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## Reengagement Panel Interim Report

### Assessment of Capacity and Approval of QA Procedures

#### Part 1 Details of provider

##### 1.1 Applicant Provider

Registered Business/Trading Name:	International College for Personal and Professional Development (ICPPD)
Address:	Suite 11, First Floor, Inish Carraig, Golden Island, Athlone, Co. Westmeath N37 PN82 Ireland
Date of Application:	13 <sup>th</sup> Dec 2019
Date of resubmission of application:	
Date of evaluation:	
Date of site visit (if applicable):	14 <sup>th</sup> Feb 2020
Date of recommendation to the Programmes and Awards Executive Committee:	11 <sup>th</sup> June 2020

##### 1.2 Profile of provider

The International College for Personal and Professional Development (ICPPD) is a higher education provider based in Athlone, Co. Westmeath providing training and education in the area of the helping professions, in the fields of Holistic Counselling and Psychotherapy, Personal and Professional Development, Expressive Arts and Spirituality.

ICPPD, the college, was founded in 2009 by Christine and Tom Moran, having evolved from New Beginnings Counselling Ltd, a professional, not-for-profit counselling service provider to individuals, couples and other professionals operating in the midlands for over twenty years.



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ICPPD was founded to develop these training and education services, and to become a leader in the field of personal and professional development for members of the public and for professionals in the caring and helping fields.

Courses at ICPPD are integrative, and include a body mind spirit philosophy, and attract adult part-time learners who appreciate a holistic perspective to helping and healing.

ICPPD provides the following QQI validated programmes:

- a) Certificate in Holistic Counselling and Psychotherapy Level 6 Exit Award only
- b) BA in Holistic Counselling and Psychotherapy (Level 7) in Teach-out mode
- c) Bachelor of Arts in Holistic Counselling and Psychotherapy Level 8
- d) Bachelor of Arts (Hons) in Holistic Counselling and Psychotherapy Level 8 Add-On

Programmes aimed at professionals include:

- a) Professional Diploma in Advanced Supervision across Professions
- b) Professional Diploma in Expressive Arts
- c) Professional Certificate in Psychosynthesis.

The Introduction to Holistic Counselling and Psychotherapy course is offered to learners taking the initial steps towards a career in counselling/psychotherapy.

In addition to these academic programmes, and to support ongoing professional body accreditation, ICPPD offers a series of CPD and supplementary workshops to support learners and accredited professionals.

A Certificate in Personal Development is offered to applicants interested in future professional training in this area or who wish to pursue personal growth by expanding their self-awareness and knowledge, and improving personal skills.

The registered learner numbers for the above programmes has historically, and continues to be, positive and demonstrates a concerted organisational growth of ICPPD since establishment. The 2019 enrolment (across 4 years) includes 116 learners enrolled on QQI validated programmes and it is anticipated that a further 90, approximately, will enrol on the other programmes offered.



Name	Role of panel member	Organisation
David Denieffe	Chair	Vice –President for Academic Affairs, Institute of Technology, Carlow
Eileen Buckley-Dhoot	Head of Similar Type of Provider	Director, IBAT
Lee Richardson	Psychology Lecturer – Subject Matter Expert	DBS
John Hoey	Student Representative	BSc (Hons) in Applied Psychology AIT
Celestine Rowland	Report Writer	Galway Business School

## Part 3 Findings of the Panel

### 3.1 Summary Findings

The purpose of QQI re-engagement is to evaluate the institutional capacity and quality assurance policies and procedures of providers.

ICPPD has undertaken a significant body of work in preparation for re-engagement. ICPPD engaged fully both through the presentation of the QA Manual and documentation but also at the meetings on the day. Nonetheless, at the conclusion of the site visit, the Panel had concerns around risk management, complaints procedures, the number of programme boards, clarity of the organisational chart, documentation around the admissions process, as well as the assessment policies, and document control in light of data protection legislation. These are outlined in section 6.1 of this report and identified as proposed mandatory changes (additional items of specific advice are included in section 6.2). Given that these issues were discreet, and in the Panel's view could be addressed quickly by the provider, the Panel availed of the option to defer its overall decision for a period of six weeks, and allowed ICPPD this time to submit evidence to the Panel that the changes identified have been satisfactorily addressed.

The Panel reconvened on 16<sup>th</sup> April 2020 to undertake a desk review of the evidence subsequently submitted by ICPPD. It is the Panel's view that ICPPD has satisfactorily addressed the proposed mandatory changes and responded appropriately to the Panel's initial specific advice. The panel consequently, recommends that QQI approve ICPPD's QA procedures. Following the desk review, additional specific advice from the panel is noted in Section 6.2

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Dearbhú Cáilíochta agus Cáilíochtaí Éireann**3.2 Recommendation of the panel to Programmes and Awards Executive Committee of QQI**

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



## Part 4 Evaluation of provider capacity

### 4.1 Legal and compliance requirements:

	<b>Criteria</b>	<b>Yes/No/ Partially</b>	<b>Comments</b>
<b>4.1.1(a)</b>	<b>Criterion:</b> <i>Is the applicant an established Legal Entity who has Education and/or Training as a Principal Function?</i>	Yes	The college provided a Certificate of Incorporation and a Certificate of Registration as part of its application
<b>4.1.2(a)</b>	<b>Criterion:</b> <i>Is the legal entity established in the European Union and does it have a substantial presence in Ireland?</i>	Yes	International College for Personal and Professional Development (ICPPD) was established as a legal entity in Ireland and is based in Athlone.
<b>4.1.3(a)</b>	<b>Criterion:</b> <i>Are any dependencies, collaborations, obligations, parent organisations, and subsidiaries clearly specified?</i>	N/A	There are no dependencies, collaborations, obligations, parent organisations, or subsidiaries of ICPPD.
<b>4.1.4(a)</b>	<b>Criterion:</b> <i>Are any third-party relationships and partnerships compatible with the scope of access sought?</i>	N/A	There are no third-party relationships and partnerships compatible with the scope of access sought.
<b>4.1.5(a)</b>	<b>Criterion:</b> <i>Are the applicable regulations and legislation complied with in all jurisdictions where it operates?</i>	N/A	The college only operates in Ireland and there are no regulations or legislation to be complied with in other jurisdictions.
<b>4.1.6(a)</b>	<b>Criterion:</b> <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 subsidiaries operate) or enrolls learners, or where it has arrangements with awarding bodies, quality assurance agencies, qualifications</i>	Yes	Quality Assurance at ICPPD is the overarching system used to ensure best practice for all programmes including QQI validated and IACP / NAPCP professionally accredited programmes.

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	<i>authorities, ministries of education and training, professional bodies and regulators.</i>		
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**Findings**

The Panel is satisfied that ICPPD meets all of the criteria specified under legal and compliance requirements.

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

	<b>Criteria</b>	<b>Yes/No/ Partially</b>	<b>Comments</b>
4.2.1(a)	<b>Criterion:</b> <i>Does the applicant have a sufficient resource base and is it stable and in good financial standing?</i>	Yes	ICPPD is funded through equity investment, some bank loans and student fees.
4.2.2(a)	<b>Criterion:</b> <i>Does the applicant have a reasonable business case for sustainable provision?</i>	Yes	ICPPD has a strategic plan that is reviewed annually and implemented by the Executive Management Board
4.2.3(a)	<b>Criterion:</b> <i>Are fit-for-purpose governance, management and decision making structures in place?</i>	Yes	The College had governance, management and decision-making structures in place, but the Panel identified a proposed mandatory change regarding the organisational chart and the clarity of the organisational chart. These issues have now been satisfactorily addressed by ICPPD.
4.2.4(a)	<b>Criterion:</b> <i>Are there arrangements in place for providing required information to QQI?</i>	Yes	ICPPD's quality assurance procedures reflect its processes for providing information to QQI.

**Findings**

Other than 4.2.3(a), the Panel was satisfied that ICPPD met each criterion under *Resource, governance and structural requirements*. In 4.2.3 (a) the Panel felt that the organisational chart as presented was overly complicated for a college of its size and it needed to be reviewed, modified and simplified so that the committee structure and the personnel are separated. Evidence that these changes were made were submitted by the provider following the six-week period, and the panel is now satisfied that this criterion has been met.

**4.3 Programme development and provision requirements:**

	<b>Criteria</b>	<b>Yes/No/ Partially</b>	<b>Comments</b>
4.3.1(a)	<b>Criterion:</b> <i>Does the applicant have experience and a track record in providing education and training</i>	Yes	The College was founded in 2009 to provide personal and professional



	<i>programmes?</i>		development courses to part-time mature learners in Athlone and Galway.
<b>4.3.2(a)</b>	<b>Criterion:</b> <i>Does the applicant have a fit-for-purpose and stable complement of education and training staff?</i>	Yes	The academic team, while largely part-time, are committed to the college and are chosen for their expertise in a particular area. The college has a complement of 12 tutors, most of whom have been with the company in excess of five years.
<b>4.3.3(a)</b>	<b>Criterion:</b> <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 standard conditions for validation specified in the 2012 Act include cooperation with and assistance to QQI in the performance of its functions; the establishment of procedures for the fair and consistent assessment of learners; and provisions for the protection of enrolled learners. The Panel is satisfied that the applicant has the capacity to comply with these standard conditions.
<b>4.3.4(a)</b>	<b>Criterion:</b> <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 College has sufficient premises, facilities and resources to meet the requirements of the provision proposed. The Panel visited the Athlone centre and previous





			panels had visited the Galway centre.
<b>4.3.5(a)</b>	<b>Criterion:</b> <i>Are there access, transfer and progression arrangements that meet QQI's criteria for approval in place?</i>	Yes	The good practice in relation to Admissions Transfer and Progression was not clearly evidenced in the QAH at the time of the initial site visit. The Panel identified a proposed mandatory change regarding the admissions process which needed to be more comprehensively documented from the information given to learners, the authentication of results, RPL and appeal processes, terms of reference for the Admissions Panel to reflect what is happening, but which was not originally clear in the documentation. The Panel identified a proposed mandatory change that the college make it a condition of entry that students need access to a computer. These issues have all now been satisfactorily addressed by the provider.
<b>4.3.6(a)</b>	<b>Criterion:</b> <i>Are structures and resources to underpin fair and consistent assessment of learners in place?</i>	Yes	The Panel has identified a proposed mandatory change regarding the assessment of learners. The assessment policy needed to be reviewed to clarify the role of the moderator, the second



			marker, the role of the extern, the role of the Academic Board and the role of the Examination Board with particular reference to where responsibility lies in the noting of results. ICPPD also needed to document clearly the policy on exam scripts review by learners. The panel is satisfied that these issues have all now been satisfactorily addressed by the provider.
<b>4.3.7(a)</b>	<b>Criterion:</b> <i>Are arrangements for the protection of enrolled learners to meet the statutory obligations in place (where applicable)?</i>	Yes	A copy of the insurance policy from O'Driscoll O'Neill was provided with the application

### Findings

Other than 4.3.5(a) and 4.3.6(a) the Panel was satisfied that ICPPD met each criterion under Programme Development and Provision Requirements. The Panel had identified three proposed mandatory changes:

1. The admissions process needed to be more comprehensively documented: from the information given to learners, the authentication of results, RPL and appeal processes, terms of reference for the Admissions Panel in order to reflect the good practice that is happening, but which was not reflected clearly in the QAH.
2. Make it a condition of entry that students need access to a computer
3. The assessment policy needed to be reviewed to clarify the role of the moderator, the second marker, the role of the extern, the role of the Academic Board and the role of the Examination Board with particular reference to where responsibility lies in the noting of results. Document clearly the policy on exam scripts review by learners.

The panel is satisfied that the revised documentation submitted by ICPPD evidences that these issues have all now been satisfactorily addressed.

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

The Panel is satisfied that ICPPD has the capacity to provide sustainable education and training and it has a track record in offering programmes in counselling and psychotherapy. The ethos and values of the organisation appear to be student-centred with a significant focus on the needs of the local community. ICPPD has evolved its QA policies and procedures to meet QQI requirements. The College has made a series of key appointments in the past years which should support it in developing its strategic plans and support academic management and staff as well as learners.

The Panel is satisfied that the provider has the capacity to provide sustainable education and training as outlined.



## **Part 5 Evaluation of draft QA Procedures submitted by <Provider Name>**

*The following is the panel's findings following evaluation of International College for Personal and Professional Development (ICPPD) quality assurance procedures against QQI's Core Statutory Quality Assurance Guidelines (April 2016) Sections 1-11 of the report follows the structure and referencing of the Core QA Guidelines.*

### **1 GOVERNANCE AND MANAGEMENT OF QUALITY**

#### **Panel Findings:**

The College explained in detail the governance and management structure of the provider; the roles, functions and membership of each committee and how they interlinked with each other and where ultimate responsibility rests for decision making

The separation between commercial and academic decision-making is a key aspect of QQI's Core Statutory Quality Assurance Guidelines and so the Panel focussed on the roles of the Board of Directors and of the Academic Board as set out in Section A, Chapter 1 of the QAH.

The Board of Directors is the most senior body governing the college and includes the shareholders of the company, three non-executive directors and the finance officer is the secretary to the Board of Director Meetings. The Board of Directors makes decisions on the strategic and academic direction, policy objectives, future plans, finance and resourcing of the college, as well as carrying out its legal and statutory obligations.

The Academic Board is made up three external academic advisors (one of whom is the chair); one industry representative; one public interest representative; the Academic Director and Registrar of ICPPD, two ICPPD Academic Staff Members; two learner representatives. An Administration Staff member acts as minute's secretary to this board. The College felt it was necessary to have three external expert educators in the fields of counselling and psychotherapy and due to such strong academic representation, it gave the Academic Board the necessary support to carry out its growth plans. The Panel was satisfied with the college's decisions in this regard and commended them for it. The Academic Board meets three times per year and the Panel was satisfied that the dominant role of the Academic Board in academic decision making is understood.

The following committees report to the Academic Board directly - the Examination Board, Programme Board, Ethics Committee, Research Ethics Committee, Appeals Committee, QA & Risk Management Committee and Complaints Committee.

Through the office of the Registrar the Quality Assurance Committee, Assessment and Standards and Academic Affairs & Learner Support also report into the Academic Board.

The Panel identified a proposed mandatory change that the college review, modify and simplify the organisational chart and separate the committees from the personnel within the organisation and clarify the reporting structures. It was also noted that as a small organisation personnel carry out dual functions and the organisational chart needs to reflect this more clearly.



The Panel felt that the College did not have a clear understanding of risk and needed to review its Risk Assessment Policy, and who is ultimately responsible for risk which was not clear from the organisational chart. It needed to consider the manner in which risk is reviewed, quantified and mitigated, with clear statements on risks associated with GDPR and Data Protection, IT provision and resourcing in terms of staff.

The Panel identified a proposed mandatory change that the college needed to consider its understanding of risk and review the Risk Assessment Policy. It needed to consider how risk is qualified and produce a Risk Register that is fit for purpose and suitable to the organisation.

The Executive Management Committee is made up of the CEO, Academic Director, Registrar, Administration Staff, Finance Officer and Marketing Consultant. It is the committee within the college responsible for operations and carries out the executive function and implements the strategic plans on behalf of the Board of Directors. It monitors performance, implements and monitors academic and operational issues and is the support and liaison between staff and learners. It is responsible for the recruitment of staff and of the staff development policy. The EMC is responsible for implementing and reviewing the Staff Development Policy. The Board of Directors is responsible for reviewing HR Policies and Procedures and for recruitment (via the CEO).

The College is offering an *ab initio* Level 8 (Honours) Degree in Counselling and Psychotherapy on a part-time mode since September 2019 and now has students enrolled on Stage 1. There is an exit award at Level 6. The Level 7 Bachelor of Arts in Counselling and Psychotherapy is in teach out mode, as is the add-on Level 8 Bachelor of Arts in Counselling and Psychotherapy. As a result, the College has had three Programme Boards which meet three times per year which has evolved to look after each programme. The College has identified a need to reduce the number of Programme Board meetings to two and have sanctioned two faculty days where tutors meet in advance of Fitness to Practice Meetings which better suit the needs and size of the College.

The Panel advised as a proposed mandatory change that the college reconsider the number of Programme Boards, perhaps combining them per programme rather than per level where the programme is interpreted as the entire programme rather than each of its components.

The Panel was satisfied that the Ethics Committee and Ethics Research Committee had different remits. The Ethics Committee is convened on an ad hoc basis when there is a question over ethical issues— i.e. questions around fitness practice.

The Ethics Research Committee deals with the research proposal and research projects that students do in the final year and it meets once per year.

Having concluded the desk review; the Panel were satisfied that the changes recommended above were made. In case of the organisational chart, the chart was revised and updated. There are a number of other minor corrections suggested for the chart. On the Risk Register, again the requisite changes have been made. The Panel noted these changes and propose that this be kept under review on an ongoing

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evolving basis. The changes to the Programme Board structures were welcomed by ICPPD and these have been made.

## **2 DOCUMENTED APPROACH TO QUALITY ASSURANCE**

### ***Panel Findings:***

It was clear to the Panel that the College had committed a lot of resources to the re-engagement process to ensure that its QA policies and procedures were fit for purpose and suitable for the scope of provision of the College. There have been a number of editions of the Quality Assurance Handbook over time and influenced by quality-related events: including institutional and programmatic review, and programme validation. The Panel was particularly impressed with the commitment of the Registrar to quality assurance and her knowledge of quality assurance and enhancement as well as with other members of the management team.

The Quality Assurance Committee and Risk Management Committee are combined in one Committee. However, the Panel felt that the College needed to review its understanding of risk management as detailed in 5.1 (since addressed).

The Quality Assurance Committee is made up of the Registrar, Academic Director and an external QA expert. Quality assurance policies and procedures are available in the Quality Assurance Handbook. The Quality Assurance Committee is tasked with reviewing the effectiveness of these policies and procedures and there is a commitment by the College to gather formal and informal feedback from staff and learners.

The QA Committee reviews the effectiveness of the policies and procedures and has a policy on how these are updated, signed off and implemented. They particularly review engagement with learners and the effectiveness of these engagements as learners progress through the college.

Learners have two support meetings per academic year and staff and tutors meet twice per month informally and four times per year - twice yearly through the new Faculty meetings where feedback is sought and recorded and twice yearly through the usual Programme Boards. Taking into account the experiential nature of the programmes offered and the need for personal development, all meetings with learners are recorded so that feedback is an essential element of each learner's trajectory through the programme and prepares them for the fitness to practice element of the programme. All learners are encouraged to have weekly/regular personal therapy sessions (as per professional bodies criteria) to further enhance their personal development and suitability for the fitness to practice element of the programme.

The College has the resources and mechanisms to support a robust quality assurance ethos.

All feedback is monitored and discussed by the Academic Board where necessary steps are taken to update QA policies and procedures. The College communicates its updated policies and procedures through Learner Handbooks, Staff Handbooks and an Administration Handbook; all of which are in the process of being updated to better document policies and to reflect the good practice that is evident in the college. The QA Manual will be published on a new webpage on the existing website.



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There are mechanisms in place for the monitoring of the QA processes and data and feedback is collected from learners, from staff.



### 3 PROGRAMMES OF EDUCATION AND TRAINING

#### **Panel Findings:**

ICPPD has a track record of providing programmes of education and training. The College is offering an *ab initio* Level 8 (Honours) Degree in Counselling and Psychotherapy on a part-time mode since September 2019 and now has students enrolled on Stage 1. There is an exit award at Level 6. The Level 7 Bachelor of Arts in Counselling and Psychotherapy is in teach out mode, as is the Add-on Level 8 Bachelor of Arts in Counselling and Psychotherapy. ICPPD also offers a range of other programmes in this area that do not lead to QQI or other awards. ICPPD plans to expand its range of programmes over the coming years and the quality assurance policies and procedures will allow for this expansion.

In addition to these academic programmes, and to support ongoing professional body accreditation, ICPPD offers a series of CPD and supplementary workshops to support learners and accredited professionals.

The QAH outlines the procedures for the development of new programmes and there seems to be sound financial and robust organisational systems in place as well as an experienced team to carry out programme development.

Due to the fact that there are two programmes currently being taught out, the Panel felt that the number of Programme Boards was excessive given the size of the offering of the College and identified a proposed mandatory change that the College reconsider the number of Programme Boards, perhaps combining them per programme rather than per level where the programme is interpreted as the entire programme rather than each of its components. This change has been made by ICPPD and the Panel are satisfied with this.

The Panel felt that ICPPD had robust Admissions Policies and Procedures in place. The admissions process needed to be more comprehensively documented as detailed in 4.3.5(a). Information on transfer and progression onto other programmes was in evidence. The changes needed to the admissions processes were made and the Panel is satisfied with these.

All learners are required to carry out a Fitness to Practice element of their programme of study and there are clear procedures in place to ensure that learners on the programme are aware of the requirements including the percentage of attendance that is mandatory to complete the programme.

The college is currently improving its recording of learner enrolments, retention and progression of its learners as well as reviewing the qualitative and quantitative data for programme review and conclusions on successes and quality enhancements that arise.



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#### **4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT**

##### ***Panel Findings:***

The Panel were impressed with the openness and transparency of the staff and the learner representative during the Panel visit and the re-engagement process and the clear development trajectory of the college.

The college complies with all statutory regulation in the area of recruitment, management and staff development. There is a clear plan around induction of new team members as well as staff appraisals and performance reviews.

It was clear that the staff play a very active role in the delivery of their programmes of education and training and have clear expertise in their individual fields as well as in the support of their learners.

The staff of the college are largely part-time as the college offers programmes of education and training on a part-time, weekend basis to mature learners. It has recently appointed two new administrators which gives the college continuity throughout the week and ensures ongoing support for learners outside of class time.

The majority of the academic team have been with the college for a long number of years and it clear that the management and development of the team is ongoing and takes place during faculty and staff meetings, as well as when they meet twice per month.

All of the academic team have to complete mandatory CPD sessions of 30 hours per year and provide evidence to ICPPD. The Panel was impressed with the quality and extensiveness of the CPD provision within the college, including support for post-graduate and masters programmes by staff. However creating a staff development register to include compliance with CPD requirements would enhance this area and document all staff development events internally and externally.

During engagement with QQI in the last four years, ICPPD tutors are required to keep their CVs and CPD training up to date. One of the tutors is the regional chair of the IACP and others are engaged in peer supervisor groups, network with peers and involved with supervisor's forums. Their challenge is to find workshops that run during the week as they teach each weekend.



## 5 TEACHING AND LEARNING

### ***Panel Findings:***

Learning within ICPPD is described as andragogical, pedagogical and perigogical which is peer learning in counselling and psychotherapy learning. Feedback from learners and from tutors is both supported and encouraged. The challenges of supporting learners throughout the week has been addressed through the provision of two full time administrators. Additional supports are given to learners at certain times including coming up to assessment submission deadlines or at exam time.

As the level of mandatory attendance is 85% because of the experiential nature of the programmes offered, learners who miss classes have the opportunity to attend the programme in either Athlone or Ballybane, Galway as appropriate. Attendance is recorded by the tutor and communication regarding absenteeism is through email to the administration office who notify the programme leader. The Registrar is responsible for attendance and records of learner attendance are managed with the help of the administration.

As the percentage of attendance is very high, learners must notify of any absence which is signed off by the tutor and learner on their return. They must also agree to making up their missed time and opportunities for this are clearly outlined and understood. This information is captured again at learner support meetings and is dealt with fully before an exam board considers learner performance.

Moodle is used extensively within the college, both as a support for the teaching and learning function and for the support for learners. There is a plan to develop this resource further, including using it as a repository for CPD training materials for staff.

Information is available to all learners in the learner handbook and on Moodle about how class reps are selected, their roles and responsibilities, training and induction provided for the role and on how to communicate with other learners; mainly through email.

The Panel recommended that the college make it a condition of entry that students have access to a computer. ICPPD made this change. The Panel is satisfied this has been addressed.

**6 ASSESSMENT OF LEARNERS*****Panel Findings:***

The college has a well understood policy on assessment of learners, provision of a schedule of assessments, extenuating circumstances and how this impacts on the mandatory attendance of 85% as well as the procedures for conducting examinations. Continuous assessments and Clinical Practice module and assessment of same are key elements of the programmes of education and training provided by the college.

In terms of the group projects for class presentations, the fair treatment of each member of the group for the group effort and for individual effort was encouraged by the college.

There was ample evidence of good practice in terms of tutor feedback on assessments and exams.

However, the Panel identified a proposed mandatory change regarding the assessment of learners. The assessment policy needed to be reviewed to clarify the role of the moderator, the second marker, the role of the extern, the role of the Academic Board and the role of the Examination Board with particular reference to where responsibility lies in the noting of results. The Panel also recommended that the college needed to document clearly the policy on exam scripts review by learners. ICPPD made this change to provide clarity on the review of exam scripts policy and procedure and the Panel are happy that this has been addressed satisfactorily.

Procedures for academic integrity are included in the QAH and reminders of requirements are given during term time and documented both on Moodle and in the Student Handbook. Management is considering adding an additional tool to deal with plagiarism and ensure more robust academic integrity through the purchase of a tool like Turnitin or Urkund or similar which provide plugins to Moodle.



## **7 SUPPORT FOR LEARNERS**

### ***Panel Findings:***

Fifty percent of learners are already degree holders and the other fifty percent are very closely monitored to check progression through the programme. This includes checking how each learner engages with Moodle and with individual modules, how they engage with the course work load, as well as Learning to Learn module, and how their preparation for fitness to practice experience is progressing. Feedback from the personal development therapy sessions is welcomed and supported.

Learning to Learn in first year is a key module and there is significant introduction information on Moodle and any extra assistance is provided by administration during the week and at learner support meetings and by individual tutors at weekends.

There is a very detailed process and a series of face-to-face questionnaires to check learner progress and how they manage every second weekend in college. Information and feedback from students is encouraged and welcomed and underpins the openness and transparent ethos of the college. There are a percentage of students who face mental health issues and this is dealt with in the personal therapy session and is seen as a part of self-development rather than as a vulnerability or barrier to continue with the programme. The programme invites lived experience into the programme, the levelling of humanity is what is being worked towards and supported.

The college recognises the need to schedule particular sessions around IT to support students further as well as updating the learner handbook to make it more user friendly and accessible for the learner in terms of the language used and documenting clearly the learner journey of the student.

Previous panels had queried the provision of study spaces for learners outside class time and this has been remedied in Athlone by the presence of the administrators during the week, and in Ballybane by agreement with the centre to have study space available during the week for learners to avail of.

The college has very clear and detailed policies on fitness to practice ensuring that the learner is facilitated in the move from classroom based learning to clinical practice. There is a Clinical Practice Handbook outlining the necessary requirements and giving clear direction to learners commencing work with trainers as part of their learning process.

All learners are Garda vetted and receive training in child protection, ethics, confidentiality, handling potential complaints, mediation and their roles and responsibilities during their clinical practice. Learners were supported by the college to access their clinical practice as the college had developed a wide network of organisations that provided fitness to practice experiences for students. While the requirement to have Child Protection Officer on site during clinical practice and it is documented in the QAH, there is no mention of a Suicide Prevention Officer in the documentation, and the Panel identified this as a proposed mandatory change. ICPPD have now made this change, having clearly documented and implemented this. The Panel are satisfied this has been addressed.



## **8 INFORMATION AND DATA MANAGEMENT**

### ***Panel Findings:***

As a small provider of programmes of education and training, the college currently uses Microsoft Office tools to record information and to keep records. The college is investigating different data management and CRM systems to better manage records and information in the future.

Company computers and access to Moodle is password protected. Communication with learners and with staff members is through face-to-face communication, student and faculty meetings, and through email and Moodle.

The college is retaining records of all its activities, including learner registrations, assessment results for longer periods than is necessary and the Panel recommended that it reviews those to be in line with GDPR and data protection legislation.

The Panel identified a proposed mandatory change that the document retention policy and retention schedules be reviewed, particularly in light of GDPR and data protection legislation. ICPPD reviewed its records retention policy and schedules and have made changes. The Panel are satisfied that changes have been made. The Panel advise that a DPO be put in place and further revisions to the records retention schedule are required.

The Panel also identified a proposed mandatory change that the college consider version and document control and who signs off on policies needs to be reflected in the QAH. This was addressed by ICPPD in their QAH and the Panel are satisfied this has been done.

## **9 PUBLIC INFORMATION AND COMMUNICATION**

### ***Panel Findings:***

The College has a part-time marketing executive and is currently in the initial stages of selecting a new website developer. This will allow it to publicise its programmes more widely and also provide greater clarity in the public domain about the programmes on offer in the college. The college produces a series of brochures and flyers to inform the public and potential learners of its offering.

The College uses the social media channels to publicise their programmes and run campaigns at certain times of year to increase interest in their programmes as well as advertising in traditional media.

The college is also updating its student handbook, as well as its tutor and administration handbook. The college is conscious of how it communicates its QA procedures to its learners and the need for continuous updates.

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Dearbhú Cáilíochta agus Cáilíochtaí Éireann**10 OTHER PARTIES INVOLVED IN EDUCATION AND TRAINING (incl. Apprenticeships)*****Panel Findings:***

n/a

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

The College has made great strides in its self-evaluation and improvement processes and it has plans to further document, monitor and review outcomes. As a small college, feedback from learners and tutors is continuous and the college recognises the challenge to formalise this feedback.

The Panel felt that there was ample evidence of good practice in self-evaluation, monitoring and review of the feedback from learners through student support meetings, fitness to practice meetings and feedback from assessments.

Tutors are in contact with each other twice per month and the introduction of formal faculty meetings as well as Programme Boards aids the process of self-evaluation, monitoring and review.



## **Evaluation of draft QA Procedures - Overall panel findings**

The Panel were impressed with the openness and transparency of the staff and the learner representative during the re-engagement visit. They were particularly impressed with the College's commitment to the re-engagement process and the clear development trajectory of the College.

Nonetheless, at the conclusion of the site visit, the Panel had concerns around risk management, complaints procedures, the number of programme boards, clarity of the organisational chart, documentation around the admissions process, as well as the assessment policies, document control in light of data protection legislation. These are outlined in section 6.1 of this report and identified as proposed mandatory changes (additional items of specific advice are included in section 6.2). Given that these issues were discreet, and in the Panel's view could be addressed quickly by the provider, the Panel availed of the option to defer its overall decision for a period of six weeks, and allowed ICPPD this time to submit evidence to the Panel that the changes identified have been satisfactorily addressed.

The panel reconvened on the 16<sup>th</sup> April 2020 to evaluate the evidence submitted by ICPPD that it had implemented the proposed changes. Following a review of the documentation submitted, the panel was satisfied that ICPPD had adequately addressed the issues set out in Sections 6.1 of this report.

The panel commends the clear and comprehensive work undertaken by ICPPD in short time period permitted and now there is a much clearer style and logical layout to the QAH making it significantly more accessible to new students and staff members. The Panel commends the college on the work done since the last visit.

The panel also noted some additional items of Specific Advice which are set out in Section 6.2 of this report.



## **Part 6 Mandatory Changes to QA Procedures and Specific Advice**

The following proposed mandatory changes were identified at the conclusion of the site visit on 13<sup>th</sup> December 2019 by the panel. The panel availed of the option to defer its decision to allow ICPPD an opportunity to address these issues within a six-week period.

The panel reconvened on 16 April 2020 to evaluate evidence submitted by ICPPD in support of the proposed changes. Following an evaluation of the evidence submitted, the panel is satisfied that ICPPD has adequately addressed the issues set out in Section 6.1 below

### **6.1 Proposed Mandatory Changes Identified at the Site Visit on 14<sup>th</sup> February 2020**

- The College needs to reconsider their understanding of risk and to review their Risk Assessment Policy. They need to consider how risk is quantified and produce a risk register that is fit for purpose and suitable to the organisation.
- The complaints procedure is not fit for purpose and needs to be reviewed to include all types of potential complaints. It should document how an investigation happens, and how decisions are made and by whom and include a complete appeal process to address different types of appeals.
- Reconsider the number of Programme Boards perhaps combining them per programme rather than per stage where the programme is interpreted as the entire programme rather than each of its components.
- Review, modify and simplify the organisational chart and separate the committees from the personnel within the organisation and clarify.
- Admissions process needs to be more comprehensively documented from the information given to learners, the authentication of results, RPL and appeal processes, and terms of reference for the Admissions Panel which reflects the good practice that is happening but is not reflected clearly in the QAH
- Make it a condition of entry that students need access to a computer
- Assessment policy needs to be reviewed to clarify the role of the moderator, the second marker, the role of the extern, the role of the Academic Board and the role of the Examination Board





with particular reference to where responsibility lies in the noting of results. Document clearly the policy on exam scripts review by learners.

- The document retention policy and retention schedules need to be reviewed particularly in light of GDPR and data protection legislation
- Version and document control and who signs off on policies needs to be reflected in the QAH
- Create a staff development register to include compliance with CPD requirements and document all staff development events internally and externally.
- Child Protection Officer is included but there is no mention of a Suicide Prevention Officer in the documentation.

## **6.2 Specific Advice Identified at 14 February, 2020 Meeting**

- 6.2.1 Consider creating a CPD section on Moodle so that staff can share individual and team professional development knowledge

### **Specific Advice Identified at 16 April, 2020 Meeting**

- 6.2.2 The Panel notes that the ICPPD has done significant work on the Risk Register. Specifically, the Panel advises the college to consider the Risk Register as an evolving document and a process to review the Risk Register on a half-yearly basis should be put in place
- 6.2.3 The Panel recognises the work done by the college in clarifying the Organisational Chart and advises that it needs to be further refined specifically indicating the relationship between the President and CEO, and clear indications of shared roles within the organisation. (inclusion of a housekeeper is not suitable).
- 6.2.4 The Panel acknowledges the work done on assessment of learning and advises that the focus needs to be further amended to reflect assessment for and as learning. The Panel recommends that feedback to learners and formative assessments should be formally reflected in the process and in the documentation.



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- 6.2.5 The Panel notes that in relation to GDPR, the absence of a Data Protection Officer and a basic records retention schedule or log needs to be addressed and be more comprehensively documented in the QAH.

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- 6.2.6 The Panel recognises the work done by the college on all procedures and processes in relation to complaints. Specifically, the Panel advises that the duration of each step needs to be addressed and the college should consider a more standardised approach. The Panel considers that the process is too drawn out at each stage, particularly in relation to non-academic complaints. The college should also address the Panel's concern on the wording for dealing with frivolous complaints. The External Examiner should not be on the Complaints Committee.
- 6.2.7 The Panel advises that the college updates the staff register to include all CPD training undertaken by individual staff members.

## Part 7 Proposed Approved Scope of Provision for this provider

NFQ Level(s) – min and max	Award Class(es)	Discipline areas
Levels 6 – 8	Major	Counselling and Psychotherapy

## 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 the International College for Personal and Professional Development (ICPPD)

Name: \_\_\_\_\_  
DAVID DENIEFFE

Date: 25<sup>th</sup> May 2020

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

Document	Related to
Re-engagement application form Company Information Financial viability information	Re-engagement
Quality Assurance Handbook	Quality Assurance
Governance Roles & Responsibilities Organisational chart	Governance & Management
Staff Roles & Responsibilities Staff contracts Staff Handbook	Staff
Admissions documents Learner Handbook including attendance policies Fitness to practice handbook	Learner
Assessment Schedule Sample Assignments Sample Exams	Assessment

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Name	Role/Position
Tom Moran	President
Michéal O Faoláin	CEO
Christina Mellican	Registrar
Christine Moran	Academic Director
Donna Bell	ICPPD External Consultant / QA Mentor
Therese Gaynor	Programme Leader
Anne Marie Lowry	Programme Leaders
Siobhan Rock	Tutor
Joanna Parker	Tutor
Mary Spring	Tutor
Liz Sugar	CPCO/In house supervisor

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Name	Role/Position
Lorraine Moran	Administration staff
Anna Mielewxyk	Administration Staff
Louise Bryant	Finance Officer
Vicky Hewitt	Marketing Consultant
Olivia Feehan	Learner Representative



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#### Appendix: Provider response to the Reengagement Panel Report

Institution: International College for Personal and Professional Development

*Appendix:* Provider response to the Reengagement Panel Report





ICPPD

19<sup>th</sup> May 2020

**Response of International College for Personal and Professional Development (ICPPD) to the report of the independent review panel convened to consider ICPPD's re-engagement with Quality and Qualifications Ireland.**

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As ICPPD reflects on the Re-Engagement process, we realise that the process, while demanding, has benefited the organisation on all levels, increasing awareness of governance and reporting responsibilities and further embedding a culture of quality. It has highlighted to the college that our QA Manual is a living and evolving document and the college will focus on continually reviewing and enhancing quality assurance policies and procedures.

ICPPD looked on the Re-Engagement process as an opportunity to reflect on and improve the existing Quality Assurance procedures, with the Gap Analysis tool being a valuable means of addressing areas that needed particular focus. A key priority was the increasing the user-friendliness of the QA Manual and its accessibility to all stakeholders via layout, clarity, language and (once approved) public availability on the website.

ICPPD welcomed the independent panel to Athlone on 14<sup>th</sup> February 2020, with some initial trepidation, but found that the approach of the panel was constructive and collegial. Indeed, the approach of the panel reflected that of the personnel at QQI who throughout the process have been helpful and supportive.

The openness of the panel and their valuable contributions were appreciated on the day by all ICPPD management and staff present. ICPPD welcomed and adopted the mandatory changes and specific advice contained in the draft report (dated 9<sup>th</sup> March 2020).

ICPPD's response to the specific advices contained in the final panel report are attached.

In conclusion, we wish to express our gratitude to all in QQI and to the panel for the supportive and professional way in which the process was conducted.

Yours sincerely,

Chris Melican  
Registrar





## ICPPD

Specific Advice Identified	ICPPD Action/Response
<p>6.2.1 The Panel notes that the ICPPD has done significant work on the Risk Register. Specifically, the Panel advises the college to consider the Risk Register as an evolving document and a process to review the Risk Register on a half-yearly basis should be put in place.</p>	<p>ICPPD intends the Risk Register to be an evolving document with input from the EMC on a monthly basis being reported back to the Board of Directors through the CEO. The area of Risk Management will be an agenda item at the next Board of Director's meeting including the scheduling of a half yearly review.</p>
<p>6.2.2 The Panel recognises the work done by the college in clarifying the Organisational Chart and advises that it needs to be further refined specifically indicating the relationship between the President and CEO, and clear indications of shared roles within the organisation. (inclusion of a housekeeper is not suitable)</p>	<p>ICPPD is clear about the definition and role/responsibilities of President and CEO in the organisation. We will refine and clarify further the separate roles and responsibilities of the President and CEO and indicate any shared role where it exists.</p> <p>ICPPD views all staff including housekeeping as being an intrinsic part of the success of the college. Our housekeeping staff support the delivery of classes at weekends, providing not only refreshment and cleaning duties but management of our outreach facilities also a level IT support. Part of the ICPPD ethos is the acknowledgement of all employees and our housekeeper is as important a role as any other. Perhaps the title of housekeeper undervalues and doesn't fully encompass the role – ICPPD will reflect on this.</p>
<p>6.2.3 The Panel acknowledges the work done on assessment of learning and advises that the focus needs to be further amended to reflect assessment for and as learning. The Panel recommends that feedback to learners and formative assessments should be formally reflected in the process and in the documentation.</p>	<p>In the QA Manual, Section C, 4.2.7 "Tutor Feedback to Learner on Assessment" will be expanded on to document more thoroughly the process of giving feedback to learners on their assessments. ICPPD will reflect on assessment FOR and AS learning and formally document formative assessments also to ensure transparency and progression.</p>





## ICPPD

Specific Advice Identified	ICPPD Action/Response
<p>6.2.4 The Panel notes that in relation to GDPR, the absence of a Data Protection Officer and a basic records retention schedule or log needs to be addressed and be more comprehensively documented in the QAH.</p>	<p>ICPPD currently has a nominated GDPR Officer (refer to Organisation Chart, Figure 2.2). ICPPD intends to elaborate further on this role and associated responsibilities and re-frame the role as a Data Protection Officer (including GDPR responsibilities). This role will be detailed in Chapter 10 of the QA Manual.</p> <p>The Records Retention Schedule will be expanded upon and the responsibility of each member of staff for the retention of their files and associated data collected will be indicated.</p>
<p>6.2.5 The Panel recognises the work done by the college on all procedures and processes in relation to complaints. Specifically, the Panel advises that the duration of each step needs to be addressed and the college should consider a more standardised approach. The Panel considers that the process is too drawn out at each stage, particularly in relation to non-academic complaints. The college should also address the Panel's concern on the wording for dealing with frivolous complaints. The External Examiner should not be on the Complaints Committee.</p>	<p>ICPPD appreciates the advice offered here and will review the timelines involved in the Complaints Procedure.</p> <p>ICPPD would like some elaboration on the Panel's concerns regarding the wording for dealing with frivolous complaints, as there is no detail in the panel report.</p> <p>As detailed in the Factual Accuracy form, the External Examiner is not mentioned in the Complaints Policy or Procedures and is not a member of the Complaints Committee.</p>
<p>6.2.6 The Panel advises that the college updates the staff register to include all CPD training undertaken by individual staff members.</p>	<p>ICPPD has commenced compiling information on CPD training undertaken by staff and is updating the Staff CPD Register accordingly.</p>