

Children's Therapy Centre

2021

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**Annual Quality Report**  
**Children's Therapy Centre**  
**Reporting Period 2019-2020**

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**Annual Quality Report**  
**Children's Therapy Centre**  
**PART A: INTERNAL QA SYSTEM**  
**Reporting Period 2019-2020**

## PREFACE

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

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

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

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

# CONTENTS

<b>PREFACE</b>	<b>3</b>
Guidelines on Completing the Report	6
Links to Reference Documents Cited in this Template	7
<b>PART A: INTERNAL QA SYSTEM</b>	<b>8</b>
Table 1 Mapping of ESG (2015) to QQI QA Guidelines (QAG)	8
Introduction and Overview of Institution	9
1.0 Internal QA Framework	12
1.1 Governance and Management of Quality	12
1.2 Linked Providers, Collaborative and Transnational Provision	14
2.0 Programme Development and Delivery	15
2.1 Programme Development and Approval	15
2.2 Admission, Progression, Recognition & Certification	17
2.3 Procedures for Making Awards	18
2.4 Teaching, Learning and Assessment	20
3.0 Learner Resources and Support	25
4.0 QA of Research Activities and Programmes	27
5.0 Staff Recruitment, Development and Support	28
6.0 Information and Data Management	30
7.0 Public Information and Communication	32
8.0 Monitoring and Periodic Review	32
9.0 Details of Arrangements with Third Parties	35
9.1 Arrangements with PRSBs, Awarding Bodies, QA Bodies	36
9.2 Collaborative Provision	37
9.3 Articulation Agreements	38
<b>PART B: INTERNAL QA SYSTEM</b>	<b>40</b>
Guidelines on Completing Part B	40
1.0 Quality Implementation and Developments	41
1.1 Strategic QA Updates	41
1.2 Update on Planned QA Objectives identified in Previous AQR	44
1.3 Governance and Management	44
1.4 Internal Monitoring and Review	47

<b>2.0 IQA System - Enhancement and Impacts</b>	<b>52</b>
<b>“Summary of recommendations</b>	<b>57</b>
<b>Summary of Commendations to the Provider</b>	<b>57</b>
2.1 Initiatives within the Institution related to Academic Integrity	67
<b>3.0 QA Improvement and Enhancement Plans for Upcoming Reporting Period</b>	<b>72</b>
3.1 QA and QE supporting the Achievement of Strategic Objectives	72
3.2 Reviews planned for Upcoming Reporting Periods	75
3.2.1 Reviews planned for Next Reporting Period	76
3.2.2 Reviews planned beyond Next Reporting Period	76
<b>4.0 Additional Themes and Case Studies</b>	<b>76</b>

## Guidelines on Completing the Report

The AQR is aligned with QQI's Core, Sector and Topic-specific Statutory Quality Assurance Guidelines and with the ESG (2015). A mapping of the ESG to QQI Core QA Guidelines is included in Table 1 below; the structure of Part A of this report template aligns with the first column of the table. Additional guidance on completing this template and reference material is included in each section. Institutions should adhere to this guidance and have regard to QQI Core, Sector and Topic-specific Statutory Quality Assurance Guidelines. **The guide text within each section should be deleted before submission of the report.**

### Submission Process and Timeline

The deadline for submission of the AQR each year is in February of the relevant year, with the call for submission sent to institutions in November of the preceding year. Once the call for submission has been made, QQI will provide access to QQI's provider portal, QHub, to the designated institution contact(s) to facilitate submission of the report. Through QHub, each institution will have access to an editable version of its AQR for the previous reporting period. This document can then be amended/updated to reflect any changes or developments that occurred during the current reporting period before submitting the final report to QQI.

### Completing the AQR

- When completing the AQR template, all relevant colleagues in the institution should be consulted.
- Consider whether external audiences will be able to understand the terminology used (particularly local abbreviations and acronyms); it may be helpful to include a glossary.
- Aim to avoid duplication in the report - where information is relevant to more than one section, the first mention may be referenced in subsequent sections.
- Provide reflections on what worked well, but also what may have been tried but did not work.

## Report Structure

### Part A: Internal QA System

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

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

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

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

### Case Studies

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

## Links to Reference Documents Cited in this Template<sup>1</sup>

### Legislation

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

### QQI Documents

#### Statutory QA Guidelines (QAG)

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

#### Other QQI Policy Documents

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

### Other National/International References

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

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<sup>1</sup> These links will be updated as further guidance documents are published.

## PART A: INTERNAL QA SYSTEM

Table 1

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



## Introduction and Overview of Institution

This is the AQR for Children's Therapy Centre for the reporting period **1 September 2019 - 31 August 2020**.

The AQR has been approved by the Academic Council and is submitted by **Eileen Prendiville**.

### Introducing the Children's Therapy Centre

The Children's Therapy Centre (CTC) is a private limited company (Company Number 385699), incorporated in 2004, providing a range of training courses in the areas of Counselling, Psychotherapy, Play Therapy, Therapeutic Play, Child Psychotherapy and Clinical Supervision. This is quite a narrow niche market. Most of our students are mature students with a professional background in the mental health, education, child-care, or social care field.

The first group of play therapy and psychotherapy trainees, who were not already psychotherapists, making them the first official core training group, began their studies at CTC in February 2004. Our first graduates, ending their three-year training process, completed their training in October 2007. We began to offer Level 6 courses in 2007 and Level 9 training in 2010. We continue to offer one level 9 award - the 4-year MA Creative Psychotherapy (Humanistic and Integrative Modality) incorporating the Postgraduate Diploma in Play Therapy as a potential exit point at the conclusion of 2<sup>nd</sup> year. We also offer level 6 component certificates, professional training in Clinical Supervision, and CPD courses.

CTC is a small but well-resourced provider. We do not employ a large staff team but this has increased significantly over recent years. We have four full-time employees and part-time administrative back-up, all other members of the team are employed on part-time contracts and hold other posts, either for agencies or in self-employment. We have a very solid team of experienced trainers who are regularly involved in delivering our programmes. We also have a number of additional experienced trainers who are currently involved as guest lecturers. In addition, we have a number of excellent trainers, including CTC alumni who are now accredited psychotherapists and play therapists, who are available for further teaching input if and when the opportunity arises.

CTC have achieved course recognition from the 1) [Irish Association for Humanistic and Integrative Psychotherapy](#) and the 2) [Irish Association for Play Therapy and Psychotherapy](#). We are also an Association for Play Therapy approved provider of play therapy training - the only one approved to deliver training in Ireland. In addition, CTC is recognised as a European Accredited Psychotherapy Training Institute (EAPTI) by the [European Association for Psychotherapy](#).

## **Preparation of the AQR**

The Board of Directors have overall responsibility within CTC for implementation of the procedures related to self-evaluation. Preparation of the AQR is the responsibility of the Director of Academic Affairs.

The purpose of CTC's self-evaluation, monitoring and review procedures is to ensure that we monitor and improve the delivery, design, and evaluation of our programmes and all related aspects of our services on an ongoing basis. We assess that our quality assurances procedures are working effectively and provide transparent descriptions, and evaluations, of all aspects of our work. This enables us to constantly improve and to provide excellent services to our learners, a suitable work environment for our staff, and maintain open communication and relevant information to all stakeholders.

### ***Ongoing Monitoring that feeds into Periodic Reviews***

CTC engages in consistent ongoing monitoring processes in all aspects of work. There are 2 main focuses of such monitoring:

- Focus on specific programmes of study
- Focus on the institution itself

Ongoing monitoring is referenced in various sections of our QA documentation. It includes, but is not limited to:

- Teaching staff engage in ongoing, regular review of feedback from learners on training delivered;
- The Programme Management Team analyse the feedback from learners and present this analysis in the annual report;
- Spot checks linked to Health and Safety, Equality and Diversity, and QA processes are carried out by the Equality & Diversity Officer, the Health and Safety Officer, and the Internal Quality Assurance Team;
- Analysis of data arising from such monitoring is compiled in annual reports;
- Monitoring of learner results for each assignment with reference to levels of achievement as monitored by the Programme Management Team each year;
- Monitoring of completion, progression, attrition rates and academic outcomes as presented at the Examination Board annually;
- Consultations with learners throughout their studies in regard to changes in employment linked to the completion of various stages of their training (e.g. completion of the Postgraduate Diploma in Play Therapy);

- Ongoing monitoring of the implementation of the agreed QA procedures in all aspects of CTC work.

### *Preparing the AQR*

The Director of Academic Affairs, with support from various staff members, is tasked with the review of relevant reports and documents for the AQR. Such documents are prepared by the relevant individuals and teams throughout the year. Having been through both a programmatic review and the re-engagement process in the previous year meant that CTC has copious amounts of data to hand, and had already begun the process of organising data in segments that matched with the templates provided by QOI.

Preparation of the AQR involves the Director of Academic Affairs in collaboration with relevant staff members and teams and making reference to any/all self and peer evaluations and reports conducted during the year in question. This includes:

- Any External Reports regarding re-engagement and/or revalidation;
- Student Handbooks
- The Annual Report for the Academic Council;
- The annual Internal Quality Assurance Team Report;
- Equality and Diversity Officer's Report;
- Health and Safety Report;
- GDPR report;
- Relevant programme plans;
- Statistics and reports regarding e.g. enrolment, retention, progression
- Course evaluation Reports;
- Minutes of meetings;
- and other documents produced within the year in question.

Particular attention is paid to any amendments to CTC's Quality Assurance Policy and Procedures that have occurred during the relevant period and any updates to organisational or process charts or other visual representations.

## 1.0 Internal QA Framework

### 1.1 Governance and Management of Quality

CTC's quality assurance documentation was completely revised and rewritten in 2019-2020. This also included a total revamp in terms of presentation: a new standardised template format was adopted and the policies and procedures as developed prior to and throughout the revalidation process were approved by the Academic Council in January 2020. All QA documentation has been collected and collated into the [CTC Quality Assurance Manual](#). The Manual is available on the CTC website and is also made available to all students on our online portal.

While the whole of CTC's QA Manual governs our management of quality, *Section 2: Introduction to Children's Therapy Centre and Governance Structures* of our QA Manual provides details information in regard to CTC's governance. An overview of governance structures is provided in [section A2.2](#) of the manual; this is supplemented by a [visual representation of our organisational structure](#).

The QA Manual is a living document subject to regular review and updating to enhance our policies and procedures. The Internal Quality Assurance Team undertake a systematic annual review culminating in the preparation of an annual report for the Academic Council.

Decisions are made about quality assurance within CTC by:

- The [Academic Council](#) (A2.3) are charged with protecting, maintaining and developing the academic and professional standards of the Centre and the quality of CTC's Programmes. They have particular roles in monitoring, reviewing and enhancing QA policies and procedures.
- The Director of Academic Affairs holds executive responsibility for academic matters and assuring quality management, development, and delivery of all programmes in accordance with agreed QA documentation.
- The [Internal Quality Assurance Team](#) (A2.4 (3)) are responsible for monitoring and reporting to the CEO and the Academic Council on the implementation and effectiveness of all CTC's QA policies and procedures, and identification of areas for enhancement.

The CEO leads the Business Operations Team who assist him in attaining the strategic business goals of the Centre as well as controlling the operational day-to-day management of the Centre including administrative support for academic staff as well as general business functions including Finance, Marketing and Advertising, I.T., Recruitment, Health and Safety, Communications and Legal compliance.

CTC's approach is to identify, assess and manage risk at local, functional and institutional level and assigning responsibility for the mitigation of risk (A10.3 [Risk Management](#)):

- Board of Directors: Reputational Risk

- Academic Council: Academic Risk
- CEO: Financial Risk

The [Research and Ethics Committee](#) (A2.4 (4)) are responsible for review and approval of Research Applications from staff and learners.

Learners contribute to management of quality by way of the [learner representative system](#) (A10.2) and by provision of feedback in regard to all aspects of their experiences within the institute ([A8.1](#)). This facilitates both the improvement of the learner experience and the improvement of the relevant programme of study. Reports on programme quality (enrolment, learner feedback, staff feedback, outcomes, resources, development etc) are considered at Programme Management Team Meetings, Examination Board Meetings, by the External Examiner, and by the Academic Council. The Board of Directors ultimately receives reports in regard to all work of the company to fulfil its' role in maintaining corporate and legal responsibility.

The Research and Ethics Committee and the Examination Board each have external independent members to provide an outside view of process and contribute to any decisions made. The External Examiner also provides a source of informed oversight providing valuable analysis to enable better decision-making. The Academic Council has an experienced independent external member as Chairperson, plus an independent Learner Representative, providing informed oversight and management of significant academic decisions as the body with delegated responsibility for all academic matters. Each of these committees has significant involvement in analysis of monitoring reports.

External stakeholders are involved in governance and management of quality within CTC in many ways including independent representation on Academic Council, Examination Board, peer review panels, and as an independent external consultant to the Research and Ethics Committee ([A2.7](#)). In addition to these roles, consultation takes place with graduates, alumni, placement sites, professional bodies and employers within our field ([A2.8](#)).

## 1.2 Linked Providers, Collaborative and Transnational Provision

### Collaborative Provision

Children's Therapy Centre is a linked provider and delivers the Principles of Art Therapy Certificate course which is awarded by Munster Technological University (previously Cork Institute of Technology). This is the only collaborative partnership arrangement that we have in place.

Our policy in regard to external partnerships with other providers is detailed in section A2.7 (2) in the *Other Parties Involved in Education and Training* section of our QA Manual.

## 2.0 Programme Development and Delivery

### 2.1 Programme Development and Approval

*Programme Development* (A4.1 [Procedure for the Design and Validation of New Programmes](#))

The Children's Therapy Centre's policy in regard to Programme Development, and approval, is detailed in [section 4.1](#) in our QA Manual and a [visual representation of the process](#) is provided in A4.1(PDP) Links are provided below.

Any member of CTC staff; member of a CTC committee or sub-committee; or any internal or external stakeholder may propose a new programme. A brief initial proposal is prepared and submitted to the Director of Academic Affairs who will review and assess it. Should she find that the proposal has merit, she submits it to the Board of Directors who may attribute resources to develop the programme. The Academic Council then appoint a Programme Development Team to develop the Draft Programme Document. This team develop the proposed programme learning outcomes as part of their brief to ensure the programme being developed is compliant with all quality assurance policies and procedures (See clause 3.4 of Policy [A4.1](#)). This development process includes consultation with internal individuals and teams (e.g. the Internal Quality Assurance Team and the Equality and Diversity Officer) and external stakeholders including potential employers, and consultation with other providers in regard to potential transfer and progression routes. The draft document (including the proposed LO's) requires approval by the Academic Council prior to submission to the Board of Directors and any subsequent external validation process.

*Minor Modifications to Programmes*

Minor modifications to programme (A8.2 [Minor Modifications to Programmes](#)), responsive to feedback from both learners and teaching staff, external stakeholders, the External Examiner, and recommended by the appropriate Programme Management Team to improve the programme are considered as part of each Annual Review. An annual Programme Improvement Plan is developed and implementation of agreed changes are initiated at the team days that follow shortly after the review. All modifications must be approved by the Director of Academic Affairs. Information collated for the Annual Report for the Academic Council, and the outcomes presented to the Examination Board, also inform decision making.

*Programmatic Review*

Every 5 years we conduct a full Self-Evaluation and produce a report that is submitted to the independent Peer Review Group, and subsequently to QQI, as part of the Programmatic Review Process (A4.2 [Programmatic Review and Revalidation](#)).

Key performance indicators are considered for each:

- Academic year
- For each stage of a programme

Data monitored as performance indicators include:

- Profile of learner population
- Feedback reports from learners
- Learner numbers enrolled
- Learner progression/attrition/completion rates
- Graduation/certification rates including grade analysis
- Career paths of graduates

This self-evaluation process concludes with the development of an action plan detailing proposed modifications and revised draft programme documentation.

### *Placements: Clinical Practice and Supervision*

CTC take a careful and sequential approach to clinical practice: for safety reasons there are many carefully monitored stages before the work with clients will reach the level of psychotherapy. Trainees begin by engaging in child observation sessions, then therapeutic play sessions, then play therapy sessions with children and adolescents, support session with parents, and counselling sessions with adults, as they progress through the training and are assessed as being ready to engage in supervised clinical practice.

### *Safety Provisions*

CTC requires all staff and trainees to work in accordance with the [Children First Act 2015](#) and the [Children First: National Guidance for the Protection and Welfare of Children](#), all relevant legislation, and ethical codes set by the relevant professional bodies (A10.4 [Child Protection Policy](#)).

It is necessary for participants be vetted by An Garda Síochána (A10.5 [Learner Garda Vetting Policy](#)) and to be covered by professional insurance cover prior to undertaking direct work with children. To be eligible for professional insurance cover, each participant must be a member of the Irish Association for Play Therapy and Psychotherapy and act in accordance with their Code of Ethics ([www.iaptp.ie](http://www.iaptp.ie)). CTC operate a Garda vetting scheme.



## 2.2 Admission, Progression, Recognition & Certification

Our policy in regard to Access, Transfer and Progression is detailed in the various subsections in Section 5 of our QA Manual. Links to each sub-section are provided below.

### *A5.1 [Information Provision](#)*

Detailed information is provided to learners, and prospective learners, in respect of access, transfer, progression, course recognition and certification. Information is made available to the public in course leaflets and promotion material via:

- advertising in journals;
- websites, social media, on notice boards;
- direct mailing;
- responding to requests for information.

This includes information on:

- programme title and award
- NFQ level and ECTS
- awarding body
- entry criteria
- selection procedures
- course content
- structure
- duration
- venue/s
- fees
- assessment
- learning aims
- protection for learners
- assignments

The information is also given to learners, tutors, committees, the External Examiner and other stakeholders by inclusion of relevant segments in handbooks and placement packs.

Section A2.8 [Key Streams of Communication](#) in our QA Manual describes how we ensure that cohesive, structured and effective communication channels exist within the organisation to optimise both internal and external communication.

### *A5.2 [Learner Entry and Deferred Entry](#)*

Entry criteria for programmes are determined as part of programme planning and at review stage and places are allocated with regard to the set criteria. When an interview is part of such criteria, each interviewee is scored against the criteria and this informs the selection process. Unsuccessful applicants are informed of the outcome of their application and advised of how they may more fully meet entry criteria in the future. Deferral of entry on an award bearing programme may be granted for a maximum of one year.

### *A5.3 [Recognition of Prior Learning](#)*

Course literature gives details of criteria for direct entry and also informs potential applicants of the indirect entry route. Applicants are provided with detailed information about this process and the supports available to applicants. We have a separate application and portfolio based application process for such applicants. This process is described in full in [Recognition of Prior Learning \(RPL\) Document](#) and RPL Guide for Mentors and Assessors, and in the associated [visual representation](#).

### *A5.4 [Transfer and Progression](#)*

Should a learner wish to transfer to another programme, CTC offer support and issue them with relevant documentation. Europass Diploma Supplements are issued to graduates to facilitate progression.

## **2.3 Procedures for Making Awards**

### **Learning Outcomes and Alignment with the National Framework of Qualification**

#### *[Developing a new programme](#)*

When the Director of Academic Affairs assesses a proposal for a new programme and finds that it has merit, she submits the proposal to the Board of Directors who may attribute resources to develop the programme. The Academic Council then appoint a Programme Development Team to develop the Draft Programme Document. This team develop the proposed programme learning outcomes as part of their brief to ensure the programme being developed is compliant with all quality assurance policies and procedures (See clause 3.4 of Policy [A4.1](#)). The draft document (including the proposed LO's) are approved prior to submission to the Board of Directors and any subsequent external validation process.

#### *[Ensuring Acquisition of Learning Outcomes](#)*

Various sections of the QA Manual describe processes for ensuring that the learner acquires the standard of knowledge, skill or competence associated with the level of each award within the National Framework of Qualifications prior to achieving the award. These include A7.9 [Consistency of Marking](#) and A7.11 [Internal Verification and Review of Provisional Assessment Results](#).

CTC consults with external bodies and individuals with outstanding knowledge and skills, and with national bodies, in developing its standards for marking assignments and portfolios which enable learners to be fully assured in relation to the standard of their award. Our [Marks and Standards Document](#) (A7.9 MSD) details the marking schemes in operation for CTC's Level 6 and Level 9 programmes. Examiners utilise marking schemes and grading descriptors to ensure that the work to which the mark is awarded reflects the standard that correlates with it. Internal moderation of every component that contributes to the classification of an award is designed to ensure that learners are accurately and fairly assessed and that marking standards are consistent. CTC provides training for assessors in methods of assessment as appropriate to the particular subject, the national standards and awarding body/s. Training is provided to new members of faculty, or those taking on marking of an assignment for the first time, in relation to the specific marking criteria, bands, expectations and standards. The Course Leader retains oversight of the marking linked to each subject and each learner, and is available to consult with markers, to raise queries, and/or to offer support. The External Examiner or External Authenticator (as appropriate) monitors the standard of work to ensure consistency with relevant standards.

CTC has a number of systems designed to ensure consistency (A7.9 [Consistency of Marking](#)) with national and international standards. These include::

- Annual review by External Examiner who is chosen partially because of their capacity to make national and international comparisons and who addresses this question as part of the annual External Examiner Report;
- Ensuring outcomes are aligned with those approved by validating body and detailed in the approved programme document;
- Training for markers and detailed marking rubrics to assist assessors with consistent and accurate marking;
- CTC seek opportunities for international benchmarking and comparisons with similar programmes.

In choosing potential members for Peer Group Review we choose those who are capable of making national and international comparisons. Similar criteria apply when appointing External Examiners

In preparing the Self-evaluation report for Programmatic Review, the grade distribution for CTC awards and that of other providers is compared and examined.

## 2.4 Teaching, Learning and Assessment

Section 7 of CTC's QA Manual is concerned with Teaching, Learning and Assessment.

### *Teaching and Learning*

The Children's Therapy Centre is committed to best practice in the areas of teaching and learning (A7.1 [Teaching, Learning and Assessment Strategy](#)) and to fair and consistent assessment of all learners attending training at the Centre, using a variety of methodologies specifically suited to the elements of training delivered on all courses and programmes. CTC aim to ensure that programmes are reflective of current and emerging theories, that trainers are highly competent and creative in their teaching, and that learners are facilitated in achieving their potential and demonstrating their learning.

Achieving Excellence	
Programme planning and development	Student Experience
Fits with CTC mission	Learner centred
Relevant and responsive to identified needs	Active learning
Appropriate resources assigned	Inclusive
Professional Standards	Personally enriching
Academic Standards	Confidence building
Appropriate validation and recognition	Supported
Well-structured curriculum and delivery	Stimulating
Coordinated approach to assessment	Challenging
Focus on theory and skills	Engaging
Built in feedback mechanisms	Enjoyable
Teaching	Learning
Coordinated across modules	Humanistic ethos
Experiential approach	Builds independent learning skills
Incremental and integrated	Experiential Learning
Inclusive	Incremental, layered approach to learning
Engaging	Building on skills
Range of effective methodologies	Active participation
Takes account of the various learning styles	Self-directed and peer-engagement
Skills modelled	Collaborative
Enhances practice	Scaffolded
Activate learner potential	Transformative
	Apply knowledge to real-world problems

Facilitating environment Personal development opportunities inbuilt	Engage with virtual learning environment
<b>Assessment</b>	<b>Graduate Attributes</b>
Coordinated Direct links to intended learning outcomes Clear guidelines provided Marking rubrics that make sense Allows for demonstration of learning Varied tasks that embed learning Enhances comprehension and competence Links theory and practice Contributes to sense of self-efficacy Enhanced by feedback Develops transferable skills	Mature Highly employable Professional Compassionate Knowledgeable and skilled Adaptable and creative Empathetic Reflective Collaborative Integrative Well prepared for future developments

The humanistic philosophy of teaching that is subscribed to at CTC is that our role is to facilitate the learning of each learner, that we have a responsibility to scaffold and support learning, and that it is CTC's role to make it as easy as possible for each student to learn as much as possible.

CTC programmes are based on three constructs of learning - theoretical, experiential and clinical, which form a central core of learning defined as 'professional practice'. We see learning as involving complimentary, interlinked and interweaving strands of skills, theory and personal development.

Course content is coordinated across modules; opportunities for both personal and professional development are built into the curriculum; skills are both modelled and practiced; both teaching content and assignments focus on enhancing the learner's capacity to apply knowledge to real-world problems and preparing them to deal effectively with new experiences and novel situations.

CTC place a high emphasis on experiential learning while ensuring that the emphasis on depth and breadth of knowledge is simultaneously maintained. Faculty encourage active participation of the learner in each session. We interweave content within learning blocks so that many training sessions incorporate content from two or three subject strands and interweave learning in clinical skills, theoretical studies, and reflective practice. This integrated approach is further enhanced by delivering content in incremental stages so that each layer builds on what has previously been learnt and lays the foundation for future learning.

Our preference is for the group to learn something experientially first, then to extrapolate the theory (or the methodology if it was a skill based session) within (e.g.) a group discussion, follow this with a lecture that elaborates on the theory, and links it to the relevant theorists, compare and contrast how this new material fits in with theories and methods already learned, and in this way develop the ability to locate each new learning in a framework that facilitates comparative analysis and critical reflection. It is important to us that learners develop a capacity to take a critical perspective on presented theory so that they can formulate their own reflective position.

Careful attention is paid to the physical learning environment including provision of appropriate resources to support teaching and learning as presented in Section 3: Learner Resources and Supports. Facilities are also provided for students with specific needs (A7.5 [Reasonable Accommodation](#)) or extenuating circumstances (A7.6 [Extenuating Circumstances](#)), those requesting extensions on assignment submission dates (A 7.7 [Applying for an Extension and Penalties for Late Submission of Assignment](#)) or seeking a [module](#) (A7.12) or [programme deferral](#) (A7.13).

CTC utilise formative and summative assessments as described in the relevant programme documents. A core principle that CTC subscribe to is that the completion of assessment tasks should:

- help to extend and embed learning;
- facilitate the linkage of theory to practice;
- enhance comprehension;
- contribute to an enhanced sense of self-efficacy.

A [co-ordinated approach \(A7.4\) to planning assessment](#) ensures that assignments are directly linked to the subject's aims and intended learning outcomes, and that a broad range of assessment methods are utilised to take account of the various learning styles of the learners. Assignment schedules ensure that learners have a fairly even spread of work throughout the year and avoid periods where multiple assignments are due at the same time.

Feedback is an integral part of the assessment process and is intended to enable the learner to understand marks received in the context of the assessment criteria; to inform them of their progress; and to assist them in improving their performance. Timely and detailed feedback (A7.10 [Provision of Marks and Feedback](#)) is provided on assignments and a facility exists for internal verification and review (A7.11 [Internal Verification and Review of Provisional Assessment Results](#)) as required. Systems for [security of assessment related processes and materials](#) (A7.8) and [return of certification data](#) (A7.14) are in place.

Exam papers are securely stored. Exams, and in-class short answer tests, are supervised by the allocated Exam Supervisor who remains in the room throughout the exam and monitors learners' behaviour throughout.

Records of each learner's assignments, submissions, results, any appeals, appeal process followed and outcomes etc are kept and stored in a locked filing cabinet in the Centre, and/or securely stored on an encrypted computer. The Course Leader is responsible for ensuring that all data on learner assessment is thoroughly checked for accuracy and all results are verified internally prior to final processing.

Following External Authentication (Level 6), or External Examination and processing at the Exam Board (Level 9), final results are entered into the QBS system by the CEO.

### *External Examining*

Policy and procedures for external examining are detailed in section A2.6 [External Examiner](#) of our QA Manual.

CTC appoints an External Examiner (EE) to monitor the standards of work on higher-level awards in the centre and make reports to the Academic Council and the Board of Directors. The External Authenticator carries similar functions for our Level 6 awards.

The Academic Council are responsible for setting criteria and selecting the External Examiner. The External Examiner should:

- Hold relevant qualifications to a high academic standard;
- Hold relevant professional qualifications and certification;
- Have considerable experience in delivery of training;
- Have extensive relevant experience in programme evaluation and in assessing learners including knowledge of appropriate standards on a national and international level;
- Have broad knowledge, experience, and expertise in the field of knowledge & broad programme area;
- Be independent of CTC, with no conflict of interest and having no existing or recent relationships (i.e. within at least 5 years) that could call their impartiality into question.

The External Examiner is responsible for:

- monitoring the standards of work and awards in CTC;
- the implementation of policies and procedures related to the learning environment;

- ensuring that the appropriate standards with regard to assessment results are adhered to;
- ensuring that standards are comparable with both National standards and those of other institutions.

The EE is given open access to all learner assignments (including any borderline cases) and is guided to the different levels of achievement in the provisional results. They are free to choose whichever assignments they wish to review. They also have access to all course documentation, handbooks, assignment guidelines, marking rubrics and the marks and feedback given to every learner for every assignment over the academic year. The EE is required to agree marking and, together with others in attendance at the Examination Board, sign the broadsheet certifying that the marks therein are agreed.

### *Academic Integrity*

Section 9 in our QA Manual deals with policies and procedures in regard to Learner Conduct, Appeals and Complaints.

- The [Disciplinary Procedure](#) (A9.1) is designed to deal with instances where a learner fails to adhere to CTC's rules and guidelines and describes progression through verbal and written warnings right up to possible expulsion from the course.
- The purpose of CTC policy and procedures in regard to academic misconduct (A9.2 [Academic Misconduct](#)) is to protect the integrity of the assessment process and ensure that submitted assignment are the learners' own work. If plagiarism, copying, collusion, or duplication, is suspected, it is investigated and adjudicated by the Subject Leader. Should a finding of Academic Misconduct arise, a report will be forwarded to the Course Leader who will consider all the circumstances and determine the penalty to be applied. The Appeals Process may be instigated within 5 working days. The work of the Learning Support Officer supports learners with academic writing and includes facilitating a number of support sessions for learners, including those requesting reasonable accommodation support, to enable them to participate fully and/or to demonstrate their learning effectively, throughout the academic year
- Questioning the academic judgement of examiners is not grounds for appealing any assessment result (A9.3 [Appeal of Assessment Result](#))
- The complaints procedure (A9.5 [Complaints Procedure](#)) is distinct from procedures for appeals in regard to academic matters including appeals in regard to assessment, deferrals, or academic misconduct. Stage 1 in the procedure is the informal stage and can be helpful in clearing up any misunderstandings and/or correcting any mistakes as quickly as possible. Stage 2 is the formal stage in which a panel is set up, chaired by a person appointed by the CEO, who will assess the validity of the complaint, make findings, seek to resolve the issue, and make recommendations. Stage 3 allows for an appeal to be heard if the grounds for lodging it are present.



### *Supporting Scholarly Activity* (A3.3 (1.3))

CTC is mindful to ensure that we remain alert to, and contribute to, international developments in our field. To this end, we support a culture of ongoing learning and engagement in scholarly activity. CTC also promotes and supports a strong writing culture. Staff are actively supported and involved in editing books and writing chapters and papers. We include a listing of recent staff publications in our Annual Report each year. CTC staff are supported in pursuing further studies and research, including MA studies. CTC considers that training in matters related to the delivery of training to higher level students is of central importance. We include sessions in regard to pedagogy, assessment, and use of the online portal within our Team Days and as individually tailored supports throughout the year.

## 3.0 Learner Resources and Support

### *Learner Facilities and Resources*

The [life cycle of the learner](#) has been carefully considered and mapped by CTC. This includes 9 stages: prospect and inquiry, application, admission, enrolment & registration, learning, assessment, grading, graduation, and alumni.

Learners are informed of the nature of supports and how to access support through a variety of mediums including their course handbooks, QA documents, the online portal, direct communication the trainers and the tutor that is assigned to them, and through their learner representative. Tutorial support, access to library and resources, and access to academic writing support are among the supports available.

Section 10 of CTC's QA Manual is concerned with the CTC Environment and Section A10.1 provides detailed information on [learning facilities and resources](#) including:

- Teaching and Learning Environment
- Learning Facilities and Resources
- Programme Delivery
- Faculty
- Tutorial Support
- Access to Library and Resources
- Course handbooks
- Academic Writing Support
- Technology to Support Learning

Course Handbooks provide the learner with detailed information about their programme of study, the supports available to them, and the expectations on them. In addition to directing them to the QA Manual for detailed information on all relevant policies, procedures, and documents to access each support, the

learner is provided with links on their online portal to the relevant material for ease of access. Prior to enrolment, course literature is provided to ensure the potential learner is fully briefed on suitable material to aid decision making including relevant material on potential career pathways.

The [Learner Representative](#) (Section A10.2) system provides an easy route for learners to communicate directly and efficiently with the relevant Programme Management Team and provides for effective mechanisms to improve the learner experience.

### *Additional Support*

Enrolled learners may initiate a request for additional learning support as appropriate to the specific needs disclosed during the admissions stage. The Equality & Diversity Officer, in consultation with the learner and their assigned tutor, carries out a needs assessment to determine what supports will help to minimise the impact of their disability on their studies and to agree an action plan. This may include support from the Learning Support Officer to assist with workload planning

The roles of Tutors and the Learning Support Officer are described in clauses 7 and 8 of [Section A2.5](#) of the QA Manual.

- Tutors are assigned to specified groups of learners and will support them during their time with CTC. The tutor has an important role in mentoring students and providing them with guidance and support on both academic and non-academic matters related to student life and coordinating the various supports for the learner.
- The Learning Support Officer develops a suite of inputs in to support learners with academic writing and is tasked with facilitating a number of support sessions for learners, including those requesting reasonable accommodation support to enable them to participate fully or to demonstrate their learning effectively, throughout the academic year

### *Learner Feedback (See [A8.1](#))*

Learner feedback is gathered and analysed by the Programme Administrator following:

- teaching inputs;
- academic years;
- the conclusion of each cycle of the programme.

These forms collect data in relation to the learners' perception of:

- the programme;
- trainers and training;
- adequacy of premises, equipment and facilities, including library facilities,
- reference materials available, premises

- materials available for practical learning at the Centre. Each learner is also asked to identify any ways in which they think any of the above could be improved.

Following teaching blocks or modules, a member of the Programme Management Team reviews the records and evaluations and discusses teaching content, learner feedback and learner progress with the trainer.

The inclusion of a Student Representative on the Academic Council ([A2.7](#) (1.5)), and on Peer Review panels ([A4.2](#) (3.5)), as well as consultation with alumni ([A2.8](#) (4.2)), enables us to better assess the impact of CTC Policy and Procedures on the learner's education and on their careers after graduation.

## 4.0 QA of Research Activities and Programmes

### *Research and Ethics Committee*

CTC's Research and Ethics Committee are responsible for review and approval of Research Outlines and Ethical Approval Applications from staff and learners. The Committee has access to an Independent External Expert for consultation as required.

The committee ensure that Research Outline Applications identify:

- The main research question and embedded questions;
- The aim of the study and its potential contribution to policy, practice and/or theory;
- A description and justification of the research sample, its location, and access to participants;
- Methods of data collection;
- Proposed timeline.

The committee must be satisfied that the proposed research will meet the ethical code of conduct.

Section A2.4 of our QA Manual deals with [sub-committees of the Academic Council](#). Clause 4 of that document describes the purpose, specific functions, membership, frequency of meetings, quorum and procedures associated with the Research and Ethics Committee.

## 5.0 Staff Recruitment, Development and Support

### *Recruitment and Selection (A3.1)*

The CEO holds executive responsibility for identifying key roles and responsibilities of individual staff members and teams. This task is carried out by gathering data on the activities currently performed, identifying any additional activities needed, and analysing and translating this data into up to date job, and team function, descriptions. A person specification for any new role identified is drawn up with reference to essential and desirable qualifications, skills, experience, knowledge and attributes. The needs of current programmes and any planned new programmes are considered with specific reference to scope of practice.

The Programme Document provides a detailed specification of the qualification (academic, pedagogical and professional/occupational) and experience required of staff to teach the specified subject. Trainers are chosen by the Course Leader for their specific training, qualification, skills and experience to deliver training at specific levels, and in the specific subject area in accordance with the specifications detailed in the Programme Document in regard to academic and professional qualifications, professional memberships, specific levels of accreditation and/or certification (e.g. as clinical supervisor or group facilitator), and skills, qualifications, and experience in delivery of training and assessment.

The CEO translating this data into up to date job, and team function, descriptions. A person specification for any new role identified is drawn up with reference to essential and desirable qualifications, skills, experience, knowledge and attributes. The Equality and Diversity Officer reviews these documents in line with their responsibilities ([A10.1 EDD](#)).

### *Staff Induction (A3.2) and Communication (A2.8 (3.1))*

CTC staff and trainers have access to induction training and mentoring for their roles. This is to ensure that staff are supported and are fully cognisant and practicing within the quality framework for delivery of programmes and courses in CTC.

In addition, CTC maintains an online portal section for all staff and lecturers. This includes material in regard to CTC policies and procedures, reference material, and QQI documents relevant to the delivery of CTC services.

Open channels of communication with staff (including contract staff) are maintained through a programme of 1 - 1 meetings; team meetings; team days; email communication; planned social events; and an online portal specifically for staff use. An Annual Appraisal and Training Needs Review Meeting

between each staff member and a suitable member of the relevant Programme Management Team, or the CEO, takes place once each year

Trainers complete feedback forms following each teaching input. They also contribute to programme evaluation through a range of other processes including regular conversations with members of the Programme Management Team); team meetings; annual review process; and team days.

Following teaching blocks, a member of the Programme Management Team reviews the records and evaluations with regard to teaching content, learner feedback and learner progress and any recommended changes for future delivery made by the trainer.

### ***Staff Development (A3.3)***

It is common for a new trainer, or a trainer taking on the teaching of a block of teaching previously delivered by another trainer, to be accompanied on their first teaching event by a more experienced member of the CTC teaching team who acts as co-facilitator. This enables CTC to provide support and model good teaching and group facilitation skills.

Training is provided to new staff, or those taking on marking of an assignment for the first time, in relation to marking criteria, bands, expectations and standards. Should a new trainer take on the marking of an assignment previously marked by another member of the team, they are provided with sample assignments and associated marks and feedback from previous cohorts. They are helped to identify the components that led to the marks achieved and feedback given. The original marker also provides assistance to the new marker as appropriate as part of their induction into the new aspect of their work

Staff participate in an annual appraisal of training needs. At this meeting, staff members' involvement in continued professional development events over the previous and needs and plans for the upcoming year are discussed and reviewed.

CTC staff are supported in pursuing further studies and research, including MA studies and engagement in the International Play Therapy Study Group. Such events may be funded by CTC for CTC direct employees.

CTC support staff in meeting CPD requirements by facilitating them to attend courses and training blocks. Trainers may attend any CTC training block to update themselves in skills and newly emerging theories. This serves the additional purpose of ensuring that teaching staff have a broader and deeper knowledge of the content and delivery of the MA, get to experience other team members teaching style, and assists each trainer to understand more fully how their own content fits into the wider context of the MA programme. CTC also considers that training in matters related to the delivery of training to higher

level students is of central importance. We include sessions in regard to pedagogy and assessment within our Team Days and as individually tailored supports throughout the year.

### *Supporting Scholarly Activity* ([A3.3](#) (1.3))

CTC is mindful to ensure that we remain alert to, and contribute to, international developments in our field. To this end, we support a culture of ongoing learning and engagement in scholarly activity. CTC also promotes and supports a strong writing culture. Staff are actively supported and involved in editing books and writing chapters and papers. We include a listing of recent staff publications in our Annual Report each year. CTC staff are supported in pursuing further studies and research, including MA studies. CTC considers that training in matters related to the delivery of training to higher level students is of central importance. We include sessions in regard to pedagogy, assessment, and use of the online portal within our Team Days and as individually tailored supports throughout the year.

## 6.0 Information and Data Management

### Information Management

Section 12 of CTC's QA Manual is concerned with Information Management. This includes information in regard to learner and information management systems, records maintenance and retention as well as data protection.

CTC's [Introduction to Information Management](#) document (A12.1) provides details of the systems in place to insure the reliable availability of data to inform decision-making and enhancements. This provides information on learner and management information systems, information management for decision-making, and records retention. Systems for return of certification data (including QBS) generate detailed records and reports. Reports are generated on learner enrolment, learner satisfaction, learner progression, learner retention, completion and non-completion as well as learner attainment / grade distribution / certification classification. Data in regard to Key Performance Indicators is used to inform improvement of our QA processes and programmes

CTC's [Privacy Notice](#) (A12.2), [Data Protection Policy](#) (A12.3) [Data Access Request Policy](#) (A12.4), and [Data Breach Notification Policy and Procedure](#) (A12.5) combine to ensure security and sustainability of our GDPR compliant information systems. The Privacy Notice details how CTC complies with the principles of GDPR and explains:

- the definitions of some key terms from GDPR;
- the principles of GDPR;
- CTC in the context of GDPR;
- who to contact in CTC about personal data;

- what personal data CTC collects and how it is used;
- when and with whom CTC shares personal data;
- the arrangements for transfer of data to other countries outside of the European Economic Area (the “EEA”);
- how CTC keeps data safe;
- how CTC stores personal data and how it is destroyed;
- rights in relation to personal data;
- the process for changes to the Privacy Statement

CTC’s Data Protection Policy applies to all Personal Data collected, processed and stored by CTC in relation to its staff, former staff, learners, applicants for courses, graduates and service providers. The policy covers both personal and special categories of personal data (sensitive data) processed in relation to data subjects by CTC. The policy applies equally to personal data held in manual and automated form.

Our [learner record keeping systems](#) (A12.9) provide for secure and relevant maintenance of learner records including assessment outcomes and course assignments. Access to the Learner Information Management System is restricted to authorised users and incorporates different layers of access (user rights) to ensure accuracy and integrity of data while enabling transparency and mechanisms for correction of personal data, as required by GDPR. All data in regard to learner enrolments, retention, completion, outcomes, and progression is compiled and analysed by the Course Leader for presentation to the Director of Academic Affairs. The Director of Academic Affairs is responsible for monitoring, collating and ensuring secure retention of data in regard to assessment outcomes and trends, learner enrolment, completion rate data, and providing data to the External Examiner within the factual data section of the External Examiner report template, for discussion at the Exam Board, presentation to the Academic Council, and as part of the [annual programme review process](#) (A8.1) and to contribute to [periodic self-evaluation processes](#) (A11.1), [Institutional Reviews](#) (A11.2) and [Programmatic Review and Revalidation](#) (A4.2).

Procedures for registering learners, and outcomes, ([A7.14](#)) on the QBS system ensure security of personal data.

Data related to assessment is securely stored in locked cabinets and on encrypted computers ([A7.8](#)).

Our [Website Privacy Policy](#) (A12.6) and [Cookie Policy](#) (A12.7) are openly available on our website and those who subscribe to our [mailing list](#) (A12.8) may remove themselves by clicking on the unsubscribe link in each mailing.

## 7.0 Public Information and Communication

### *Communication Streams (A2.8)*

CTC's QA Manual, and relevant evaluations, is available to the public on our [website](#) as is information on our Centre, staff, programmes of study, external examiner reports, ethical frameworks and our ethos, testimonials from relevant stakeholders, and links to our online portal, Facebook and Instagram pages. We have a strong presence on social media and regularly post content.

Information on programme titles, awards, awarding body, entry criteria, selection procedures, course content, structure, duration, venue/s, fees, assessment, learning aims, protection for learners, and assignments is made available to the public via advertising in journals, on websites, social media, on notice boards, by direct mailing and by responding to requests for information.

CTC endeavours to share information with individuals and agencies with potential importance for the centre, learners and staff. Communication with professional bodies, employers, placement sites takes place throughout each academic year and through our consultation process when conducting self-evaluations.

CTC liaise with relevant professional and academic bodies about:

- specific programmes;
- policy;
- job opportunities;
- the profession including national developments in regard to regulation and registration.

Each year, our Research and Ethics Committee ([A2.4 \(4\)](#)) identify dissertations that may be suitable for the author to base a Poster Presentation or publication on. Students and graduates are supported in presenting papers and poster presentations at conferences, professional events, and in publishing chapters, research, and articles by the Centre. Such events facilitate the sharing of relevant information with interested parties.

## 8.0 Monitoring and Periodic Review

### *Self-Evaluation: Informing Practice*

In 2019-2020 CTC successfully competed both the Reengagement and Programmatic Review processes in regard to our Level 9 awards. Final reports are available on our website, as is feedback from learners and graduates in regard to our programmes. Self-evaluation takes place regularly in CTC and both Peer and External Reviews are much valued processes to us. We undertake a comprehensive



5-year review of our programmes in accordance with our policy on [Programmatic Review and Revalidation](#) (A4.2).

Section 11 of our QA Manual describes our [Internal Periodic Self-Evaluation](#) (A11.1) and [QQI Institutional Review](#) (A11.2) processes.

Self-evaluation takes place in CTC throughout the year; at the conclusion of each academic year; and at 5 yearly intervals for specific QQI events. Our Internal Quality Assurance Team engage in regular checks and an annual review and prepare an annual report which informs us in making improvements. Likewise for our Equality and Diversity Officer and our Health and Safety Officer. The Programme Management Team also review the programme supports and facilities in detail on an annual basis so that we can improve incrementally.

As a private provider of programmes on the National Framework of Qualifications CTC must provide for the regular revalidation of programmes and regular institutional reviews. Overall responsibility within CTC for implementation of the procedures related to institutional reviews rests with the Board of Directors.

CTC's comprehensive self-evaluation is produced with input from the relevant staff including the Programme Management Team/s and Director of Academic Affairs on the academic side, and the Board of Directors and the CEO on the corporate governance side. Report include a description of the evaluation process undertaken, including records of consultations with internal and external stakeholders; CTC's organizational structure; quality management and enhancement; programmes delivered; staffing and staff development; learning environments, supports, and resources; and relevant statistics related to learner outcomes.

Similar procedures are in place for the Self-evaluation for Programmatic Reviews. The self-evaluation process includes extensive consultation with learners, staff and external stakeholders; a critical analysis of all QA related to the educational quality and running of the programme since the most recent validation or revalidation; and analysis and evaluation of relevant statistics including learner numbers, retention rates and success rates.

Key performance indicators are considered for each:

- Academic year
- For each stage of a programme

Data monitored as performance indicators include:

- Profile of learner population
- Feedback reports from learners

- Learner numbers enrolled
- Learner progression/attrition/completion rates
- Graduation/certification rates including grade analysis
- Career paths of graduates

This self-evaluation process concludes with the development of an action plan detailing proposed modifications and revised draft programme documentation.

## 9.0 Details of Arrangements with Third Parties

### *Munster Technological University*

CTC has a collaborative partnership (linked provider) in place as a Secondary Provider to Munster Technological University (entered into when they were the Cork Institute of Technology) for their [Principles of Art Therapy Certificate](#) (10 credits at Level 8). In the Agreement document CIT (now MTU) take responsibility for governance.

CTC rent premises and provide lecturers to deliver the course in Dublin/Kildare. MTU are the First Provider. All literature on our website, in information leaflets, on the online portal, and presented in conversation makes this clear. CIT ran this programme for many years prior to our involvement and the learners register with MTU rather than with CTC. They receive access to MTU library, are issued with student cards, receive final results on the MTU online portal, and are issued their parchments from MTU.

### *[European Association of Psychotherapy](#)*

CTC was assessed by both the European Association for Integrative Psychotherapy and the European Association of Psychotherapy in November 2019, January 2020, and February 2020. The outcome of these evaluations was that the Children's Therapy Centre was successfully accredited as a European Accredited Psychotherapy Training Institutes (EAPTI) by the Training Accrediting Committee (TAC) of the European Association for Psychotherapy (EAP) and the EAP Board on February 20th, 2020. We are now one of only 3 European Accredited Psychotherapy Training Institutes in Ireland.

### *[Irish Association for Play Therapy and Psychotherapy \(IAPTP\)](#)*

Our Postgraduate Diploma in Play Therapy is a recognised course of the Irish Association for Play Therapy and Psychotherapy (IAPTP) for play therapist accreditation. They have also approved our CTC's MA in Creative Psychotherapy (Humanistic and Integrative Modality) so that graduates of the four-year programme are eligible for professional accreditation as a psychotherapist with a specialisation in play therapy.

*Irish Association of Humanistic and Integrative Psychotherapy (IAHIP)*

CTC's MA in Creative Psychotherapy (Humanistic and Integrative Modality) is an IAHIP recognised course - the only child and adolescent psychotherapy training to achieve this status. IAHIP is a section of the Irish Council for Psychotherapy so accredited members will be eligible to receive the European Certificate in Psychotherapy through the ICP.

*Association for Play Therapy (APT)*

CTC is also an APT approved provider of play therapy training - the only one approved to deliver training in Ireland

## 9.1 Arrangements with PRSBs, Awarding Bodies, QA Bodies

Type of arrangement	Total Number
PRSBs	0
Awarding bodies	0
QA bodies	0

<b>1. Type of arrangement</b> (PRSB/awarding body/QA body)	
Name of body:	
Programme titles and links to publications	
Date of accreditation or last review	
Date of next review	

## 9.2 Collaborative Provision

### Definitions:

QQI's Policy for Collaborative Programmes, Transnational Programmes, and Joint Awards, 2012 defines **collaborative provision** as a process that occurs where two or more providers are involved by formal agreement in the provision of a programme of higher education and training.

The Qualifications and Quality Assurance (Education and Training) Act 2012 (as amended) defines '**joint award**' as a single award made jointly by two or more awarding bodies

The Qualifications and Quality Assurance (Education and Training) Act 2012 (as amended) defines '**linked provider**' as a provider that is not a designated awarding body but enters into an arrangement with a designated awarding body under which arrangement the provider provides a programme of education and training that satisfies all or part of the prerequisites for an award of the designated awarding body.

Type of arrangement	Total number
Joint research degrees	
Joint/double/multiple awards	
Collaborative programmes	
Franchise programmes	1
Linked providers (DABs only)	

<b>1. Collaborative provision</b> (Type of collaborative provision)	We are a linked provider.  Cork Institute of Technology (Now Munster Technological University) are the First Provider. CTC is a second provider. We rent premises and provide lecturers to deliver the course in Dublin/Kildare. Learners are registered with MTU and governed by their P&P's.
Name of body (/bodies):	Munster Technological University
Programme titles and links to publications	CR_AATPY_8 Certificate in Principles and Theory of Art Therapy
Date of last review	2014
Date of next review	

### 9.3 Articulation Agreements

**Definition:**

Per the IHEQN Guidelines for the Approval, Monitoring and Review of Collaborative and Transnational Provision, an **articulation agreement** may be defined as a process whereby all students who satisfy academic criteria on one programme are automatically entitled (on academic grounds) to be admitted with advance standing to a subsequent stage of a programme of a degree awarding body. These arrangements are subject to a formal agreement between the parties.

<b>Articulation agreements - Total number</b>	<b>0</b>
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<b>1. Articulation agreement:</b>	
Name of body (/bodies):	
Programme titles and links to publications	
Date of agreement/arrangement or last review	
Date of next review	
Detail of the agreement	

Children's Therapy Centre

2021

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**Annual Quality Report**  
**Children's Therapy Centre**  
**PART B: INTERNAL QUALITY ASSURANCE**  
**ENHANCEMENT & IMPACT**  
**Reporting Period 2019-2020**

## PART B: INTERNAL QA SYSTEM

### Guidelines on Completing Part B

As outlined in the general guidelines for this template (p.5), **Part B** of the AQR documents and captures QA activities, developments and enhancements undertaken by institutions **during the reporting period** and their **impact**.

Insofar as is possible, institutions should demonstrate in Part B how plans set out in the previous AQR submission were progressed during the reporting period - these may be plans linked to strategic objectives, to reengagement advices, or to institutional review recommendations.

Part B of the AQR is an opportunity for self-reflection and critical evaluation of the effectiveness of QA activities over the reporting period. Institutions are encouraged to reflect both on what worked well and what did not work well, and to consider impact measures, using both quantitative and qualitative evidence (metrics, benchmarks and feedback/judgement) in how they led to specific QA improvements and enhancement.

Part B provides evidence of quality improvement and enhancement and impact<sup>2</sup> of QA activities within the totality of an institution's QA system.

**Section 1** pertains to internal quality assurance implementation and developments since the previous reporting period.

**Section 2** deals with institutional analysis of IQA enhancements and impacts including activities undertaken in respect of academic integrity, and the enhancements and impacts resulting from same.

**Section 3** relates to IQA developments and plans for the next reporting period.

**Section 4** provides an opportunity for institutions to illustrate IQA in action through case studies in relevant thematic areas.

Institutions are invited, if they wish to do so, to use case studies to demonstrate quality in action and to highlight areas of practice for dissemination at any point in this part of the report.

#### Case Studies

QQI recommends that written case studies should:

- Be between half a page and two pages in length;
- Relate to a specific time- and subject-bound issue;
- Include an introduction that sets out a brief overview of contextual matters;
- Include any relevant supporting data and data analysis;
- Include links to any sources cited;
- Include a clear concluding paragraph with overview of key outcomes/learning.

Although case studies will generally be in written form, institutions may also provide links to audio-visual/multimedia case studies. QQI does not prescribe a format for case studies.

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<sup>2</sup> The National Forum for the Enhancement of Teaching and Learning in Higher Education have considered impact and measures leading to development and improvement specifically in terms of teaching and learning. See: <https://www.teachingandlearning.ie/wp-content/uploads/NF-2020-Insights-from-Practice-About-Impact-in-Teaching-and-Learning-web-ready.pdf>. This is a very useful reference, though impact in the context of this report should be considered



## 1.0 Quality Implementation and Developments

### 1.1 Strategic QA Updates

#### *CTC and Strategic Objectives*

The Children's Therapy Centre is committed to providing high quality service and academic standards for our learners and to equipping our graduates to provide ethical, professional, effective, and appropriate services to their clients. This will involve them in working at the forefront of the field in a wide and diverse range of contexts. We stay abreast of developments in the area and structure our programmes to meet identified and emerging needs and ensure that our graduates are well placed to secure employment and enjoy fulfilling careers. Our positive reputation is central in this regard.

To provide this high-quality service, CTC is committed to:

- maintaining a team of trainers to provide education of the highest standard,
- providing efficient and effective administrative (and other) supports
- ensuring sustainability by careful management and attention to sustainability and good business management.

Achieving our objectives would not be possible without a 100% commitment to quality. To this end, CTC works to ensure that all our procedures are fit for purpose, are constantly reviewed and refined, and are effective in meeting our aims. We evaluate this through a process of regular internal and external review.

#### *Reengagement with QQI*

CTC completed the re-engagement process with QQI during this academic year. Our application for re-engagement was submitted in September 2019. This followed an extensive self-evaluation and gap-analysis process with reference to our capacity and our QA procedures. This had been an on-going process since 2015 and involved a complete review of our QA policies and procedures, how these are presented in our QA Manual, extensive consultation with our staff team, major revisions to our policies and procedures, and re-writing of many internal documents to facilitate smooth implementation of the revised procedures. Repeated use of QQI's gap-analysis tool enabled us to identify evidence and assess current degrees of compliance with requirements, and identify actions required and the person responsible to initiate change and write new policy/procedures. Each question on the tool led into a search of the existing QA documents, and also a review of current practice, to establish if evidence existed of meeting the identified requirement, and to review if there could be a more effective way of meeting the requirement. We had been implementing changes to our procedures during the previous 3 years in preparation for re-engagement, with a particular emphasis on the separation of corporate and academic decision-making.

### *Gap Analysis Findings and Actions taken in 2019 (Prior to Re-engagement)*

- **GDPR:** Production of stated policies and further development of procedures in bringing us in line with Data Protection requirements under GDPR. Procedural change had already begun and was in action but it had not been written up.
- **Updated maps:** organisational structure and programme development (and clearer process for programme development)
- **Updating of policy statements** (remove Traveller Community from E & D statement), and additional statements (Information Management Statement)
- **Exploration of Risk** (reputational, academic and financial) and Risk Management
- **Annual Report:** Describe more fully the structure of the Annual Report
- **Learning Support Officer** New position approved
- **Learner Representatives** New structure
- **Submitting Assignments:** New route to submit assignments online
- **Learner Requests:** Update, describe and record more fully the procedures for managing deferrals, applications for extensions
- **Appeals:** Revised appeals procedures for deferrals, extensions, and Examination Board decisions (plus addition of complaints against the appeals process procedure)
- **Improve Descriptions:** Opportunity to put in writing some procedures that were in action but not officially recorded (supporting scholarly activity, Team Days) Described more fully the process of developing our annual Programme Improvement Plan and implementing minor modifications to programmes.
- **External Stakeholders:** Increased frequency of consultation and inviting evaluative feedback from placement sites and employers
- **Career Impact:** Modification of end of year learner feedback to access data on the impact on career throughout the training period

### *Specific improvements implemented following gap-analysis*

In 2019 CTC's Governance Structure was refined to further separate corporate and academic roles. The CEO no longer holds the role of Examination Board Chairperson. Terms of reference for committees and responsibilities for named roles were also specified with reference to specific functions, membership, and frequency of meetings. Clarity in regard to procedures for rechecks, reviews and appeals was enhanced. The vulnerabilities that were identified through the gap-analysis process were compiled into a formal risk register. Clarity within the QA Manual itself was improved by the use of

standard templates, division into discrete sections for each quality area, and use of title pages and a version control mechanism.

### ***Successful Outcome to Re-engagement Process***

The Panel concluded that CTC had successfully addressed their proposed mandatory changes and had responded appropriately to their initial specific advice the re-engagement process concluded with a [recommendation to the Programme Awards Executive Committee](#) on 6<sup>th</sup> February 2020 that CTC's QA procedures be approved.

The Panel commended the Children's Therapy Centre on the following:

1. The Children's Therapy Centre's mapping of delivery to professional standards.
2. The established links with international higher education institutions with respect to peer grading, comparisons and staff development.
3. The Children's Therapy Centre's annual process of review, evaluation and reflection.
4. The integration of feedback, annual monitoring and review of delivery and QA procedures, which is actively used to determine changes in internal practices.
5. The provider's commitment to regularly capturing feedback from a range of stakeholders, both internal and external, and to applying the learning from that feedback to their practice and to quality enhancement.
6. The Children's Therapy Centre's genuine analysis of its own situation and identification of area of vulnerability.

Successful implementation of CTC's QA Policy and Procedures subsequently supported us through all stages of a successful Programmatic Review and Revalidation process for our MA Creative Psychotherapy (Humanistic and Integrative Modality), with embedded Postgraduate Diploma in Play Therapy.

## 1.2 Update on Planned QA Objectives identified in Previous AQR

As a private provider, this is our first AQR.

<b>No.</b>	<b>Planned objectives (Previous AQR)</b> Note: Include reference to the relevant section of the preceding AQR, where applicable	<b>Update on Status</b> Provide brief update on status, whether completed or in progress. If an action was planned in the previous AQR, but not completed, provide reasons/short reflections for the delay/non-completion.
1	N/A	N/A
2		
3		
4		
5		

## 1.3 Governance and Management

### 1.3.1 QA Governance Meetings Schedule

<b>Body</b>	<b>Meeting dates</b>
Academic Council	<ul style="list-style-type: none"> <li>• 12<sup>th</sup> November 2019</li> <li>• 5<sup>th</sup> January 2020</li> <li>• March 2020 (various members on various dates)</li> <li>• 22<sup>nd</sup> June 2020</li> </ul>
Examination Board	<ul style="list-style-type: none"> <li>• 5<sup>th</sup> August 2020</li> </ul>
Internal Quality Assurance Team (IQAT)	<ul style="list-style-type: none"> <li>• 8<sup>th</sup> November 2019</li> <li>• 4<sup>th</sup> January 2020</li> <li>• Regular virtual meetings from March to June in regard to coronavirus lockdown.</li> <li>• 23<sup>rd</sup> July 2020</li> <li>• 4<sup>th</sup> August 2020</li> </ul>

<p><b>MA Programme Management Team</b></p>	<ul style="list-style-type: none"> <li>• 7<sup>th</sup> November 2019</li> <li>• 13<sup>th</sup> November 2019</li> <li>• 20<sup>th</sup> November 2019</li> <li>• 21<sup>st</sup> November 2019</li> <li>• 19<sup>th</sup> January 2020</li> <li>• 1<sup>st</sup> February 2020</li> <li>• 14<sup>th</sup> February 2020</li> <li>• A series of regular virtual meetings between March and June in regard to Covid-19.</li> <li>• 4<sup>th</sup> August 2020</li> </ul>
<p><b>L6 Programme Management Team</b></p>	<ul style="list-style-type: none"> <li>• 23<sup>rd</sup> February 2020</li> <li>• A series of regular virtual meetings between March and June in regard to Covid-19.</li> </ul>

### 1.3.2 QA Leadership and Management Structural Developments

The Children’s Therapy Centre reconstituted membership of committees and teams and more clearly defined roles, membership, and functions on standardised templates in preparation for, and during, the re-engagement process this year.

Further changes that were implemented as a response to proposed mandatory changes during the re-engagement process included changing the governance structure of the organisation to further separate commercial and academic roles. Three changes were implemented, and approved by the panel:

- The CEO no longer holds the role of Examination Board Chairperson.
- An additional academic has been added to the Academic Council so that it is now weighted in favour of academic rather than ex-officio members.
- The CEO is no longer involved in the desk review of appeals.

#### Organisational Structure Chart

##### ***Membership of Committees and Teams:***

Responsibility for academic decision making and delivery of education and training programmes at The Children’s Therapy Centre rests with the Academic Council and the Director of Academic Affairs. Programme Management Teams administer and provide each programme. Programmes are delivered and learner evidence assessed by a team of Course Leaders, Subject Leaders and Tutors who deliver training at a number of sites.

### *Academic Council*

Membership of the Academic Council comprises ex officio members and appointed members.

Ex officio members are the CEO (as Secretary) and the Director of Academic Affairs. Appointed members include an External Member (as Chairperson), two members of the Programme Management Team and a student representative.

Subject to approval by the Board, the Academic Council may appoint additional members where additional expertise is deemed necessary.

### *Examination Board*

The Examination Board is a sub-committee of the Academic Council that involves a meeting of both Internal Examiners and the External Examiner. It is composed of

- Chairperson
- Director of Academic Affairs
- External Examiner
- Course Leader
- Faculty that have been involved in examining learners
- External member with relevant academic experience

### *Internal Quality Assurance Team (IQAT)*

The Committee is composed of

- Director of Academic Affairs (Chairperson)
- Equality & Diversity Officer
- Health & Safety Officer
- MA Course Leader

### *Programme Management Teams (PMT)*

Teams are led by the Course Leader who delegates tasks to individuals and/or groups within the team as appropriate.

- Course Leader
- Subject Leaders
- Trainers
- Tutor
- Programme Administrator
- Learning Support Officer

## 1.4 Internal Monitoring and Review

### 1.4.1 Overview of Periodic Reviews

Unit of review for which report has been published during reporting period	Date of completion/reason for conducting review (if not planned) or non-completion (if planned but not conducted)	Links to relevant publications
<p><b>Self-Evaluation: MA Creative Psychotherapy</b>            CTC successfully engaged in the Programmatic Review and Revalidation process for our MA Creative Psychotherapy (Humanistic and Integrative Modality), with embedded Postgraduate Diploma in Play Therapy, this year. This included the completion of an extensive self-evaluation including a detailed analysis of the programme as delivered over the previous 5 years addressing data in regard to applications; enrolment; attrition, transfer, progression and completion; grades and awards classification; and graduate destinations. We also reviewed physical facilities; timetabling of contact hours; learner workload by module and stage; attendance; teacher to learner ratios; teaching and learning strategies; learning outcomes achieved by learners; assessment strategies; learner feedback, complaints, appeals and commendations; and external examiner feedback. Furthermore, we engage in processes to enable us to gather data in relation to evaluation of the programme by currently enrolled learners and graduates; staff; and external stakeholders. We addressed findings, analysis and implications for revised programme for each of these aspects.</p>	<p>November 2019</p>	<p>Programmatic Review 2019-2020: Self Evaluation Report provided to the Peer Review Panel</p>

<p>Programmatic Review and Revalidation process for our MA Creative Psychotherapy (Humanistic and Integrative Modality), with embedded Postgraduate Diploma in Play Therapy</p>	<p>12<sup>th</sup> February 2020</p>	<p><a href="#">Independent Evaluation Report for Programme Review</a></p>
<p><b>QZI Reengagement</b> This included submission of an extensive application form based on self-evaluative gap analysis process.</p>	<p>6<sup>th</sup> Feb 2020</p>	<p><a href="#">Reengagement Panel Report: Assessment of Capacity and Approval of QA Procedures</a></p>
<p><b>Annual MA Creative Psychotherapy Programme Review</b> CTC's Annual Programme Review process is designed to aid the development of an Annual Programme Improvement Plan and facilitate 1) the implementation of minor modifications to award bearing programmes, and 2) improved delivery of the programme and enhancement of the learner experience.</p> <p>In 2019, CTC engaged in an extensive review of all elements of our MA programme. Data was gathered regarding:</p> <ul style="list-style-type: none"> <li>• teaching blocks;</li> <li>• trainer evaluation;</li> <li>• learner feedback and evaluation;</li> <li>• programme and subject evaluations at conclusion of course or stage;</li> <li>• consultation with the External Examiner;</li> <li>• placement sites;</li> <li>• external stakeholders (e.g. employers and professional bodies);</li> </ul> <p>Data from this review was presented in the CTC Annual Report and considered by the Programme Management Team at the Annual Programme Review, Training and Evaluation Day, and at the annual two-day team meeting.</p>	<p>August 2020</p>	<p>Internal Report</p>



<p>Plans for minor modifications to the programme, responsive to the feedback from both learners and teaching staff, the External Examiner was agreed and presented in the Annual Programme Improvement Plan. This plan included improvements that are related to the delivery of the programme without impacting on the programme itself (for example, sequencing of content), i.e., no change to any content in the approved programme document.</p> <p>The Annual Programme Improvement Plan was approved by the Director of Academic Affairs prior to implementation in the 2019-2020 academic year.</p>		
<b>External Examiner Review</b>	August 2020	External Examiner Report 2019-2020

## 1.4.2 Expert Review Teams/Panels<sup>3</sup> involved in IQA

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

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

\* excluding secretary if not a full panel member

### (ii) Composition of Expert Review Teams/Panels involved in IQA

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<sup>3</sup> QQI acknowledges that the terminology used to describe the groups of individuals that conduct peer review/evaluation varies from institution to institution.

	Total	Gender			Internal	National	International			Institution Type	
Type of Expert/ Role on Panel		Male	Female	Other, or unspecified			UK, incl. NI	Other European	Outside of Europe	Similar	Different
Chair	1		1			1					
Secretary	1		1			1					
Academic/Discipline Specific	1		1				1				1
Student Representative	1	1				1					
QA											
Teaching & Learning											
External Industry /Third Mission	2	1	1			2					

## 2.0 IQA System – Enhancement and Impacts

### Developments and Enhancements

#### *Re-engagement with QQI*

CTC completed the re-engagement process with QQI during this academic year. This followed an extensive self-evaluation and gap-analysis process with reference to our capacity and our QA procedures and required extensive internal and external consultation with relevant stakeholders to evaluate current procedures and identify gaps and improvements. This had been an on-going process since 2015 and included a complete review of our QA policies and procedures, how these are presented in our QA Manual, extensive consultation with our staff team, major revisions to our policies and procedures, and re-writing of many internal documents to facilitate smooth implementation of the revised procedures. Repeated use of QQI's gap-analysis tool enabled us to identify evidence and assess current degrees of compliance with requirements, and identify actions required and the person responsible to initiate change and write new policy/procedures. Each question on the tool led into a search of the existing QA documents, and also a review of current practice, to establish if evidence existed of meeting the identified requirement, and to review if there could be a more effective way of meeting the requirement. We had been implementing changes to our procedures during the previous 3 years in preparation for re-engagement, with a particular emphasis on the separation of corporate and academic decision-making.

The gap analysis findings resulted in extensive revisions to procedures and modifications to documentation.

#### *Gap Analysis Findings and Actions taken in 2019 (Prior to Re-engagement)*

- **GDPR:** Production of stated policies and further development of procedures in bringing us in line with Data Protection requirements under GDPR. Procedural change had already begun and was in action but it had not been written up.
- **Updated maps:** organisational structure and programme development (and clearer process for programme development)
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- **Submitting Assignments:** New route to submit assignments online
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- **External Stakeholders:** Increased frequency of consultation and inviting evaluative feedback from placement sites and employers
- **Career Impact:** Modification of end of year learner feedback to access data on the impact on career throughout the training period

*Specific improvements implemented following gap-analysis*

In 2019 CTC's Governance Structure was refined to further separate corporate and academic roles. Terms of reference for committees and responsibilities for named roles were also specified with reference, e.g., to specific functions, membership, and frequency of meetings. Clarity in regard to procedures for rechecks, reviews and appeals was enhanced. The vulnerabilities that were identified through the gap-analysis process were compiled into a formal risk register. Clarity within the QA Manual itself was improved by the use of standard templates, division into discrete sections for each quality area, and use of title pages and a version control mechanism.

In September 2019, we submitted our application to QQI addressing all relevant areas:

1. CTC details and profile;
2. Details of ownership, management structure and control of CTC;
3. Details of financial viability and resources;
4. Scope of provision data;
5. Statutory declaration;
6. Identification and mapping of our documentation to capacity criteria.
7. Mapping of updated QA procedures to the relevant QQI guidelines.

Following the panel's preliminary meeting, CTC was notified that they had agreed on the agenda for the site visit and asked for some additional clarifications and information to be provided in advance of the meeting. This information was provided.

CTC prepared the presentation for the site visit and included information on the specific areas identified by the panel both on the agenda and identified in the questions posed by the panel in advance of the session.

The Panel event took place on 15<sup>th</sup> November 2019. The initial outcome was to defer its decision for a period of six weeks to allow CTC time to address issues that the panel had identified as potential mandatory changes. CTC was notified by QQI of the 4 mandatory changes and the specific advices arising from the site visit. The re-submission date was set for 7<sup>th</sup> January 2020. Following this we were issued with a draft report from the panel. We submitted a response addressing both the mandatory changes and the specific advices by the due date.

On 17<sup>th</sup> January we were verbally informed that the panel were happy with the work done to comply with the mandatory changes and the specific advices in their interim report, that all their requirements had been met and that they would recommend to the PEAC that CTC had met the requirements of QQI. Their final report was presented at the PEAC meeting on 6<sup>th</sup> February and CTC's re-engagement was formalised.

CTC's QA Policy and Procedure manual has been completely rewritten. Policies and procedures in the QA Manual are now more clearly presented through the use of standard templates with a title page and a version control mechanism. The manual has been restructured to divide it into discrete sections for each quality area, and regularly used documents, including some process maps/diagrams, have been included within an appendix to the relevant section. Terminology and language has been clarified and consistently applied.

A1: Introduction

A2: Governance Structures

A3: Staff and Human Resources

A4: Programme Development and Revalidation

A5: Access, Transfer and Progression

A6: Protection of Enrolled Learners

A7: Teaching, Learning, and Assessment

A8: Annual Monitoring and Minor Modification of Programmes

A9: Learner Conduct, Appeals and Complaints

A10: The CTC Environment

A11: Self Evaluation and Institutional Review

A12: Information Management

## **Specific enhancements and Impacts in various sections**

### ***Governance and Management of Quality***

Engagement in strengths and vulnerabilities assessments in regard to 1) Resourcing and Capacity, and 2) Governance - Structure provided us with welcome opportunities to self-assess and to identify areas for further development of our QA going forward.

In 2019-2020 CTC's Governance Structure was refined to further separate corporate and academic roles. A revised graphic was developed to depict the organizational structure. The CEO no longer holds the role of Examination Board Chairperson. Terms of reference for committees and responsibilities for named roles were also specified with reference, e.g., to specific functions, membership, and frequency of meetings. An additional academic has been added to the Academic Council so that it is now weighted in favour of academic rather than ex-officio members. A risk register has been compiled and will be reviewed annually.

Children's Therapy Centre Limited is a private limited company and the Board of Directors govern the operation of the company as a commercial organization. The Board of Directors delegates all responsibility for academic decision making to the Academic Council which reports to the Board of Directors through the Chairman of the Academic Council and the Director of Academic Affairs.

The Academic Council oversees the general professional, management, co-ordination, development and academic progress and direction of all CTC training programmes. It has full authority for all academic decision-making and reports to the Board of Directors through its Chairperson and the Director of Academic Affairs. The function of the Academic Council is to protect, maintain and develop the academic and professional standards of the Centre and the quality of CTC's Programmes.

The Director of Academic Affairs holds executive responsibility for academic matters and assuring quality management, development, and delivery of all programmes in accordance with agreed QA documentation. She reports to the independently chaired Academic Council.

The Chief Executive Officer is responsible for ensuring the implementation of plans to attain the strategic business goals of the Centre and for controlling the operational day-to-day management of the Centre including administrative support for academic staff as well as general business functions including Finance, Marketing and Advertising, I.T., Recruitment, Health and Safety, Communications and Legal compliance.

## *Programmes of Education and Training*

### *QA Manual Revisions*

- The QA Manual has been redesigned to rationalise procedures related to Programme Development, Design and Validation which are now set out in Section A4.
- We updated our map depicting the process of programme development to provide additional clarity.
- We have described more fully the structure of the Annual Report presented to the Academic Council.
- We have also described more fully the process of developing our annual Programme Improvement Plan and implementing minor modifications to programmes.

### *MA Programmatic Review*

Implementation of our updated QA policies and procedures supported CTC in successfully engaging in the Programmatic Review and Revalidation process for our MA Creative Psychotherapy (Humanistic and Integrative Modality), with embedded Postgraduate Diploma in Play Therapy, this year. This included the completion of an extensive self-evaluation including a detailed analysis of the programme as delivered over the previous 5 years addressing data in regard to applications; enrolment; attrition, transfer, progression and completion; grades and awards classification; and graduate destinations. We also reviewed physical facilities; timetabling of contact hours; learner workload by module and stage; attendance; teacher to learner ratios; teaching and learning strategies; learning outcomes achieved by learners; assessment strategies; learner feedback, complaints, appeals and commendations; and external examiner feedback. Furthermore, we engage in processes to enable us to gather data in relation to evaluation of the programme by currently enrolled learners and graduates; staff; and external stakeholders. We addressed findings, analysis and implications for revised programme for each of these aspects.

The self-assessment fed into the development of the revised programme document. In addition, this process included comparison with other programmes, confirming alignment with professional standards, and mapping against relevant standards. Our Peer Panel event took place in December 2019 and we were delighted to be recommended for revalidation with no conditions, 3 minor recommendations, and 4 commendations. The panel concluded that all criteria were met and therefore the outcome of the Programmatic Review was “Satisfactory (meaning that it recommends that QQI can be satisfied in the context of unit 2.3) of Core policies and criteria for the validation by QQI of programmes of education and training”.



#### “Summary of recommendations

1. It is recommended that Children’s Therapy Centre make explicit reference in the programme syllabus on how the following topics are covered:
  - ethics
  - cultural diversity
  - play theory
  - efficacy of approach
2. It is recommended that Children’s Therapy Centre review the credit weighting for the dissertation module.
3. It is recommended that Children’s Therapy Centre consider the introduction of a research module at an earlier stage in the programme.

#### Summary of Commendations to the Provider

1. The panel commends Children’s Therapy Centre on a consultation process that has exceeded expectations set out in this criterion.
2. The panel commends the programme staff on the supportive personal and professional culture they have created.
3. The panel commends Children’s Therapy Centre on the efficient, sensitive and timely manner in which they respond to individual student needs.
4. The panel commends the staff on the skilled way in which they have woven complex theoretical and scientific concepts with experiential learning techniques to ensure comprehensive understanding of key issues by students.”

In response to the recommendations above, CTC amended the draft programme document and schedule to adjust the credit weighting for the dissertation module, amended the structure of the programme slightly to introduce research content earlier in the programme, and added more explicit references in the programme syllabus to the 4 topics identified above.

The Independent Evaluation Report and all relevant documents were submitted to QQI and revalidation is now complete. The PEAC confirmed revalidation on 11th June 2020.

#### *European Association of Integrative Psychotherapy*

As part of our application to become a European Accredited Psychotherapy Training Institute (EAPTI), we submitted relevant documentation and were also assessed by the European Association for Integrative Psychotherapy during a site visit on 19<sup>th</sup> and 20<sup>th</sup> November 2019. This included meetings

with management, staff, students and graduates. We enjoyed a successful outcome and resulted in a recommendation to the European Association for Psychotherapy (EAP) in regard to our application.

### *[European Association for Psychotherapy](#)*

The final stage in our application to become a European Accredited Psychotherapy Training Institute (EAPTI), involved a review of relevant documentation and assessment during a site visit on 31st January and 1st February 2020. This included meetings with management, staff, students and graduates.

We were delighted to achieve status as a European Accredited Psychotherapy Training Institute (EAPTI) - one of only 3 such institutes in Ireland.

The EAP website states that "*EAPTI's are training institutes whose excellence and commitment to high standards have been tested and approved by the 'European Association for Psychotherapy'. This requires a rigorous approval visit and the backing of the relevant national and modality bodies.*"

### *Level 6 Programme*

CTC have been involved in the delivery of the Therapeutic Play Skills (6N4705) component certificate at a variety of locations (Kerry, Limerick, Leixlip, Galway, Claremorris, Dublin and Mountmellick) and online in 2019-2020.

The Level 6 team engaged in meetings in early March 2020 to agree contingency plans in regard to programme delivery and possible impact of the coronavirus situation in Ireland. Initial planning in this regard was to suspend almost all Level 6 courses. However, when it became clear that the lockdown would be prolonged, these courses resumed online. This has proven to be a very effective mode of delivery for the course.

### **Staff Recruitment, Management and Development**

Section A3 of the QA Manual details all policies and procedures in regard to Recruitment and [Selection of Staff](#) (A3.1), [Staff Induction](#) (A3.2), and [Staff Development](#) (A3.3). The Internal Quality Assurance Team reviewed the implementation and effectiveness of these procedures in July 2020 and found them to be working satisfactorily.

This section was expanded and now elaborates more fully on supports available to staff in regard to ongoing professional development including a new section on CTC's approach to supporting scholarly Activity, and inclusion of training components in the areas of, e.g., assessment in team days.

Our MA Programme Document details the qualifications required for programme staff.

## Teaching, Learning and Assessment

### *Teaching, Learning and Assessment Strategy*

A formal teaching, learning and assessment strategy document is now included in the revised QA manual (A7.1)

### *Marks and Standards*

A Marks and Standards section has been added to the QA Manual (A7.9 MSD).

### *Placements*

The [work placement policy and procedure](#) section (A7.3) now clearly describes the roles and responsibilities of CTC, the learner, the supervisor and the workplace. Further details in this section and in the appendix (A7.3 WP&CPL) clarify the requirement, and the process in place, to ensure the suitability of the specific placement for the associated stage of practice

### *Rechecks and Reviews*

Clarity in regard to procedures for rechecks and reviews was enhanced in our revised QA Manual. Sections [A7.11](#) is particularly relevant.

### *Appeals*

The appeals mechanisms has been simplified, the grounds for appeal are clearly delineated, and the CEO is no longer involved in the desk review of appeals ([A9.4](#)). Revised appeals procedures for deferrals, extensions, and Examination Board decisions, plus addition of section for complaints against the appeals process procedure have been provided. The pre-Examination Board Appeals process has been removed and the procedures for post-Examination Board Appeals has been more clearly articulated ([A9.3](#)).

### *Exam Processes*

The Director of Academic Affairs now holds overall responsibility for ensuring the integrity of exam processes ([A2.5](#)).

### *Covid-19 Response in regard to assessment*

The MA PMT under the leadership of the MA Course Leader, and with input from the Director of Academic Affairs, responded efficiently and effectively in implementing changes in programme delivery when government policy required the cessation of face-to-face teaching in mid-March. Our response included analysis of the problems posed in regard to teaching, learning and assessment, implementing procedures to prepare alternative provision, a move to online delivery of content, and a modification of 2 assessment tasks. One of these was substitution of a written paper instead of an in-class assignment,

the second was simply a move to online assessment of a presentation rather than attendance at the centre to present this.

## Supports and resources for learners

### *Learning Support Officer*

New position approved. The Learning Support Officer will develop a suite of inputs to support learners and complement the associated online portal unit. In addition, they will support learners, including those requesting reasonable accommodation support, to participate fully and demonstrate their learning effectively.

### *Learner Representatives*

New structure implemented and [policy document](#) developed.

### *Learner Requests*

We updated and described more fully, in our QA Manual, the procedures for managing deferrals and applications for extensions.

### *Appeals*

Revised appeals procedures in regard to deferrals, extensions, and Examination Board decisions, plus addition of section for complaints against the appeals process procedure.

## Information and Data Management

- GDPR: Further development of procedures in bringing us in line with Data Protection requirements under GDPR.
- Production of a suite of stated policies and additional statements (including Information Management Statement) prepared and included in revised QA Manual
- The term 'Data Controller' has been replaced with 'Data Protection Contact' throughout the QA manual (Section A12: Information Management)

## Public Information and Communication

Our policy on Key Streams of Communication ([A2.8](#)) governs our communication with individuals and agencies. This is a two-way street including information we send out and avenues for incoming communications.

CTC's full QA Manual, QA evaluation report, External Examiner Reports, and feedback from students and graduates are published on our website.

Detailed information on all courses remains available on the website also.

### Other Parties Involved in Education and Training

- External Stakeholders: Increased frequency of consultation with and inviting evaluative feedback from placement sites and employers
- Career Impact: Modification of end of year learner feedback to access data on the impact on career throughout the training period
- Reference to any specific institute has been removed from section [A2.7](#) on 'External Partnerships with Other Providers' in 'Other Parties involved in Education and Training'. This makes the policy more applicable to engagement with other entities in general.
- Composition of Peer Review Group for programmatic review has been formulated, along with procedures for the review itself, and included in QA Manual section [A4.2](#)
- Section [A2.6](#) of the revised QA Manual addresses all aspects regarding appointment and role of the External Examiner.
- The revised Work Placement policy and Procedure ([A7.3](#)) provides for additional resources being made available to placement sites.

### Self-evaluation, Monitoring and Review

#### *Our revised QA Manual*

- Has elaborated on the procedures involved in our internal periodic self-evaluation processes to describe the ongoing monitoring that feeds into evaluations ([A4.2](#) and [A11.1](#)).
- Describes more succinctly our Annual Monitoring ([A8.1](#))
- Describes more fully the process of developing our annual Programme Improvement Plan and implementing minor modifications to programmes ([A8.2](#))

## Effectiveness and Impact of QA policy and Procedures

The main event this year that impacted on improving effectiveness of our QA policy and procedures was obviously the re-engagement process. Implementing our existing QA processes in regard to measuring effectiveness and gathering feedback from relevant stakeholders enabled us to gather relevant data in preparation for this event and helped us identify helpful amendments.

These included both the changes implemented in response to our gap-analysis as described above; the subsequent changes implemented in response to the mandatory changes, specific advises and more general recommendations mentioned within the Draft Re-engagement Report; and the review of the QA procedures in action by our Internal Quality Assurance Team in July 2020.

### ***Response to Draft Re-engagement Report***

CTC thanked the Re-engagement Panel members for the detailed report and extremely useful feedback received both within the report and during the day of the panel visit. CTC were happy to report that we have now made all 4 mandatory changes and followed all the specific advices offered. We also incorporated many further recommendations contained in the body of the draft report.

1. CTC's Governance Structure has been refined to further separate corporate and academic roles. The CEO no longer holds the role of Examination Board Chairperson.

2. Policies and procedures in the QA Manual are now more clearly presented through the use of standard templates with a title page and a version control mechanism. The manual has been restructured to divide it into discrete sections for each quality area, and documents, including some process maps/diagrams, have been included within an appendix to the relevant section.

A1: Introduction

A2: Governance Structures

A3: Staff and Human Resources

A4: Programme Development and Revalidation

A5: Access, Transfer and Progression

A6: Protection of Enrolled Learners

A7: Teaching, Learning, and Assessment

A8: Annual Monitoring and Minor Modification of Programmes

A9: Learner Conduct, Appeals and Complaints

A10: The CTC Environment

A11: Self Evaluation and Institutional Review

A12: Information Management

3. Terms of reference for committees (including details of purpose, specific functions, membership, frequency of meetings, standing orders, and quorum) and responsibilities for named roles are included (Throughout Section 2).

4. The QA Manual has been completely redesigned to rationalise procedures related to Programme Development, Design and Validation.

5. The pre-Examination Board Appeals process has been removed and the procedures for post-Examination Board Appeals has been more clearly articulated ([A9.3](#)).

6. A Marks and Standards section has been added ([A7.9 MSD](#)).

7. A formal Risk Register, with review schedule, has been added to assist in the mitigation of the risks identified through the gap analysis process ([A10.3](#)).
8. Terminology has been clarified - 'delegated responsibility' now replaces 'delegated authority' ([A2.2](#)), and 'appeal' has been replaced with 'recheck' ([A7.11](#)).
9. A formal teaching, learning and assessment strategy document is now included ([A7.1](#))
10. An additional academic has been added to the Academic Council so that it is now weighted in favour of academic rather than ex-officio members ([A2.3](#)).
11. Some sections of narrative have been removed, and the incidence of repetition in the manual has been reduced to make it more user-friendly.
12. The work placement policy and procedure section ([A7.3](#)) now clearly describes the roles and responsibilities of CTC, the learner, the supervisor and the workplace. Further details in this section and in the appendix ([A7.3 WP&CPL](#)) clarify the requirement, and the process in place, to ensure the suitability of the specific placement for the associated stage of practice.
13. Reference to CIT/Crawford has been removed from section [A2.7](#) on 'External Partnerships with Other Providers' in 'Other Parties involved in Education and Training'. This makes the policy more applicable to engagement with other entities in general.
14. The appeals mechanisms has been simplified, the grounds for appeal are clearly delineated, and the CEO is no longer involved in the desk review of appeals ([A9.4](#)).
15. The Director of Academic Affairs now holds overall responsibility for ensuring the integrity of exam processes ([A2.5](#)).
16. Information on additional documents provided to the Re-engagement Panel, and information elicited during discussion on the day, has now been incorporated into the QA Manual itself to make it more clearly a 'one-stop shop' where users and stakeholders can access clearly detailed policies and procedures.



17. The term 'Data Controller' has been replaced with 'Data Protection Contact' throughout the document (Section A12: Information Management), and all role titles have been checked for consistency.

18. The Programme Administrator has now been charged with being an additional back-up person in relation to data input in the QBS system ([A2.5](#); [A7.14](#)).

The Academic Council met on 5th January 2020 and approved all changes and agreed that the manual would be published on the CTC website, with guidance on its use, when approved by QQI. This happened following the PEAC meeting on 6th February. Learners and staff also have access to the manual, and associated documents, within the online learning system.

### ***Internal Quality Assurance Team Review***

The IQAT report presented at our Annual Review last August concluded that:

*“While it is probably too early to speak conclusively to the impact of the revised QA policies and procedures, initial impressions are that:*

- *The restructuring of the Examination Board so that the CEO no longer serves as Chairperson has facilitated us in having **Sue Callaghan**, previously external member, take on that role.*
- *Greater clarity in terms of the purpose, role, membership and proceedings for each committee has not only enhanced our operating procedures, it has also been welcomed by the members of the various committees as they also value the increase in transparency.*
- *The restructuring of the QA Manual, and publication of the new format in discrete sections on the website and online portal, has facilitated ease of access to the precise information being sought.*
- *The greater clarity in regard to programme deferrals and the more formal application procedure has streamlined the process for learners seeking to take time out during the programme.*
- *The refinement of our Garda Vetting processes, and agreement with IAPTP for sharing the outcomes of these applications in accordance with Section 12.3(a) of the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 (as amended), is more effective and useful for our learners than the previous system.*
- *The enhanced clarity regarding re-checks, reviews, and appeals in relation to assessment tasks, and the desk review process in regard to e.g. unsuccessful applications for extensions or deferrals, is appreciated by all. In particular, clarity in regard to the grounds for appeal has been experienced as informative and beneficial.*
- *We will be rolling out our revised Placement Packs to learners and placement sites at the beginning of the new academic year. This pack was presented to relevant staff at an internal training day in February 2020 and the enhanced procedure developed to assure the suitability*

*of the work placement location was welcomed by the trainers and supervisors. The 3<sup>rd</sup> year pack has already been reviewed in Tusla as part of the process of securing a clinical practice placement for one of our students.*

- *The operation of our Internal Quality Assurance Team, our Programme Management Teams and our Academic Council was tested and found to be very effective in dealing with the challenges of having re-engagement, programmatic review, and evaluation by both the European Association of Integrative Psychotherapy and the European Association for Psychotherapy all take place within a 12 week period. CTC had successful outcomes from all these evaluations. We were happy that we were able to host some of our governance meetings remotely and that the use of technology was satisfactory.*
- *The addition of an additional academic to the Academic Council has ensured that decision making is weighted towards academic concerns. While we have never had any concern that other matters influenced decision making, it is reassuring to know that the balance is now more appropriate.*
- *The diagrams created as part of the revised manual are very clear and immediately informative in regard to the structures (organisational structure) and processes (programme development) they depict. Our plan is to develop more process maps to further enhance the manual.*
- *Providing the Marks and Standards document as an appendix in the QA manual, rather than just including it in the Course Handbook as it was previously, is making it more accessible to both learners and staff.”*

## 2.1 Initiatives within the Institution related to Academic Integrity

### *Academic Misconduct*

Our revised QA Manual now has a comprehensive section on Academic Misconduct ([A9.2](#)) addressing plagiarism, copying, and duplication. This includes definitions, categorisation of minor and serious offences, student responsibilities, as well as a detailed section on academic impoverishment and/or impropriety.

### *Learning Support Officer*

We have developed a new role of Learning Support Officer within CTC. The role of the Learning Support Officer is to develop a suite of inputs to support learners with academic writing. This complements the online portal area specifically devoted to this and includes content in regard to:

- Planning and preparing for assessment;
- Competence in writing and literacy;
- Citation instruction;
- Academic dishonesty and plagiarism.

The Learning Support Officer is also tasked with facilitating a number of support sessions for learners, including those requesting reasonable accommodation support to enable them to participate fully or to demonstrate their learning effectively, throughout the academic year.

### *Integrity of Exam Processes*

The Director of Academic Affairs now holds overall responsibility for ensuring the integrity of exam processes ([A2.5](#)).

### *Benchmarking with Deakin University, Australia*

CTC undertook a benchmarking process with Deakin University in which we second marked a selection of each other dissertations. This provided us with rich data to demonstrate compliance with international standards in regard to assessment. We presented this data (as well as information of our staff's engagement in the International Play Therapy Study Group) as part of our presentation for the re-engagement panel. This contributed to a commendation in regard to establishing links with international higher education institutions with regard to peer grading, comparisons and staff development.

### *Staff Training*

Staff training in assessment and marking took place at our 2019 team days. We also facilitated an in-house training day for all clinical supervisors to enhance consistency of marking in regard to assessment of the clinical practice of trainees. Staff also received training to equip them to deliver training online

and training to equip them to supervise students whose practice placement now shifted to tele-mental health rather than face-to-face therapy sessions.

#### *Global Pandemic: CTC's Covid-19 Response*

##### *A Covid Response Plan*

Our revised QA policies and procedures were put to the test in responding to the coronavirus restrictions imposed on institutes of higher education in mid-March this year when government policy required the cessation of face-to-face teaching. Our updated QA procedures and clear separation of corporate and academic roles allowed a clear route for the needs identified by the academic staff to be proposed to the corporate staff utilising the organisational processes in place. The Director of Academic Affairs, Course Leader and Programme Management Team linked in with the Internal Quality Assurance Team, staff and learners and identified the immediate and potential future challenges faced and potential solutions to these challenges. Proposals were brought to the CEO, Academic Council and Board of Directors.

Significant levels of additional funding were made available to cover current (e.g. purchase of Zoom Pro accounts) and future costs linked to the crisis (e.g. increased budgets to purchase individual kits of resources for learners, posting these kits to incoming learners, provision of finance to rent conference facilities for use instead of our own venues to meet physical distancing requirements for the next academic term, production of training videos to enhance online learning).

A Covid-19 contingency plans was developed and approved by the relevant committees. The MA Programme Management Team under the leadership of the MA Course Leader, and with input from the Director of Academic Affairs, responded efficiently and effectively in firstly recommending and then in implementing changes in programme delivery. This response included analysis of the problems posed in regard to teaching, learning and assessment, implementing procedures to prepare alternative provision, a move to online delivery of content, and a modification of assessment tasks previously completed during face-to-face sessions.

The Level 6 team met on 23rd February 2020. Further meetings took place in early March to agree contingency plans in regard to programme delivery and possible impact of the coronavirus situation in Ireland. Initial planning in this regard was to suspend almost all Level 6 courses. However, when it became clear that the lockdown would be prolonged, these courses resumed online.

##### *Implementing the plan*

Covid Response plans to meet the immediate including a shift to online learning and training of staff in online teaching were implemented. We soon began to incorporate flipped classroom learning strategies

to further enhance the learning experience for our learners (See *Flipped Classroom and Blended Learning* section below)

Incorporating flipped learning facilities required enormous planning, preparation, and financial investment including significant costs associated with the preparation of videos, narrated PowerPoints, directed study tasks etc. However, CTC is very pleased with the success of this approach in facilitating our learners achieve their goals thus far and considers the investment to have been very worthwhile. It is evident that the group sessions that follow these newly introduced preparatory activities will continue to enhance learning even when restrictions are eased and learners can be physically present.

The Director of Academic Affairs and the Internal Quality Assurance Team completed a review of the implementation of the Covid-19 plan at the conclusion of the academic year in May 2020. The Course Leader and Programme Management Team contributed to an evaluation of the impact of the plan on learners and staff and developed an updated plan for the 2020-2021 academic year. However, this plan was subsequently continually updated in line with emerging information as it included a planned return mainly to face-to-face training from late August. To this aim, we rented conference facilities for the first semester of 2020-2021 year so as to ensure safe physical distancing even in the event of the 2 metre rule remaining in place.

#### *Assignments and Assessment in the Covid Era*

As most of CTC assignments do not take place during face-to-face sessions and we had already completed many of the continuous assessment tasks for the relevant academic year, CTC only needed to modify two assessment tasks. One of these was substitution of a written paper instead of an in-class assignment, the second was simply a move to online assessment of a presentation rather than attendance at the centre to present this. Both of these worked out very well. In fact, the online assessment of the presentation (sharing a video of a clinical practice session and engaging in discussion with panel in regard to this) worked even better than that usual face to face format. An additional benefit was that peers could also observe the presentation and both see and hear more clearly than in face-to-face format.

#### *Monitoring feedback on switch to online learning*

This crisis tested our QA processes and overall, we were happy that our policy and procedures are robust. Feedback from staff and learners has been to report high levels of satisfaction with the necessary switch to online learning.

We have monitored feedback from each cohort following each teaching period and the end of year evaluation (for Postgraduate Diploma stage at end of year 2) to assess how the learners have experienced the temporary shift to online learning.

Cohort	Teaching Block	Responses to Questions on Feedback form				
		Would recommend this module to others?	Teaching Methods: Range and Effectiveness		Overall rating of the module.	
			Average from 7	Average %	Average from 7	Average %
Year 1, G1	March 2020	100%	6.26	89%	6.37	91%
Year 1, G2	April 2020	95%	6.12	87%	6.24	89%
Year 2, G1	April 2020	100%	6.39	91%	6.61	94%
Year 2, G2	April 2020	100%	6.11	87%	6.39	91%
Year 3	April 2020	100%	6.06	87%	6.35	91%
Year 4	May 2020	100%	5.68	81%	6	86%
Year 2, G2	May 2020	100%	6.27	90%	6.67	95%
Year 3	May 2020	100%	6.44	92%	6.56	94%
Year 1, G1	May 2020	100%	6.39	91%	6.61	94%
Year 1, G2	June 2020	100%	6.1	87%	6.3	91%

Our Year 2 end of year evaluation asked for a rating on a scale of 1 (low) - 7 (high), for the experience. The average rating was 6 out of 7 (86%).

One impact of Covid-19 has been a significant increase in costs associated with delivery of training. This will include substantially increased costs for training venues when we resume face-to-face teaching. We foresee this increase in costs continuing until all health risks have passed.

### *Flipped Classroom and Blended Learning*

In the past CTC has indicated that we are committed to developing blended learning and flipped classroom opportunities to enhance learners' experiences through engagement in discussions, group projects, and accessing some lectures remotely. The Covid-19 situation this year has brought this to a head. Since March 2020 we have begun to incorporate flipped classroom learning strategies to further enhance the learning experience for our learners when face-to-face learning in the same physical space has not been possible. Sharing teaching materials, and prescribing activities, for individual active learning prior to online group sessions has enabled us to make the group learning space even more dynamic, interactive and conducive to fostering an integrated understanding of material and enhance the learners' capacity to apply learning through experiential activities. The trainers were now able to focus additional time on guiding the learners as they applied the newly learned concepts to their clinical practice. Between March and June 2020 we were restricted to online platforms even for these sessions. We believe that the group sessions that follow the preparatory activities will be even more effective when learners can be physically present. We are excited about the possibility of developing this mode of delivery even when coronavirus regulations do not require it.

Flipped learning requires enormous planning, preparation, and financial investment. Significant levels of additional funding have been invested and allocated to this area. We look forward to reviewing the benefits of this as time goes on.

### 3.0 QA Improvement and Enhancement Plans for Upcoming Reporting Period

#### 3.1 QA and QE supporting the Achievement of Strategic Objectives

No.	<b>Relevant objectives</b> Note: Include reference to the relevant section of the preceding AQR, where applicable	<b>Planned actions and indicators</b>  <i>Note: Include details of unit responsible, and how planned action will address the relevant strategic priority and/or reengagement advice/CINNTE recommendation.</i>  <i>If the institution is preparing for cyclical review, include how the planned actions will address the relevant review objective(s).</i>
	Review of premises to allow for physical distancing including securing a new permanent base that will allow for this where necessary.	The CEO conducts regular reviews of current provision of suitable learning facilities. Covid-19 and the associated need for physical distancing when face-to-face contact was possible highlighted a shortfall in both our Limerick and Ballymore venues in terms of capacity to hold full cohort of learners. This was most problematic in Limerick where our rented space is part of a therapy centre and square footage was insufficient when allowing for 2 metre distancing. The CEO, Director of Academic Affairs, and MA Course Leader will seek to source a larger Limerick venue for our exclusive use.
	Continuing to monitor the effectiveness of flipped classroom strategies and blended learning as implemented during the coronavirus crisis. Review provision of flipped classroom learning and use of online delivery for some lecture based components and individual dissertation support sessions	CTC was pleasantly surprised at how effective, and popular, flipped classroom strategies and blended learning, made necessary by COVID-19 restrictions, proved to be. As we attract learners from all over the country, the burden of travel has traditionally been onerous on some learners. We found that many components of our education programme, including but not limited to lecture-based components (including both clinical and dissertation supervision for example) were not hampered by the switch to online delivery. In addition, we found that some components were actually enhanced by the



		online platform and the flipped classroom strategies and resources provided to learners. We now hope to explore ways to incorporate more of these approaches into our programmes. This will include engaging in research and reviewing and adding to our QA Policies and Procedures.
	Participate in preparation for statutory regulation and registration including engagement with other psychotherapy training providers who work to TAC standards	The title of psychotherapist is listed to be one of the protected titles and subject to CORU regulation and practitioner registration. The Registration board is in place and working to develop standards and procedures. Until this process is more advanced, we cannot begin any validation process with CORU. However, in the meantime we intend to learn as much as we can about the process, generic components of standards and criteria, and become active in consultation processes and advocacy on behalf of learners and graduates.
	Continue to update policies and procedures	Our Internal Quality Assurance Team, and Director of Academic Affairs, are involved in regular reviews of policies and procedures. As we have recently completed the reengagement process our QA Manual has been totally rewritten and presented in more cohesive manner. However, as a living document, constant review and revision is required.
	Regular reviewing of our Risk Register in light of emerging developments that may impact on provision of education service	One gap we noted in our Risk Register in 2020 was lack of provision for a Global Pandemic. A minimum of an annual review process is provided for and will address this and any other shortcoming we find.
	Continue to monitor and review GDPR procedures in light of requirements and any issues that come to light in implementing revised record keeping procedures (Storage and return of learner files, destruction of data when no longer required).	Monitoring and improving data management systems require constant attention. The recently improved system for return of learner files and secure destruction of data when no longer required is subject to regular review. Staff engage in an annual training in regards to legal requirements, including data protection legislation, and will update and develop new procedures as indicated.

	Continue to monitor effectiveness and adjust procedures to become more useful and learner friendly. Improve ways of performing daily, weekly, monthly and annual tasks.	As we implement the updated policies and procedures as approved as part of the reengagement process we anticipate that possible improvements will become evident and can be incorporated.
	Monitor revised policies and procedures in regard to academic integrity and the impact of the new resources being made available to learners by our recently appointed Learning Support Officer.	Monitor, and adjust as necessary, our policies and procedures in regard to academic integrity in light of our learnings from the implementation of our updated support, and accountability, system.

## 3.2 Reviews planned for Upcoming Reporting Periods

The Children's Therapy Centre reviews its courses and programmes with learners, trainers, and other stakeholders through a process of regular review and engagement in an ongoing quest to identify and implement the most effective and efficient ways to improve the training we deliver. CTC does not have any external review scheduled over the next 3-4 years. However, we will continue with our standard internal reviews as follows.

### **Annual Reviews (internal):**

Annual reports are based on review and evaluation of the systems in operation, documents, procedures, policies, sample records, files, assignments, and any other relevant documents, and meetings and consultations with relevant people who may include learners, staff, and other stakeholders.

Reports prepared at the conclusion of each academic year:

- Annual Report prepared by the Director of Academic Affairs;
- Annual Programme Improvement Plan;
- Evaluative reports for each cycle of the programme that has been completed;
- Internal Quality Assurance Team report;
- GDPR Report;
- Equality and Diversity Officer Report;
- External Examiner Report

In addition to the annual review process, CTC monitor and review programmes on an ongoing basis through the use of learner feedback and trainer feedback. Learner feedback is gathered and analysed by the Programme Administrator following:

- teaching inputs;
- academic years;
- the conclusion of each cycle of the programme.

Trainers provide feedback following identified teaching components. They also contribute to programme evaluation through a range of other processes including:

- regular reviews with members of the Programme Management Team;
- annual review process;
- team days etc.

Material gathered through all the above processes will provide data for Institutional Review which will be due in 2024/2025.

### 3.2.1 Reviews planned for Next Reporting Period

Unit to be reviewed	Date of planned review	Date of last review
No Programmatic Review planned in the next year.		

### 3.2.2 Reviews planned beyond Next Reporting Period

*There is no published schedule for these External Reviews as yet*

- MA Creative Psychotherapy (Humanistic and Integrative Psychotherapy) next programmatic review due prior to 2025 intakes.
- Institutional review due in 2024
- Revalidation with the Irish Association for Humanistic and Integrative Psychotherapy (IAHIP) due in 2023-2024
- Revalidation with the European Association for Psychotherapy (EAP) in 2026-2027

## 4.0 Additional Themes and Case Studies

### Cross-institutional quality enhancement initiative

#### *Benchmarking with Deakin University, Australia*

CTC undertook a benchmarking process with Deakin University in which we second marked a selection of each other dissertations. This provided us with rich data to demonstrate compliance with international standards in regard to assessment. We presented this data (as well as information of our staff's engagement in the International Play Therapy Study Group) as part of our presentation for the re-engagement panel. This contributed to a commendation in regard to establishing links with international higher education institutions with regard to peer grading, comparisons and staff development.

### Case Study: Responding to the Covid-19 Pandemic

The Children's Therapy Centre provides Level 9 training in the form of an MA in Creative Psychotherapy that equips graduates with the knowledge, skills, and professional qualities that enable them to safely and ethically provide effective psychotherapy services to children and adolescents. We are committed

to regular internal and external review to enable us to constantly improve and provide excellent services to our learners, staff and external stakeholders. In fact, we had a particularly busy time with External Reviews in late 2019 and early 2020:

- Mid November: QQI Re-engagement Panel
- Late November: European Association of Integrative Psychotherapy validation visit
- December: Programmatic Review Panel for our MA and Postgraduate Diploma
- January/February: European Association for Psychotherapy validation visit

Each of these reviews provided rich learning and all were successful. In addition to re-engagement with QQI and revalidation of our academic awards, CTC was also awarded status as a European Accredited Psychotherapy Training Institute.

Preparation for, and engagement in, the QQI re-engagement process involved us in an extensive review and revision of our QA processes, and led to the development of a completely revised and more clearly presented QA manual. Our panel visit was in mid-November 2019 and, on 6<sup>th</sup> February 2020, the panel recommendation that CTC's QA procedures be approved was brought to QQI's Programme Awards Executive Committee. We had reached the conclusion of the External Review processes that had engaged us over recent months. Phew! "Now we can relax for a while" we thought.

Famous last words. It was not long before we had to test our QA processes in terms of their capacity to support us in functioning effectively in the context of a global pandemic - something we had neglected to include on our risk register. In mid-March 2020 government policy required the immediate cessation of all 3<sup>rd</sup> level face-to-face teaching. As a provider who relies heavily on experiential learning, we had to find a way forward to meet our strategic objective of providing the best learning environment possible - including working in accordance with our teaching, learning and assessment strategy and other governing policies.

The staff team immediately began to consider the best ways to address this unprecedented situation. Our updated QA procedures presented a clear route for the academic staff to bring proposals to the corporate staff utilising the organisational processes in place. The Director of Academic Affairs, Course Leader and Programme Management Team linked in with the Internal Quality Assurance Team, staff and learners and identified the immediate and potential future challenges faced as well as potential solutions to these challenges. Proposals were brought to the CEO, Academic Council and Board of Directors.

A Covid-19 contingency plan was developed and approved by the relevant committees. The MA Programme Management Team under the leadership of the MA Course Leader, and with input from the

Director of Academic Affairs, responded efficiently and effectively in firstly recommending and then in implementing adaptations in programme delivery. This response included analysis of the problems posed in regard to teaching, learning and assessment; implementing procedures to prepare alternative provision; a move to online delivery of content; and a modification of assessment tasks previously completed during face-to-face sessions. The plan to meet the immediate needs, including training teaching staff in the use of the Zoom platform and online teaching, was implemented. Challenges in dealing with waiting rooms, muting microphones, screen sharing, using the whiteboard, the chat box, managing breakout rooms, were mastered. We soon began to incorporate flipped classroom learning strategies to further enhance the learning experience for our learners. It is fair to say that this required enormous planning, preparation, and financial investment.

We designed and developed training videos, narrated PowerPoints, and directed study tasks. We began to email out handouts and lists of materials to learners to have to hand in advance of each module. We made additional resources available on the online portal. When restrictions permitted, we set up small 'pods' of learners to be together during the module so that they could practice skills with each other. We introduced the use of preparatory activities to introduce theoretical concepts (for example) so that some of the online learning could focus more on the integration of theory and practice rather than the presentation of material. This allowed learners to study and prepare on a time scale that fits with their individual needs and circumstances. We were acutely aware of the challenges of spending long periods online in front of a screen. We redesigned the structure and content of training days to take account of the new home-based learning environment; the need to include as many experiential components as possible; the need for movement and access to outdoors; and recognise that some learners would have additional challenges associated with care of children or vulnerable adults that required their attention when restrictions prevented others being available as supports to them.

Sharing teaching materials, and prescribing activities, for individual active learning prior to online group sessions enabled us to make the group learning space even more dynamic, interactive and conducive to fostering an integrated understanding of material and enhance the learners' capacity to apply learning through experiential activities. The trainers were now able to focus additional time on guiding the learners as they applied the newly learned concepts to their clinical practice. Between March and June 2020 learners were restricted to online platforms even for the supervised clinical practice sessions. The tele-mental health training that CTC provided for staff and learners in March enabled this to happen safely and further enhanced the skill set of the learners concerned. We were very glad that we had taken this pro-active step so quickly.

Significant levels of additional funding were made available to cover costs linked to the crisis. Immediate costs were the purchase of Zoom Pro accounts for teaching staff; training costs to equip staff for this

new mode of teaching; and provision of training for staff and learners in tele-mental health service provision. This equipped them to meet challenges presented, enable continued services to our learners' clients, and equipped clinical supervisors to supervise this new mode of practice. Predicted future costs at that stage (and implemented later) included funding to purchase individual kits of resources for learners (as they would no longer have access to resources within the training centre); posting these kits to incoming learners; provision of finance to rent conference facilities for use instead of our own venues to meet requirements should resumption of face-to-face learning be permitted while physical distancing requirement remain in place; and production of training videos to enhance online learning.

As most of CTC assignments do not take place during face-to-face sessions and we had already completed many of the continuous assessment tasks for the relevant academic year, CTC only needed to modify two assessment tasks. One of these was substitution of a written paper instead of an in-class assignment, the second was simply a move to online assessment of a presentation rather than attendance at the centre to present this. Both of these worked out very well. In fact, the online assessment of the presentation (sharing a video of a clinical practice session and engaging in discussion with panel in regard to this) worked even better than that usual face to face format. An additional benefit was that peers could also observe the presentation and both see and hear more clearly than in face-to-face format.

This crisis tested our QA processes and overall we were happy that our policy and procedures are robust. The Director of Academic Affairs and the Internal Quality Assurance Team completed a review of the implementation of the Covid-19 plan at the conclusion of the academic year in May 2020. Feedback from staff and learners has been to report high levels of satisfaction with the necessary switch to online learning. CTC is very pleased with the success of this approach in facilitating our learners achieve their goals thus far. We were actually pleasantly surprised at how effective, and popular, flipped classroom strategies and blended learning, made necessary by COVID-19 restrictions, proved to be. As we attract learners from all over the country, the burden of travel has traditionally been onerous on some learners. We found that many components of our education programme, including but not limited to lecture-based components, were not hampered by the switch to online delivery. In addition, we found that some components were actually enhanced by the online platform and the flipped classroom strategies and resources provided to learners. The group sessions that follow the newly introduced preparatory activities will continue to enhance learning even when restrictions are eased and learners can be physically present. We now hope to explore ways to incorporate more of these approaches into our programmes. While we will not move to that as our main mode of delivery, certain elements enhanced programme delivery and meeting learners' needs. CTC will certainly explore ways to incorporate this within our programmes going forward.