

QA 11.1 SELF-EVALUATION, MONITORING AND REVIEW

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1 Self-evaluation, Monitoring and Review

1.1 Policy Owner

The policy owner is the Quality Assurance Manager. The Quality Assurance Manager will be assisted by the heads of all departments in ensuring a thorough monitoring and evaluation process is carried out within Cenit College.

1.2 Purpose of the Policy

The purpose of this policy is to ensure that the mechanisms are in place to conduct and support self-monitoring in order to review, evaluate and report on:

- Education, training, research and related services provided by Cenit College and
- The Quality Assurance system and procedures which underpin these.

By providing these mechanisms, effective practices are identified and maintained. Additionally, those areas needing improvement are addressed with action items being identified to carry out these improvements.

1.3 Scope of the Policy

This policy applies to the following;

- All Cenit College programmes will be subject to continuous monitoring. This will ensure that any areas that need to be improved are identified and implemented. This will result in more effective programmes of education and training.
- All Cenit College QQI programmes will adhere to the QQI Core Statutory Guidelines for Quality Assurance (2016) relating to programme monitoring and review. This includes peer review of programmes and external review of the QA framework.
- Other Cenit College programmes will be subject to reviews and audits of their respective awarding bodies.

1.4 Roles and Responsibilities

QA Manager: Is responsible for the Quality Improvement Plan and monitoring it

Quality Committee: Oversight of the QIP and reporting to the Academic Committee

Training Manager: Responsible for updating and monitoring the programme improvement plan (PIP) and reporting to the programme committee and Academic Committee.

1.5 Self-monitoring and Self-evaluation

Self-monitoring: The QQI Core Statutory Quality Assurance Guidelines (2016) state that self-monitoring is *“ongoing and typically focuses on specific indicators”* such as completion rates. This monitoring is continuous and as such provides Cenit College with an early warning mechanism for flagging weaknesses in our quality system and procedures for all the operational areas. This is implemented by identifying a measure of quality that is appropriate to the area being monitored. These measures will highlight both good and bad practices. Where practices are not deemed fit, they are rectified immediately.

Self-evaluation: These guidelines further state that self-evaluation has *“a broad, systemic focus and is carried out at specified intervals”* such as every 5 years. This provides Cenit College with an opportunity to explore, reflect and report on both good and bad practices at a much broader level than self-monitoring. Existing good practices are highlighted and continued while those practices that

need improvements are identified, discussed and remedies sought to improve them. The stages in the self-evaluation processes are:

- Agree the terms of reference
- Complete the self-evaluation report (SER)
- Review of the SER by Cenit College and an onsite review by an external panel
- External panel prepare a panel report with recommendations
- Improvement plan is published, monitored and maintained at regular intervals.

Where Cenit College has sought the revalidation of a programme, the independent panel will recommend to the awarding body whether the programme should be revalidated or not.

1.6 Policy Statement

According to the QQI Core Statutory Quality Assurance Guidelines (2016) “Review and self-evaluation of quality, including review of programmes of education and training, research and related services, is a fundamental part of the provider quality assurance system”.

As part of its quality assurance mechanisms, Cenit College is committed to the continuous self-evaluation, monitoring and review. This facilitates reporting of the college's operational activities on a regular basis and allows for reflection upon the college's activities and processes. This reflection provides an opportunity for identification of areas of strengths and areas where improvements could be made. Furthermore, it ensures that Cenit College can provide a solid quality assurance framework that identifies an acceptable level of standards. There will be an annual QA audit – which provides for an audit of all QA policies, their operational effectiveness and discovery of any issues with the QA system in place.

In order for self-monitoring and review to operate effectively, there must be a strong and regular reporting mechanism. These reports provide the vital information needed for the review of programmes, related services and the Cenit College quality assurance policies and procedures. This provides the confidence to the learners that their programmes and the quality processes that support the learner experience in Cenit College are fit for purpose.

Cenit College **self-monitors** for a variety of reasons including to:

- Determine if the programmes are still fit for market
- determine if the stated aims and objective of programmes are being met
- determine if the programme content meets learner's academic needs and societal needs
- identify any issues and corrective action needed
- monitor student enrolment, achievement and progression
- ensure learner supports and other learner services are appropriate for the learner needs
- evaluate the quality of learner and other stakeholder experiences and take any relevant action
- evaluate best practises
- ensure compliance to external quality assurance and accreditation requirements
- ensure compliance to the terms and conditions of approved external validating body
- improve standards and mitigate/reduce the opportunity for errors
- analyse learner performance,
- analyse Cenit College service performance and inform future actions and service developments and enhancements.

1.7 Procedure for Self-Monitoring

Once a programme has been established, and in accordance with the QQI Core Statutory Quality Assurance Guidelines (2016), Cenit College will have the following procedures in place for self-monitoring;

- The identification of appropriate quality measures
- The gathering of evidence to determine if the defined objectives have been met or not.
- A prioritising of these objectives.
- Taking corrective action on any issues found during self-monitoring.

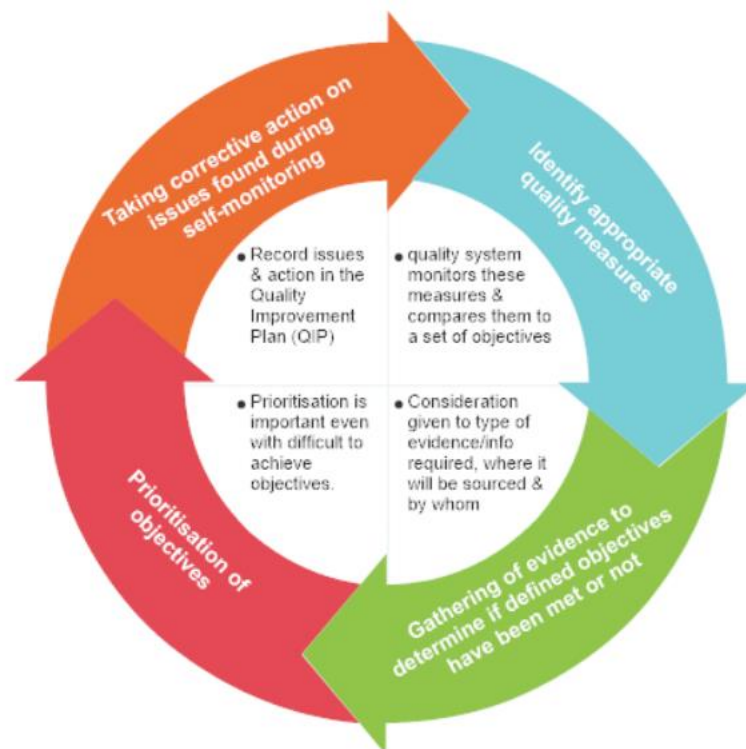


Figure 1: Self-monitoring procedure

1. The identification of appropriate quality measures.

Cenit College has identified a number of quality measures as part of the procedure for self-monitoring. These include (but are not limited to) the following:

- Learner completion rates
- Learner certification rates
- Learner satisfaction rates
- Learner progression rates
- Learner enrolment numbers
- Learner attendances
- Learner feedback

The Cenit College quality system will monitor these quality measures (called key performance indicators or KPI's) on an ongoing basis and compare them against the set objectives for each respective area. Benchmarking will also be used.

2. The gathering of evidence to determine of the defined objectives have been met or not.

Once the objectives have been set, Cenit College will then give consideration to the type of evidence or information required to determine if that objective has been met, where the information will be sourced from and by whom. Objectives can either be outcome based (e.g. certification rates or completion rates) or input based (enrolment numbers) or process or environment based.

3. Prioritisation of objectives

Cenit College understands that it is essential to prioritise the most important objectives, “*even where they are difficult to achieve or to quality assure*”.

4. Taking corrective action on issues found during self-monitoring

Should any issues be found during the self-monitoring process, these along with their corrective action will be recorded in the Cenit College Quality Improvement Plan (QIP). The Cenit College QIP records the issue, the action to be undertaken, the person this action is assigned to and the timeline for completion of this action.

Self-monitoring can also identify areas of good practice and innovation.

Appendix 1 of this policy sets out the monitoring mechanism for each policy area and the indicators of effective monitoring.

1.8 Self-evaluation, monitoring and review methodology

The process of self-evaluation, monitoring and review acts together to form a quality methodology that ensures a full cycle of activity that will produce areas for improvement and innovation. This methodology can be seen in Figure 2 below.

Information is taken from monitoring mechanisms such as:

- Data from Learners, Programmes, KPI's and benchmarking,
- Feedback from tutors, learners, EAs and External Stakeholders
- Various reports; E.g. Programme reviews, staff reports, learner support, audit reports.

This information is then reviewed by the Cenit College review mechanism to determine if any corrective action needs to be taken. The review mechanism consists of the various boards and committees that form the Cenit College operational and academic structure. For example, programme content would be first reviewed by the programme delivery team and then by the Programme Board.

Similarly, information gathered from the periodic reviews such as annual audits, programme reviews and peer reviews are fed into the Cenit College review mechanism for identification of good practices or in need of enhancement of improvement.

Any items that are highlighted as needing enhancement or improvement from any review process (periodic or ongoing reviews) are recorded as issues and actions in the Quality Improvement Plan (QIP) or the Programme Improvement Plan (PIP). These can result in updates to the QA framework.

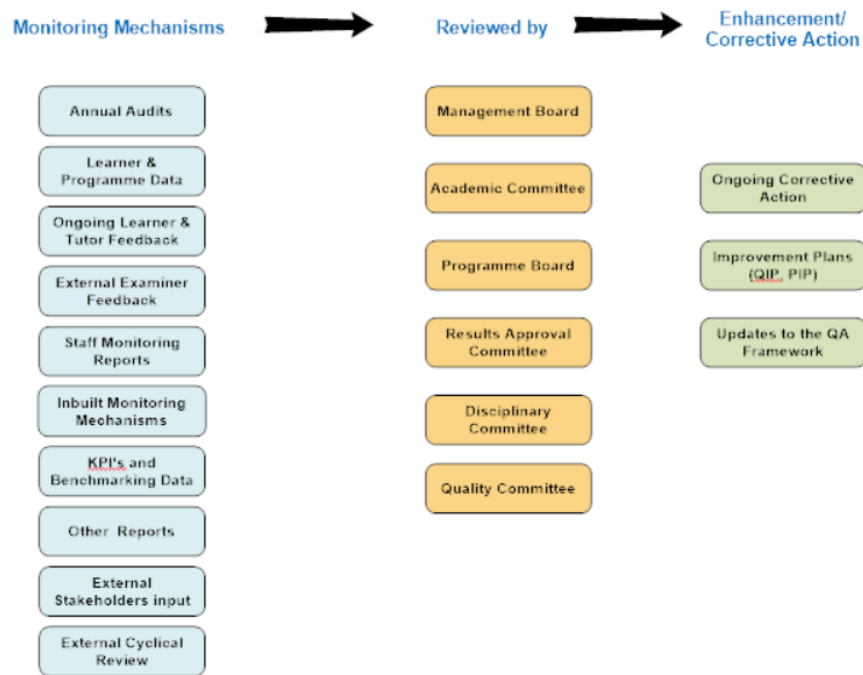


Fig 1 Ongoing monitoring, review and improvement process

1.9 Information Sources and Monitoring Mechanisms for Programmes

The on-going monitoring process draws on information from a variety of sources, including:

1. Learner feedback:
 - a. Outcomes of programme evaluation forms (completed at the end of each programme and module)
 - b. Mid programme reviews
 - c. Ad hoc/informal feedback
 - d. Feedback from learners via discussions with tutors or programme coordinators or leads.
2. Tutor feedback:
 - a. Review of Tutor reports completed at the end of each programme or each module
 - b. Ad hoc/informal feedback
 - c. Tutor peer reviews
3. Feedback on Assessments
 - a. Internal verification report (IV)
 - b. External Authentication report (EA)
4. Feedback on Support Services
 - a. Feedback on support services via the learner feedback and
 - b. Support Services reports
5. External stakeholders input such as
 - a. Feedback from engaging with Skillnets
 - b. Feedback from engaging with companies
 - c. Feedback from engagement with Awarding and Professional bodies
6. Reports received from Appeals or Disciplinary Committee.
7. Data Collection. Cenit College collects data to determine how our objects are being met and how performance is progressing. This data is reviewed, discussed and corrective measures

taken if required. Our data analysts are equipped with the skills and expertise to delved into data and produced the required reports. This data is derived from several sources;

- a. Data from programmes and learners enrolled on these programmes; examples of data collected includes; enrolment numbers, attendance rates, completion rates, engagement rates and examination results.
- b. KPI's– In Cenit College we have set performance indicators. Data collected is measured against these KPI's to ensure objectives are being met. Appropriate action is taken based on the results of data collected to verify these KPI's.
- c. Benchmarking data – where we have data available from other suppliers and sources, we benchmark our own activities against this.

The information gathered from the programme monitoring and evaluation mechanisms is fed into a number of forums for review. These forums are as follows:

- Programme Board
- Results Approval Committee
- Quality Committee
- Management Board
- Academic Committee

The outcomes will help maintain and improve the quality of Cenit College programmes. Information is securely stored on our bespoke Administration system.

Appendix 1 to this document shows the monitoring mechanisms for each policy area, the frequency, methods of monitoring and the indicators for effective quality.

The primary evaluation methods for programme monitoring are as follows;

Evaluation Method	Stakeholders	Frequency	Programme Elements Reviewed
Learner Feedback Forms	Learners	On completion of the programme Interim reports may be taken	<ul style="list-style-type: none"> ● Programme Objectives ● Training Facilities ● Resources provided ● Programme information provided ● Delivery methods ● Assessment ● Programme administration provided ● Learner Supports
Tutor Feedback Forms	Tutors	On completion of the programme Interim reports may be taken	<ul style="list-style-type: none"> ● Reflection on Programme Delivery ● Issues with Learners ● Support received from Cenit ● Training Facilities ● Online resources ● Report on Learners (informal assessments, strengths/weaknesses etc.) ● Changes needed to programme documentation & resources
Programme Review Meetings	Programme Leads, Tutors, QA Manager, Training	Quarterly	<ul style="list-style-type: none"> ● Programme reports ● Learner and Tutor feedback forms ● External Examiners Report ● Key performance data ● Review of Programme Information

	Manager, Learners		
Results Approval Committee Meetings	External Authenticator Examination Officer	Quarterly	<ul style="list-style-type: none"> ● Completion rates ● Learner Achievements ● Other assessment related statistics
External Authentication Reports	External Authenticator	Quarterly	<ul style="list-style-type: none"> ● Evidence Available ● Minimum Intended Programme Outcomes ● Actual Attainment of Learners ● Assessment Procedures ● Trends
Informal Communication	Learners, Tutors, Support Staff	ongoing	<ul style="list-style-type: none"> ● Informal communication in respect of any aspect of the programme provision

1.10 Ongoing Review and Update to QA Framework and QA Policies and Procedures

The procedure of the review and update to QA policies and procedures is as follows:

1. As part of the Quality Committee, the QA Manager develops an annual QA Audit schedule for the review of the QA process. This schedule ensures that all eleven policy areas in the framework are reviewed annually.
2. Staff responsible for implementing each quality area will receive communication of the audit and the timeframe, along with their roles in the audit process. All such staff are expected to review the policies and procedures for currency and accuracy. They should ensure evidence of following these policies and procedures are available when requested by the audit team.
3. The Quality Committee selects a review team (including the QA Manager) to carry out the review on each of the 11 quality areas.
4. The review team will carry out the following:
 - a. Review of relevant policies and procedures
 - b. Review of the supporting resources such as forms, reports and manuals
 - c. Meet with the relevant stakeholders who are familiar with and implement each policy area.
5. For the purpose of the review consideration is given to the following:
 - a. Has the document been updated for regulatory changes?
 - b. Is the implementation of the policy still carried out as per the document?
 - c. Is the relevant stakeholder using the most current document?
 - d. Are there any suggested enhancements or changes?
 - e. Is the document fit for purpose?
6. The Quality Manager will carry out an institution wide review to ensure that all documents have been correctly updated for any regulatory changes, changes made by awarding bodies and other national and European related changes. The Quality Manager will ensure that these changes are reflected accurately in the policy document and supporting resources.
7. Any issues found in the audit will be recorded in the QIP.
8. Any changes that need to be made to the policies being reviewed will be reflected in the audit report and sent to the Quality Committee for review and approval.
9. Once the Quality Committee approves changes to the policies they will submit these changes to the Academic Committee or Management Committee, as relevant, for approval.

10. Each Policy has a version control which logs the changes made to the policy, the data, a description of the changes made, the person who made the change and who it was approved by.
11. New or amended policies are published on the relevant platforms (for example; website, online learning platform, in manuals and so forth).
12. Older copies of the policies are archived and retained on the Cenit College secure server for reference.

All providers of QQI awards are subject to cyclical external reviews, which are known as institutional reviews. This process takes place once every five to seven years or as otherwise directed by QQI.

1.11 Institutional Review of the QA Framework and Programme Review

QQI requires providers to have two types of reviews; (i) Institutional review and (ii) programme review. The institutional review (External Cyclical Review) of Cenit College’s QA framework is conducted by a panel of experts appointed by QQI. This occurs every five to seven years.

Programme Review and Revalidation is outlined in the Cenit College policy number 11.2 Programme Review and Revalidation.

1.12 Monitoring

The QA Manager will review the effectiveness of this policy through:

- The review of the documentation as set out in the Ongoing Review and update of QA documents as part of the annual QA audit.

Monitoring mechanisms include;

- The Quality Assurance Manager will review on a quarterly basis, the minutes of the Quality Committee meetings, the Quality Improvements Plan and any audit outputs.
- Quality Improvement Plan
- Audit Report

Any issues found during the monitoring will be reviewed as part of the programme review or the by the Quality Committee as part of their review of the Quality. Items on the PIP and QIP will be tracked, assigned and monitored to ensure resolution.

1.13 Reference documents

This references upon which this policy is based are as follows:

- The Irish Qualifications and Quality Act (Education and Training), 2012
- QQI Core Statutory Quality Assurance Guidelines (2016)

1.14 Version Control

Version	Date	Description	Originator	Approved by
Version 1	20/01/2022	Policy Approval	Perri Williams (QA)	Academic Committee

1.15 APPENDIX 1 – MONITORING MECHANISMS FOR EACH POLICY AREA

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
QA 1 GOVERNANCE				
QA 1.1 Governance	QA Manager	Annually	Internal QA audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
QA 1.2 Risk Management	QA Manager	Annually	Internal QA audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings ● Reduction in number of external risks in the register
	Management Board	Quarterly	Review of Risk Register	
	Senior Management Team	Monthly	Review new of amended risks	
	Managing Director	Ongoing	Update and amend the risk register as required.	
QA 2 DOCUMENTED APPROACH TO QUALITY ASSURANCE				
QA 2.1 Documented Approach to Quality Assurance	QA Manager	Annually	Internal QA audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
		Quarterly	Review of Quality Committee Meetings Quality Improvement Plan (QIP)	<ul style="list-style-type: none"> ● Zero or low number of items on the QIP ● Zero or low number of action items arising from Quality Committee Meetings.
QA 3 PROGRAMME DEVELOPMENT AND MANAGEMENT				

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
QA 3.1 Programme Development & Management	QA Manager	Annually	Internal QA audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Academic Committee	Post Programme	Review External Authentication (EA) reports Programme Board Reports QA Committee Report	<ul style="list-style-type: none"> ● Positive EA reports ● Positive Programme Board Reports ● Positive reports of the ongoing programme quality from the QA report
	Training Manager		Monitors KPIs and other statistical data including the following <ul style="list-style-type: none"> ● <i>enrolment rates</i> ● <i>completion rates</i> ● <i>certification pass rates</i> ● <i>Learner Engagement</i> ● <i>Attendance rates</i> ● <i>Positive/Negative Feedback</i> <p>These are reported and stored in Cenitsys</p>	<ul style="list-style-type: none"> ● KPI's are within expectations. ● Benchmarking of learner intake, progression and certification statistics
	Programme Lead		Oversees the QA policies and processes at course level – provides feedback for programme review meetings.	<ul style="list-style-type: none"> ● No issues
	Programme Lead		Learner Feedback Forms Employer/industry feedback Forms Learner attendance report Tutor Feedback Forms Informal feedback	<ul style="list-style-type: none"> ● No issues

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
QA 3.2 Updating Programmes & Course Material	QA Manager	Annually	Internal QA audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Programme Co-ordinator and Programme Lead	Post Programme	Learner Feedback Forms for course content Employer/industry feedback Forms for course content	<ul style="list-style-type: none"> ● No issues. Currency and Accuracy has been maintained.
	SME	Prior to Programme start	Review of Content for delivery (online)	<ul style="list-style-type: none"> ● No issues. Currency and Accuracy has been maintained.
QA 3.3 Learner Access, Transfer and Progression	QA Manager	Annually	Internal QA audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	QA Manager	Annually	Review minutes of Programme Board Review minutes of Academic Committee	<ul style="list-style-type: none"> ● Minutes contain references to Transfer, Access and Progression ● Minutes contain action points, where relevant
	Programme Coordinator/ Administrator	Programme intake	Learner registration forms – learners all meet the minimum entry criteria Learner Academic Record verifications Learner Record (Cenit) - completed	<ul style="list-style-type: none"> ● All ATP learners who are registered meet the minimum entry requirements ● All documents available ● Learner record exits and current

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
	Training Manager	Programme Intake	All forms completed by ATP learners and signed where required.	<ul style="list-style-type: none"> Any signature required has been completed.
	Exams Officer	At each Review	Comparison of pass/fail/drop-out rates for each ATP learner	<ul style="list-style-type: none"> Rate compare favorably with normal access routes
QA 3.4 RPL	QA Manager	Annually	Review minutes of Programme Board Review minutes of Academic Committee	<ul style="list-style-type: none"> Minutes contain references to RPL Minutes contain action points, where relevant
	Training Manager	At Course Level	RPL form	<ul style="list-style-type: none"> No errors on form
QA 3.5 Verification of Identity of Online Learners	QA Manager	Annually	Internal QA Audit	<ul style="list-style-type: none"> Number of internal audits per annum Low number of internal audit findings Time taken to correct findings
	IT Manager	Ongoing	<ul style="list-style-type: none"> Helpdesk Tickets relating to Password and user ID Any relevant disciplinary procedures Review of emails sent to learners with user ID and passwords. 	<ul style="list-style-type: none"> No issues Helpdesk deals with routine issues within the time agreed by their manager
QA 3.6 Blended Learning	Board of Directors	Quarterly or more frequently if required.	<ul style="list-style-type: none"> Minutes of meetings Strategic planning documents Budget plans and records Third Party Contracts Staff Communications 	<ul style="list-style-type: none"> No issues. Budgets were appropriate. Strategic plans being followed. Third Party Contracts in place and correct procedures followed. Communication on strategies has been disseminated.

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
	Academic Committee	Bi-annual	<ul style="list-style-type: none"> ● Minutes of meeting 	<ul style="list-style-type: none"> ● Process has been followed for approval of BL programmes.
	Programme Proposer	At each programme proposal stage	<ul style="list-style-type: none"> ● New Programme Justification form 	<ul style="list-style-type: none"> ● Form completed and sent to senior management for review.
	Director of HR, Operational Development and Strategy Academic Committee	Ongoing	<ul style="list-style-type: none"> ● Recruitment and Selection Records ● CPD ● Training & Development Plans 	<ul style="list-style-type: none"> ● Contain evidence of new staff appropriate eLearning experience ● Evidence of CDP for Staff ● Evidence of Blended Learning Training
	All Staff Board of Directors	Annual	<ul style="list-style-type: none"> ● Staff Contracts ● Copyright Policy ● Handbooks 	<ul style="list-style-type: none"> ● Evidence of IP, Copyright and Data Protection in staff contracts and handbooks.
	QA Manager, Instructional Designer Peer Reviewer	Prior to programme going live and annual audit	<ul style="list-style-type: none"> ● Learner Feedback ● Peer review feedback ● Annual QA Audits 	<ul style="list-style-type: none"> ● Adherence to minimum requirements in respect of tools, technologies and learning resources, upload times and compliance with validated programme requirements.
	Programme Lead	Mid and end of course reviews	<ul style="list-style-type: none"> ● Learner Feedback 	<ul style="list-style-type: none"> ● Quality of the learning experience across the programmes
	Instructional Designer Training Manager	Mid to end of programme	<ul style="list-style-type: none"> ● Learner feedback 	<ul style="list-style-type: none"> ● Suitability of the VLE for programme and content development and learning
	Programme Co-ordinator	Mid to end of programme	<ul style="list-style-type: none"> ● Learner feedback 	<ul style="list-style-type: none"> ● Suitability of the learner supports

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
QA 4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT				
QA 4.1 Staff Recruitment, development and Management	QA Manager	Annually	Internal QA Audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Senior Management Team	Annually	Information for the recruitment, selection and induction process is obtained through the following means: <ul style="list-style-type: none"> ● Learner Feedback on Tutors ● Staff feedback on Recruitment, Section and Induction Process ● Employer/Industry Feedback ● Complaints 	<ul style="list-style-type: none"> ● Positive Feedback ● No complaints
	QA Manager	Annually	Information for Staff Development is obtained from the following sources: <ul style="list-style-type: none"> ● Staff CPD records ● Programme Board minutes 	CPD exists and is relevant to role
	Training Manager	Annually	Sign off on CPD records Staff Development Plan Review of minutes of team meetings	Planned CPD has been completed CPD records signed
	Director of HR, Strategy etc		*Note: HR Manager will sign off on all Manager CPD records and review Manager development plans.	Planned CPD has been completed CPD records signed

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
QA 4.2 Peer Review of Teaching Staff	QA Manager	Annually	Internal QA Audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	QA Manager	Annually	<p>Information for the peer review of teaching staff is obtained from the following sources;</p> <ul style="list-style-type: none"> ● Those involved in the peer review process ● Programme Board minutes ● Learner feedback on the effectiveness of teaching 	<ul style="list-style-type: none"> ● Positive feedback ● No further action items from the programme board ● Teaching staff that require development are given a development plan in a timely manner, complete the plan and improvements are evident.
QA 4.3 Staff Appraisals	QA Manager	Annually	Internal QA Audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	QA Manager/HR Manager	Annually	<p>Information for monitoring staff appraisals is obtained from the following sources:</p> <ul style="list-style-type: none"> ● Staff feedback ● Completed Appraisal Forms ● Employee Self-Assessment Form ● Employee appraisal form ● Performance Improvement Plan ● Employee Reports on Performance ● Staff responses to Performance Report 	<ul style="list-style-type: none"> ● Positive feedback ● All forms completed and signed
		Ongoing	To ensure policies reflect best practices:	

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
	QA Manager/HR Manager		<ul style="list-style-type: none"> ● External information ● Benchmarking 	
	Line Managers	Ongoing	<ul style="list-style-type: none"> ● Performance Improvement Plan (PIP) 	<ul style="list-style-type: none"> ● Staff working with PIP
QA 5 TEACHING AND LEARNING				
QA 5.1 Teaching and Learning	QA Manager	Annually	Internal QA Audit	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Program Co-coordinator	Per Course	<p><u>Prior to Delivery</u></p> <ul style="list-style-type: none"> ● Checklist of information made available to tutors and learners ● Tutors co-sign the checklist ● Learners will receive a checklist of information which is contained in their learner handbook. <p><u>During Delivery</u></p> <ul style="list-style-type: none"> ● Peer Review of teaching ● Examination of lesson plans, results and portfolio's ● Teacher reflections, meeting logs and surveys ● Employers – feedback on work based learning 	<p><u>Prior to Delivery</u></p> <ul style="list-style-type: none"> ● Check list fully checked and signed ● Learners sign the checklist to ensure that they have received the tutor handbook and other information. <p><u>During Delivery</u></p> <ul style="list-style-type: none"> ● Peer review is conducted and any improvements are acted upon and improvements are made. ● Lesson plans are reviewed and signed by reviewer (peer). Any improvements suggested are reviewed and a further review conducted to ensure

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
			<p><u>Post Delivery</u></p> <ul style="list-style-type: none"> ●Learner Surveys (mid and end) ●Employer Feedback ●Tutor Feedback ●Feedback analysed and report compiled ●Post Programme review meeting outcomes 	<p>improvements suggested have been made.</p> <ul style="list-style-type: none"> ●Results are reviewed and benchmarked against Cenit internal results and awarding body standards and are on par or above. ●Employers feedback is positive. Where it is not, a review is undertaken and improvements are made. <p><u>Post Delivery</u></p> <ul style="list-style-type: none"> ●Learner Surveys are positive ●Employer Feedback is positive ●Tutor Feedback is positive ●Feedback analysed and report compiled – favourable to other courses and benchmarks ●Post Programme review meeting outcomes – no improvements in the quality. If improvements are needed, the appropriate process is followed. The same for programme improvements.
QA 5.2 Learner Complaints	QA Manager	Annually	Internal QA Audit	<ul style="list-style-type: none"> ●Number of internal audits per annum ●Low number of internal audit findings ●Time taken to correct findings

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
			<ul style="list-style-type: none"> ● All the complaint applications made in the year ● Copy of Investigators advice to complainant and request for response ● Response from complainant ● Copy of notification sent to all parties of outcome of complaint consideration ● Copy of appeal as lodged ● All appeal board meeting minutes. ● Copy of notification of outcome of appeal 	<ul style="list-style-type: none"> ● No complaints ● ● No complaints ● Any complaints made are handled effectively with no further complaints arising from each case. ● Trail of the complaint process is clearly visible
QA 6 ASSESSMENT OF LEARNERS				
QA 6 Assessment	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit including review of completed forms ● Compliance with all requirements for all assessment policies ● Minutes of appeal board meetings ● Log and physical location of assessments, data submissions statements and management system. 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings ● No issue with any compliance of assessment policies ● Log fully completed and assessment location fully secure.
	Programme Board	Each Meeting	<ul style="list-style-type: none"> ● Internal Verification Report ● External Authentication Reports ● Examination report summary which includes: <ul style="list-style-type: none"> ○ Exam Summary Report ○ Average Result 	<ul style="list-style-type: none"> ● Few if any errors ● KPI's are in line with expectations or above.

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
			<ul style="list-style-type: none"> ○ No. Certified in full ○ No. Certified partially ○ No. completed ○ Benchmarking statistics ○ Completion Rate (%) ● Other monitoring KPI's used for include: <ul style="list-style-type: none"> ○ Number of deferrals given ○ Number of appeals ○ Rechecks ● Security of Assessments 	
	External Authentication	For each exam	<ul style="list-style-type: none"> ● Internal verification reports ● Assessments (written and evidence of work) 	Few if any errors
	Academic Committee	Bi-annually	<ul style="list-style-type: none"> ● Examination report summary (for each awarding body) ● Feedback or updates from awarding bodies ● Review of assessment performance Adherence to regulations ● Review of minutes should any case of academic misconduct be elevated to this level/ 	No further action needed
	Programme Coordinator	At the end of each programme	<ul style="list-style-type: none"> ● Completed Feedback forms 	Positive feedback on assessment process

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
	Invigilator/proctors	For each assessment requiring invigilation	<ul style="list-style-type: none"> ● Invigilator/Proctor reports are completed, including any issues record as per guidelines 	Reports completed with no issues in the process
	Assessors	For each assessment	<ul style="list-style-type: none"> ● Marking Schemes and marking records ● Record of provisional communication of results ● Assessors reports 	<ul style="list-style-type: none"> ● Marking Schemes/records are available for each assessment
	Tutors		<ul style="list-style-type: none"> ● Record of provisional communication of results ● On the job learning logs ● Briefing materials for third party assessment ● Correspondence for third party assessment 	<ul style="list-style-type: none"> ● Results communicated clearly and effectively with no negative feedback on the process ● Logbooks are completed within the guidelines given ● Briefing has been prepared and delivered ● Third party has been informed via correspondence of the requirements for assessment and all 3rd party questions have been answered.
	Exams Office	At the end of each module	<ul style="list-style-type: none"> ● Publication of results to learners ● Learner record contains original and repeat results ● Learner record contains any reasonable accommodation ● Review of correspondence between exams office and any learner guilty of 	<ul style="list-style-type: none"> ● Results communicated clearly and effectively with no negative feedback on the process ● Repeat process followed without any issues

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
			<ul style="list-style-type: none"> academic malpractice, plagiarism or other misconduct in relation to assessment ●Security of assessments 	<ul style="list-style-type: none"> ●Forms completed and process following correctly and timely. ●No breach of security
	Learners	For each module	<ul style="list-style-type: none"> ●Record of submission of assignments on Moodle ●Record of assessments given at the end of exam 	<ul style="list-style-type: none"> ●All submitted without issues ●All submitted without issues
QA 7 LEARNER SUPPORTS				
QA 7.1 Learner Supports	QA Manager	Annually	<ul style="list-style-type: none"> ●Internal QA Audit ●Review of forms 	<ul style="list-style-type: none"> ●Number of internal audits per annum ●Low number of internal audit findings ●Time taken to correct findings
	Academic Committee	Bi-annually	Review of reports	●No issues
	External Authentication	Per programme	Examiners reports	●No issues
	Learning Support Coordinator	Annual Per programme	<ul style="list-style-type: none"> ●Report on Learner supports ●Forms for learner support 	●No issues
	Programme Review	Per programme	Review of supports	●No issues
QA 7.2 Approval and Monitoring of venues	Programme Coordinator	Per programme	<ul style="list-style-type: none"> ●Premises Specifications ●Learner and Tutor Feedback 	●No issues
QA 8 INFORMATION AND DATA MANAGEMENT				

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
QA 8.1 Data Privacy	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit ● Review of forms 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Board of Directors	Annually	<ul style="list-style-type: none"> ● Review of ongoing accuracy of the Statement ● Review of complaints, requests, withdrawals of consent ● Review of audit outcomes ● Compliance with legislative changes with respect to the associated policies – subject access request policy, website / cookies policy, records retention policy, data protection policy. 	<ul style="list-style-type: none"> ● No issues ● Changes to legislation have been updated
QA 8.2 Information Management	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit ● Review of forms 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Board of Directors/Academic Committee	Ongoing	<ul style="list-style-type: none"> ● Feedback from stakeholders on the Management Information Systems and Data Analytics ● Review of any error reporting or data breaches 	<ul style="list-style-type: none"> ● No issues

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
QA 8.3 Data Protection	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit ● Review of forms 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Board of Directors	Ongoing	<ul style="list-style-type: none"> ● Review of data protection enquiries, complaints, requests, breaches, withdrawals of consent. ● Integration with other policies such as Privacy Statement, Subject Access Request Policy, Records Retention schedule. 	<ul style="list-style-type: none"> ● No issues
QA 8.4 Data access requests, rectification and erasure	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit ● Review of forms 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Board of Directors	Ongoing	<ul style="list-style-type: none"> ● Monitor Data Requests ● Monitor withdrawal of consents ● Monitor the retention and destruction of data to ensure compliance 	<ul style="list-style-type: none"> ● No issues
QA 8.5 Data Breaches	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit ● Review of forms 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
	Board of Directors	Ongoing	<ul style="list-style-type: none"> ● Monitor any data breach reports made ● Monitor the destruction of data to ensure all traces have been fully destroyed/eliminated. 	<ul style="list-style-type: none"> ● No issues
9.1 PUBLIC INFORMATION AND COMMUNICATION				
QA 9.1 Public Information and Communication	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit ● Review of forms 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	Marketing Officer	Ongoing	<ul style="list-style-type: none"> ● Website and social media feedback ● Website and Social Media data analytics 	
	Training Manager/Programme Lead	Per programme	<ul style="list-style-type: none"> ● Learner Feedback 	<ul style="list-style-type: none"> ● No issues
	Training Manager/Programme Lead	Ongoing	<ul style="list-style-type: none"> ● Feedback from Learners, Tutors and Admin on Learner Admin systems 	<ul style="list-style-type: none"> ● No issues
10.1 OTHER PARTIES INVOLVED IN EDUCATION AND TRAINING				
QA 10.1 Other parties involved in education and training	QA Manager	Annually	<ul style="list-style-type: none"> ● Internal QA Audit ● Review of forms 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	QA Manager	Annually	<p>The Quality Manager will review any audits conducted with the following bodies;</p> <ul style="list-style-type: none"> ● Institute of Leadership and Management 	<ul style="list-style-type: none"> ● Low number of issues ● Time taken to correct issues

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
			<ul style="list-style-type: none"> ● Association of Chartered Certified Accountants ● Certified Public Accountants ● Accounting Technicians Ireland ● Axelos ● Scrum Alliance ● AAT UK ● Review of any audit reports 	
	QA Manager, Training Manager, Director of IT	Ongoing	Review with employers and other external parties. Via Feedback forms and meetings	● Low number of issues
QA 11 SELF EVALUATION, MONITORING AND REVIEW				
QA 11. Self-evaluation, monitoring and review	QA Manager	Annually	<ul style="list-style-type: none"> ● The review of the documentation as set out in the Ongoing Review and update of QA documents as part of the annual QA audit. ● Review of forms ● Review of the audit report 	<ul style="list-style-type: none"> ● Number of internal audits per annum ● Low number of internal audit findings ● Time taken to correct findings
	QA Manager	Quarterly	<ul style="list-style-type: none"> ● Minutes of the Quality Committee Meetings ● Review of Quality Improvement Plan 	● No issues
QA 11.2 Review and Revalidation	QA Manager	Annually	<ul style="list-style-type: none"> ● QA Audit ● Minutes of the Academic Committee 	● No issues

Policy	Responsibility	Frequency	Method for Monitoring	Indicators of Effective Quality
			<ul style="list-style-type: none">● Panel reports● Responses to the panel	