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Quality and Qualifications Ireland
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Reengagement Panel Report

Assessment of Capacity and Approval of QA Procedures

Part 1 Details of provider

1.1 Applicant Provider

Registered Business/Trading Name:	Irish College of Humanities and Applied Sciences (ICHAS)
Address:	Walton House, Lonsdale Rd, Castletroy, Limerick
Date of Application:	15 th November 2018
Date of resubmission of application:	
Date of evaluation:	
Date of site visit (if applicable):	30 th May 2019
Date of recommendation to the Programmes and Awards Executive Committee:	



1.2 Profile of provider

The Irish College of Humanities and Applied Sciences (ICHAS) is an independent education provider based in Limerick and specialising in the delivery of higher education (HE) programmes. The provider was established in 1999, and previously known as the National Counselling Institute of Ireland (NCII).

NCII was established to provide educational services for individuals working in health and social care in socio-economically deprived community settings. The founding vision was to develop programmes that would allow students to develop and practice counselling skills within relevant fields of practice.

NCII agreed quality assurance procedures with HETAC in 2006, and its first undergraduate programme was subsequently validated. An expansion of the provider's programme offerings since that time has seen growth in learner numbers, and concurrent growth in the number of academic, administrative and support staff working for the provider. In 2011, following internal and external review, the adoption of the current name was agreed and the provider became known as ICHAS on August 1st of that year.

Following this, ICHAS reconstituted its internal structures and expanded its programme offerings. Within ICHAS, three institutes (National Counselling and Psychotherapy Institute; National Institute of Open Learning; National Institute of Business and Management) are managed by the core leadership and administration of ICHAS, offering programmes from levels 6 – 9 on the National Qualifications Framework (NFQ). Additionally, the Institute of Open Learning offers CPD Workshops.

The administrative centre and main campus of ICHAS is located in Limerick. ICHAS offers programmes ranging from levels 6 – 9 on the National Qualifications Framework (NFQ) using a blended learning (BL) delivery mode. The provider has QQI approval to offer undergraduate programmes at 17 off-campus centres and postgraduate programmes at five off-campus centres. The purpose of off-campus centres is to provide greater accessibility to learners in remote areas. However, in practice in recent years the use of a BL mode of delivery has enabled the provider to limit this to one location in Dublin. In 2015, ICHAS undertook a revision of its QA with QQI in relation to collaborative provision, although currently there are no collaborative provisions in place. ICHAS now caters to a diverse cohort of full-time and part-time learners. Learners attend workshops in person, and are offered the choice of attending synchronous BL sessions remotely or in person.



Part 2 Panel Membership

Name	Role of panel member	Organisation
Danny Brennan	Panel Chair	Former Registrar, Letterkenny IT and DNB Education Consultants
Marcella Finnerty	Panel Member	Chairperson and Director, IICP
Tara Ryan	Panel Member	Registrar, Irish Management Institute
Barry Clohessy	Student Representative	Formerly, IT Sligo
Catherine Peck	Report Writer	Education Consultant

Part 3 Findings of the Panel

3.1 Summary Findings

The panel acknowledges the track record of certification and established good standing of ICHAS in the Irish higher education sector. The reengagement process has involved a comprehensive review by the panel of the provider's QA documentation and a site visit to ICHAS in Limerick. During the latter the panel engaged in discussions with provider staff working across a range of academic, administrative and student support functions. The provider staff and leadership engaged constructively with the panel throughout the discussions and were receptive to feedback.

In the course of these activities, the commitment of the provider to facilitating widened participation in third level education in its disciplinary domain was evident. The panel notes that ICHAS has invested substantially in both technology and expertise related to blended learning, and strives to deliver blended learning programmes appropriately to the subject matter and achievement of learning outcomes. In doing so, ICHAS offers increased flexibility to the provider's diverse cohort of learners.

Nonetheless, at the conclusion of the site visit, the panel had concerns pertaining to the identification of groups or units responsible for the oversight of education and training, research and related activities at ICHAS. The panel had further concerns pertaining to the provision of necessary information to staff and the public as required in usable formats. These are outlined in detail in Section 6.1 and Section 6.2 of this report and were identified as *proposed mandatory changes* and *specific advice*.

However, given that these issues were discreet, and in the panel's view could be addressed quickly by the provider, ICHAS was granted 6 weeks in which to submit evidence to the panel that the changes identified had been satisfactorily addressed. The panel reconvened on July 30th, 2019 to undertake a desk review of the evidence submitted by ICHAS. It was the panel's view that ICHAS had comprehensively addressed the *proposed mandatory changes* and *specific advice*. Further, the panel



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commends ICHAS staff and representatives for their evident collegiality and commitment to the reengagement process. Consequently, the panel's recommendation to QQI is to approve the draft QA procedures of ICHAS.

Subsequent to the desk review, additional *specific advice* from the panel is noted in Section 6.2.

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3.2 Recommendation of the panel to Programmes and Awards Executive Committee of QQI

	Tick <u>one</u> as appropriate
Approve ICHAS draft QA procedures	X
Refuse approval of ICHAS draft QA procedures pending mandatory changes set out in Section 6.1 <small>(If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)</small>	
Refuse to approve ICHAS draft QA procedures	



Part 4 Evaluation of provider capacity

4.1 Legal and compliance requirements:

	Criteria	Yes/No/ Partially	Comments
4.1.1(a)	Criterion: <i>Is the applicant an established Legal Entity who has Education and/or Training as a Principal Function?</i>	Yes	ICHAS is a Private Limited Company registered in Ireland; the CRO number has been provided within the provider's application documents.
4.1.2(a)	Criterion: <i>Is the legal entity established in the European Union and does it have a substantial presence in Ireland?</i>	Yes	ICHAS has been established in Ireland since 2011 under its current name, and prior to that NCPII from 2009 and its original name (NCII) from 1999 to 2009.
4.1.3(a)	Criterion: <i>Are any dependencies, collaborations, obligations, parent organisations, and subsidiaries clearly specified?</i>	Yes	ICHAS currently does not have collaborative provision arrangements in place. A policy on external partnerships requires that parties to a Consortium Agreement will agree as to which party will have overall responsibility for QA.
4.1.4(a)	Criterion: <i>Are any third-party relationships and partnerships compatible with the scope of access sought?</i>	Yes	ICHAS does not have any partnership agreements in place; the provider's QA documentation outlines policy with regard to Development of Collaborative Programmes (15.2) and Key Collaborative Operation Principles (15.3)
4.1.5(a)	Criterion: <i>Are the applicable regulations and legislation complied with in all jurisdictions where it operates?</i>	Yes	The evidence provided in support of ICHAS's application is indicative of compliance with Irish/EU legislation.
4.1.6(a)	Criterion: <i>Is the applicant in good standing in the qualifications systems and education and training systems in any countries where it operates (or where its parents or</i>	Yes	ICHAS was established in 1999 (as NCII), and has a track record of certification and engagement with HETAC and currently QQI.

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	<i>subsidiaries operate) or enrolls learners, or where it has arrangements with awarding bodies, quality assurance agencies, qualifications authorities, ministries of education and training, professional bodies and regulators.</i>		
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Findings

The panel is satisfied that ICHAS meets the legal and compliance requirements of criteria 4.1.

ICHAS has been operating since 1999, and has a record of certification with HETAC and QQI from 2006. The provider submitted documentation with its application for reengagement that is indicative of its adherence to the legal and compliance requirements of QQI.

**4.2 Resource, governance and structural requirements:**

	Criteria	Yes/No/ Partially	Comments
4.2.1(a)	Criterion: <i>Does the applicant have a sufficient resource base and is it stable and in good financial standing?</i>	Yes	Evidence submitted is indicative that this is the case. The panel defers to QQI for more detailed evaluation on this criterion.
4.2.2(a)	Criterion: <i>Does the applicant have a reasonable business case for sustainable provision?</i>	Yes	ICHAS has a track record in the sector, and there are no indications to the contrary.
4.2.3(a)	Criterion: <i>Are fit-for-purpose governance, management and decision making structures in place?</i>	Yes, upon review of evidence submitted by ICHAS post the site visit	At the conclusion of the site visit the panel identified that greater clarity was required in relation to this criterion. This is discussed in detail in Section 5.1 of this report. Following a review of evidence subsequently submitted by ICHAS, the panel is satisfied that these concerns have been comprehensively addressed.
4.2.4(a)	Criterion: <i>Are there arrangements in place for providing required information to QQI?</i>	Yes	ICHAS has sufficient administrative support in place, and employs a QAE officer.

Findings

The panel is satisfied that ICHAS meets the resource, governance and structural requirements of Criteria 4.2.1(a), 4.2.2(a) and 4.2.4(a).

The Board of Management, chaired by the provider's Vice President (Corporate Affairs), undertakes strategic planning and reviews actions against this. ICHAS makes financial allocations per an annual budget; management accounts are prepared quarterly.

Recent infrastructural resourcing priorities at the provider have included investment in BSLE technology, the MIS and LMS platforms and online library. ICHAS has, for example, invested significantly in the infrastructure needed to support and develop BL. Resource allocation takes into account the organisational context, programme context, and student experience context.

The panel was not satisfied that ICHAS demonstrated meeting Criterion 4.2.3(a) in its initial application documents. This was indicated to the provider within the *proposed mandatory changes* listed in Section 6.1 of this report. The panel's concerns have now been satisfactorily addressed, as discussed in Section 5.1.

**4.3 Programme development and provision requirements:**

	Criteria	Yes/No/ Partially	Comments
4.3.1(a)	Criterion: <i>Does the applicant have experience and a track record in providing education and training programmes?</i>	Yes	The provider has a proven track record of delivering training and education programmes.
4.3.2(a)	Criterion: <i>Does the applicant have a fit-for-purpose and stable complement of education and training staff?</i>	Yes	The provider includes selection criteria for staff recruitment in its documentation; ICHAS has 31 teaching staff, 12 of whom hold PhDs and many of whom are concurrently practitioners. Teaching staff are advised of expectations regarding availability and these are set out in contracts of employment.
4.3.3(a)	Criterion: <i>Does the applicant have the capacity to comply with the standard conditions for validation specified in Section 45(3) of the Qualifications and Quality Assurance (Education and Training) Act (2012) (the Act)?</i>	Yes	The panel is satisfied that the provider's track record of certification, and its approach to the re-engagement process reflects its capacity to co-operate with and assist QQI and provide QQI with information as specified in Section 45(3) of the 2012 Qualifications and Quality Assurance (Education and Training) Act.
4.3.4(a)	Criterion: <i>Does the applicant have the fit-for-purpose premises, facilities and resources to meet the requirements of the provision proposed in place?</i>	Yes	The physical premises are adequate, and ICHAS has approval from QQI to deliver at a number of off-campus premises as required. Substantial investment has been made in resource to facilitate effective delivery of blended learning.
4.3.5(a)	Criterion: <i>Are there access, transfer and progression</i>	Yes	ICHAS has appropriate procedures in place to facilitate Access, Transfer and Progression;



	<i>arrangements that meet QQI's criteria for approval in place?</i>		these are outlined in the provider's documentation.
4.3.6(a)	Criterion: <i>Are structures and resources to underpin fair and consistent assessment of learners in place?</i>	Yes, upon review of evidence submitted by ICHAS post the site visit.	At the conclusion of the site visit, the panel noted that ICHAS generally had structures and resources in place to facilitate the fair and consistent assessment of learners. However, the panel noted a proposed mandatory change to ICHAS QA documentation in relation to clearer procedures for rechecks, reviews and appeals. This has been satisfactorily addressed by ICHAS in evidence subsequently submitted and reviewed.
4.3.7(a)	Criterion: <i>Are arrangements for the protection of enrolled learners to meet the statutory obligations in place (where applicable)?</i>	Yes	There are PEL arrangements in place (HECA scheme and academic arrangements).

Findings

The panel is satisfied that ICHAS meets the programme development and provision requirements of criteria 4.3. At the conclusion of the site visit a partial exception was criterion 4.3.6(a) as noted above, and reflected in section 6.1.7 of this report. This has now been satisfactorily addressed, as discussed in Section 5.6 of this report.

ICHAS has a complement of appropriately qualified teaching staff, and invests in their ongoing development as teachers. The provider has policies in place that pertain to fair and consistent assessment and the protection of enrolled learners; these were submitted to QQI and the panel in the provider's application for reengagement. ICHAS also has a track record of thirteen years of programme validation and certification with HETAC/QQI.



4.4 Overall findings in respect of provider capacity to provide sustainable education and training

The panel is satisfied that ICHAS has the capacity to provide sustainable education and training within its current scope of provision.

Appropriate evidence was submitted as part of the provider's application for reengagement. This evidence was indicative of the provider having a sufficient resource base, appropriate staffing and established procedures.

Two areas of perceived vulnerability were identified by the panel as *proposed mandatory changes* following the site visit (outlined in Section 6.1 of this report). These were satisfactorily addressed in evidence subsequently submitted to the panel for review.



Part 5 Evaluation of draft QA Procedures submitted by ICHAS

The following is the panel's findings following evaluation of ICHAS's quality assurance procedures against QQI's Core Statutory Quality Assurance Guidelines (April 2016) and Topic Specific QA Guidelines for Blended Learning. Sections 1-11 of the report follows the structure and referencing of the Core QA Guidelines.

1 GOVERNANCE AND MANAGEMENT OF QUALITY

Panel Findings:

Following discussions with the president and senior staff at ICHAS during the site visit, the panel was generally satisfied that ICHAS had a system of governance in place which enforced a separation of academic and commercial decision-making and was fit-for-purpose. However, the panel was not satisfied that as per QQI guidelines:

"Groups or units responsible for the oversight of education and training, research and related activities are identified in the provider's documented procedures" (QQI 2016 Core Statutory Quality Assurance Guidelines, p. 5)

An indicative example of this was that prior to the site visit, the panel noted that the provider's documentation did not identify where the company directors, who hold ultimate statutory authority for the company's compliance with Company law, were situated within the management structure. During the site visit, the president of ICHAS confirmed to the panel that the Board of Directors had delegated functional responsibility to the Governing Authority. The panel advised that the provider's documentation of its governance needed to reflect this arrangement, and also provide clarity in relation to the multiple roles currently fulfilled by the President of ICHAS.

A further indicative example pertained to the Programme Directors, and the relationship between the Programme Director and Programme Boards. The documentation lacked a definition of the Programme Director's role, and the panel sought clarity on this during the site visit. In discussions with the panel, ICHAS noted that this was also a self-identified gap within the provider, and that the panel feedback was welcomed in this regard.

Three *proposed mandatory changes* (see Sections 6.1.1, 6.1.2 & 6.1.3) emerging from this dimension of QA were identified by the panel. These changes were intended to ensure that the provider's QA documentation identified the groups and units responsible for oversight of education and training at ICHAS, as well as clarifying the reporting relationships between these. It was the panel's view that greater clarity in this regard would be valuable to ICHAS staff during the planned handover of key roles internally (including the role of Director of Postgraduate Programmes, at that time filled by the President of ICHAS) following approval of the draft QA. The panel reconvened on July 30th, 2019 to undertake a desk review of evidence submitted by ICHAS subsequent to implementation of the changes. ICHAS representatives were also available remotely for further discussion or clarification as required. The panel was satisfied



that the issues had been addressed. Specifically, ICHAS highlighted the Board of Directors within the organisational chart, and set out Terms of Reference for the Board of Directors in detail. ICHAS further laid out the roles and responsibilities of academic staff, and Terms of Reference for Programme Boards where the role of the Programme Directors is addressed. These changes are sufficient for the panel to proceed with a recommendation to approve the draft QA procedures of ICHAS.

A further aspect of this dimension of QA is that QA systems include procedures that ensure a system of governance that considers risk. During the site visit ICHAS representatives presented the provider's risk management practices to the panel. The Governing Authority is the ultimate authority for risk management within the college. The Board of Management aims to ensure that there is an organisation-wide awareness of risk, and that all staff and related parties are engaged in communication and information pertaining to risk.

2 DOCUMENTED APPROACH TO QUALITY ASSURANCE

Panel Findings:

Following the site visit, the panel was generally satisfied that ICHAS took a documented approach to QA. However, the panel was not satisfied that as per QQI Guidelines:

"necessary information is available to staff and the public as required in usable formats" (QQI 2016 Core Statutory Quality Assurance Guidelines, p. 9)

During the site visit, ICHAS representatives noted that as a small third level institution, context and proportionality was central to the development of the provider's QA. Efforts had been made to tailor QA processes to the specific operating context and align these with the provider's current scope of provision. ICHAS had also undertaken benchmarking against other providers in the sector.

The provider's staff indicated that it was an internal priority to ensure that QA documentation was easy to read for students, and that the provider was striving to achieve this. The addition of visual representations of processes and diagrammatic communication was considered by ICHAS staff to represent an improvement upon previous iterations of the documentation. The provider's vision was that the QA manual would be a living document, and an accessible reference for all stakeholders. However, the provider's staff stressed that they viewed the identification of gaps and weaknesses within QA as an ongoing process at ICHAS. For example, in the process of preparing for reengagement a number of micro-enhancements to procedures and policies had been implemented. Ongoing reviews would be undertaken cyclically.



It was clear to the panel that efforts had been made by the provider to align to QQI Guidelines. The panel acknowledged the provider's affirmation of their commitment to QA, reflected in the newly created role of the QAE officer and the provider's engagement with a number of activities in the sector in this regard. ICHAS conducts regular reviews at module, programme and institutional level, and its policies and procedures pertaining to these were summarized in section 5.1 – 5.3 of the Draft QA Manual.

However, the panel was not satisfied that the submitted documentation achieved the aim of being a user-friendly reference for all stakeholders, particularly for students. It was the panel's view that while the draft QA documentation was detailed, it was not always clear or readily navigable (see also Section 5.1 pertaining to documentation of the ICHAS governance structure). The draft QA manual also contained unnecessary levels of overlap and duplication across over an estimated 150 policies.

One indicative example of this was the Policy and Procedure on Unoriginal Work and Collusion (p.180). This important policy is not directly listed in the QA document's content pages and was to be found located within a subsection of 25 pages in length. Following this, the document contained a set of Procedures for Cases of Suspected Plagiarism and Collusion, as well as a Policy and Procedure on Penalties for Collusion.

A further indicative example related to the area of Information & Communication. On p. 193, Section 12.3 contained a brief Policy on Student Information. On p. 233, Section 14.1 contained a lengthier Policy and Procedures on the provision of Learner Information which somewhat duplicated the previous. On p. 235, Section 14.3 contained a Policy and Procedures on Public Information Provision, while section 14.4 contained a Marketing Material Policy which could readily be merged with this.

It was the panel's view that the document as a whole required substantial revision of tone and format to ensure consistent presentation and easy navigation through subsections for the user. This would be aided by selection of a suitable template, to be adopted as a 'house style' for all documentation, including the QA Manual and Programme Documentation. Attention to consistent use of tenses, the use of numbered section and subsection headings and the judicious use of appendices would also improve the accessibility of the document for both staff and learners.

Three *proposed mandatory changes* (see Sections 6.1.4, 6.1.5 & 6.1.6) emerging from this dimension of QA were identified by the panel. These changes would ensure that the provider's QA documentation was more accessible for all learners and staff. It was the panel's view that this would more appropriately support the high value that the ICHAS places on a culture of inclusivity, as it would ensure the information was clear and usable for all staff and learners. When the panel reconvened on on July 30th, 2019 to undertake a desk review, the panel was unanimously satisfied that the revised QA documentation was presented with sufficient clarity for the panel to proceed with a recommendation to approve the draft QA procedures of ICHAS. The panel also noted and commended the comprehensive and thorough approach the ICHAS team had taken toward the task of implementing the changes identified. This entailed a significant body of work, undertaken in a short period of time, and is indicative of the provider's commitment to enhancing its QA infrastructure.



3 PROGRAMMES OF EDUCATION AND TRAINING

Panel Findings:

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

The draft QA documentation submitted by the provider contains policies and procedures pertaining to Access, Transfer, Progression and Retention in section 7. During the site visit, the panel sought more detail on admission and progression procedures from ICHAS. In the discussion, provider staff explained that student admission to ICHAS involves submission of an application form and supporting documentation as appropriate. This is followed by an interview for the prospective student with the programme director, subsequent to which the learner is informed of the provider's decision, and may receive a letter of offer. The average yearly intake of students at ICHAS is currently 207, with an estimated 5 – 7% of this intake applying for RPL.

Progression through the stages of the provider's programme are marked by progression interviews. This is considered to be a significant part of the learner journey at ICHAS, as it is an opportunity to deal with learner misconceptions about the course and the learner's suitability to practice in the field may become relevant. During the site visit, ICHAS representatives discussed this in connection with the provider's positive view of slight declines in learner numbers across the stages of some programmes. ICHAS view it as important to assist learners to recognise at various points in their learning journey if they are discovering through their learning on the programme that they are not personally suited to a career in psychotherapy or counselling. In such instances, progression interviews offer an opportunity for ICHAS staff to guide learners to move toward alternative fields of practice prior to direct engagement with clients (learners do not interact with clients until the 3rd year of their studies). Learning in these cases can be recognised through exit awards (a certificate and a higher certificate).

Discussions with the panel explored the subjectivity of the interview component of admission and progression procedures, and queried whether learners could appeal these decisions. ICHAS staff acknowledged that this is an inherent challenge within the discipline domain, and that the need to balance screening of fitness to practice against subjectivity is carefully considered in practice.

The procedure for developing a new programme at ICHAS is provided in section 6.1 of the QA documentation. This policy is detailed and aligns to QQI Guidelines. Any member of staff at ICHAS can propose a new programme. Programme proposals will initially be discussed with the Vice President (Academic Affairs) and the relevant Programme Directors, before being considered with reference to strategic alignment and resource requirements. Currently, ICHAS benchmark student outcomes in their programmes against student outcomes in the voluntary provision sector. ICHAS identify this as an area where they intend to focus more in the future.



4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT

Panel Findings:

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

ICHAS draws upon the professional development framework of the National Forum for Enhancement of Teaching and Learning in Higher Education (2016) to inform its development opportunities for teaching staff in relation to pedagogic skills. Induction procedures for teaching staff are documented, and these include training to assist lecturers in managing the IT system and fulfilling their obligations in relation to the BL programme delivery mode.

Of the 31 lecturers employed by ICHAS, 19 hold Masters degrees and 12 hold a PhD. ICHAS employs a number of lecturers who are concurrently practitioners in the fields of psychotherapy and counselling. The provider notes that the values of listening and respecting others central to the field is also central to the ethos of ICHAS, and that this is reflected in workplace relationships between staff members and between staff and the provider.

Currently, issues related to performance in teaching may become visible via feedback from students or via a lecturer's own self-evaluation. A formal appraisal system or policy covering Performance Improvement Plans is not in place. During the site visit, ICHAS representatives indicated a future intention to address this, and to introduce a peer observation framework to the CPD activities within the provider; the provider notes internal awareness of the need to handle this with sensitivity.

Following the site visit, two items of *specific advice* to the provider that emerged from this dimension of QA were noted by the panel. ICHAS was advised to develop a performance management policy and associated procedures, and ensure information was provided on this through the recruitment process (see Section 6.2.2). Further, the panel advised that prior to implementation of a peer observation framework, ICHAS should identify whether peer observations were developmental or would be associated with performance management. If the latter, ICHAS was advised to ensure it was clearly documented how peer observation integrated with HR processes, specifically the performance management policy (see Section 6.2.3). Although these items of specific advice were not mandatory, the panel noted when reconvening on 30th July, 2019 that ICHAS had made revisions in relation to these areas of its practice which satisfactorily addressed the panel's concerns. Specifically, ICHAS developed a policy for staff performance and appraisal, and confirmed that peer observations were purely developmental and not part of performance management.



5 TEACHING AND LEARNING

Panel Findings:

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

Teaching and learning is considered to be the core of all activities at ICHAS. Both formal and informal activities focus on engaging students, as well as monitoring and improving their achievement. During the site visit, the panel sought to understand how teaching and learning at the provider had been impacted by the integration of a BL delivery mode. ICHAS representatives noted that the transition had been approached with care; no more than two of ten lectures were available online. These are selected on the basis of the didactic nature of their content. In person attendance is preserved where it is seen as necessary to facilitate the psychodynamics of the group in relation to the subject matter.

In discussions with the panel, ICHAS staff noted that within the domain of psychotherapy and counselling listening was highly valued, and that the values of the profession were integral in the pedagogic approaches used and learning environment facilitated.

Further discussion of teaching and learning at ICHAS with specific regard to blended learning is provided in Section 5.12 of this report.

6 ASSESSMENT OF LEARNERS

Panel Findings:

The panel is generally satisfied that ICHAS QA pertaining to assessment of learners is fit-for-purpose. However, following the site visit the panel was not satisfied that as per QQI Guidelines the processes for recheck, reviews and appeals were:

"...straightforward, efficient, timely and transparent" (QQI 2016 Core Statutory Quality Assurance Guidelines, p. 15)

During the site visit, discussion with regard to review or appeal of a provisional result indicated that current practice at ICHAS was that a group comprising the Internal Examiner, Programme Director and Director of Academic Affairs would adjudicate an application. The panel provided ICHAS with feedback on this procedure, indicating that as each of these individuals may already have participated in the assessment process, this practice should be amended to include external involvement. A *proposed mandatory change* (see Sections 6.1.8) emerging from this dimension of QA was identified by the panel. This required revision of the QA manual to include revised and clearer procedures in relation to rechecks, reviews and appeals. Upon reconvening on 30th July, 2019, the panel noted that ICHAS had made revisions in relation to these areas of its practice which satisfactorily addressed the panel's concerns, including the updating of procedures for rechecks, reviews and appeals.

**7 SUPPORT FOR LEARNERS*****Panel Findings:***

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

During the site visit, ICHAS representatives emphasised that the facilitation of a supportive, welcoming and inclusive environment is central to formal and informal practices. This ethos is reflected in the provider's support services. These include an extensive induction process, the provider's student handbooks and LMS, and the accessibility of lecturers and course co-ordinators. ICHAS note that a welcoming and supportive environment which is conducive to supporting a diversity of learners, including mature students engaged in lifelong learning is essential to cater for the profile of their cohort.

Learners at ICHAS receive an orientation that includes an orientation to the BL environments in use at the provider. This is available in a differentiated manner, according to learner needs, as some learners enrol with high levels of digital literacy and others require support and training over several weeks to be comfortable with the systems. Students have access to technical support via the educational technology staff; remote support, video conferencing, and email and phone support are possible.

Learner feedback is sought and actioned in relation to the learning environment. An example of this is the upgrading of audio hardware in certain classrooms. Learners connecting remotely to sessions had complained they were unable to hear discussion among their peers, and additional microphones were installed to better facilitate this.

During discussion at the site visit, the panel queried whether learner representatives contributing to programme boards received any training for the role. ICHAS staff acknowledged this was not the case, and were receptive to the suggestion of training available nationally through NStEP.

The provider's policies on student support are available in section 12 of its QA documentation; these include in section 12.8 the provider's Policy and Procedures on Reasonable Accommodation for Disability and Specific Learning Needs Support.

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8 INFORMATION AND DATA MANAGEMENT

Panel Findings:

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

The provider's QA documentation includes sections on Information and Data Management. ICHAS views this as a critical asset, and the provider's processes and procedures are GDPR compliant. Information systems are used to generate data that informs decision-making units such as the Academic Council and Examination Boards, for example trends in learner completion.

During the site visit, ICHAS representatives discussed the implications of a new Management Information System (MIS) which the provider is in the process of phasing in. The system is being customized to the provider's needs and will better support GDPR compliance at ICHAS. The MIS will be integrated with other systems in use at ICHAS to create a Single Sign On environment that gives learners access to all the information the institution holds on them, including information pertaining to fees and transcripts.

ICHAS staff identified that in the case of catastrophic failure, the estimated recovery time is two hours; in the case of hardware failure recovery is estimated within 24 hours.

9 PUBLIC INFORMATION AND COMMUNICATION

Panel Findings:

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

Section 14.1 of the provider's documentation indicates the provider includes necessary information about programmes on their website. However, the panel refers ICHAS to section 5.2 of this report with regard to the presentation of this information.

10 OTHER PARTIES INVOLVED IN EDUCATION AND TRAINING (incl. Apprenticeships)

Panel Findings:

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

ICHAS does not currently engage in any collaborative provisions with external partners or second providers. ICHAS includes a policy and procedures for Peer Relationships with the Broader Education and Training Community in section 15.1 of its QA documentation; this is followed by relevant policies and procedures pertaining to collaborative provision, consortium agreements and external partnerships.

**11 SELF-EVALUATION, MONITORING AND REVIEW*****Panel Findings:***

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

ICHAS outlines internal policies and procedures for systematic evaluation, monitoring and review in section 16 of the draft QA documentation. The provider conducts periodic quality audits (p.258), and produces annual quality assurance reports (p.359). ICHAS engages with stakeholders and learners with regard to monitoring and review. The panel is satisfied that practices at the provider reflect an alignment to QQI Guidelines in this dimension of QA.

12 TOPIC-SPECIFIC QA PROCEDURES: BLENDED LEARNING***Panel Findings:***

The panel is satisfied that QQI's Guidelines under this dimension of QA have been addressed.

ICHAS has approached the introduction of a blended learning (BL) delivery mode through the appointment of staff with appropriate expertise to support the provider's successful achievement in this domain. During the site visit the panel discussed this aspect of provision with the provider's in-house Educational Technologist as well as the Information Systems manager in addition to other ICHAS representatives.

ICHAS outlined how the provider aligns to QQI's 2018 Topic Specific Statutory Quality Assurance Guidelines for Blended Learning through the use of appropriate systems, infrastructure, pedagogic supports and resources. The approach is considered to be content-led and technology enhanced. In practice, learners at ICHAS attend workshops in person, but are able to attend sessions denoted as BL on the schedule either in person or remotely. All asynchronously delivered content items (for example, slideshows or quizzes) are reviewed by the Director of Academic Affairs prior to uploading.

Considerable investment and development has supported the development of BL at ICHAS. The provider's Virtual Learning Environment (VLE) is Moodle, which is hosted in-house. This has enabled ICHAS to integrate Adobe Connect to the VLE and allow students to enter virtual classrooms at the click of a button. Training and workshops are also provided for staff. These develop their practical skills in using the VLE for programme delivery, for example, how to grade online.

In this discussion, the challenges associated with introducing BL in a field where there is a well-established assumption that the 'in person' experience is central were discussed, including the reticence of some academic staff. A clear rationale for pursuing the development of BL despite these challenges was outlined by the provider. ICHAS is committed to reducing obstacles to participation in education for mature and remote learners. ICHAS representatives identify that enabling greater flexibility in the learning mode is a way to support widening participation in third level education within their disciplinary domains.



Evaluation of draft QA Procedures - Overall panel findings

The panel notes and commends the constructive and open approach ICHAS took during its interactions with the panel members on the day of the site visit and throughout the reengagement process.

Through the process, the panel had opportunity to explore dimensions of the draft QA documentation submitted by ICHAS in depth with the provider's leadership, SMT, academic and support staff. It is clear to the panel that ICHAS have fostered a workplace culture characterised by mutual respect, support and a desire for continuous improvement. It is also clear that ICHAS staff and leadership are deeply committed to their mission of providing quality education in the fields of psychotherapy and counselling to learners whose access to such programmes may otherwise be limited by their remote locations.

The panel noted that the provider had areas of vulnerability in relation to the documentation of its governance and decision-making processes, and the documentation of its QA more broadly. These are reflected in this report as *proposed mandatory changes*.

The panel additionally noted items of *specific advice*. Although not mandatory, it was the panel's view that these recommendations would support and strengthen internal processes at ICHAS in its ongoing provision in the sectors.

Both proposed mandatory changes and items of specific advice were comprehensively addressed by ICHAS, and evidence was submitted of this to the panel prior to its reconvening on 30th July, 2019.



Part 6 Mandatory Changes to QA Procedures and Specific Advice

The following *proposed mandatory changes* and items of *specific advice* were identified at the conclusion of the site visit on 30th May, 2019 by the panel. The panel availed of the option to defer its decision to allow ICHAS an opportunity to address these issues within a six-week period. The Panel reconvened on 30th July, 2019 to evaluate evidence submitted by ICHAS in support of the proposed changes. Following an evaluation of the evidence submitted, the panel is satisfied that ICHAS has adequately addressed the issues set out in Sections 6.1 and 6.2 below. Three further items of specific advice were identified for ICHAS during the panel meeting on 30th July, 2019. These are included here in Section 6.2 (see 6.2.5, 6.2.6 and 6.2.6) and have since been satisfactorily addressed by ICHAS.

6.1 Mandatory Changes

At the time of the site visit, the panel noted that a number of changes were required before the panel could be satisfied that the groups or units responsible for the oversight of the provider's activities were clearly identified in the provider's Draft QA pertaining to governance. The following mandatory changes were therefore required:

- 6.1.1 Include clear and specific Terms of Reference for all units of governance within the college. These should include:
- a. Purpose, including scope of responsibilities
 - b. Membership
 - c. Roles and responsibilities of the officers of the unit
 - d. Operating procedures
 - e. Powers of decision-making
 - f. Reporting relationships

Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this, as evidenced in the provider's comprehensive revision of Section 2 of its QAE documentation.

- 6.1.2 Make visible the Board of Directors within the structure, using appropriately clear and specific information as per the previous point. Provide evidence of the resolution to delegate functional responsibility to the Governing Authority. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this by highlighting the Board of Directors within the organisational charts and including Terms of Reference for the Board of Directors. ICHAS also provided sworn affidavits as evidence of the resolution to delegate functional responsibility to the Governing Authority.
- 6.1.3 Clarify the roles and responsibilities as well as reporting relationships of Programme Directors. Following desk review of the evidence submitted by ICHAS within the six-week



period allocated, the panel was satisfied that ICHAS had addressed this through inclusion of the roles and responsibilities of academic staff in its documentation, as well as Terms of Reference for Programme Boards which address the role of the Programme Director.

- 6.1.4 Address the inconsistency in the application documentation in relation to 50% vs.100% shareholding. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this through submission of sworn affidavits confirming company shareholding.

In addition the panel was not satisfied that the presentation and structuring of the Draft QA in its current form would effectively enable and facilitate the implementation of the provider's QA procedures. The provider's QA manual needed to be presented in plain language and easy to navigate formats. This would ensure that it was accessible to all learners and staff, and more appropriately reflect the high value that the provider places on a culture of inclusivity. The following mandatory changes were therefore required:

- 6.1.5 The document in its current form contains unnecessary levels of background and contextual information, and is not consistently written in a user-friendly style. It needs to be comprehensively edited to ensure that it is informational in tone and uses plain language. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this through comprehensive redrafting of the QAE manual.
- 6.1.6 Policies and procedures need to be comprehensively reviewed to remove unnecessary duplication, and to reflect a consistent format. ICHAS are advised that good practice would be to have a single, clearly written source from which the student handbook content is directly extracted (or hyperlinked to). Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this through removal of background and contextual information.
- 6.1.7 The revised version of the QA manual must include clearer procedures in relation to rechecks, reviews and appeals. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this through revision of this procedure in the redrafted QAE manual.

6.2 Specific Advice

At the time of the site visit, the following items of *specific advice* for ICHAS were noted by the panel:



- 6.2.1 Consider strengthening the Terms of Reference for the Academic council, for example, making explicit that its role is to protect, maintain and develop the academic standards of the institution. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this by making this clear within the revised Terms of Reference for the Academic Council.
- 6.2.2 Develop a performance management policy and associated procedures, and ensure information is provided on this through the recruitment process. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this, developing a policy and associated procedures for staff performance and appraisal, and including these within its revised documentation.
- 6.2.3 Identify whether peer observations are developmental or a practice associated with performance management. If the latter, ensure it is clear how peer observation integrates with HR processes. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this by confirming that peer observations at the provider were purely developmental.
- 6.2.4 Review risks associated with contracting out lecturing services, with regard to the accountability for QA of lecturing staff, with particular regard to the binding nature of the QA procedures for those who come under the remit of a contract for services. Following desk review of the evidence submitted by ICHAS within the six-week period allocated, the panel was satisfied that ICHAS had addressed this by seeking legal advice in relation to the matter.

Subsequent to the panel meeting on 30th July, 2019, three further items of specific advice for ICHAS are indicated by the panel.

- 6.2.5 Clarify in the revised QAM whether members of teaching staff will sit on the academic council following their selection by peers, or whether all will be ex officio members.
- 6.2.6 Explicitly state in the QAM that the Governing Authority is appointed by the Board of Directors, and that therefore all acts and things done by and decisions made by a Governing Authority, or in the name of, or on behalf of the College with the express or implied authority of the Governing Authority, shall be deemed to have been done or made by the Company.
- 6.2.7 Note explicitly in the Programme Development Procedure that the Board of Management should be consulted.

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Part 7 Proposed Approved Scope of Provision for this provider

NFQ Level(s) – min and max	Award Class(es)	Discipline areas
6 - 9	Major, Minor and SPA	Health and Welfare (091 & 092) and Business (041)



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Part 8 Approval by Chair of the Panel

This report of the panel is approved and submitted to QQI for its decision on the approval of the draft Quality Assurance Procedures of ICHAS.

Name:

Date: 09 August 2019



Annexe 1: Documentation provided to the Panel in the course of the Evaluation

Document	Related to
Application Form	QA
Supporting Evidence (2016 & 2017 abridged accounts; CRO information; Public Liability Insurance Details; Statutory Declaration; Tax Clearance)	Application Form
Draft QA Documentation	QA
Response to Draft Re-engagement Panel Report: 15/07/19	QA
Updated ICHAS Quality Assurance and Enhancement Manual	QA
Sworn affidavit Declan Carey	QA
Sworn affidavit Denis Ryan	QA

Annexe 2: Provider staff met in the course of the Evaluation

Name	Role/Position
Professor Denis Ryan	President
Dr. Jane Alexander	Director of Academic Affairs
Marie Mulcahy	CEO
Joseph G. Forde	Registrar
Tony O'Brien	Quality Enhancement Officer
Jonathan Flynn	Educational Technologist
Harry Dickinson	Information Systems Manager

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Finbar Chambers	Programme Director
John Hickey	Programme Director
Christine Beekman	Programme Director
Dr. James Kinnane	Programme Director
Roisin Taaffe	Programme Co-ordinator
Anne Conlon	Programme Co-ordinator



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Appendix: Provider response to the Reengagement Panel Report

Response to the Report of the Re-Engagement Panel, Dated 9th August, 2019

The College warmly welcomes the report of the independent panel convened to consider the College's reengagement with QQI. While we are very grateful for the commendations made by the Panel, we are equally appreciative of both the Mandatory Changes and elements of Specific Advice, which the College is happy to unreservedly accept and has acted upon within the process. They are all both insightful and constructive.

ICHAS is particularly pleased that the Panel has acknowledged the College's track record of certification and its established good standing in the Irish Higher Education sector, the commitment of the College to facilitating widened participation in third level education in its disciplinary domain, the substantial investment in both technology and expertise related to blended learning and our endeavours to deliver blended learning programmes appropriately to both the subject matter and achievement of learning outcomes. We were equally pleased that the Panel noted our commitment to flexibility for the benefit of our diverse cohort of learners and recognised the College's ethos of and commitment to inclusivity. We experienced the entire process, which includes the preparatory and support work undertaken by QQI up to and including the Site Visit by the Panel and the support from QQI in terms of providing clarity and responding to queries following the process, as one that was driven by a commitment to excellence in Higher Education and one that epitomised all that is positive about peer review. It was robust and fair.

We wish to acknowledge the time and commitment given by the Panel members to the review process and the professional manner of the engagement. While we welcome the overall recommendation to QQI's Programmes and Awards Executive Committee to approve the College's QAE procedures, we also want to note our appreciation for the collegial tone of the process. The College's response to both the Mandatory Changes and elements of Specific Advice follows.

Response in respect of Mandatory Changes

At the time of the site visit, the panel noted that a number of changes were required. The panel availed of the option to defer its decision in relation to recommending approval (or otherwise) and therefore this welcome decision allowed the College an opportunity to address these issues within a six-week period.

Administrative Offices,
Walton House, Lonsdale Road,
National Technology Park,
Castletroy, Limerick,
Ireland.

Tel: 061 216288

Email: info@ichas.ie

Web: www.ichas.ie

The Panel reconvened on 30th July, 2019 to evaluate the supplementary evidence submitted by ICHAS.

The 7 Required Changes are summarised as follows:

1. Include clear and specific Terms of Reference for all units of governance within the college. These should include:
 - a. Purpose, including scope of responsibilities
 - b. Membership
 - c. Roles and responsibilities of the officers of the unit
 - d. Operating procedures
 - e. Powers of decision-making
 - f. Reporting relationships
2. Make visible the Board of Directors within the structure, using appropriately clear and specific information as per the previous point.
 - a. Provide evidence of the resolution to delegate functional responsibility to the Governing Authority.
3. Clarify the roles and responsibilities as well as reporting relationships of Programme Directors.
4. Address the inconsistency in the application documentation in relation to 50% vs.100% shareholding.
5. The document in its current form contains unnecessary levels of background and contextual information and is not consistently written in a user-friendly style. It needs to be comprehensively edited to ensure that it is informational in tone and uses plain language.
6. Policies and procedures need to be comprehensively reviewed to remove unnecessary duplication, and to reflect a consistent format. ICHAS are advised that good practice would be to have a single, clearly written source from which the student handbook content is directly extracted (or hyperlinked to).
7. The revised version of the QA manual must include clearer procedures in relation to rechecks, reviews and appeals.

College Response to Mandatory Changes Required

The College was happy to accept and address the required changes. Many related to issues of providing clarity and editing to ensure consistency and avoidance of unnecessary duplication. The College was very grateful for the opportunity to address these matters in the time period available. We were grateful that the Panel believed that these issues were relatively discreet and in the panel's view could be addressed quickly. While the College acknowledges the very significant work undertaken by the leadership team within a tight timeframe, we were, nonetheless, very appreciative for the opportunity to address the issues identified by the Panel. What is most gratifying is the fact that the Panel was satisfied that each of these reasonable requirements were met when the Panel reconvened.

Specific Advice

At the time of the site visit, the following 4 items of Specific Advice for ICHAS were noted by the panel:

- a. Consider strengthening the Terms of Reference for the Academic Council, for example, making explicit that its role is to protect, maintain and develop the academic standards of the institution.
- b. Develop a performance management policy and associated procedures, and ensure information is provided on this through the recruitment process.
- c. Identify whether peer observations are developmental, or a practice associated with performance management. If the latter, ensure it is clear how peer observation integrates with HR processes.
- d. Review risks associated with contracting out lecturing services, with regard to the accountability for QA of lecturing staff, with particular regard to the binding nature of the QA procedures for those who come under the remit of a contract for services.

Subsequent to the panel meeting on 30th July, 2019, three further items of specific advice for ICHAS are indicated by the panel, as follows;

- i. Clarify in the revised QAM whether members of teaching staff will sit on the academic council following their selection by peers, or whether all will be ex officio members.
- ii. Explicitly state in the QAM that the Governing Authority is appointed by the Board of Directors, and that therefore all acts and things done by and decisions made by a Governing Authority, or in the name of, or on behalf of the College with the express or implied authority of the Governing Authority, shall be deemed to have been done or made by the Company.
- iii. Note explicitly in the Programme Development Procedure that the Board of Management should be consulted.

College Response to initial and additional elements of Specific Advice

The College was happy to address the first 4 elements of specific advice from the panel following the site Visit. The Panel was subsequently satisfied that each of these points of advice had been incorporated in the relevant documentation.

In relation to the final 3 elements of Specific Advice, the College is also happy to accept them unreservedly and notes the following in relation to each point.

- i. Clarify in the revised QAM whether members of teaching staff will sit on the academic council following their selection by peers, or whether all will be ex officio members.

College Response

The College is very pleased to accept this advice. The QAE Manual has been revised to distinguish between ex officio members who are teaching staff and those Members of Faculty who are elected by their peers. <https://ichas.website/wp-content/uploads/2019/08/Terms-of-Reference-for-Academic-Council.pdf>

- ii. Explicitly state in the QAM that the Governing Authority is appointed by the Board of Directors, and that therefore all acts and things done by and decisions made by a Governing Authority, or in the name of, or on behalf of the College with the express or implied authority of the Governing Authority, shall be deemed to have been done or made by the Company.

College Response

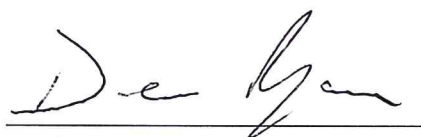
The College is very pleased to accept this advice. The QAE Manual has been revised to include this statement. <https://ichas.website/wp-content/uploads/2019/08/Terms-of-Reference-for-Governing-Authority.pdf>

- iii. Note explicitly in the Programme Development Procedure that the Board of Management should be consulted.

College Response

The College is very pleased to accept this advice. The QAE Manual has been revised to include this statement. <https://ichas.website/wp-content/uploads/2019/08/Procedures-associated-with-Programme-Design-and-Development.pdf>

On Behalf of ICHAS,



Prof. Denis Ryan
President ICHAS

Dated: 27th August, 2019