

Reengagement Panel Interim / Final [delete as appropriate] Report

Assessment of Capacity and Approval of QA Procedures

Part 1 Details of provider

1.1 Applicant Provider

| Registered Business/Trading Name: | Kingstown College/Executive Coaching Solutions |
|--|---|
| Address: | 7 – 9 Clarence Street, Dun Laoghaire, Co Dublin |
| Date of application: | 27 th of August, 2020 |
| Date of resubmission of application: | 8 th April 2021 |
| Date of (virtual) site visit: | 27 th of August, 2020 |
| Date of reconvene meeting (if applicable) | 21 st of May, 2021 |
| Date of recommendation to the Programmes and Awards Executive Committee: | 3rd December 2020 and 9 th September 2021 |



1.2 Profile of provider

Kingstown College (rebranded from Executive Coaching Solutions Limited in 2009) is an established provider, and has been delivering professional training programmes accredited by FETAC since 2006. Kingstown College is additionally accredited by the International Coaching Federation (ICF) and the European Mentoring and Coaching Council (EMCC).

The programmes offered are aimed at managers and professionals, and fall within the domains of development, management, coaching and mentoring. The typical learner profile is a professional or executive aiming to enhance their leadership skillset or pursue a career as a life/executive coach and/or a trainer.

Kingstown College currently certifies over 300 learners annually on its NFQ Level 6 Certificate in Professional Coaching Practice and NFQ Level 6 Special Purpose Award in Training and Development. Plans to expand programme offerings within Ireland and internationally are in development, and potential partnerships with higher education institutions are under consideration, in order to facilitate progression opportunities for graduates of Kingstown College programmes.



Part 2 Panel Membership

| Name | Role of panel member | Organisation |
|-----------------|----------------------|---|
| Danny Brennan | Chair | Former Registrar, Letterkenny Institute of Technology; DNB Consulting |
| Catherine Peck | Report Writer | Independent Education Consultant |
| Pam Skerritt | Panel Member | Independent Education Consultant |
| Lorraine Halpin | Panel Member | Director of Quality and Academic Affairs, SQT Training |

Part 3 Findings of the Panel

3.1 Summary Findings

The panel would like to commend Kingstown College (hereafter KC) on the commitment to learners reflected in its submission for reengagement with QQI. The learner-centred focus within the organisation was evident to the panel during discussions with KC representatives throughout the evaluation process. The panel also commends KC on its commitment to corporate social responsibility and engagement with community initiatives, details of which were outlined to the panel within the provider's presentation. The panel also notes that due to the restrictions imposed by the COVID-19 pandemic, a site visit was facilitated virtually by KC. During this event, the panel had the opportunity to engage in discussions with leadership, management and training staff at KC. These discussions were positive in tone and highly informative. The dialogue provided the panel with useful insights into how the draft QA was developed and lived within the organisation.

Nonetheless, at the close of the virtual site visit, it was the view of the panel that the draft QA procedures presented by KC did not reflect sufficient alignment with QQI's Core Statutory Quality Assurance Guidelines (2016). Based on the wide-ranging and highly constructive nature of discussions with KC during the virtual site visit, the panel was confident that, given sufficient time to address the issues identified, KC would be able to progress its application. The panel therefore recommended that QQI refuse approval of KC's draft QA procedures pending *Mandatory Changes*. Those *Mandatory Changes* are outlined in Section 7.1 of this report, and are discussed where relevant in subsections 5.1 – 5.12.

The panel reconvened on May 21st, 2021 to undertake a desk review of KC's revised QA procedures. Although KC had made progress in relation to its QA enhancement, the panel held ongoing concerns that KC's documentation in several areas required additional development. Notably, KC had not engaged directly with QQI in the interim period as required in relation to transnational and international elements of programme delivery. The panel therefore identified



a number of conditions of approval, listed in Section 6 of this report. The panel also identified two items of additional specific advice, listed in Section 7.3.

The panel encourages KC to further develop its QA procedures through an active engagement with QQI in the future.

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

| | Tick <u>one</u> as appropriate |
|--|--------------------------------|
| Approve Kingstown College's draft QA procedures | X |
| Refuse approval of Kingstown College's draft QA procedures pending mandatory changes set out in Section 7.1 | |
| (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision) | |
| Refuse to approve Kingstown College's draft QA procedures | |



Part 4 Evaluation of provider capacity

4.1 Legal and compliance requirements:

| | Criteria | Yes/No/ | Comments |
|----------|---|-----------|--|
| | | Partially | |
| 4.1.1(a) | Criterion: Is the applicant an established Legal Entity who has Education and/or Training as a Principal Function? | Yes | A Certificate of Incorporation dated June 2006 has been provided with the application, along with a Memorandum and Articles of Association for Executive Coaching Solutions. A Certificate of Registration of Business Name (Kingstown College) registered by Executive Coaching Solutions Limited has also been submitted. |
| 4.1.2(a) | Criterion: Is the legal entity established in the European Union and does it have a substantial presence in Ireland? | Yes | KC has submitted appropriate evidence that it is a legal entity within the EU as per 4.1.1(a). KC has delivered programmes accredited by FETAC and QQI since 2006. |
| 4.1.3(a) | Criterion: Are any dependencies, collaborations, obligations, parent organisations, and subsidiaries clearly specified? | Yes | There are no collaborative provision arrangements in place. An ambition to develop relationships with higher education institutes to facilitate progression routes for learners has been stated within the application. |
| 4.1.4(a) | Criterion: Are any third-party relationships and partnerships compatible with the scope of access sought? | Yes | Kingstown College is additionally accredited by the International Coach Federation (ICF) and the European Mentoring and Coaching Council (EMCC), and is affiliated with the International Institute of Coaching, Clutterbuck Associates. However, these relationships do not impact the scope of access sought. |
| 4.1.5(a) | Criterion: Are the applicable regulations and legislation complied with in all jurisdictions where it operates? | Yes | The evidence provided in support of the Institute's application is indicative of compliance with Irish/EU legislation. |
| 4.1.6(a) | Criterion: Is the applicant in good standing in the qualifications systems and education and training systems in any countries where it | Yes | KC has a track record of certification in Ireland, and has been recognised by FETAC and QQI since 2006. |

| operates (or where its parents | | |
|----------------------------------|--|--|
| or subsidiaries operate) or | | |
| enrols learners, or where it has | | |
| arrangements with awarding | | |
| bodies, quality assurance | | |
| agencies, qualifications | | |
| authorities, ministries of | | |
| education and training, | | |
| professional bodies and | | |
| regulators. | | |

Findings

The panel is of the view that the evidence submitted by KC is consistent with the provider meeting this criterion in full.

4.2 Resource, governance and structural requirements:

| | Criteria | Yes/No/ | Comments |
|----------|--|-----------|--|
| | | Partially | |
| 4.2.1(a) | Criterion: Does the applicant have a sufficient resource base and is it stable and in good financial standing? | Yes | A letter from the provider's accountant has been submitted. The letter confirms the financial statements for the previous 3 years have been signed off by the directors and filed with the CRO. A Tax Clearance confirmation letter from Revenue has also been submitted. |
| 4.2.2(a) | Criterion: Does the applicant have a reasonable business case for sustainable provision? | Yes | The provider has submitted financial income/expenditure projections to 2021 indicative of meeting this criterion. |
| 4.2.3(a) | Criterion: Are fit-for-purpose governance, management and decision making structures in place? | Yes | At the time of the initial site visit, the panel was not satisfied that KC's governance structure reflected the requirements of QQI's guidelines for this dimension of QA. This is discussed in Section 5.1 of this report. When the panel reconvened on May 21 st , 2021 the panel noted that progress had been made in this area. However, the panel identified a condition of approval pertaining to this criterion. |



| 4.2.4(a) | Criterion: Are there | Yes | KC has a track record of certification with |
|----------|--------------------------------|-----|--|
| | arrangements in place for | | QQI. However, the panel initially noted that |
| | providing required information | | further development was required in relation |
| | to QQI? | | to KC's documented QA procedures. When |
| | | | the panel reconvened on May 21st, 2021 the |
| | | | panel identified conditions of approval |
| | | | pertaining to this criterion. |

Findings

The panel is of the view that the evidence submitted by KC is consistent with the provider meeting criterion 4.2.1(a) and criterion 4.2.2(a) in full. However, the panel initially found that further development was needed in relation to KC's governance structure and documented QA. This is discussed in detail in Sections 5.1 and 5.2 of this report. When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel identified conditions of approval pertaining to these criteria.

4.3 Programme development and provision requirements:

| | Criteria | Yes/No/ | Comments |
|----------|---|-----------|--|
| | | Partially | |
| 4.3.1(a) | Criterion: Does the applicant have | Yes | KC is an established provider of |
| | experience and a track record in | | programmes of education and training. |
| | providing education and training | | |
| | programmes? | | |
| 4.3.2(a) | Criterion: Does the applicant have | Yes | KC works with a core team and contracts |
| | a fit-for-purpose and stable | | trainers within its network as required. |
| | complement of education and | | |
| | training staff? | | |
| 4.3.3(a) | Criterion: Does the applicant have | Yes | The panel is satisfied that the provider's |
| | the capacity to comply with the | | track record of certification, and its |
| | standard conditions for validation | | approach to the reengagement process |
| | specified in Section 45(3) of the | | reflects its capacity to co-operate with and |
| | Qualifications and Quality | | assist QQI and provide QQI with |
| | Assurance (Education and | | information as specified in Section 45(3) of |
| | Training) Act (2012) (the Act)? | | the 2012 Qualifications and Quality |
| | | | Assurance (Education and Training) Act. |
| 4.3.4(a) | Criterion: Does the applicant have | Yes | Due to the Covid-19 pandemic, the site visit |
| | the fit-for-purpose premises, | | for this evaluation was conducted virtually, |
| | facilities and resources to meet the | | and the panel members did not undertake |
| | | | a site visit to the Institute's premises. |



| | requirements of the provision | | |
|----------|--|-----|--|
| | proposed in place? | | |
| 4.3.5(a) | Criterion: Are there access, | Yes | The panel is satisfied that the |
| | transfer and progression | | arrangements presented are in line with |
| | arrangements that meet QQI's | | QQI's criteria. |
| | criteria for approval in place? | | |
| 4.3.6(a) | Criterion: Are structures and | Yes | The panel is satisfied that the |
| | resources to underpin fair and | | arrangements presented are generally in |
| | consistent assessment of learners | | line with QQI's criteria. However, the panel |
| | in place? | | was of the view that processes in this area |
| | | | should be reviewed and expanded, for |
| | | | example in relation to reasonable |
| | | | accommodations and appeals. When the |
| | | | panel reconvened on May 21st, 2021 to |
| | | | undertake a desk review of the evidence |
| | | | submitted the panel identified a condition |
| | | | of approval associated with this criterion. |
| 4.3.7(a) | Criterion: Are arrangements for | Yes | The provider is exempt from PEL |
| | the protection of enrolled learners | | obligations due to the short-term nature of |
| | to meet the statutory obligations | | programmes offered. However, a |
| | in place (where applicable)? | | confirmation of insurance cover |
| | | | (professional indemnity) has been |
| | | | submitted alongside the application |
| | | | documents. |

Findings

The panel is of the view that the evidence submitted by KC is largely consistent with the provider meeting the Criteria in Section 4.3. However, the panel initially required KC to expand its documented QA in relation to assessment processes. This is discussed further in Section 5.6 of this report. When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel identified a condition of approval pertaining to this criterion.



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

The panel was initially of the view that KC met the majority of the Criteria in Section 4 pertaining to the provider's capacity to deliver sustainable programmes of education and training. Specific areas of concern for the panel fell under Governance and Management of QA, Documented Approach to QA, and Assessment of Learners. These are discussed in Sections 5.1, 5.2 and 5.6 of this report.

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that some progress had been made in these areas. However, the panel held a number of ongoing concerns that are reflected as conditions of approval and additional items of specific advice in this report.



Part 5 Evaluation of draft QA Procedures submitted by Kingstown College

The following is the panel's findings following evaluation of Kingstown College's quality assurance procedures against QQI's Core Statutory Quality Assurance Guidelines (April 2016) and Topic Specific QA Guidelines - 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 the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Core and Sector Specific Quality Assurance Guidelines.

QQI's guidelines require a provider's governance structures to enforce an appropriate separation between commercial and academic decision-making. During the virtual site visit, the panel explored how the governance structure at KC achieved this, noting that KC had established the structure following a gap analysis exercise that identified a shortcoming in this area. Discussion in relation to this was broad ranging, and encompassed, for example, the challenges posed by a Company Director holding the post of Academic Director, the membership of the Academic Committee and selection criteria for external members on boards and committees.

The panel acknowledges the significance of KC's willingness to make adjustments to the governance structure to meet QQI's requirements, and activity undertaken in preparation for reengagement in this area. However, the panel was of the view that the structure presented within the draft QA procedures did not sufficiently demonstrate how the required degree of separation between academic and commercial interests would be enforced. The panel therefore identified a mandatory change pertaining to this for KC, and required that the revised governance structure be documented in more detail in the resubmission of draft QA procedures (see 7.1.1 and 7.1.2).

QQI's guidelines also require a provider's structure and processes to enforce a separation of responsibilities between those who develop or produce material (for example, QA documentation and new programme proposals) and those who approve that material. During the virtual site visit, the panel sought to understand whether this separation was reflected in KC's process for proposing and developing new programmes. Discussion reflected that, as appropriate, where members of the Academic Committee had been involved in the development of programme documentation they presented this to the Academic Committee, but did not vote on it. However, the panel noted that this was not transparent within the documented process. The panel therefore identified an additional mandatory change for KC pertaining to clarifying this within the documentation (see 7.1.3).

Under this dimension of QA, QQI requires providers to have a governance structure in place that considers risk. The panel noted that KC had submitted a risk register within the documentation made available to the panel as part of the reengagement process, and discussed the processes in place for identifying, managing and mitigating risk with KC representatives. Acknowledging the work undertaken in this area,



the panel required some further development within the review and enhancement of the draft QA procedures (see 7.1.4).

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that progress had been made in this area. However, the panel held concerns that the representation of the Academic Director as a person external to the organisation did not reflect the responsibilities and functions of that role as reflected throughout the QA procedures. The panel has identified a condition of approval pertaining to this in Section 6 of this report.

2 DOCUMENTED APPROACH TO QUALITY ASSURANCE

Panel Findings:

Following the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Core and Sector Specific Quality Assurance Guidelines

QQI's guidelines require fully documented QA policies and associated procedures to be in place that are informed by QQI quality assurance guidelines and have formal standing within a provider. Further, these must be available to learners, staff and stakeholders in usable (i.e. accessible and navigable) formats. During the virtual site visit, the panel explored how KC's draft QA documentation was developed. KC representatives outlined a participatory process within the organisation of capturing and considering multiple views within the process of preparing for engagement. The documents are reviewed by tutors within the organisation and their input is invited prior to being submitted for approval by the Academic Committee and units of governance. KC had also recently appointed a Quality Manager internally. The panel note that a commitment to continual enhancement within the organisation was evident within these discussions.

Nonetheless, the panel noted that KC's documentation required some additional development prior to approval. The panel was of the view that structural review was needed to differentiate policy and procedures from associated resources or task specific instructions (for example, assignment submission guidelines). In some areas, an expansion of documentation was also necessary, and mechanisms for review, update and approval of QA also needed to be developed and made transparent within the documentation. The panel noted that KC may find it beneficial to benchmark the draft QA procedures against the published QA procedures of other providers that have successfully reengaged with QQI during the revision process. The panel identified a mandatory change for KC pertaining to this (see 7.1.5).

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that progress had been made in this area. However, the panel felt that deficiencies remained in some areas, including blended learning. The panel has included conditions of approval in Section 6 and additional specific advice in section 7.3 pertaining to this.



3 PROGRAMMES OF EDUCATION AND TRAINING

Panel Findings:

Following the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Core and Sector Specific Quality Assurance Guidelines.

QQI's guidelines under this dimension of QA encompass access, transfer and progression procedures. During the virtual site visit, the panel explored how learners accessed programmes at KC, how entry requirements were managed and what consideration was given to opportunities for transfer and progression. The majority of learners enrolling in programmes offered by KC have previously attended 'taster' workshops or information sessions, before completing a registration form on the website. Learners may be required to evidence English language proficiency. The panel sought to understand how processes for recognition of prior learning (accredited and experiential) were implemented within the organisation. Following this discussion, the panel noted that the documented processes pertaining to this needed to be reviewed and expanded (see 6.1.5). With regard to transfer and progression, KC representatives noted that learners graduating from programmes at KC are fast-tracked in applying for EMCC accreditation. Consideration is also being given to how developing relationships with higher education institutions may enable other forms of progression.

Notably, this dimension of QA also encompasses programme development, approval and monitoring processes. With regard to programme development, the panel was of the view that the documented procedure for this would benefit from review, particularly in relation to detail of the approvals process (see 7.1.3). KC has produced a template for an annual quality report and annual programme reports. Programme monitoring and review takes account of tutor and learner feedback as well as the outcomes of external authentication processes.

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that some progress had been made in this area. However, the panel held concerns that the approval mechanisms indicated within the programme development procedure did not reflect an appropriate interaction of commercial and academic decision-making. The panel has identified a condition of approval pertaining to this in Section 6 of this report.



4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT

Panel Findings:

The panel is of the view that KC has satisfied the requirements of QQI's Core and Sector Specific Quality Assurance Guidelines under this dimension of QA.

QQI's guidelines under this dimension of QA require a provider to assure itself as to the competence of its staff, and ensure there is a systematic approach to recruitment and Continuing Professional Development (CPD). During the virtual site visit, the panel explored how KC recruits and supports staff involved in teaching. Tutors at KC are trained by the organisation and required to demonstrate an understanding of the organisation's ethos. New tutors shadow delivery of modules twice, and commence tutoring with support from a peer. Tutors are monitored and periodically observed by the Academic Director. CPD activities are facilitated internally, with recent examples oriented to managing technology and effective remote teaching during the COVID-19 pandemic shared by KC representatives. Tutors are also encouraged to take part in conferences, master classes and other CPD activities. The panel noted that the documented processes pertaining to this in the staff handbook could usefully be made more prominent within the QA Manual.

5 TEACHING AND LEARNING

Panel Findings:

Following the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Core and Sector Specific Quality Assurance Guidelines.

QQI's guidelines require providers to ensure the learning environment enables flexible pathways for a variety of learners, and uses a range of pedagogical methods. During the virtual site visit, the panel discussed the approach to teaching and learning at KC with provider representatives. Programme delivery methods at KC are heavily informed by the domains of coaching and training. Learner feedback at KC is also collected and used to inform adjustments to programme delivery. The panel were of the view that the approaches to/strategy for teaching and learning would benefit from being more fully documented, and that documentation in this area could usefully demonstrate alignment to the overall strategy for KC as well as the approach to blended learning (see also Section 5.12).

Under this dimension of QA, providers are also required to attend to the QA of learning environments off-campus, including physical premises, equipment and facilities. KC representatives confirmed that requirements are in place for delivery locations, and that risk assessments and safety statements are obtained for premises prior to use. The panel noted that the process for quality assuring learning environments needed to be given prominence within the QA Manual (see 7.1.4).



When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that some progress had been made in this area. The panel felt that further development and expansion of documentation in this area would be beneficial and has included an additional item of specific advice pertaining to this in Section 7.3 of this report.

6 ASSESSMENT OF LEARNERS

Panel Findings:

Following the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Core and Sector Specific Quality Assurance Guidelines

QQI's guidelines require providers to incorporate procedures and systems for the security and integrity of the assessment process. During the virtual site visit, the panel explored how this is managed at KC. KC use plagiarism detection software, and is considering upgrading this to provide learners with direct access to the software to monitor their own submissions. KC learners are also required to submit an authorship declaration for all assignments submitted, and learners are notified of this requirement at induction. KC's plagiarism policy is available to learners within Moodle. The panel also viewed examples of assessment material within the College's Moodle, which included information for learners pertaining to citation and referencing. The panel was satisfied that these aspects of assessment practice at KC are carefully monitored.

QQI's guidelines also require that a provider's processes for assessment, complaints and appeals meet the same standards of fairness, consistency and fitness for purpose as assessment in general, and that these are straightforward, efficient, timely and transparent. The panel sought further information from KC regarding the assessment appeals process. Discussion with KC regarding this process encompassed how the escalation process is managed, given that the role of the Academic Director is concurrently held by a Company Director, and the Academic Director is also involved in programme delivery activities. The panel queried how appeals would be heard and decided within the process, and how that process ensured no individuals involved in the original decision would be involved in the appeal. The panel was of the view that this aspect of KC's documented processes required further development (see 7.1.5).

The panel notes that the Academic Committee meets twice per year and is also responsible for Results Approval. The panel has noted an item of specific advice pertaining to this in Section 7.2 of this report.

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that progress had been made in this area. However, the panel held some ongoing concerns in relation to assessment reviews and appeals. The panel has identified a condition of approval pertaining to this in Section 6 of this document.



7 SUPPORT FOR LEARNERS

Panel Findings:

Following the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Core and Sector Specific Quality Assurance Guidelines.

QQI's guidelines require the adequacy of resources available to learners to be monitored, updated and expanded as necessary and to take account of learner needs identified through feedback on teaching and learning. During the virtual site visit, KC representatives outlined that learner support was core to the philosophy of provision at KC, and this extended to ongoing mentoring of learners for up to one year post-completion of a programme. KC has a dedicated learner support coordinator, and tutors also provide significant direct support to learners.

QQI's guidelines also require that resources and supports are promoted actively to ensure that learners are aware of their existence. The panel sought to understand how learners at KC would become aware of and request reasonable accommodations or additional supports that may be required on the basis of specific learning differences, disabilities or other circumstances. KC representatives noted that assistive technology is available, citing specific examples of learner supports that had previously been provided. The learner support coordinator assists learners in this area on a one to one basis. The panel were of the view that KC's commitment to supporting learners was very evident. However, the panel held concerns that the supports available and processes for accessing these were not sufficiently visible or documented within the existing processes. The panel therefore identified this as an area in which the documented QA procedures required further development in order to clearly represent existing good practices and ensure these are appropriately visible to prospective learners.

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that progress had been made in this area. For example, KC had revised and expanded its documentation in relation to the provision of reasonable accommodations and other aspects of learner support.

8 INFORMATION AND DATA MANAGEMENT

Panel Findings:

The panel is of the view that KC has satisfied the requirements of QQI's Core and Sector Specific Quality Assurance Guidelines under this dimension of QA.

QQI's guidelines require providers to have reliable information and data systems in place to inform decision-making. Within KC, information is collected within the VERI system to facilitate the collation of quantitative as well as qualitative data to inform programme review processes. Compliance with data protection legislation is also relevant to this dimension of QA. At KC, one drive is used to control versions



of documents and access to these through management of permissions. The requirements of GDPR legislation are attended to, and KC is streamlining systems to ensure compliance. Attention has been given to GDPR in the context of blended learning, for example, permission is sought in relation to the recording of teaching sessions. KC's privacy statement notifies learners that data may be processed outside the EU.

9 PUBLIC INFORMATION AND COMMUNICATION

Panel Findings:

T Following the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Core and Sector Specific Quality Assurance Guidelines

QQI's guidelines require providers to ensure that information published is clear, accurate, up to date and easily accessible. During the virtual site visit, the panel discussed with KC representatives how the organisation communicated with learners and stakeholders. KC has a strong culture of direct personal communication, and also maintains formal communications channels. An approvals process is followed in relation to information provided to learners. During the site visit, the panel sought to understand how the QQI award was positioned within the programme offered to learners, as not all learners in all locations availed of this. The panel identified that KC must engage directly with QQI regarding requirements associated with information to learners, and to additionally seek advice from QQI regarding information to learners in the context of provision of programmes of education and training outside of Ireland (see 7.1. 7 & 7.1.8).

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted KC's response to its Mandatory Conditions. The panel held concerns that the Mandatory Changes had not been implemented sufficiently. Specifically, KC had not obtained advice/explicit approval of its activities in relation to the QQI award from QQI. The panel has identified conditions of approval pertaining to this in Section 6 of this report.

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

Panel Findings:

The panel is of the view that KC has satisfied the requirements of QQI's Core and Sector Specific Quality Assurance Guidelines under this dimension of QA.

QQI's guidelines require providers to ensure the nature of all arrangements in place with the broader national and international education and training community are made clear. KC has clearly outlined its relationships with other accrediting bodies in its application documentation.

KC does not engage in any collaborative provision.



11 SELF-EVALUATION, MONITORING AND REVIEW

Panel Findings:

The panel is of the view that KC has satisfied the requirements of QQI's Core and Sector Specific Quality Assurance Guidelines under this dimension of QA.

QQI's guidelines require providers to have a system of appropriate measures in place for internal self-monitoring. KC have established systems for obtaining, collating and reviewing feedback from learners, and both learner and tutor feedback is considered in the course of programme monitoring and review activities. Technology is used to enable benchmarking in relation to specific indicators. KC representatives noted that the VERI platform is used extensively to produce reports in relation to learner attendance and other metrics.

12 TOPIC-SPECIFIC QA PROCEDURES: BLENDED LEARNING

Panel Findings:

Following the original site visit, the panel was of the view that further development was needed by KC under this dimension of QA in order to demonstrate an appropriate alignment to QQI's Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes (2018).

QQI's Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes require providers to demonstrate that they have taken account of the organisational context, programme context and learner context. During the virtual site visit, the panel sought to understand how this has been considered and evidenced by KC. The panel acknowledged the capacity demonstrated within the organisation to adapt to the demands of the COVID-19 pandemic and rapidly enact contingency procedures for remote delivery. However, these contingency procedures do not equate to a systematic or strategic approach to the implementation of blended learning. The panel noted that it was not apparent within the documents submitted how QA processes would be adapted to take account of blended learning or how resources and capacity within the organisation had been assessed to support this. The panel was therefore of the view that KC needed to include more substantive documentation in this area in its application. This documentation must demonstrate awareness of and systematic alignment to QQI's Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes (2018). The panel identified a mandatory change pertaining to this (see 7.1.6).

When the panel reconvened on May 21st, 2021 to undertake a desk review of the evidence submitted the panel noted that some progress had been made in this area. However, the panel held concerns that the documentation submitted did not provide an appropriate level of detail to provide confidence that KC will be able to delivery programmes of blended learning in alignment with QQI's Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes (2018). The panel has therefore identified conditions of approval pertaining to this in Section 6 of this report.



Evaluation of draft QA Procedures - Overall panel findings

The panel would like to acknowledge the areas of strength within the organisation that have been highlighted under various dimensions of QA within this report. Although the panel was of the view that further development was needed to the draft QA procedures, the panel was of the view that KC has the capability to implement the required changes within the allocated period of six months.

When the panel reconvened on May 21st, 2021 to undertake a desk review of the revised QA procedures submitted, the panel noted that KC had made progress in relation to its QA enhancement. However, the panel held ongoing concerns that KC's documentation in several areas required additional development. Notably, KC had not engaged directly with QQI in the interim period as required in relation to transnational and international elements of programme delivery. The panel therefore identified a number of conditions of approval, listed in Section 6 of this report. The panel also identified two items of additional specific advice, listed in Section 7.3.



Part 6 Conditions of QA Approval

6.1 Conditions of QA Approval

- As the role of the Academic Director is key within the overall operation of the provider and is indicated to be responsible for multiple internal processes and procedures in the QA, this role cannot be characterised as external to the organisation. KC must address this point and clarify how this role is filled to QQI.
- 2. Within the procedure for the development and approval of new programmes, KC must revise the points of approval to reflect an appropriate sequencing of commercial and academic decision-making. Specifically, KC must ensure that a final commercial approval of the programme documentation, inclusive of resource requirements and budgets, occurs prior to submission to QQI. This will ensure that any additional resource requirements identified in the development of the programme have been taken into account.
- 3. KC must revise its assessment appeals process to ensure that it aligns with the definitions and steps outlined in QQI's Assessment and Standards, Revised 2013. Further, within that process KC must ensure that the RAP (or members thereof) cannot adjudicate on grade reviews or appeals.
- 4. The panel is not satisfied that the Blended Learning documentation presented by KC is sufficient in scope, detail or depth to support the operation of programmes in line with QQI's Statutory Quality Assurance Guidelines for Providers of Blended Learning. KC must therefore undertake a comprehensive review and enhancement of its documentation in this area prior to bringing forward an application for validation of a Blended Learning programme. The panel further wishes to make clear that KC is not being offered approval for Blended Learning retrospectively for existing programmes.
- 5. KC must remove references to fully online delivery from its QA documentation. The panel notes that QQI's Statutory Quality Assurance Guidelines for providers of Blended Learning Programmes (2018) explicitly state that all blended programmes must have a face-to-face element.
- 6. The panel is not satisfied that KC has provided adequate information within its response to sufficiently address Mandatory Change 7.1.7. KC must meet directly with QQI and obtain explicit approval regarding the position of the QQI award within the programme offered, and the acceptability of this in relation to Information to Learners and QA processes.
- 7. The panel is not satisfied that KC has addressed Mandatory Change 7.1.8. KC must meet with QQI and obtain explicit approval for the international/transnational aspects of their activities in relation to QQI Awards.



Part 7 Mandatory Changes

7.1 Mandatory Changes

- 7.1.1 KC must review its draft QA procedures to ensure that an appropriate separation of commercial and academic decision-making is enforced by the governance and management structure, and that the system of governance is aligned with the provider's mission and strategy. This could be achieved, for example, by:
 - Expanding the Board of Directors to include non-executive members, who would provide independence and help provide strategic oversight of this unit, which is the primary body for corporate decision-making.
 - Considering whether the independent chair of the Academic Committee could act as a formal link between the Board of Directors and the Academic Committee.
 - Considering expanding the Academic Committee to include representation of tutors.
 - Giving further consideration to the criteria for selection of external members of units of governance within the organisation
 - Considering formalising the membership of the operations team that manages the organisation on a day to day basis
- 7.1.2 KC must ensure that detailed Terms of Reference that include membership, remit, quorum and frequency of meetings for all units of governance.
- 7.1.3 Review the approval mechanisms surrounding key processes to ensure an appropriate level of separation between those who produce material and those who approve it (for example, new programmes or QA documentation).
- 7.1.4 KC must review its approach to risk identification, management and mitigation. The risk register needs to be expanded to account for different dimensions of risk and include a more structured approach to mitigation of risk in key areas, for example, succession planning for key personnel. Additional documentation relevant to this aspect of KC's operations needs to be made available as part of the evidence resubmitted, for example the checklist for QA of training locations and facilities.
- 7.1.5 KC must undertake a significant revision of its QA documentation. Policies must clearly outline the principles that guide action within the policy area. Procedures must be presented in a format that includes key steps indicating how policies are implemented, by whom, when and in what order. Within the revision KC must attend to the following:
 - The procedures must provide clear evidence of the alignment of practice to QQI's guidelines.
 - The revised Policies and Procedures must include a formal mechanism for ongoing review, update and academic approval.
 - The QA must include processes that are not currently documented, or documented sufficiently.
 These include, but are not limited to: Reasonable Accommodation, Recognition of Prior Learning and Appeals.



- 7.1.6 KC must undertake a comprehensive revision of the documentation pertaining to blended learning. This should demonstrate the strategic alignment for adoption of a blended delivery mode to the overall provider strategy and the documented approach to teaching, learning and assessment. The revised submission must reflect:
 - Capacity and resource planning for blended learning, including human resources, accountable key roles and costs associated with investments in technology and IT support.
 - Standards in place for assuring the quality of online content that align to QQI's guidelines.
 - Consideration of the pedagogic implications of implementing Blended Learning for the provider's approach to curriculum and programme development.
 - The principled use of technology, in the service of pedagogy.
 - Systematic staff development that takes account of pedagogic as well as technical training for Blended Learning.
- 7.1.7 Provide clarification regarding the position of the QQI award within the programme offered in relation to Information to Learners and QA processes.
- 7.1.8 KC must engage directly with QQI regarding the practice of offering QQI certification to learners participating in programmes offered outside Ireland, and offering this option to learners during the programmes. Specifically, KC must seek QQI's advice on the implications of this with regard to information to learners on the programme, to KC's scope of provision and to the validation of programmes for transnational delivery.

7.2 Specific Advice

- 7.2.1 Review the Results Approval Process, distinguishing this function within the organisation from the broader function of the Academic Committee.
- 7.2.1 Further develop the draft QA in relation to teaching and learning. Specifically, ensure that the principles underpinning teaching and learning within the organisation are clearly articulated.

7.3 Additional Specific Advice

- 7.3.1 KC is advised to further develop and complete the risk register presented, which does not reflect a full or comprehensive approach to risk identification, mitigation and management.
- 7.3.2 KC is advised to expand its draft QA in relation to teaching and learning.

Part 8 Proposed Approved Scope of Provision for this provider

| NFQ Level(s) – min and max | Award Class(es) | Discipline areas |
|----------------------------|---------------------------|----------------------------|
| 6 | Minor and Special Purpose | Coaching Practice & Ethics |
| | | Training & Development |

Part 9 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 Kingstown College.

Name:

Date: 15 June 2021



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

Document Related to

No further documentation was provided to the panel.

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

Name Role/Position

| Mr Edward Boland | Managing Director |
|------------------------|---|
| Ms Paula King | Managing Director and Academic Director |
| Dr Chandrika Deshpande | Quality Assurance Manager |
| Mr Alan Brereton | Marketing Executive |
| Ms Camila Romani | Course Coordinator |
| Ms Abigail Abbott | Learner Support Coordinator and Internal Verifier |

Appendix: Provider response to the Reengagement Panel Report





Date:06th August 2021

Sub: Response to Report on Reengagement process

Attention of QQI:

At Kingstown College, it is our constant endeavour to provide our students with a great learning experience which meets all the objectives of the program to the highest quality standards. We are a learner-centered institution and seek to further enhance our standards based on constructive feedback. Thanks for your detailed response to our re-submission to QQI. The management and staff involved in the process have gained insights into the way forward. The dialogue enabled us to revisit how QA is developed and implemented within the organisation.

We appreciate the inputs provided by you and assure you that we will continue to work on our internal processes as applicable in the report.

We thank you for the recommendation of Approval and look forward to your continued support and guidance.

Thanks

Regards,

Edward Boland

Elward Boland

Director

Paula King

Paula King

Director