	Student Services Coordinator
Student information to set up library accounts is transferred from the Banner database system.	Duration of course plus 1 year	Delete Electronic Copies	Librarian
Borrowing Records	Duration of course plus 1 year	Delete Electronic Copies	Librarian
Undergraduate dissertations (Thesis), Post Graduate Dissertations, Theses research and Taught Masters	Indefinitely		Librarian

### IT Service

Document/record	Retention period	Action	Responsible
Minutes of meeting	Indefinitely		IT Services Manager
Attendance Records	1 year	Delete electronic record.	IT Services Manager

Student Innoskills (Moodle) records	2 years after the student ceases to be registered in the college.	Record archived 2 semesters after completion and deleted thereafter in accordance with retention period	IT Services Manager
Lecture Recordings	2 years	Attached to Innoskills (Moodle) record and deleted in line with Innoskills (Moodle) record retention period.	IT Services Manager
Staff Accounts	Immediate after staff exit	Delete record – Innoskills (Moodle) , All Microsoft access (one drive, SharePoint email)	IT Services Manager
CCTV	2 weeks	Auto resets every 2 weeks	IT Services Manager

## HR

Document/record	Retention period	Action	Responsible
Personal Records - employment history, qualifications, training, salary increments, appointment details, medical certificates, leave of absence, birth certificates, staff development, etc.	Term of Employment plus 6 years	Delete Electronic Files/Shred hard copy files	HR Manager
Interview Report Forms, Selection Board recommendations. Application forms and any other documentation in respect of applicants who are not offered positions	12 months from the date the position is filled in order to defend any claim to the WRC.	Delete Electronic Files/Shred hard copy files	HR Manager
HR Policies and Procedures	Indefinitely		HR Manager

Attendance Records - Sick leave, annual leave, maternity leave,  Force Majeure, Parental Leave etc.	Term of Employment plus 3 years  Term of Employment plus 8 years	Delete Electronic Files/Shred hard copy files	HR Manager
Training: Details of courses attended; Training Budget and related correspondence. Applications for support subsidy, Training Policy	Indefinitely		HR Manager
Staff lists, addresses and contact numbers	Duration active employment and updated on an ongoing basis	Delete Electronic Files/Shred hard copy files	HR Manager
General Correspondence	3 Years	Delete Electronic Files/Shred hard copy files	HR Manager

### Finance

Document/record	Retention period	Action	Responsible
Insurance documentation	7 years	Delete Electronic Files/Shred hard copy files	Finance Manager
Budget files and correspondence	Indefinitely		Finance Manager
Signed financial statements and audit reports	Indefinitely		Finance Manager
Final operating programme and budgets	10 years	Delete Electronic Files/Shred hard copy files	Finance Manager
Internal audit reports	10 years		Finance Manager
Legal documents and correspondence	Indefinitely		Finance Manager
All payroll reports for weekly, monthly and part-time staff	3 Years	Delete Electronic Files/Shred hard copy files	Finance Manager

Memos from personnel for payroll calculations	6years	Delete Electronic Files/Shred hard copy files	Finance Manager
P35s and P30s and P60s	6years	Delete Electronic Files/Shred hard copy files	Finance Manager
Bank statements	6years	Delete Electronic Files/Shred hard copy files	Finance Manager
Bank reconciliation records	6years	Delete Electronic Files/Shred hard copy files	Finance Manager
Monthly governing body financial reports	6 years	Delete Electronic Files/Shred hard copy files	Finance Manager
Minutes of meetings relevant to the Finance office and other staff members	6years	Delete Electronic Files/Shred hard copy files	Finance Manager
Financial reports for student assistance and disability reports	6years	Delete Electronic Files/Shred hard copy files	Finance Manager
Copies of financial procedures	Indefinitely		Finance Manager

#### IT

Document/record	Retention period	Action	Responsible
Software Licence	Indefinitely		IT Manager
Network account usernames - students	1 year after the individual has left the College		IT Manager
Network account usernames - staff	Duration of employment - Security copies for a further 3 months.		IT Manager

#### Marketing

Document/record	Retention period	Action	Responsible
General minutes of meeting	Indefinitely		Marketing Manager
Prospectus, student handbooks, graduation booklets, marketing literature	Indefinitely		Marketing Manager

#### Data Protection

Document/record	Retention period	Action	Responsible
Data Protection Requests and all materials pertinent to each request	5 years		Information Security Committee
Request Register	Indefinitely		Information Security Committee

## 11.11 Document Control

Document Title	Data Retention Schedule
Author	Data Protection Representative
Version	4.0
Date created	July 2021
Review	June 2022

## 11.12 Data Deletion

Data destruction is a critical component of a data retention policy. Data destruction ensures that the College will use data efficiently thereby making data management and data retrieval more efficient and cost effective. When the retention timeframe expires, the College must actively destroy the data covered by this policy. If a user feels that certain data should not be destroyed, he or she should identify the data to his or her supervisor so that an exception to the policy can be considered. Since this decision has long-term legal implications, exceptions will be approved only by a member or members of the College management team.

The College specifically directs users not to destroy data in violation of this policy. Destroying data that a user may feel is harmful to himself or herself is particularly forbidden or destroying data in an attempt to cover up a violation of law or company policy. Data will be held across a number of databases depending on the subject's status. On audit and review of data in line with deletion policy the College will remove subject personal data on a permanent basis.

In accordance with GDPR guidelines a Data Subject can request to have their data removed on a permanent basis from our database. Where an individual contacts the College in this regard, we have specific steps that we follow to ensure the request is actioned in the most appropriate and effective manner.

- Data Controller i.e. the College have 28 days to action and complete request (*in accordance with GDPR guidelines*).
- Data Protection Representative to Speak to the Data Subject directly to confirm their request and outline the process including our statutory obligations to

report to Springboard where applicable and advise we have 28 days to complete the request.

- Get Data Subject to complete the Data Deletion request form.
- Data Protection Representative to contact owners of various databases and filing systems in the College to sweep the database/hardcopy files for all data subject information and remove permanently in a secure manner.
- The data base owner on completion of this task reports back to Data Protection Representative to confirm all information removed.
- Final contact with data subject from Data Protection Representative to confirm all records are deleted.
- All appropriate records relating to this request to be save in the GDPR folder.

## 11.13 Data Protection Breach

### 11.13.1 Overview Data Breach Policy

The GDPR (*General Data Protection Regulation*) defines a ‘personal data breach’ as a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data transmitted, stored or otherwise processed.

### 11.13.2 The College’s Data Breach Policy:

Prevention is better than cure and all the College staff have been trained and understand GDPR policy and the importance at all times of protecting all information we hold in respect to a data subject.

In accordance with the GDPR guidelines the College employees shall not disclose any Data Subject’s Information (including Personal Data), unless our Policies allow such disclosures. Regardless of the measures that are taken in accordance with the above paragraph and related policies, there is always a risk of data security incidents arising. Data security incidents may range from relatively minor incidents, which do not actually result in unauthorised disclosure, loss, destruction or alteration of personal data, to major security incidents, such as the loss or theft of devices, such as laptops, which contain personal data. The College Staff must report all suspected data security incidents to the Data Protection Response Team, Incidents include:

- Disclosure, loss, destruction or alteration of Customer Confidential Information, regardless of whether it is in paper or electronic form.
- The Data Protection Response Team will consider whether the incident constitutes a personal data breach. If the incident does constitute a personal data breach, the Data Protection Response Team will consider whether a notification to DPC is required.
- The Data Protection Response Team will also take such steps as are required to stop, contain or mitigate the effects of the data security incident and ensure that appropriate steps are taken in response to the incident, including the putting in place of new policies and procedures where necessary.

- Where a personal data breach occurs, it must be reported to the Data Protection Commissioner and other stakeholders without delay and, where feasible, not later than 72 hours after the College become aware of the breach, unless the personal data breach is unlikely to result in a risk to the rights and freedoms of natural persons.
- Where a personal data breach is likely to result in a high risk to the rights and freedoms of affected data subjects, then those data subjects must also be notified without undue delay.
- When assessing whether there is a high risk to data subjects it is important to bear in mind that one of the core purposes for notifying data subjects is to help data subjects take steps to protect themselves from any negative consequences of the breach.
- Notifications to the Data Protection Commission must include the following information:
  - a) a description of the nature of the personal data breach including, where possible, the categories and approximate number of data subjects concerned
  - b) approximate number of personal data records concerned.
  - c) the name and contact details of the Data Protection Response Team.
  - d) a description of the likely consequences of the personal data breach; and
  - e) a description of the measures taken or proposed to be taken by the College to address the personal data breach, including, where appropriate, measures to mitigate its possible adverse effects.
- f) Notifications to data subjects must include the information set out above.

The College will also ensure that an appropriate record of the data security incident as well as any associated communications, are maintained in a Data Security Incident Log. The record should at a minimum include a brief description of the nature of the data security incident as well as whether the incident was reported.

Any notifications to affected data subjects or the Data Protection Commission will be made by an appointed individual from the College Data Protection Response team. Individual staff members should not make any such communication.

## 11.14 Data Backup and Recovery

Information security is extremely important to the College, driven in part by GDPR and advances in technology. Information security ensures that the College data and infrastructure are protected from risks such as unauthorised access, destruction or loss of data, as well as unauthorised disclosure or incorrect processing of data.

### 11.14.1 Purpose of data backup and recovery

The primary objective of the policy is to protect the College data from loss and ensure it can be recovered in the event of equipment failure, a destruction or becoming inaccessible. This policy seeks to outline the data backup and recovery controls for the College employees to

ensure that the data is correctly and efficiently backed up and recoverable in line with best practice.

#### **11.14.2 Scope of data backup and recovery**

This Data Backup and Recovery Policy has been created to guide and assist the College to align with GDPR, regarding data backup, recovery controls and procedures.

The policy applies to all employees of the College. This policy is crucial to the effective protection of data and a means for its recovery.

This policy applies to company related data that is stored locally by users on desktops, laptops, tablets and mobile phones. This includes both Windows, Mac and Android devices all of which are compatible with Microsoft OneDrive.

This policy does not relate to corporate email or contacts which are automatically synchronized with the user's device and the College Microsoft Exchange Server.

This policy does not relate to applications managed by the College Services that store, process or transmit information, including network and computer hardware, servers, or software and applications either locally or cloud hosted.

#### **11.14.3 Policy**

##### *11.12.1.1 What cloud storage services can I use to store and share information at the College?*

For the purposes of work-related file storage or file sharing, employees at the College may use either OneDrive or SharePoint service that is associated with their College Microsoft Office365 account.

- Employees should take care to ensure that they do not use a OneDrive account (such as a personal Microsoft account) that is not associated with their College Microsoft Office365 account to store or share work related files.
- Employees who have been using alternate cloud platforms for work related file storage or file sharing should immediately discontinue this practise. This includes services like Google Drive, Drop box, iCloud etc. These are not corporately supported services by the College.
- OneDrive or SharePoint offer equivalent functionality to alternate cloud platforms. If you are migrating from using an alternate cloud services please seek technical assistance if you have difficulty replicating features, functionality or processes in OneDrive/SharePoint.
- Continued use of alternate cloud platforms for work related file storage or file sharing by an employee will place them in breach of the College GDPR compliance policies.

It is the responsibility of the individual to ensure that their device is correctly synchronised with their corporate OneDrive and that they use and manage OneDrive in a way that synchronises work related data that is created on their local device. The College IT Services have issued guidelines on how to configure OneDrive on your device; however, please request support directly if you require assistance in setting this up.

OneDrive provides powerful functionality for users who need to recover working versions of files or folders that are missing, deleted or corrupted. Users may please request assistance from the College IT services if needed for such data recovery.

- *Why will the College not permit the use of alternate cloud platforms?*

It is impractical for the College at a corporate level to support alternate cloud platforms while at the same time maintaining a high degree of GDPR compliance. The terms of use, privacy policies and other user obligations of such services, would need to be reviewed and approved for use, on an ongoing basis as they are updated by the College. The proliferation of accounts, their management and security could not easily be managed as they are not synced with the College Microsoft Office365 accounts. It would be impractical for the College to have a robust process to respond to data requests, right to be forgotten requests or data breach incidents.

#### **11.14.4 Removable Media Policy**

Removable media is a well-known source of malware infections and has been directly tied to the loss of sensitive information in many organisations. Employees should take care to limit the circumstances in which they make use of removable media to minimise the risk of loss or exposure of sensitive information and to reduce the risk of acquiring malware infections.

When using removable media suitable encryption software should be used to secure the drive.

Sensitive information including that of Personal Data as defined under GDPR should not be stored on removable media.

Removable media should not be used as a form of data backup and recovery. Employees should use OneDrive for this purpose.

Exceptions to this policy may be requested on a case-by-case basis. Such requests should be made to the IT Manager.

## 11.15 Control Sheet

Policy and Procedure Title	Information and Data Management
Responsible Officer(s)	Director Academic Affairs and Registrar
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	27 <sup>th</sup> June 2020
Supersedes	2.0
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 11.15.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Affairs	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	There has been a significant revision of this policy to incorporate related procedures into the QAM; Responsibilities of College staff have been included; Greater clarity on the definition of lawful data processing is appropriately expanded beyond consent. The revised definition accounts for data processing that is necessary for the performance of a contract, necessary for compliance with legal obligations, or necessary protect the vital interests of the data subject or a natural person	Director of Academic Affairs	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Signification revision of policy to include Section 11.9.1 outlining the data collected and shared and 11.9.2 includes the data retention schedule	Director of Academic Affairs	Academic Council

Version 4.0	15 <sup>th</sup> December 2023	Revision of QA manual to reflect changes to roles and corporate governance within Innopharma education	Director of Academic Affairs	Academic Council
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## 12. Public Information and Communication

### 12.2 Policy for Public Information and Communication

QA Area (s)	• Public Information and Communication
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
Policy Owner	Director of Academic Affairs

#### 12.2.1 ESG Standard:

##### **ESG Standard 1.8**

*Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to-date and readily accessible.*

#### 12.2.2 Purpose

This policy sets out the principles that the College adopts for the comprehensive and effective public communication about the College and its programmes, including information that will help prospective learners make informed choices.

#### 12.2.3 Scope

This policy applies to all staff involved in the preparation and/or dissemination of communication material for the public and prospective students.

#### 12.2.4 Policy

The College is committed to the publication of “clear, accurate, up to date and easily accessible”<sup>1</sup> information, for all stakeholders on the College website. It ensures that all information published by the College is monitored for accuracy and honesty on an ongoing basis.

### 12.3 Provision of Information

#### 12.3.1 General Information

##### **Responsibilities:**

It is the responsibility of the Director of Academic Affairs to ensure all relevant information published by the College is comprehensive, accurate and honest. Information in this context, is any information about the College that is available publicly or specifically promoted and includes the following:

- Essential and legal details about the College.  
(e.g. full name, location of College, key staff, legal and accreditation status, contact details)  
These are available on the College website, and through official documentation which is available upon request.  
(Reviewed and updated, where necessary, annually)
- College Mission and Strategy.
- Information regarding education and training programmes including non-accredited programmes:

- Programme Information.
- Arrangements for the protection of enrolled learners.
- Terms and conditions.
- Tuition and all associated fees.
- Pre-enrolment Information.

(Reviewed and updated, where necessary, annually)

- QA policies and procedures:
  - Quality Assurance Manual.
  - Access, Transfer and Progress, Recognition of Prior Learning Procedure (RPL) and other relevant (Prospective) Learner information in relation to Programmes of Education and Training.
  - These Policies and Procedures are available in the Quality Assurance Manual.

(Reviewed and updated as and when appropriate)

- Reports from QA or programme evaluations, this includes, but is not limited to:
  - Initial engagement and re-engagement.
  - Validation Reports.
  - Programme Revalidation Reports.
  - Institutional review.
- Information Provision and Data Management
 

This information includes information about the use of personal data and right to privacy. It includes details of how the College processes and manages data. This is available on the College website and in the Quality Assurance Manual.

(Reviewed and updated, where necessary, annually)

- Marketing Materials
 

This information is available through brochures which are available in the College, and through online advertisements (e.g. Promoted Posts on Social Media), and at conferences, workshops and events where the College has an active presence.

(Reviewed and updated, where necessary, annually)

- Where information provision involves active engagement with the public/stakeholders, all communications shall be conducted in an honest, helpful, respectful and friendly manner.

### 12.3.2 Information Provided to Learners

It is the responsibility of the **Director of Academic Affairs**, in conjunction with the **Director of Academic Programmes**, to ensure all relevant programme and award information is made available on the College website to prospective learners and that it is current, honest, transparent and facilitates comparison.

The College website is used as the primary tool to communicate public information. In addition to marketing information and programme information above, other information available on the website includes information on upcoming events, news, College activities and the relevant support services attached to a programme.

A review is conducted on an annual basis prior to production of the recruitment campaigns for enrolment. This ensures accuracy is maintained to enable prospective learners to have clear, transparent information to facilitate comparison and better decision making. Such information includes:

- Whether or not a programme leads to an award.
- The name of the awarding body. The title of the award; whether the award is recognised in the NFQ and if so, the award type and NFQ level.
- Whether the programme is subject to procedures for access, transfer and progression and if so, what these are.
- Details of the PEL arrangements in place, should PEL be a requirement.
- Prior to enrolment all learners have access to information including:
  - Programme information:
    - Programme learning outcomes
    - Entry requirements
    - Access, transfer and progression
    - Commencement dates
    - Admission procedures
    - Fees
    - Any additional non-discretionary costs
    - Terms and conditions
    - Arrangements for the protection of enrolled learners
  - Information pertaining to the blended mode of delivery, including:
    - The blend of learning that will be experienced within a specific programme (i.e. the proportion of online asynchronous, online synchronous and face-to-face learning; the extent to which learning is autonomous, collaborative or supported).
    - The realistic commitment required from a learner to successfully complete the programme.
    - Pre-knowledge or technical skills a learner requires to successfully complete the programme.
    - The hours when academic, technical and pastoral supports are available and the nature of these supports.
    - Details of any hardware or software required to enable access to or participation in College programmes, and mechanisms to test hardware.
    - Mandatory attendance or participation requirements for specific aspects of the programme, where these exist.

- Terms and conditions relevant to a specific programme (e.g. specified timings for synchronous learning or assessment, regulations pertaining to re-assessment opportunities).

This information is either available to all on the College website or included in the learners' offer letter and enrolment information.

In addition, learners, through the Class Representative system have access to reports and minutes of appropriate boards and committees.

### **12.3.3 Programme Lead**

It is the responsibility of the **Programme Lead** to ensure all relevant programme and award information is available to enrolled learners in the Student Handbook and Module Guides.

### **12.3.4 Responsibility**

- The **Director of Academic Affairs** is responsible for ensuring that all information in the public domain is clear, accurate, objective, up to date and easily accessible and for ensuring that reports issued for formal evaluations including College enhancements are published in a timely manner. Such information is made available on the College website, intranet or in the Student Handbook, and other marketing material.
- It is the responsibility of the **Marketing Manager** to ensure that all such information is current.
- The **Head of Quality Assurance and Admissions** oversees the authorship, maintenance and review of all documentation relevant to the College's Quality Assurance Framework.
- **Programme Leads**, under the guidance of the **Head of Faculty**, are responsible for the ensuring the accuracy of all programme material that is published.
- The **President** is responsible for the maintenance and review of all legal documentation pertinent the College and its operations.
- The **Academic Council** is responsible for approving all changes and updates to documentation that, in any way, directly affects or has an impact on the Academic Framework of the College.

### **12.3.5 Related legislation, regulation or guidelines:**

- <sup>1</sup>Core Statutory Quality Assurance Guidelines, 2016 (QQI) - Section 9
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).

## 12.4 Control Sheet

Policy and Procedure Title	Public Information and Communication
Responsible Officer(s)	Director of Academic Affairs
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	27 <sup>th</sup> June 2020
Supersedes	2.0
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 12.4.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Affairs	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	Reflects changes to Job Titles and Responsibilities pertaining to Public Information and Communicatoin	Director of Academic Affairs	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Section 12.2.2 Final bullet point – Information pertaining the blended mode of delivery has been significantly expanded	Director of Academic Affairs	Academic Council

## 13. Other Parties involved in Education and Training

### 12.1 Policy for Engagement with Other Parties Involved in Education and Training

<b>Quality assurance Area (s)</b>	Public Information and Communication
<b>Applies to</b>	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
<b>Policy Owner</b>	Director of Academic Affairs

#### 13.2.1 ESG Standard 1.8: Public Information

*Institutions should publish information about their activities, including programmes, which is clear, accurate, objective, up-to date and readily accessible. All collaborative arrangements or other relationships with external bodies, both in Ireland and abroad, offered through or by the College are organised with reputable bodies and are subject to appropriate internal and external Quality assurance procedures.*

#### 13.2.2 Purpose

This policy sets out the principles that the College adopts for the effective management of its relationships with other parties in higher education and its use of appropriate external expertise, including advisors, expert panellists and examiners.

#### 13.2.3 Scope

This Section details the policy and procedures which could be followed for the development, approval and ongoing quality management of the following:

- Programmes operated in collaboration with other organisations nationally or internationally.
- Engagement of external expertise, including advisors, expert panellists, and examiners.

#### 13.2.4 Policy

While the College has established partnerships with TU Dublin, Tallaght Campus and Griffith College, it is conscious that in its new development phase, it will require additional ongoing external mentoring support. In this regard, it has established key independent roles in its major units of governance, the Board of Directors and the Academic Council. In the case of the Board of Directors a non-executive Director has been appointed, while the Chair of the Academic Council is also external and independent. In both cases, the persons appointed are independent external experts, with a long track record at senior level in higher education. The Board of Directors will also appoint an external chair to the Strategic Advisory Board.

External expertise will also be sought, as required and appropriate, at significant junctures in the College's development and growth, for example, in preparation for validation of programmes of education and training.

In all cases where external persons are engaged, including independent chairs of units of governance, external examiners, advisors, the College shall require that they make a Conflict of Interest Declaration and sign a confidentiality form.

The College's overriding imperative is to establish procedures and processes, in this regard, that minimises any potential risk to it. It will ensure that all such arrangements also maximise opportunities for existing or new learners.

**13.2.5 Related Legislation, Regulation or Guidelines:**

- Core Statutory Quality Assurance Guidelines, 2016 (QQI)
- Sector Specific (Independent/Private) Statutory Quality assurance Guidelines 2016 (QQI).
- Collaborative Programmes, Transnational Provision and Joint Awards, 2016 (QQI).

### **13.3 Procedure for Engagement with Other Parties Involved in Education and Training**

#### **13.3.1 Approval for Collaborative Arrangements**

In proposing collaborative arrangements, the College implements an approval process to mitigate any reputational risk to the College, the sector and /or the national qualifications system associated with particular prospective providers, awarding bodies and other third parties.

All collaborations regarding the delivery of academic programmes must be approved by the Academic Council and the Board of Directors. In reaching its decision, the Board of Directors will be advised by the Executive Management Team on strategic development and risk assessment aspects of the proposal. Clear and appropriate policies and procedures for the quality assurance of collaborations with clearly articulated responsibilities must be agreed and underpinned with a formal agreement.

Collaborative arrangements will vary in nature from delivery of programmes developed in partnership with an awarding body, to a study centre arrangement. The application for approval by the Academic Council is prepared by the Head of Faculty or the function proposing the collaboration. All applications for approval must be arranged to cover the following key headings

1. Legal, reputation and compliance requirements
2. Resource, governance and structural requirements
3. Programme development and provision requirements

The due diligence exercised must take account of the overall suite of education and training provision offered by the proposed collaborator. The Director of Academic Programmes is responsible for academic due diligence. The President is responsible for undertaking financial and legal due diligence. All due diligence reports and associated paperwork are submitted to the Academic Council with the final proposal for approval. Following approval by the Academic Council, the proposal is forwarded to the Board of Directors for final approval.

Where a collaborative arrangement is agreed procedures must be put in place to monitor and review the effectiveness of those arrangements. Any review agreed with a collaborating body, must be periodic, two-way and there should be a facility to schedule a review where there is a doubt or concern regarding the quality of the arrangement.

The Director of Academic Affairs is responsible for maintaining all formal agreements and Quality assurance arrangements and agreeing a schedule of review.

The College does not currently offer any formal collaborative, transnational programmes, or joint awards validated or awarded by QQI. However, the College is informed by QQI policies on Transnational, Collaborative Provision, and Joint Awards, when considering collaborative provision.

#### **13.3.2 Collaborative Arrangements with the TU Dublin, Tallaght Campus (TUD) and Griffith College Dublin (GCD)**

The College has a collaborative partnership with TUD and GCD for validated provision, in which curricula are developed by the College, in liaison with either TUD or Griffith College, for approval through that provider's quality assurance systems.

To achieve this, the College complies with TUD and GCD's relevant quality assurance processes, and meets all financial, legal and academic due diligence requirements, as defined in their Quality Handbook and collaborative provisions requirements.

The following documents define the collaborative arrangements and agreed policy and procedures for the delivery of validated programmes:

- Memorandum of Understanding
- TUD / GCD Quality Handbook
- All documents and agreements are retained by the Director of Academic Affairs office.
- The overall arrangement for the collaborative partnership between the College and TUD or GCD is subject to review at least every five years.

### **13.3.3 Collaborative Partnership Review**

The overall arrangement for the collaborative partnership between the College and TUD and / or GCD is reviewed by the College at least every five years. The partnership review focuses on the partnership, rather than on an individual programme. The purpose is to review the general operation of the partnership, including the operation of regulations and procedures, the monitoring and development of the programmes, the assessment of learners and the enhancement of quality and standards.

### **13.3.4 Validation of Programmes**

TUD is an awarding body in its own right, while GCD has a degree of autonomy in validating programmes. Regardless of which awarding body we are dealing with, all programme development at the College is informed by QQI's Core Validation Criteria.

Validation of New Programmes with TUD or GCD is subject to the approval of College Academic Council. Once agreed in principle the Director of Academic Programmes is responsible for liaising with TUD or GCD in the first instance. The process of programme validation is overseen by the Programme Development Committee of the Academic Council, and undertaken in accordance with the requirements set out in the Quality Assurance Handbook.

The process results in:

- Definitive Programme Document
- Curriculum document:
- Overview of the programme
- Employment Roles and Employability
- Links with Other Organisations
- Programme Details
- Module Details
- Resource information document
- General learning and teaching resources
- Specific and/or specialist learning and teaching resources
- Staffing resources
- Programme of Study Handbook – produced by Head of Faculty and subject to sign off by the Director of Academic Affairs. In addition to the requirements of TUD or GCD all such documents are subject to the College's own policies on public information.

Every programme is subject to revalidation (major review) at least once in every five years. The College proposes a schedule for a major review indicating whether or not there are

plans to make substantial changes to those programmes. The procedure for the review is defined by either TUD or GCD.

Minor changes to programmes are agreed with TUD or GCD Academic Quality and Standards Committee which has oversight of all programme modifications to ensure that academic quality and standards are maintained, and to enable the Academic Office to maintain accurate, definitive records of all programmes.

The Director of Academic Programmes is responsible for ensuring all programmes at the College awarded by TUD or GCD are delivered in accordance with the agreed conditions as laid out in the documents referred to in this Section.

The Director of Academic Affairs is responsible for ensuring that all programmes delivered are properly validated, for maintaining all associated documentation, ensuring the integrity of the data produced and keeping adequate records.

### **13.3.5 External Expertise**

The College engages external, independent, national, and international experts from time to time. These include:

- Membership of the Board of Directors
- Chair of the Academic Council
- Membership of the Strategic Advisory Board
- Membership of Committees
- External Subject Matter Expert Report for new programme development
- Expert Panels
- Internal Review
- Programme Review with Awarding Bodies
- External Examiners.

External Examiners and panel members for programme review are subject to the approval of the Academic Council.

For external review processes, the College engages with, and is guided by, the procedures for the relevant awarding body for the appointment of experts.

The key considerations when selecting and proposing external experts are independence and appropriate expertise and experience.

Generally, the College has a firm policy of not appointing persons to above roles in any case where there is any foreseen possibility of conflict of interest. Even the appearance of conflict of interest, where none exists, can damage the credibility of the person selected and the particular role.

All persons so appointed are required to have completed the 'Conflict of Interest Form' outlined in Appendix 15.A of section 15 of this QAM, prior to their appointment.

The Director of Academic Affairs is responsible for maintaining a record of the names and affiliations of expert panellists, examiners and other external experts associated with the College.

## 13.4 Policy Control Sheet

Policy and Procedure Title	Public Information and Communication
Responsible Officer(s)	Director of Academic Affairs and Director of Academic Programmes
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	27 <sup>th</sup> June 2020
Supersedes	2.0
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 13.4.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Updated to include additional members on Expert Panel Review	Director of Academic Affairs	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	The procedure for Collaborative Arrangements has been incorporated into the QAM	Director of Academic Affairs	Academic Council
Version 3.0	4 <sup>th</sup> September 2020	Section 12.2.5 has been expanded with additional detail supporting the Colleges Conflict of Interest policy	Director of Academic Affairs	Academic Council

## 14. Self-Evaluation, Monitoring and Review

### 14.2 Policy for Self-Evaluation, Monitoring and Review

QA Area (s)	<ul style="list-style-type: none"> <li>Programmes of Education and Training</li> <li>Governance and Management of Quality</li> <li>Documented Approach to QA</li> </ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policy Owner	Director of Academic Affairs

#### 14.2.1 ESG Standard:

**ESG Standard 1.9:** On-going Monitoring and Periodic Review of Programmes

*Institutions should monitor and periodically review their programmes to ensure that they achieve the objectives set for them and respond to the needs of students and society. These*

*reviews should lead to continuous improvement of the programme. Any action planned or taken as a result should be communicated to all those concerned.*

**ESG Standard 1.10:** Cyclical External Quality Assurance

*Institutions should undergo external quality assurance in line with the ESG on a cyclical basis*

**14.2.2 Purpose**

The purpose of this policy is to set out the framework for Self-Evaluation, Monitoring and Review at the College, in alignment with Core Statutory QA Guidelines.

This policy and the associated procedures guide all staff and learner representatives involved in the ongoing self-evaluation and monitoring of quality, including review of programmes. This monitoring process therefore relates to the organisation and operation of the programme as a whole.

**14.2.3 Scope**

This policy applies directly or indirectly to all members of the College community, inclusive of learners, and staff holding teaching, administrative, management or support roles.

**14.2.4 Policy**

The College is committed to maintaining robust and systematic processes for review and self-evaluation as part of the College's overall quality assurance framework. Internal self-monitoring and self-evaluation processes are systematically integrated within the College's overall Quality Assurance Framework. Responsibilities for activities pertaining to this are clearly delineated within the Terms of Reference for various units of governance at the College and within the individual role descriptions outlined in the governance and management structure in Section 2 [Governance and Management of Quality](#). These are particularly emphasised within:

- Terms of Reference for Board of Directors
- Terms of Reference for Academic Council
- Terms of Reference for Programme Boards
- Role and responsibilities: Head of Faculty
- Role and responsibilities: Head of Quality Assurance and Admissions
- Role and responsibilities: Learner Support Coordinator
- Role and responsibilities: Programme Lead

Monitoring and evaluation are crucial to the success of programmes, the enhancement of the learner experience, and are essential to the continued quality of services. The on-going monitoring reports created provide information for the evaluation of programmes, services and quality assurance policies and procedures, as part of internal and external processes and contributes to the enhancement of the learner experience and programme quality in the College.

It is the policy of the College to carry out regular programme monitoring and review, based on a process of self-evaluation, in order to:

- ensure that programmes remain relevant and fit for their intended target market;
- inform updates of programme content; delivery modes; teaching and learning methods;
- learning supports and resources; and information provided to learners;

- identify the impact of interventions, services or development;
- Identify issues for further learning enhancement or corrective action;
- identify best practice for further dissemination;
- ascertain the quality of the experience of stakeholders and act upon them accordingly;
- evaluate the appropriateness of practices;
- review learner progression and completion rates;
- ensure that academic and labour market requirements of the learner are fulfilled;
- embed and promote a culture of quality and enhancement in which all stakeholders play a role;
- meet the changing terms and conditions of approved external validating body;
- review quality assurance arrangements that are specific to that programme;
- analyse the performance and services of the College and its programmes to inform future actions and developments.

The aims of self-evaluation include identifying appropriate quality measures, setting objectives and gathering evidence of achievement of those objectives. The Programme Boards and the Academic Council ensure that objective setting and prioritising are carried out appropriately, transparently and are reported back to those entities. This ensures that findings are acted on and feed into ongoing quality enhancement through a Quality Enhancement Plan which sets out a schedule of actions to be undertaken following internal evaluation and identifies the person(s) responsible for actions and follow-up.

#### **14.2.5 Responsibility**

- The **Academic Council** is responsible for approving this policy and associated policies and procedures and making recommendations to the **Board of Directors** on Self-Evaluation, Monitoring and Review.
- The **Director of Academic Affairs, Registrar, Head of Academic Programmes, Head of Quality Assurance and Admissions and Learner Support Coordinator** are jointly responsible for making recommendations to the **Academic Council** pertaining to Self-Evaluation, Monitoring and Review.
- The **Head of Quality Assurance and Admissions** is responsible for monitoring and maintaining the overall alignment of the College's policy and procedures pertaining to Self-Evaluation, Monitoring and Review to QQI's guidelines and policy statements.

#### **14.2.6 Cyclical Review**

QQI published a policy for Cyclical Review of Higher Education Institutions in 2016. The review has a three-fold purpose:

- It evaluates the **effectiveness** of the institution-wide quality assurance procedures for the purposes of establishing, ascertaining, maintaining and improving the quality of education, training, research and related services the institution provides.

- It measures institutional **accountability** for compliance with European standards for quality assurance, regard to the expectations set out in the QQI quality assurance guidelines or their equivalent and adherence to other relevant QQI policies and procedures as established in the lifecycle of engagement between the institution and QQI.
- It explores institutional **enhancement** of quality in relation to impacts on teaching, learning and research, institutional achievements and innovations in quality assurance, alignment to the institution's mission and strategy and the quality-related performance of the institution relative to quality indicators and benchmarks identified by the institution.

QQI regularly publishes a schedule of reviews. This schedule covers the universities, institutes of technology and the RCSI. The College will continue to monitor this schedule and comply with QQI when further information and guidelines become available for the Independent/Private College sector.

#### **14.2.7 Related Legislation, Regulation or Guidelines**

- Core Statutory Quality Assurance Guidelines 2016 (QQI).
- Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines 2016 (QQI).
- Policies and criteria for the validation of programmes of education and training 2017 (QQI)
- Policy and Criteria for Making Awards 2014 (QQI)
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG, 2015).
- Assessment and Standards, Revised 2013 (QQI).
- Policy for Determining Awards Standards – QQI, 2014
- NFQ Awards Standards
- European Credit Transfer and Accumulation System (ECTS) User Guide –2015
- International Standard Classification of Education (ISCED) – UNESCO, 2011.
- Policy for Cyclical Review of Higher Education Institutions 2016 (QQI)

### 14.3 Procedure for Self-Evaluation, Monitoring and Review

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Governance and Management of Quality</li><li>Documented Approach to QA</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input checked="" type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for Self-Evaluation, Monitoring and Review

#### 14.3.1 Procedure

The Director of Academic Affairs is responsible for preparing the College's Annual Self-Assessment Report (ASAR), compiled from the various self and external evaluation activities, benchmarking, data analysis and the following reports. The ASAR includes findings and recommendations for improvement with an improvement or action plan detailing how and when the College will address the recommendations made in the self-assessment report. A range of monitoring, self-evaluation and review processes are carried out in the College including:

- Report on Admissions, including RPL admissions.
- Examination Board Report including learner attainment, rechecks, reviews, appeals and academic conduct matters.
- Annual programme monitoring including learner retention and withdrawal.
- Annual Student Services Report.
- QA policy monitoring and review.
- Graduate survey.
- Marketing Report.

This Report is submitted to the Quality Enhancement Committee for review.

#### 14.3.2 Annual Programme Monitoring Report

A comprehensive annual monitoring report is completed each year for each programme by the Programme Lead, in consultation with the Programme Board. The report is based on the following:

- Programme Board minutes
- External examiner reports
- Learner appraisal of programmes
- Faculty feedback
- Student enrolment, progression and award statistics

- Survey of employers
- Ongoing learner monitoring reports

#### **14.3.3 Annual Learner Support Report**

This is completed by the Learner Support Coordinator annually and referred to the Quality Enhancement Committee. The report should review the services offered over the year, including details of take up of individual services.

#### **14.3.4 Admissions Report**

An admissions audit is conducted annually for all programmes by the Head of Quality Assurance and Admissions to determine if admissions decisions have been made in accordance with College policy. A report on the audit is submitted to the subsequent meeting of the Quality Enhancement Committee.

#### **14.3.5 Examination Board Monitoring**

The Head of Quality Assurance and Admissions, or their nominee, attends at the Examination Board as an observer. They compile a report that should answer the following questions:

- How complete and accurate was the data presented to the Board?
- Was the management of the meeting appropriate?
- Was the process of decision-making appropriate and in accordance with the College Marks and Standards as well as QQI and programme regulations?
- Did the examiners, internal and external, contribute effectively to the decision making in the board and were their contributions given appropriate weight?

Examination Board monitoring is applied to progression and award Boards only and is required to cover at least one Board annually.

The report is submitted to the subsequent meeting of the Quality Enhancement Committee.

### **14.4 QA Policy and Procedure Review**

The Academic Council oversees an annual review of the Quality Assurance Manual. It is the responsibility of the Head of Quality Assurance and Admissions to undertake this review with input from the various units in the College.

The purpose of the annual review is to:

- Evaluate the effectiveness of the College's QA procedures.
- Examine the College's compliance with QQI's requirements.
- Ensure the review of the Quality Assurance Manual is transparent and informed by stakeholder feedback.
- Make recommendations for additions to, or enhancements of the Quality Assurance Manual, on a rolling Section by Section basis, with the complete Manual being reviewed over a two- year period.

Any recommended revisions or updates of the Quality Assurance Manual are reviewed by the Quality Enhancement Committee, with final approval required from the Academic Council.

## 14.5 Learner Appraisals

### 14.5.1 Learner Appraisal of Modules

A formal learner appraisal of modules is undertaken on two occasions during module delivery, in mid and end semester, using the *Learner Module Survey*. The survey is designed to elicit the learners' views on:

- the resources available;
- the content of modules;
- delivery of modules;
- communication;
- general evaluation and suggestions.

Learners are given the opportunity to appraise the module anonymously.

### 14.5.2 Learner Appraisal of Programmes

A formal learner appraisal of the entire programme is undertaken towards the end of the academic year using the *Learner Programme Survey*. The survey gathers learner feedback on:

- learner attendance;
- resources available;
- organisation and content of modules;
- communication;
- general evaluation and suggestions.

It is the responsibility of the Programme Lead to have the questionnaires administered towards the end of each academic year and ensure that they are analysed for the first meeting of the respective programme boards in the next academic year.

## 14.6 Graduate Survey

The graduate survey is issued to graduates in the year immediately following the completion of their studies. In order to ensure a good response rate, it is ideally carried out at the Annual Conferring Ceremony by the Student Services department.

The results are used to strengthen and develop the services provided by the College that in their entirety contribute to the learner experience. The survey also gives information on the preparedness of graduates for the job market.

The feedback is incorporated in a report which is considered by the Quality Enhancement Committee and forms part of the consolidated report from that Committee to the Academic Council.

## 14.7 Marketing Monitoring Report

The Marketing Manager completes this report on an annual basis. It should appraise the effect of changes adopted from previous year and propose new initiatives. It should also analyse the correlation between marketing campaigns and learner enrolment.

The report is submitted to the Executive Management Team for a value-for-money adjudication and for resource allocation purposes. It is also presented to the Quality Enhancement Committee for information and for consideration of any academic issues.

## **14.8 Quality Improvement Plan**

A key element of monitoring is to identify areas for further development. Working with the Quality Enhancement Committee, the Head of Quality Assurance and Admissions consolidates the results of the various monitoring activities into the College Quality Improvement Plan (QIP). They take responsibility, under the direction of the Quality Enhancement Committee, for monitoring the implementation of the QIP and reports on this to Academic Council.

Copies of monitoring reports are retained by the Head of Quality Assurance and Admissions.

## 14.9 Control Sheet

<b>Policy and Procedure Title</b>	Self-evaluation, Monitoring and Review
Responsible Officer(s)	Director of Academic Affairs
Issuance Date	27 <sup>th</sup> June 2020
Effective Date	27 <sup>th</sup> June 2020
Last Revision Date	October 2019
Supersedes	1.1
Next Revision Date	June 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 14.9.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	Sept 2019	New policy	Director of Academic Affairs	Academic Council
Version 1.1	October 2019	Reflections to reflect minor changes to roles and responsibilities	Director of Academic Affairs	Academic Council
Version 2.0	27 <sup>th</sup> June 2020	QA Policy Procedure and QA Review have been incorporated to the QAM; Job Titles have been updated; Required reports have been updated	Director of Academic Affairs	Academic Council

## 15. CONFLICT OF INTEREST

### 15.2 Policy for Conflict of Interest

Quality assurance Area (s)	Marks and Standards
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and learners
Policy Owner	President

#### 15.2.1 Purpose

This policy sets out the principles that the College adopts to ensure that employees and contractors avoid ethical, legal, financial, or personal relationships that may be, or be perceived to be, conflicts of interest, and ensure that their activities and interests do not conflict with their obligations to the College.

#### 15.2.2 Scope

This policy and its associated procedure apply to College employees and others who are:

- External examiners
- Invigilators
- any other person/s appointed or engaged by The College to perform duties or functions on its behalf such as, among others, consultants, contractors and advisors.

#### 15.2.3 Policy

All employees and contractors of the College should avoid ethical, legal, financial, or personal relationships that may be, or be perceived to be, conflicts of interest, and ensure that their activities and interests do not conflict with their obligations to Innopharma.

This policy and procedure outline the responsibilities and process for identifying, disclosing and managing conflicts of interest in Innopharma.

In the event of employees, contractors and consultants dealing with personal data of any employee or registered learner of Innopharma, by signing this conflict of interest form, agrees that that are a processor as defined in Article 28 of the GDPR and that the College is a controller of the data for the purposes of GDPR.

- *Definition of a conflict of interest*

A conflict of interest is a conflict between an employee, consultant or contractor's duty to act in the best interests of the College, and their private interests. A conflict of interest is deemed to exist whether it is:

- actual
- potential (given the circumstances a conflict could arise)
- perceived (it could reasonably be viewed that a conflict exists, or could arise)

Conflicts of interest may arise where there is a financial interest, or through favour or prejudice as a result of friendship or animosity, or through personal or emotional involvement with an individual or group.

It is the duty of all employees and contractors of the College to identify and disclose conflicts, or potential or perceived conflicts of interest and it is the duty of the College to

manage such conflicts. Except in exceptional circumstances, as determined by the Board, the interests of the College will be balanced against the interests of the member and resolved in the College's favour.

## 15.3 Procedure for Dealing with Conflict of Interest.

### 15.3.1 Employees:

Employees must ensure that any and all conflict or potential conflict between their private interests and their duties to the College are promptly identified, communicated to their supervisor and managed.

### 15.3.2 External Persons:

Contractors, consultants and external examiners for each contract they agree with the College must ensure that any and all conflict or potential conflict between their private interests and their duties agreed with the College under the terms of their contract are promptly identified and communicated to the relevant authority within Innopharma. Ethical considerations and conflict of interest, actual or perceived, must be considered and declared by the proposed appointee.

The instances listed below are given as examples. They are not intended to comprise an exhaustive list of situations where a conflict of interest might arise.

Independence could be compromised, or perceived to be compromised, for the following groups:

- Current or previous appointment holders in the provider making the application for validation (e.g. employees, consultants, guest lecturers/trainers, external examiners/authenticators, research supervisors and such like).
- Former employees, directors, consultants and graduates (except for learner representatives) of the College.
- Persons who have had long-standing service, or who are retired from their employment with the College.
- Collaborators in joint projects (including research initiatives) involving the College. Where an assessor is concerned regarding existing minor collaborations in a particular field of study or at any institutional level, they should consult with the Director of Academic Affairs.
- Persons who have a potential future conflict of interest.
- Persons with family or other relationship with any members employed by or attending the College might have a conflict of interest.
- Persons with direct financial interest of any sort, including the holding of shares in a company associated with the College.
- Direct competitors in a particular industry or professional environment or in a specific geographical location may have a conflict of interest but will not automatically be deemed to be conflicted.

Since cases can arise where the possible appearance of a conflict of interest is not generally known, the primary responsibility for disclosing such a possibility rests with the person proposed for the role.

The College requires that persons appointed to these roles enter into a confidentiality agreement with the College stating that they will not divulge details of confidential discussions or distribute any documents other than as necessary for the conduct of the role.

Completed Conflict of Interest forms will be held in a Conflict of Interest Register (see below, under Disclosure).

Where there is uncertainty as to whether a conflict of interest exists, advice should be sought from the Director of Academic Affairs, the Director of Programmes and/or the HR Department.

### **15.3.3 Disclosure of Conflicts or Potential Conflicts of Interest**

Employees, contractors and consultants and external examiners of The College are required to disclose in writing, to the Board (which is responsible for Corporate Governance), through the relevant senior manager, and on the appropriate form, any conflict that may arise between the member's personal interests and interests of Innopharma.

Completed conflict of interest forms and records of decisions made with regard to conflicts of interest will be stored in the College's Conflict of Interest Register. Any employee, contractor or consultant of The College shall be entitled, on written request to the President of the College (or CEO) consult and be given copies of entries about him/her in the Conflict of Interest Register. This Register will be maintained in accordance with the College's Record Retention Policy.

## **15.4 Managing Conflict of Interest**

### **15.4.1 Avoiding conflict of interest**

Avoiding a conflict of interest which poses an unacceptable risk to, or impact on, the College's interests is the preferred strategy.

To avoid a conflict of interest, the individual involved may be removed from the decision-making process in relation to the matter concerned or requested to relinquish the private interest which is creating the conflict.

### **15.4.2 Accept and reduce the conflict of interest**

A conflict of interest may be reduced by ensuring that the individual has restricted involvement in the relevant matter, or that another qualified individual or organisational area takes responsibility for the matter.

### **15.4.3 Sharing the conflict of interest**

A conflict of interest may be shared by involving a third party to oversee part or all of the decision-making process that deals with the relevant matter.

### **15.4.4 Retaining the conflict of interest**

A conflict of interest may be retained, and the individual continues to be involved in the matter concerned, subject to a regular review of the situation. This response is only suitable for low risk conflicts of interest.

### **15.4.5 Failure to disclose a conflict of interest**

Employees have an obligation to disclose and manage conflicts of interest. Failure to comply with this policy and procedure, including refusal to take any reasonable action as directed to resolve a conflict of interest, may constitute misconduct or serious misconduct which may result in disciplinary action or termination of employment.

Where an external consultant or contractor is involved in the College's decision-making processes they are required to abide by the College's policies and procedures for conflicts of interest. It should also be understood by them that breaches of this policy and procedure may result in referral to a relevant external statutory authority and/or agency and that they may take action as a result of such a referral.

The Director of Academic Affairs is responsible for maintaining a record of the names and affiliations of expert panellists, examiners and other external experts associated with the College.

**15.4.6 Conflict of Interest Form:**

All expert panellists, examiners and other external experts associated with the College are required to complete the conflict of interest form attached in Appendix 15.A.

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## Appendix 14.A Conflict of Interest Form

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GDPR Agreement:

This agreement (“Agreement”) is made between the College and External Examiner/Subject Matter Expert, hereinafter referred to as the Appointee. The College and the Appointee have agreed to enter into this agreement for the purposes of ensuring compliance with Data Protection Legislation, inter alia, Regulation 2016/679 of the European Parliament and of the Council (General Data Protection Regulation) (hereinafter “the GDPR”). Terms used herein are as defined in the GDPR unless otherwise defined.

The College processes appropriate personal data of the Appointee, for the purpose of fulfilling its role in respect of the appointment.

The Appointee processes data on behalf of the College for the purpose of fulfilling their role as outlined in the College’s quality assurance procedures.

The College and the Appointee have agreed that the Appointee is a processor as defined in Article 28 of the GDPR as they carry out processing of data on behalf of the College. The College is a controller of the data for the purposes of the GDPR.

This Agreement is limited to personal data provided by the College to the Appointee and to personal data provided by the relevant provider to the Appointee, and to personal data duly shared between appointees, for the purposes of fulfilling their role, (hereinafter “the data”). This data may include:

- (a) Personal data associated with the College;
- (b) Personal data of members of staff of the College;
- (c) Personal data of enrolled learners or prospective learners of the College.

This data should not be used by the Appointee for any other purpose other than the carrying out of their role. The Appointee shall not transfer personal data to a third country or an international organisation (as defined in the GDPR), unless required to do so by Union or Member State law, in such a case the Appointee shall inform the College of that legal requirement before processing.

The Appointee understands that they are bound by the terms of the Confidentiality Clause which they has separately entered into.

The Appointee shall not engage another processor for the processing of the data without prior specific written authorisation of the College as per Article 28.2 of the GDPR. For the avoidance of doubt, the College hereby gives prior specific written authorisation to the Appointee to share the data with the other persons appointed to carry out the role, and this Agreement applies equally to all data received by the Appointee from fellow appointees in relation to carrying out the role.

The data held by the Appointee for each instance of their carrying out the role should be deleted at the end of each cycle, unless otherwise instructed in writing by the College. Any hard copy data shall be shredded; if shredding facilities are not available to the Appointee then they shall be returned to the College.

The Appointee will implement appropriate technical and organisational security measures to protect the personal data in their possession. The Appointee will ensure that these measures comply with the requirements of the GDPR.

As required by Article 33(2) of the GDPR, the Appointee will inform the College of any personal data breach without undue delay. The Appointee will cooperate with any enquiries or investigations by the Data Protection Commissioner. The Appointee will assist the College in ensuring compliance with the College’s obligation to respond to requests for exercising

the data subject's rights laid down in chapter III of the GDPR. The Appointee will cooperate fully with the College to ensure compliance with the obligations of the College pursuant to articles 32 to 36 of the GDPR.

The Appointee will make available to the College all information necessary to demonstrate compliance with the obligations laid down in this Article and allow for and contribute to audits, including inspections, conducted by the College or another auditor mandated by the College.

This Agreement terminates at the same time as the agreement between the College and the Appointee in relation to their carrying out the role. Notwithstanding the expiry or termination of this Agreement for any reason, the provisions of this Agreement shall continue to apply to any personal data in the possession of either party which was covered by the agreement.

This agreement shall be governed by Irish law and subject to the exclusive jurisdiction of the Irish courts.

Persons selected must complete the following declaration:

Declarations:

I wish to declare the following interests and understand that this declaration will be material to my appointment:

Please state 'None' if applicable.

I have read the above and confirm that I do not have any conflicts of interest in participating in the role as (Independent Chair of the Academic Council/External Examiner/External Subject Matter Expert)

I understand that the documentation and materials I receive in my role are confidential. I understand that materials are provided for purpose of my fulfilling the role only and must not be distributed or used for other purposes. This applies equally to any copies made for back-up purposes.

I acknowledge that I have read and understood the GDPR Agreement included above and as a condition of my appointment by signing here I agree to be bound by its terms.

Signed: \_\_\_\_\_

Date:

Name : \_\_\_\_\_

Entered on College Register: \_\_\_\_\_ Date: \_\_\_\_\_

## **Appendix 14.B Conflict of Interest Declaration**

Declarations:

I wish to declare the following interest(s):

Please state 'None' if applicable.

Or:

I have read the above and confirm that I do not have any conflicts of interest in fulfilling my functions.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Name : \_\_\_\_\_

Entered on College Register: \_\_\_\_\_ Date: \_\_\_\_\_

## 15.5 Control Sheet

<b>Policy and Procedure Title</b>	Conflict of Interest
Responsible Officer(s)	Director of Academic Affairs
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	4 <sup>th</sup> September 2020
Supersedes	N/A
Next Revision Date	September 2022
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 15.5.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	4 <sup>th</sup> September 2020	New policy	Director of Academic Affairs	Academic Council

## 16. Policy for Protection of Enrolled Learners

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Documented Approach to QA</li></ul>
Applies to	<input type="checkbox"/> Staff only <input type="checkbox"/> Staff and Learners only <input checked="" type="checkbox"/> Learners
Policy Owner	Director of Academic Affairs

### 16.2 Purpose

This policy sets out the principles that ensure the College's practices are compliant with Part 6 of the Qualifications and Quality Assurance (Education & Training) Act 2012. The Act requires that a provider has arrangements in place for the Protection of Enrolled Learners (PEL) on programmes of three months duration or more, where monies have been paid by, or on behalf of the learner, to a provider.

### 16.3 Scope

This policy applies to all Innopharma Education programmes accredited by QQI of three months' duration or more, and is inclusive of any financial bonding and academic bonding arrangements that are made in respect of those programmes.

### 16.4 Policy

The College is committed to implementation of the relevant protocols set out in QQI's *Protection of Enrolled Learners: Protocols for the Implementation of Part 6 of the 2012 Act, Version 2* (2013). This document stipulates that providers must demonstrate compliance with the legal requirements for PEL when submitting programmes of education and training for validation or revalidation. The 2012 Act seeks to ensure that:

- Learners have the opportunity to complete a programme leading to an award, or
- Learners are refunded the moneys most recently paid if a programme ends before they complete it, and
- Learners are provided with adequate and accurate information about the programme that they wish to pursue and about the protection in place for them in the event that the programme ceases prior to their completion.

To ensure these conditions are met, the College is therefore committed to observing the following General Protocols:

- I. The College will provide adequate, accurate and transparent programme and award-related information available to learners prior to enrolling them or accepting payment for an education and training programme (see Section 12.1 Policy for Public Information and Communication ).

- II. The College will agree its overall policy and procedures for PEL with QQI as part of its Quality assurance agreement with QQI. Further, and as per QQI's *Operating Principles for PEL*, programme specific PEL arrangements will be provided in writing to QQI as part of any submissions made for validation or revalidation of a programme of education and training.
- III. The College will assist QQI, in so far as is practicable, and if requested in the accommodation of learners affected by the cessation of a programme.
- IV. In the event that the College enters into collaborative arrangements with PEL-required providers, PEL will be addressed in the contractual arrangements underpinning those collaborations.
- V. The College will ensure learners are protected by PEL arrangements from the time that fees are paid, in part or in whole, for enrolment on programmes of education and training of three months' duration or longer until they have received certification for the learning achieved or until they have been legitimately excluded from the programme.

With specific regard to Information for Learners about PEL, the College is committed to observing the following additional protocols:

- I. The College will notify enrolled learners in writing of any change in the information notified to learners within 14 days of becoming aware of that change.
- II. The College will publish the PEL arrangements, and notify learners of these before they begin a programme. This information will include either:

- a. The names and contact details of the alternate providers and the names of the alternate programmes

*OR*

- b. A summary of the refund arrangements that are in place

*AND*

- c. A statement that in the event of a PEL arrangement being implemented, learner data may be shared with alternate providers and QQI.

N.B. The lawful basis for the transfer of learner data in such an instance is that (1) processing is necessary for the performance of a contract to which the data subject is party or in order to take steps at the request of the data subject prior to entering into a contract, and (2) processing is necessary for compliance with a legal obligation to which the controller is subject. These, and other lawful basis for the processing of data are specified within the College's Policy for Information and Data Management

With specific regard to Arrangements for PEL, the College is committed to observing the following additional protocols:

- I. The College will submit details in writing to QQI of the arrangements for PEL when applying for validation (or revalidation) of a programme. These will comprise:
  - a. An agreement between the College and at least two other providers that an enrolled learner may transfer to a similar programme of those other providers

*OR*

b. Where it is not practicable to have an agreement with two or more other providers as per (a), the details of arrangements in place to enable the College to provide a refund to an enrolled learner (or to the person who paid the monies on behalf of the enrolled learner) of the monies most recently paid for the programme concerned for:

- i. Tuition fees
- ii. Registration fees
- iii. Examination fees
- iv. Library fees
- v. Student services fees
- vi. Any other fees relating to the provision of education, training and related services.

In relation to the above, the College is committed to ensuring that, where feasible, learners are facilitated to complete their studies.

With specific regard to the Activation of PEL arrangements, the College is committed to observing the following additional protocols:

- I. PEL arrangements will be activated in the unlikely event that the College fails to provide the programme of education and training for any reason, including insolvency or QQI's withdrawal of the programme validation.
- II. PEL arrangements will be activated in the unlikely event that enrolled learners have begun, but not completed a programme of education and training that the College ceases to provide for any reason, including insolvency or QQI's withdrawal of the programme validation.

With specific regard to Demonstrating Compliance with PEL Protocols, the College is committed to observing the following additional protocols:

- I. The College will inform QQI in writing of the arrangements in place for PEL, setting out how the College has satisfied itself that the arrangements are adequate and meet legal requirements. The following information will be supplied accompanying any application for validation or revalidation of a College programme of education and training to which PEL applies.
  - a. If an arrangement is in place to facilitate learner transfer to a similar programme offered by an alternate provider:
    - i. Details of the arrangements for learners to transfer to a similar programmes offered by at least two alternate providers.
    - ii. Confirmation that the alternate providers are separate legal entities and are financially independent from the applicant provider.
    - iii. Confirmation that the alternate providers have the capacity to meet their obligations under the PEL arrangement, including specification of the exact number of learners that may be accommodated on a programme.
  - b. If it is not practicable to arrange for the transfer of learners to a similar programme offered by an alternate provider:
    - i. The reasons why it is not practicable to arrange for transfer.

- ii. Details of the financial arrangements in place for the refund of monies to learners, or to those who have paid monies on their behalf, including provision for distributing funds to learners and the cost of this.
  - iii. How the College has satisfied itself that the PEL arrangements are adequate to meet the legal requirements set out in these protocols.
  - iv. The College's stated procedure for alternate providers and QQI to access learner records including fee payment records and assessment material (including assignment briefs and marking criteria etc.) in the event of the College ceasing to deliver a programme or ceasing trading entirely.
- II. The PEL arrangements of the College will be duly authorised by the College's appointed representatives, specifically, the Academic Council and the Board of Directors.
- III. The College will ensure the following:
  - a. The number of enrolled learners on a programme must not exceed the maximum number in the PEL arrangement agreed for that programme.
  - b. Each time a programme begins, the College will contact any alternate providers to ensure that the protection arrangements are current and sufficient.
  - c. The College will notify learners in writing of any change to the arrangement agreed for PEL within 14 days of becoming aware of that change.
  - d. The College will notify alternate providers, learners and QQI as soon as practicable when the need to implement a PEL arrangement arises.
- IV. In the event that an alternate provider ceases to offer the alternate programme, or that programme changes materially so that it may no longer be claimed to be similar, or it no longer reflects the PEL arrangements that were made known to QQI, the College will ensure that a new arrangement which complies with QQI's *Protection of Enrolled Learners: Protocols for the Implementation of Part 6 of the 2012 Act, Version 2* (2013) is put in place, and that learners and QQI are advised of this within one calendar month.

## 16.5 Indicative Procedure for Activation of PEL Arrangements

QA Area (s)	<ul style="list-style-type: none"><li>Programmes of Education and Training</li><li>Documented Approach to QA</li></ul>
Applies to	<input checked="" type="checkbox"/> Staff only <input type="checkbox"/> Learners only <input type="checkbox"/> Staff and Learners
Policies this Procedure relates to	Policy for the Protection of Enrolled Learners

### 16.5.1 Notes:

This indicative procedure has been benchmarked against those of other higher education providers in the sector that have successfully reengaged for approval of QA with QQI. It represents the overall arrangements of the College in the unlikely instance that activation of College's PEL arrangements is required. It is the College's intention to further develop this indicative procedure should the College be eligible for HECA PEL Scheme membership in the future.

Further, and as per QQI's guidance, details of programme specific PEL arrangements/action plans will be submitted accompanying all applications for validation or revalidation of programmes of education and training made by the College.

The Activation of PEL arrangements will be required in the unlikely event that the College:

- Ceases trading while learners are enrolled on programmes.
- Ceases to offer a specific programme while learners are enrolled on the programme.
- QQI withdraws validation of a programme while learners are enrolled.

### 16.5.2 Responsibilities:

- It is the responsibility of the College President to notify QQI, the College's legal counsel, any alternate provider PEL protecting Colleges, and learners.
- It is the responsibility of the Director of Academic Affairs to ensure that programme specific PEL Action Plans are maintained and fit for purpose, and that these are retained by the College and:
  - a. (in the case of financial arrangements for refund) the College's legal representative.

OR

- b. (in the case of transfer to an alternate provider) the alternate provider PEL protecting Colleges and HECA PEL Oversight Committee.

- It is the responsibility of the Director of Academic Affairs to ensure programme information and records are securely stored with the College's legal representative, and to ensure access (in so far as is practicable) to relevant resources and facilities to manage the PEL event.

- It is the responsibility of the Director of Academic Affairs to ensure that data management and the sharing of learner data in the context of a PEL activation event is lawful.
- It is the functional responsibility of the Head of Admissions, and the ultimate responsibility of the Director of Academic Affairs to ensure that prospective and enrolled learners are provided with clear and appropriate information regarding the College's PEL arrangements.
- Where financial arrangements are in place to refund enrolled learners (or the person who paid the monies on behalf of the enrolled learner) it is the responsibility of the College's legal representative to initiate the refund process for:
  - vii. Tuition fees
  - viii. Registration fees
  - ix. Examination fees
  - x. Library fees
  - xi. Student services fees
  - xii. Any other fees relating to the provision of education, training and related services.

#### **16.5.3 Indicative Steps**

1. The College's PEL arrangements will be activated if the College President informs QQI and any alternate provider PEL Protecting Colleges of the need for this to occur.
2. The President will inform QQI and alternate provider PEL Protecting Colleges. The President will inform learners impacted by the PEL activation event.
3. The Director of Academic Affairs will facilitate emergency internal PEL Activation Action Plan meetings as per the relevant programme's specific PEL Action Plan.
4. The Director of Academic Affairs agree a timeline for, and prepare the transfer of information to QQI and any alternate providers, as soon as is practicable. The information may include:

##### **Learner Records Details:**

- Learner Personal detail records (including personal reports and learning needs).
- Learner Academic records.
- Learner fees records.

##### **Programme Related Details:**

- Provide Details of Programme Organisation, including
- Full details of academic staff (full time, part time)
- All administration support staff at all levels
- Premises information (including lease and owner information of the premises where applicable)
- Information on outreach or satellite centres in use, for programme delivery
- Key interaction contacts for the programme (including government or state agencies, international agencies etc.)

- All promotional information used to market the programme

**Programme Information Details:**

- Assessments, examination questions and marking schemes, including material related to repeat assessments and a copy of the assessment schedule
- Soft copies of any submissions, feedback issued to learners and resubmissions, hard copies of any previous examination scripts
- Soft copies of Programme Board meetings over the previous academic year
- Soft copies of minutes of Exam Board meeting minutes over the previous academic year
- Soft copies of any programme related Quality Assurance meeting minutes
- Soft copies of any applications for Reasonable Adjustment, issues of Plagiarism or other incidence of learner infringement on assessment and examinations over the previous academic year
- A soft copy of the validated programme submission document originally agreed with QQI, including programme schedule
- Soft copies of issued lecture notes and other materials distributed during the programme
- Soft copies of results transcripts (if applicable) and/or copies of results issued to learners up to the point of the activation of the PEL arrangements
- Collateral and Supporting Assets necessary to provide the Programme
- ICT Network Infrastructure
- Access to the Virtual Learning Environment(s)
- Access to digital library materials and assets (online), and borrowing records
- Online Licenses and Software related to programme delivery
- Storage and security of assessment related materials
- QA policies and procedures of the College
- Any equipment related to the programme (owned, leased)
- Location of assets
- Any and all other Intellectual Property related to the programme

## 16.6 Policy Control Sheet

<b>Policy and Procedure Title</b>	Conflict of Interest
Responsible Officer(s)	Director of Academic Affairs
Issuance Date	4 <sup>th</sup> September 2020
Effective Date	4 <sup>th</sup> September 2020
Last Revision Date	01 <sup>st</sup> December 2023
Supersedes	N/A
Next Revision Date	
Designated Reviewers	Board of Directors, Executive Management Team, Academic Council
Scope	All programmes

### 16.6.1 Revision History

Revision	Approval Date	Revision Description	Originator	Approved by
New Policy	4 <sup>th</sup> September 2020	New policy	Director of Academic Affairs	Academic Council
QA Manual Review 6.0	October 2022	Update to remove term "Indicative" from policy	Director of Academic Affairs	Academic Council

## APPENDIX 1: CRITERIA FOR BLENDED LEARNING (SYNCHRONOUS AND ASYNCHRONOUS ONLY)

In demonstrating that they meet criteria applicable to programmes leading to awards in the NFQ, blended programmes (incorporating on-site, synchronous, and asynchronous delivery modes) being proposed for approval or validation will address the following matters specific to the mode:

### Delivery Mode and Credit Integrity

- The mix of on-site, synchronous, and asynchronous contact hours reflects the credit value of modules and the overall programme.
- The programme's duration, delivery structure, and credit allocation are appropriate and transparent.

### Delivery Breakdown and Learner Engagement

- The expected proportion of on-site, synchronous, and asynchronous teaching is clearly defined at both programme and module level.
- Maximum class sizes are defined to ensure effective learner engagement during live (synchronous) sessions.
- The programme clearly articulates how asynchronous activities will be used to enhance flexibility without compromising interaction or support.

### Stakeholder Engagement and Strategic Fit

- The programme has been developed with input from key stakeholders, including employers, industry partners, learners, and faculty.
- Where applicable, the provider describes any collaborations or partnerships (e.g., for digital tools or platform support), including risk mitigation and continuity planning.

### Staff Capacity and Training

- Teaching staff have the appropriate qualifications and experience for delivering in a blended mode, including asynchronous engagement.

- Ongoing training and professional development supports staff in using digital tools and pedagogies aligned with blended learning.

#### **Platforms, Tools, and Learning Resources**

- Digital platforms (e.g., Moodle, Zoom, Articulate Rise, Vyond) are used to support structured learner engagement and access to materials.
- Learners have access to appropriate digital learning resources, including library services, academic databases, and asynchronous content.
- Platforms and tools are tested to ensure they support equitable engagement in synchronous and asynchronous activities, including by remote learners.

#### **Curriculum, Assessment, and Teaching Strategy**

- The programme's curriculum design and teaching/assessment strategies follow learner-centred principles and good practice in blended learning.
- Synchronous and asynchronous methods support both teacher-learner and peer-to-peer interaction, with attention to inclusivity and accessibility.
- Clear policies and procedures are in place for assessment integrity, including identity verification, mitigation of fraudulent practices, and use of AI-monitoring protocols, where relevant.

#### **QA, Records, and Student Support**

- Learner-facing staff are available via designated contact channels, including email, VLE messaging, and scheduled office hours (on-site or virtual).
- Learners are supported in developing digital skills and becoming effective in navigating asynchronous learning.
- Administrative systems accurately maintain records, monitor learner progression, and trigger appropriate interventions for students at risk.
- Mechanisms are in place to monitor the effectiveness of blended learning and support continuous improvement through feedback loops.