**QQI Review**

**CINNTE INSTITUTIONAL REVIEW REPORT**

March 2025

Hibernia College

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# Foreword

Quality and Qualifications Ireland (QQI) is responsible for the external quality assurance of further and higher education and training in Ireland. One of QQI’s most important functions is to ensure that the quality assurance (QA) procedures that institutions have in place are effective. To this end, QQI carries out external reviews of higher education institutions on a cyclical basis. This current QQI cycle of reviews is called the CINNTE cycle. CINNTE reviews are an element of the broader quality framework for institutions composed of Quality Assurance Guidelines; each institution’s Quality Assurance Procedures; Annual Quality Reports (AQR); and Dialogue Meetings. The CINNTE review cycle has been extended by one year i.e. from 2017-2024 to include the larger and mature independent/private higher education institutions (HEIs) operating in the Irish higher education sector. These HEIs have been prioritised on the basis that they have indicated their intention to seek the delegation of authority (DA) from QQI when it becomes available[[1]](#footnote-2). During this period, QQI will organise and oversee independent reviews of these HEIs.

Each CINNTE review evaluates the effectiveness of the quality assurance procedures and processes in the institution. It also measures the institution’s compliance with European standards for quality assurance, having regard to the expectations set out in QQI’s quality assurance guidelines, as well as adherence to other relevant QQI policies and procedures.

For independent/private providers, CINNTE reviews also explore how these institutions have enhanced their teaching, learning and assessment strategies and their quality assurance systems and how well institutions have aligned their approach to their own mission, quality indicators and benchmarks.

The CINNTE review process is in keeping with Parts 2 and 3 of the [Standards and Guidelines for Quality Assurance in the European Higher Education Area](http://www.enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf) (ESG 2015) and based on the internationally accepted and recognised approach to reviews, including:

- the publication of Terms of Reference;

- a process of self-evaluation and Institutional Self-Evaluation Report (ISER);

- an external assessment and site visit by a team of reviewers;

- the publication of a Review Report including findings and recommendations; and

- a follow-up procedure to review actions taken.

This institutional review of Hibernia College was conducted by an independent review team in line with the terms of reference in Appendix A. This is the report of the findings of the review team.

# The Review Team

Each CINNTE review is carried out by an international team of independent experts and peers. The 2024 institutional review of Hibernia College was conducted by a team of six reviewers selected by QQI. The review team was trained by QQI on 28 August 2024. The chair and coordinating reviewer attended an online planning visit with Hibernia College on 6 September 2024. The main review visit was conducted by the full team between 7 and 10 October 2024.

***Chair:*** Professor Anthony McClaran

Anthony McClaran became the third Vice-Chancellor of St Mary’s University Twickenham in April 2020, having returned to the UK from Australia, where he served as CEO of the Tertiary Education Quality and Standards Agency (TEQSA) from 2015 to 2020. Prior to that move, Anthony was chief executive of the UK’s Quality Assurance Agency (QAA) from 2009 to 2015 and chief executive of the Universities and Colleges Admissions Service (UCAS) from 2003 to 2009. Anthony has held a number of governance roles at all levels of education and was Chair of Council and Pro-Chancellor of the University of Gloucestershire from 2007 to 2009. Anthony is currently Chair of GuildHE and in June 2021 was appointed by Pope Francis to the Board of AVEPRO, the Holy See’s HE quality assurance agency.

***Coordinating Reviewer:*** Professor Michelle Callanan

Professor Michelle Callanan is the Deputy Dean (Quality Assurance & Enhancement) of Higher Education at University College Birmingham (UCB). Her academic and industry experience spans several decades in tourism, aviation, and hospitality. Michelle’s primary focus is to work with teams across all Schools to ensure the design and delivery of sector and industry-relevant programmes that align with national academic standards & are student-centred whilst ensuring student success (in terms of experience and outcomes).

Michelle oversees the quality monitoring and enhancement of UCB’s international and UK partnerships, supports teams in the effective implementation of policies and regulation, liaises with external examiners and oversees the annual quality cycle of programmes. Over 30 years of working in higher education, Michelle has contributed to quality assurance reviews in education (in the UK, Ireland and overseas), developed several industry toolkits (to enhance practice) and engaged in research and consultancy projects. Michelle has extensive experience as an external examiner, chief external examiner, external advisor and reviewer of higher education in the UK, Ireland and internationally, supporting institutions to enhance their quality governance to positively impact the experience and outcomes of their students.

***International Representative***: Professor Neuza Pedro

Neuza Pedro is a Full Professor at the Institute of Education, University of Lisbon, in Teacher Training and ICT in Education. She is Coordinator of the PhD and Masters’ Degree Programmes in ICT in Education at University of Lisbon. Professor Pedro is a member of the Portuguese Scientific and Pedagogical Council for Continuous Teachers’ Training (CCPFC), a unit of the Ministry of Education responsible for the regulation and accreditation of in-service training activities that can be considered valid as teachers’ continuous professional development.

In the last 10 years she has coordinated the E-learning laboratory of the University of Lisbon. She has been involved in many national and international R&D projects and in many expert panels in evaluation processes of European Research Funding Programmes as well as of the Portuguese Agency of Evaluation and Accreditation of Higher Education (A3ES). Her current research interests include teacher training, educational technologies and Innovative Learning Environments.

***Learner Representative:*** Frances Kiely

Frances Kiely is a PhD candidate in Education (Home Economics pedagogy) with a particular focus on formative assessment in the Home Economics classroom as experienced in Ireland and internationally. Frances holds a B.Ed. in Home Economics and Biology from St. Angela’s College, Sligo (now part of Atlantic Technological University), an M.Sc. Agri. Food Science from University College Dublin, an M.Ed. Educational Mentoring from University of Limerick and a Postgraduate Diploma in Educational Leadership (PGDEL), from Maynooth University.

Frances’ teaching philosophy is grounded in the belief that effective learning is active and collaborative where the teacher combines active learning strategies and new forms of technology to motivate students. In a previous role as an associate for the Junior Cycle for Teachers (2017- 2022), Frances contributed to the design, development, and delivery of cluster days for Home Economics, providing advice and support to the Junior Cycle Home Economics team in facilitating teachers’ professional development.

Frances is an external assessor with the Teaching Council, assisting with the qualification process for Home Economics, and the review of the accreditation process for Home Economics at third level.

***External Representative:*** Dr Mark Glynn

Dr Mark Glynn is the Head of Business Development for Catalyst IT with responsibility for the EU, Middle East and Africa regions. Mark is an Advance HE Principal Fellow, one of only 1600 worldwide. This fellowship is international recognition of his sustained record of strategic leadership in higher education. Mark has a substantial understanding of the education landscape and its unique dynamics due to his experience working in the education sector for over 20 years.

He has extensive involvement in a variety of national and international networks supporting the education sector. Following on from four years working across the institute of technology sector, Mark joined DCU as Head of Teaching Enhancement, a role which he held for ten years. Through this role he expanded his network through active involvement in the National Forum for Teaching & Learning. This has resulted in numerous collaborative projects between DCU and other HEIs as well as invitations as a keynote speaker on various topics such as Academic Integrity, Universal Design for Learning, Digital Learning and Curriculum Design.

Through leading numerous teaching and learning initiatives in areas including blended learning, technology-enhanced learning, learning spaces, student retention and assessment, Mark has developed a local, national and international reputation for innovation and for leadership in teaching and learning.

He has provided consultancy to higher education institutions across Ireland and also in Germany, Georgia and Vietnam.

***External Representative:*** Emeritus Professor Ciaran Sugrue

Ciaran Sugrue is Emeritus, Full Professor of Education, School of Education, University College Dublin (UCD) where he was appointed to the chair of education in 2011.

He has worked in the Irish education system in a variety of capacities including teacher, schools inspector, teacher educator and researcher. Prior to his appointment in UCD, he worked at the Faculty of Education, University of Cambridge, and was a fellow of St. Edmund's College. While at the faculty of education, he also had a leadership role in the Centre for Commonwealth Education, reflecting a sustained commitment to, and involvement with, educational reform in the global south, sub-Saharan Africa in particular, working with agencies such as Ireland Aid, UNESCO and World Bank. This work has extended also to Egypt and Asia.

He was a lecturer, senior lecturer and principal lecturer at St. Patrick's College Drumcondra where he had a variety of responsibilities over time. He was General Editor of Irish Educational Studies (1998-2008), serves on the editorial boards of several international journals, is a past president of the International Study Association of Teachers and Teaching, and was involved in creating the Irish Primary Principals' Network (IPPN). He was Head of School from September 2011 until August 2014. His research interests are wide-ranging and include School Leadership and Educational Change, Continuing Professional Development, Teacher Educational Reform in developed and developing countries, and Educational Policy, and more recently leadership in higher education. He has more than 100 publications including more than a dozen books authored and edited by him, as well as peer reviewed papers. He retired in the autumn of 2023 but continues to research, write and publish.

# Section 1: Introduction and Context

Hibernia College (HC) was founded in 2000 to ‘meet the growing demand for flexible lifelong learning unbound by geographical or traditional educational constraints’, as stated in its Institutional Profile report. The institution awards higher education awards on the National Framework of Qualifications (NFQ) at Level 8 (29%) and Level 9 (71%), in professional education and practice-based learning for regulated professions, in particular teaching, and more recently in the health sciences and corporate governance. Accordingly, the institution works closely with regulatory and statutory bodies, including the Teaching Council and the Nursing and Midwifery Board of Ireland (NMBI). It should be noted that the institution was the first independent institution in Ireland to offer an NMBI accredited programme.

The institution’s delivery strategy is founded on a blended model, integrating online and face-to-face instruction with work placements, within the context of Universal Design for Learning (UDL). This flexible approach has made education accessible to a broader community, allowing the institution to uniquely compete effectively with traditional campus-based higher education. Consequently, the institution has a wide geographic reach, making use of 23 centres across Ireland, and with ambitions to develop into the international market.

In 2021, Hibernia College became part of the Folens Group, which facilitated collaborative opportunities for the institution with other Folens providers, such as the Accountancy School.

The institution’s 2024-25 provision includes:

* PME in Primary Education
* PME in Post-Primary Education
* MA/PG Diploma (Arts) in Inclusive & Special Education
* BSc (Hons) in Nursing in General Nursing
* MSc in Corporate Governance (in collaboration with the Accountancy School)
* PG Diploma (Science) in Business Data Analytics.

Hibernia College communicates its values clearly in its Institutional Profile Report and ISER. These values shape decision-making processes, actions and behaviours and focus on flexible learning (changing student profile, pathways to success, student engagement, creativity, alternatives), student-centred learning (student success, personalised learning, supportive community, student at the core of the mission); innovation (blended learning, collaborative, adaptive learning, GenAI), and inclusive learning (geographical access, transformative experiences, empowering students, UDL).

The institution’s mission statement is as follows: 'through the use of transformative educational approaches to make high quality education widely available to a diverse learner population’. This signifies the institution’s commitment to making a positive contribution to Ireland's National Access Plan. The strategic objectives, as stated in its ISER, are guided by four overarching themes: learner-centric education, sustainability, transformative technology and international reputation and growth. Overall, the values and mission of the institution align with their strategic objectives.

That said, the institution’s alumni conveyed a more inspirational vision of the institution to the review team than the above, highlighting their deep pride and honour to be part of the Hibernia College community. They shared many remarkable insights into how their experiences at the institution had prepared them for their successful careers. These encompassed their insightful application of educational theory to diverse classroom settings, their valuable placement experiences, the collaborative environment of the institution, the strong relationships they have built as graduates, and their profound sense of ‘giving back’ to the broader institution community. Based on the uplifting alumni voice, **the review team recommends that the institution strengthen its vision to clearly reflect its ambition and evident impact on its alumni**.

**Student and Staff profile**

Given the context of the institution’s blended and flexible provision, 83% of its students are mature (23+), as cited in its Institutional Profile Report. At the time of the review, all students were Irish domiciled. From 2019-2023, the institution had 4608 graduates, with 74% of 2023 graduates in employment.

Hibernia College’s staff community comprises academic faculty, adjunct faculty (who are experienced professional and employed on a part-time basis), and professional support staff to support its student body. This staff community greatly appreciated the collaborative nature of the institution, especially adjunct staff who work part-time and many of whom are retired. In addition, the institution has developed an alumni network who actively contribute to numerous institution events. The alumni expressed a strong sense of being heard and a deep pride in being part of the institution community. Furthermore, external stakeholders, including school principals and co-operating teachers/Treoraí teachers, commended the institution for the quality and variety of CPD support, the value and accessibility of their resource hub, the vibrant energy they generate, the institution’s proactive engagement and their responsiveness to all feedback. Against this background, **the review team commends the institution for fostering a clear culture of collaboration among administrative and academic staff, as well as with external stakeholders**.

**Quality Assurance and Enhancement**

The institution has developed and disseminated its comprehensive quality framework, the Hibernia College Quality Framework (HCQF), which encompasses their quality assurance policies and procedures within an enhancement context. The HCQF aligns with the ESG and the QQI’s QA policies and guidelines, which was confirmed following a Re-engagement process with QQI in 2019 to approve the institution’s QA procedures. In addition, the Teaching Council confirmed in April 2023 that their quality standards had been met for the institution’s Professional Master of Education (Primary) and the Professional Master of Education (Post-Primary). This evidence by external regulatory and statutory bodies confirms that the institution’s quality standards are fit for purpose and compliant. That said, the quality assurance policies and procedures have been explored in more depth in the Quality Assurance and Accountability section.

**Conclusion**

Overall, the review team noted the success of the institution since 2000, taking a leading role in flexible learning in Ireland and commends the institution for fostering a clear culture of collaboration among administrative and academic staff, as well as with external stakeholders. In addition, the review team recommends that the institution strengthen its vision to clearly reflect its ambition and evident impact on its alumni.

# Section 2: Institutional Self-Evaluation Report (ISER)

**ISER development process**

The Institutional Review (IR) was an institution-wide process developed collaboratively with a range of internal and external stakeholders, under the guidance of the Institutional Review Steering Committee (IRSC), with themed cluster groups. The process began in September 2023 with clear terms of reference guiding the process. A comprehensive stakeholder consultation with all academic departments, adjunct faculty, professional services teams, students, alumni and external providers has effectively informed the ISER. The communication ensured that all stakeholders understood the purpose of the self-reflection process, had maximum engagement and established a shared sense of ownership. To ensure institution-wide engagement and collaboration in the IR process, the institution hosted various webinars.

Following a peer review exercise leading to a SWOT analysis, several case studies were created to showcase examples of quality reviews, good practice and areas for enhancement, against the HCQF. The use of case studies provided illustrations of the institution’s approach in practice and drew well on external evidence and research. Further peer reviews were undertaken of the draft document to ensure a consistent and evidence-based narrative had been provided. In addition, the IR was a standing item on the agendas of both Academic Board and Student Engagement Committees, ensuring the process was formalised with regular oversight, which contributed to the final report.

Overall, the review team concluded that the process for developing the ISER by the institution was thorough and inclusive.

**Effectiveness of the ISER**

The review team agreed that the ISER was clear, comprehensive, reflective, inclusive and was presented professionally and openly. The report covered the essential features required by QQI’s Core Quality Assurance Guidelines and by QQI Sector Specific Quality Assurance Guidelines for Independent and Private Providers.

The institution’s structures and policies for assuring quality were set out systematically. The review team highlighted that the strongest narrative in the ISER centred on Governance, Risk Management, Ethics and Academic Integrity, and Digital Technology-enhanced Learning. That said, the institution demonstrated a significant level of introspection and commitment to continuous improvement in their reflection on practices. The extensive use of case studies demonstrated the practical application of the institution’s structures and approaches. During the review visit, the institution reflected on the ISER process in an open and transparent way, providing suggestions as to how they would improve the process for a future review; such as providing teams with a case study template, and including more challenging case studies. In addition, the review team concluded that greater use of metrics and statistical data would have provided more measurable evidence to the narrative and conclusions drawn in the ISER. Overall, the ISER presents an institution which seriously engages with quality assurance and is reflective and strategic in managing its implementation.

**Design and accessibility of the review documents**

**The exemplary design and accessibility of the review documents are to be commended as they demonstrate the institution’s** **high standards for inclusion, universal design, and visual appeal**. These documents ensure, not only an aesthetically pleasing presentation, but also a seamless user experience for a diverse audience. The layout is clean and intuitive, and its readability has clearly been carefully considered. Each element is optimised for readability, allowing individuals who rely on assistive technology to navigate with ease. These documents represent the institution’s effort to embrace inclusive design in their educational practices as well as in their digital environments. This dedication to quality and inclusivity reflects an understanding of the diverse needs of today’s users and a commitment to making information available and usable for all.

Overall, the review team concluded that the institution engaged thoroughly and collaboratively with the production of the ISER, engaging with an extensive number of internal and external stakeholders. The review team also commended the institution for the exemplary design and accessibility of the Review documents.

# Section 3: Quality Assurance/Accountability

Hibernia College demonstrates a strong institution-wide dedication to continuous quality improvement. The institution has developed and disseminated its comprehensive quality framework, the Hibernia College Quality Framework (HCQF), which encompasses their quality assurance policies and procedures. The HCQF aligns with QQI policies and guidelines and the European Standards and Guidelines (ESG), as evidenced in the QQI Re-engagement Process in 2019 and is explicitly evidenced in all quality documents. In addition, academic and professional teams confirmed the value of HCQF across their operations.

Hibernia College has a transparent system for quality assurance and accountability. Responsibility for ensuring the implementation of, and compliance with, academic quality assurance policies and procedures is currently in the remit of the Quality Assurance Team and the Registrar. In addition, Academic Board, which meets six times per year, is responsible for oversight and decision-making on all academic and quality assurance matters at the institution. The membership includes the Academic Dean (as chair), all programme directors and professional services managers, faculty and adjunct faculty representatives, the chairs of all the sub-committees and two elected student representatives. Academic Board discharges various duties to its constituent sub-committees: the Ethics Committee, the Board of Examiners, the Research Committee, the Teaching, Learning and Assessment Committee, and the Programme Boards. Academic Board’s terms of reference (TOR) and annual work plan clearly outline their responsibilities and actions, culminating in the annual Academic Board report. This report includes the results from a review exercise conducted every three years as stated in its TOR, including a survey of all its members. The results from the 2024 survey articulated the need for the delineation of the function of Academic Board with regards to the role of the CEO and EMT. One particular action included the recent appointment of the Academic Dean as a non-executive member to the Board, which ensures a ‘strong academic voice is on the Board’, with the CEO invited to a meeting of Academic Board to clarify the role.

Further recent enhancements were approved by Academic Board, such as the creation of a new Generative AI Policy, and the updates to the reasonable accommodation process, which included the creation of a more accessible form, along with widening its scope to include placements. These policies were disseminated to all staff through training sessions. Students were formally informed of the policies and procedures during their orientation programme.

Obtaining student feedback on their overall learning experience is essential to Hibernia College. They utilise various mechanisms, such as module surveys, elected student representation on formal panels and at in-person days, and through student forums. The review team established from the student meetings that students were aware of the mechanisms to capture their feedback and provided some examples of where their feedback prompted actions, including further support for students with neurodiversity challenges. A more in-depth review of student engagement and feedback is covered under Governance and Management.

The review team noted many examples of best practice and exemplars in e-learning, teaching and research (which will be covered in more detail in the Teaching, Learning and Assessment Section). The institution reported a student retention rate of 97%, with 74% of 2023 graduates in employment. In addition, the review team was also impressed with the regular positive feedback from teaching faculty, adjunct staff and external stakeholders on the supportive culture of the senior academic leadership team, as noted in the previous section. The institution’s approach to quality assurance and accountability is consistent with their mission and values.

**New programme development**

The review team investigated the process for the development and approval of new programmes, in relation to the new nursing degree. The Acting Programme Director for Nursing articulated the process that the team implemented for designing, developing and validating their new degree programme. It was also noted by the review team that standards for nursing degree programmes were simultaneously updated by NMBI at this time.

The nursing team completed the pro formas for initial approval, which then prompted a scoping exercise, leading to the development of the formal programme proposal. The proposal was reviewed by both Academic Board and Executive Management Team, who determined that it aligned with the institution’s academic and corporate strategic goals. Once the proposal was formally approved, cluster groups were set up to ensure the programme design, delivery and outcomes aligned with QQI and PSRB processes and standards. From here, extensive stakeholder engagement with clinical providers and QQI was undertaken, which also informed the final programme remit. Academic Board then reviewed these draft documents and offered suggestions for enhancement, which included refining the assessment process. Finally, Academic Board formally reviewed and approved the programme.

Overall, the review team concluded that the institution has a coherent quality framework, HCQF, which aligns with the QQI Quality Codes, the ESG and PSRB standards. In addition, the review team determined that the HCQF was effectively applied to the design and development of new programmes, as well as to the support, evaluation and enhancement of the quality of education.

## Objective 1 – Governance and Management

The governance and management of Hibernia College is highly effective, with clear demarcation between the corporate and academic structures, informed by two key policies: the Governance and Management Policy and the Corporate Governance Code. The Board of Directors is the governing authority of the institution and is responsible for the general business and resources, focusing on corporate and fiscal responsibilities along with setting the strategic direction.

The Board of Directors has delegated all authority for academic decision-making to Academic Board, chaired by the Academic Dean. The senior leadership team emphatically informed the review team about the independent nature of Academic Board and the establishment of formal reporting structures. To demonstrate the Board’s commitment to the separation of corporate and academic governance, along with raising the profile of the academic voice on the Board, they recently appointed the Academic Dean as a non-executive member to the Board, as noted in the previous section. They also highlighted the collaborative relationship between the Board and the institution, mentioning that a Board member is currently working with the Head of Digital Learning on an AI project.

The CEO is responsible for the day-to-day operations and performance of the institution, ensuring alignment with its strategic goals and reporting directly to the Board of Directors. An Executive Management Team (EMT), chaired by the CEO, focuses on the implementation of the strategic plan, fiscal management of all academic initiatives and programmes, and overall resource planning. Board members informed the review team of their support for the institution's collaboration with an independent external advisory body on wellbeing and mental health initiatives. Overall, while there is a clear separation between corporate and academic governance structures, they collaborate effectively to ensure the institution's successful and sustainable future.

**Student engagement in governance**

The institution actively involves students at all academic levels by appointing elected student representatives as members of Academic Board and its sub-committees. Accordingly, students participate in the review and updating of quality policies and procedures to ensure their accessibility to the wider student community. In addition, the institution has constituted a Student Engagement Committee (SEC), chaired by a student representative (nominated by their peers) and co-chaired by the Head of Student Affairs and the Quality Enhancement & Registration Manager. The SEC sets out a work plan with co-developed projects over a two-year period (the lifetime of the SEC). For example, students were involved in co-creating the principles and policy for the use of GenAI (Generative AI) in the assessment process.

The institution, in their ISER, recognised the need to encourage better attendance at formal panels so sought feedback from students. Students acknowledged that their lack of confidence stemmed, somewhat, from their limited experience on such panels, and the prevalent use of formal language. Accordingly, the institution met students more regularly and used more accessible language to facilitate better contributions. Student representatives at Academic Board were positive that their contributions mattered and that the experience was positive. That said, the review team reviewed several Academic Board minutes where student representation was limited. Accordingly, **the review team recommends that the institution increase student engagement across its governance structures**.

**Strong and supportive leadership**

The evolution of the institution since 2000 has enabled it to create a culture and ethos where all contributions are appreciated and valued, a community of practice. Throughout the review visit, the senior leadership team projected confidence in competing with established players in the higher education field and in their future ambitions to ‘consolidate’ and to ‘diversify’ (including internationally), with an ‘evident commitment to learning innovation’. When meeting the various stakeholder groups, a very strong sense of community, collaboration, and loyalty towards the institution, and particularly the senior academic leadership team, was emphatically conveyed. In this regard, **the review team commends the institution for the evident sense of loyalty, collaboration and community that speaks eloquently of its leadership and culture**.

With their diversification and international ambitions, the governance and decision-making of the institution are centred in Dublin, leaving many regional centres without a sense of ‘delegated autonomy’. This was expressed by faculty members at the level of regional tutor groups, along with students who commented about the challenge in attending Dublin-centric events, if located in Donegal. The institution, during its next phase of growth, should cultivate a greater sense of regional autonomy, which is an important leadership challenge that warrants attention. Accordingly, **the review team recommends the development of a policy and associated practices that enable greater delegated autonomy in and across the organisation, built on the trust, collaboration and openness that the institution has established**.

As part of the collaborative culture, various professional teams conveyed that they would happily step in to support other teams when necessary. This was evident in various meetings, where the library team was acknowledged for assisting the Student Support team with reasonable accommodation cases, particularly as the number of cases had significantly increased. As the institution diversifies, the 'all hands-on deck' culture is likely to be severely tested, potentially rendering it ineffective. To survive and thrive in a phase of expansion and growth, **the review team recommends that a strategic workforce development plan be created to clarify and define roles and responsibilities in cross-functional processes**.

The institution has recently recruited a significant number of academic staff, all of whom praised the thorough induction process. Senior leaders confirmed that the institution had created more opportunities for staff to progress, through assistant professor posts and funding for doctoral and other studies. In addition, the institution has contacted Advance HE regarding fellowship opportunities for their faculty. That said, several faculty members expressed to the review team the view that they would benefit from a formal policy outlining career advancement, promotion benchmarks, and related remuneration implications. In addition, faculty members noted that although they were assigned Fridays as a research day, this often did not materialise due to the prioritisation of administrative tasks over their research. The institution would benefit from fostering a more distinct research culture. Essential to this effort is supporting faculty in establishing protected time for research, particularly for analysing the significant data sets accumulated over time, which have so far been examined only intermittently and selectively. To further support faculty members and to ensure that teaching is informed by research, **the review team recommends that the institution create a structured approach to career progression and performance management, with more protected time for research**.

**Risk Management**

The institution has established robust processes for managing risks effectively, as articulated in the ISER. Senior managers also informed the review team that the institution has identified three layers of risk: academic risk, digital learning and information technology (IT). The institution maintains a Risk Register, with all relevant staff provided with Risk Register Training and SOPs. The Risk Register is a standing item on the Academic Board agenda, where academic risks are discussed, such as a change in an accreditation process or when students could not go on placements during the Covid pandemic. The CEO meets with the Chairperson of the Board weekly for updates to the Risk Register. Senior managers highlighted that, given their blended delivery model, IT poses a significant risk, particularly with the potential for cyber-attacks. In addition, they acknowledged the possible risks associated with the new Cohort app, where the freedom for students to communicate may increase the likelihood of inappropriate comments. They confirmed, however, that no inappropriate comments had been made to date. Furthermore, all new programme proposals undergo a thorough due diligence and risk assessment process before being approved. This was demonstrated through the collaboration between the institution and the Accountancy School in designing, developing, and successfully launching the new MSc in Corporate Governance. Overall, the review team determined that the institution’s risk management policies and processes are effective.

**Conclusion**

Overall, the review team concluded that the institution provides an effective and comprehensive governance and management structure. The review team **commends** the institution for the evident sense of loyalty, collaboration and community that speaks eloquently of the leadership and culture. In addition, the review team **recommends** that the institution increase student engagement across their governance structures and develop a policy and associated practices that enable greater delegated autonomy across the organisation, built on the trust, collaboration and openness that it has established. Furthermore, the review team **recommends** that a strategic workforce development plan be created to clarify and define roles and responsibilities in cross-functional processes, and that the institution create a structured approach to career progression and performance management, with more protected time for research.

## Objective 2 – Teaching, Learning and Assessment

Hibernia College's dedication to maintaining high standards in their online teaching, learning, and assessment practices deserves recognition. The institution is dedicated to providing high-quality education to all their students at every centre. The quality of online teaching content reflects a deep understanding of the needs of distance education learners. Courses are meticulously designed by expert faculty and educational technologists who prioritise clarity, engagement, interactivity, and accessibility. Students were very complimentary about the quality of teaching, the range of modules and assessments, and the supportive culture of the institution. They felt assured in the key knowledge, skills, and competencies they were expected to develop, enabling them to focus on their learning effectively and reflect better on their own progress. Students specifically acknowledged to the review team the applicability of theory they learned in the classroom to their practical work contexts. In addition, students and graduates highlighted the engaging module content, the high quality of the face-to-face group sessions, and the valuable practical experiences shared by tutors. In the words of one graduate, ‘we really value the fact that educators are educating us’.

**Online platforms**

Students confirmed that the online platforms were particularly valuable, especially when compared to their experiences at other educational institutions. That said, given the institution’s plan to grow and diversify, the review team advises the institution to explore the transformative potential of new online learning solutions to remain a leader in digital education. As the number of online services and platforms increases, it is essential to improve the usability and interoperability of these interfaces. With multiple platforms in place (VLE, library databases, the institution's website, administrative portals, mobile apps), students face the challenge of navigating several systems, each with its own structure and design. This fragmentation can lead to inefficiency and confusion, as observed by students during their meetings with the review team. Improving usability and interoperability will promote a unified, user-friendly, and integrated digital learning experience where students can transition smoothly between systems, thus avoiding ‘getting lost’ or overwhelmed with information. Accordingly, **the review team recommends that the institution improve the usability and interoperability of their systems to create a more supportive, streamlined, and efficient learning environment for students**.

**Assessment, Feedback and Academic Integrity**

Assessments are effectively designed to monitor students’ achievement of the learning outcomes, while also providing them with several opportunities to apply theory to practical contexts. Detailed and clear information about module assessments is provided through the VLE. Senior leaders emphasised the importance they place on the development of clear assignment briefs to ensure they align transparently with the marking criteria. The institution has enhanced their assessment standardisation process through peer reviews to ensure that assessments are clear and accessible. Furthermore, the Academic Integrity and Assessments Manager has been assigned to oversee this standardisation process. In addition, the use of assessment rubrics ensures transparency in the marking process, allowing students to receive valuable feedback and understand how it aligns with the marks awarded. Although the review team did not review any assessments, students confirmed that the assessment instructions and guidance were clear, which enabled them to demonstrate their knowledge and skills effectively. In addition, they commended the high level of assignment support provided by both the teaching faculty and professional teams. They also valued the feedback from formative assessments, which helped them to reach their full potential. Their only concern was the bunching of assignments around the Christmas period. Although the review team acknowledges that this comment is common amongst students across higher education, they would advise the institution to regularly review assessment schedules to enable students to better manage their workload.

In addition, the institution shared their extensive work on GenAI, which holds potential risk to academic integrity. The institution undertook an in-depth research study on GenAI, informing their new GenAI policy and creating the new Academic Integrity Champions Network (AICN). Furthermore, staff presented their research outputs at various conferences. As higher education navigates a disruptive GenAI environment, the institution has made considerable progress in this area.

**Student Research**

The institution provides valuable opportunities for students to complete in-depth research as part of their programmes, using different formats such as dissertations and academic posters. Given the high quality of research outputs, the institution has established a research repository to compile the research outputs of both staff and students, which all students can access. In acknowledgment of exceptional dissertation work, the institution has also created an annual journal series publishing these students' work. The journal series is presented at an annual celebratory event attended by parents and external stakeholders. Now in its 7th edition, the review team were given the opportunity to read a range of articles from different editions. In addition, the institution has recently assisted three students in publishing their dissertations externally. Publishing their research enhances students' profiles and confidence, especially when applying for jobs. **The review team would like to commend the institution for their commitment to the publication of students’ research in a series of journal volumes**.

**Student Support**

The institution offers a wide array of accessible support services, covering academic, pastoral, placement, IT, and employment needs. The review team observed from the faculty, student and alumni meetings, that the learning experience extended beyond coursework to exceptional learning support services available to all students, as well as informal learning and communication environments. Students highlighted the value of the Cohort app for accessing critical information, resources and support services, and communicating with peers. With dedicated advisors, online tutoring services, and readily accessible resources, the institution has created a supportive ecosystem that helps students thrive regardless of their location and specific needs. The recently enhanced reasonable accommodation policy now extends to the placements. This is particularly significant in clinical settings, where typical shifts last 12 hours. By collaborating with clinical providers, the institution successfully negotiated shift patterns to meet individual student needs. The student panels were eager to express their appreciation for the highly supportive and responsive learning environment fostered by the institution. Students specifically praised the following support areas as being outstanding: welfare, assessments, extenuating circumstances, pastoral support, library support and personal tutors. In addition, students also emphasised the helpful information about the support services and resources available on the portal. Accordingly, **the review team commends the institution for their comprehensive and excellent wraparound support for students, which enables them to excel**.

**Placements**

The institution provides comprehensive placement guidance for its students, which is set out by the relevant PSRB. In addition, the institution has disseminated its Student Support on Placement Policy with all staff involved in placements, which focus on managing attendance and sickness. The School Placement Officer (Education) or Student Allocation Liaison Officer (SALO - Nursing) oversee the administration of the placements and track all visits by placement tutors. The institution employs a considerable number of placement tutors; for example, in primary education alone, there are 100 placement tutors. Placement tutors have a dual role – they assess students and support them. Regarding clinical placements, the tutors meet their students weekly at Stage 1, moving to fortnightly visits at Stage 2. The Link lecturer also visits the students to check on their progress and identify further support, if needed. Each placement tutor must upload their notes which are tracked and monitored by the placement director. With reference to school placements, students lead a ‘micro-teach’ session and receive peer feedback as part of their placement preparation process. The Feedback Link tutors commented on the high quality of feedback from students on these sessions. When the school placement starts, students shadow their school mentor and have ‘float visits’ by the institution. This is particularly important for students new to placements or who have a new tutor. Then the ‘float’ team share their feedback on the visits to identify any enhancements. To ensure better consistency in practice by all placement tutors, the institution hosts two days of face-to-face staff development in August and then in the December/January period. Here, tutors share their experiences to drive a more consistent practice. Students confirmed that their preparation was valuable for building their confidence before the start of their placement. Students provided varied accounts of their experiences with their placement supervisors, including very positive feedback. That said, some students expressed dissatisfaction with the limited communication from one placement supervisor, while others noted an excessive focus on administrative tasks, such as completing the placement documentation, rather than observing the actual teaching session. In addition, students were reluctant to provide negative feedback about their placement supervisors in case it impacted their overall experience of the placement, and subsequent grade. Based on these varied student experiences and given the extensive number of placement tutors, **the review team recommends that the institution ensure a greater consistency of placement supervision, balancing student preparation and classroom pedagogy**.In addition, the students found the timing of the Gaeltacht experience disruptive to their placement and completion of their assessments. While the institution communicated the mandatory nature and timing of the Gaeltacht experience, they should consider providing additional support to students to ensure a more seamless experience.

**The Library Services**

The Library Services at the institution have distinguished themselves through a high level of responsiveness, truly understanding and meeting the evolving needs of students. Far more than managing a repository of knowledge, the library has become a dynamic hub of supporting online students, focusing not only on providing support for accessing academic resources but also on enhancing the reading and writing skills of students. Through strategic investments and a forward-thinking approach, the library team has expanded their role to offer targeted initiatives, such as Banned Books Week, designed to elevate students’ literacy and communication competencies. The students were highly appreciative of the services provided by the library team. Consequently, **the review team commends the Library Services team for their high level of responsiveness to student needs**.

**Equality, Diversity and Inclusion**

Equality, Diversity and Inclusion is at the heart of the institution’s mission and values, as stated in the Institutional Profile and ISER. It is evident in the blended and flexible delivery approach targeting a wider student community, as noted previously. In addition, UDL principles are applied to ensure that all course materials are accessible and inclusive. All modules embed various EDI themes, including ethics, and working with pupils or patients with special educational needs and disabilities (SEND). The education students confidently articulated what EDI meant to them based on their studies and the support from their co-operating teachers. They felt very prepared and equipped to teach diverse classes. This point was also conveyed by the co-operating teachers who concluded that the institution students were more confident on their placements than students from other higher education providers.

As previously discussed, the institution has improved its reasonable accommodation policy and processes to better support students with diverse needs, including those related to neurodiversity. In addition, all course materials are formatted in a variety of ways to ensure maximum accessibility, including closed captions, transcripts, recordings, and visuals. That said, one student commented that not all images were appropriate or clear, noting interestingly that the slides on Inclusivity included blurred images. The student contacted the institution, and the images were quickly updated. Although the institution outlined a robust process for module content creation to the review team, these instances show that this process has not always been as effective as intended. Accordingly, the institution should consider further ways to check the quality of all course content before it is shared with students.

Overall, the review team concluded that the institution provides students with a supportive learning, teaching and assessment experience, which enables them to excel. **The review team would like to commend the institution for their commitment to the publication of students’ research in a series of journal volumes, their comprehensive and excellent wraparound support for students, which enables them to excel and the Library Services team for their high level of responsiveness to student needs**.

That said, **the review team recommends that the institution improve the usability and interoperability of their systems to create a more supportive, streamlined, and efficient learning environment for students, and that the institution ensure a greater consistency of the placement supervision, balancing student preparation and classroom pedagogy**.

## Objective 3 – Self-evaluation, Monitoring and Review

The institution has a systematic process to monitor, review and report on their education, training and professional services. As previously noted, the HCQF sets out the principles and process for the monitoring review and evaluation of the institution's provision, factoring in extensive stakeholder engagement. The QQI Re-engagement Process in 2019 confirmed that the HCQF is integrated, comprehensive, coherent, and user friendly. Academic Board oversees all academic monitoring and reports directly to the Board of Directors. The internal academic quality assurance cycles and reporting requirements align with those set out externally by QQI, ESG and the various PSRBs. These include the ISER, Annual Quality Reports (AQRs), Programme Reviews and institutional reviews and self-reflection. A review of the ISER was provided earlier in the report.

**Annual Quality Reports and Programme Reviews**

The AQR is a comprehensive annual report covering various quality assurance processes for the year, best practices and quality enhancement activities, through case studies. The ISER states that the AQRs develop the institution’s short- and long-term plans across all their provision, including improvements to the VLE, IT infrastructure and resources. The review team acknowledged the thorough detail in the two sample AQRs. However, they observed that each AQR seemed like a standalone report and did not incorporate actions from the previous AQR. The institution should aim for greater continuity in reporting between successive AQRs. In addition, the review team observed that the AQRs were highly descriptive, offering more narrative content than data analysis.

As part of the process, the review team reviewed the two sample Programme Reviews. Each review included extensive internal and external stakeholder consultation, which is critical to any evaluation. This was also strongly reinforced throughout the meetings with staff, external stakeholders and students. **The review team commends the institution for their extensive engagement with internal and external stakeholders in their review processes**. That said, the Programme Reviews were very positive and descriptive in narrative, with further opportunity to provide more in-depth critique and evaluation.

The review team also observed that the institution does not incorporate formal benchmarking into its quality monitoring and evaluation processes. This was confirmed by senior managers. Formal benchmarks would enable the institution to evaluate its performance against more established standards, provide a more structured framework for accountability and better inform decision-making. Given the institution’s ambitions for delegated authority, **the review team recommends that the institution deploy a proactive evaluation process which facilitates the formal benchmarking of practice and outcomes**.

**Data Analytics**

The data used to monitor student performance is mainly through students’ satisfaction, engagement and academic progress. This well-structured data-collection investment could be further developed into an institutional data science-based policy. In the current environment, it is essential that higher education institutions embrace and consistently apply the principles of data analytics. Articulating a clear and cohesive approach to data analysis would enable the institution to make better informed decisions that truly align with their values, goals, and long-term vision. This commitment to data-driven insights, using dashboards, would empower Hibernia College to foster innovation, improve student outcomes, and continually refine their practices based on evidence, ensuring a sustainable and impactful future—one where decisions are informed by evidence and guide their commitment to excellence. Accordingly**, the review team recommends that the institution clearly articulate and consistently apply principles of data analysis to secure a more evidence-informed and sustainable future**.

Overall, the institution has an effective system for evaluating, monitoring, and reporting on the quality of their provision. The review team **commends** **the institution for their extensive engagement with internal and external stakeholders in their review processes**. That said, the review team **recommends that the institution deploy a proactive evaluation process which facilitates the formal benchmarking of practice and** **outcomes, and clearly articulates and consistently applies principles of data analysis to secure a more evidence-informed and sustainable future.**

# Section 4: Conclusions

The review team commends the dedication, enthusiasm, and positive engagement of Hibernia College colleagues in preparing for and hosting the main review visit for the CINNTE review. They recognise the substantial effort involved in the entire process, including engaging with internal and external stakeholders, forming cluster groups, writing various case studies, drafting the ISER, and finalising it through formal quality channels. The documentation was of exemplary standard, and the team greatly appreciated the prompt responses to requests for additional information.

The four-day review visit was well-organised, and the review team valued the active and open participation of staff, students, and external stakeholders during the panel meetings. All participants made valuable contributions, and the review team would like to extend their gratitude to the senior leadership team and all stakeholders for generously giving their time to this review and supporting their visit.

The review team noted the success of the institution since 2000, taking a leading role in flexible learning in Ireland. The institution has a coherent quality framework, HCQF, which aligns with QQI’s Statutory QA Guidelines, the ESG and PSRB standards. HCQF was effectively applied to the design and development of new programmes, as well as to the support, evaluation and enhancement of the quality of education. The institution provides an effective and comprehensive governance and management structure, with clear demarcation between the corporate and academic structures. Since joining the Folens Group in 2021, the institution has seized the opportunity to collaborate with another educational provider in the group, the Accountancy School, in the design and delivery of the newly approved MSc in Corporate Governance. Overall, the institution has an effective system for governance and management, teaching, learning, assessment, and self-monitoring and review, all within a strong, collaborative, and passionate community environment.

 As the institution approaches its 25th anniversary, the emerging sense of security, confidence, competence and courage to incrementally build a sustainable future is most impressive.

The next section of the report will cover the commendations and recommendations made by the review team.

**Findings, Commendations and Recommendations**

The review team **commends** the institution for:

**Introduction and Context**

1. fostering a clear culture of collaboration among administrative and academic staff, as well as with external stakeholders.

**ISER**

1. the exemplary design and accessibility of the review documentswhich demonstrate the institution’s high standards for inclusion, universal design, and visual appeal.

**Governance and Management**

1. the evident sense of loyalty, collaboration and community that speaks eloquently of their leadership and culture.

**Teaching, Learning and Assessment**

1. its commitment to the publication of students’ research in a series of journal volumes.
2. its comprehensive and excellent wraparound support for students, which enables them to excel.
3. the Library Services team high level of responsiveness to student needs.

**Self-evaluation, Monitoring and Review**

1. its extensive engagement with internal and external stakeholders in their review processes.

**Recommendations**

The review team **recommends** that the institution:

**Introduction and Context**

1. strengthen its vision to clearly reflect their ambition and evident impact on their alumni.

**Governance and Management**

1. increase student engagement across their governance structures.
2. develop a policy and associated practices that enables greater delegated autonomy in and across the organisation, built on the trust, collaboration and openness that they have established.
3. create a strategic workforce development plan to clarify and define roles and responsibilities in cross-functional processes.
4. establish a structured approach to career progression and performance management, with more protected time for research.

**Teaching, Learning and Assessment**

1. improve the usability and interoperability of their systems to create a more supportive, streamlined, and efficient learning environment for students.
2. ensure a greater consistency of the placement supervision, balancing student preparation and classroom pedagogy.

**Self-evaluation, Monitoring and Review**

1. deploy a proactive evaluation process which facilitates the formal benchmarking of practice and outcomes.
2. clearly articulate and consistently apply principles of data analysis to secure a more evidence-informed and sustainable future.

Finally, the review team would also like to thank colleagues at QQI for their support, training and organisation throughout the whole process.

# Section 5: Top 5 Commendations and Recommendations

**The review team commends the institution for**

1. fostering a clear culture of collaboration among administrative and academic staff, as well as with external stakeholders.
2. the exemplary design and accessibility of the review documentswhich demonstrate the institution’s high standards for inclusion, universal design, and visual appeal.
3. the evident sense of loyalty, collaboration and community that speaks eloquently of their leadership and culture.
4. its commitment to the publication of students’ research in a series of journal volumes.
5. its comprehensive and excellent wraparound support for students, which enables them to excel.

**The review team recommends that the institution**

1. clearly articulate and consistently apply principles of data analysis to secure a more evidence-informed and sustainable future.
2. deploy a proactive evaluation process which facilitates the formal benchmarking of practice and outcomes.
3. increase student engagement across its governance structures.
4. ensure a greater consistency of the placement supervision, balancing student preparation and classroom pedagogy.
5. strengthen its vision to clearly reflect its ambition and evident impact on its alumni.

# Section 6: Institutional Response

Hibernia College welcomes the publication of the CINNTE review panel’s comprehensive report, which comes at an important time for the College as we mark our 25th anniversary on the Irish higher education landscape. Hibernia College is a private independent provider of programmes in the areas of primary and post-primary initial teacher education (ITE), nurse education, early childhood education, special education, corporate governance, business data analytics and continuing professional development (CPD).

Initially focused on professional postgraduate teaching qualifications delivered through a blended model of delivery, the College has embraced advancements in educational technology to offer an accessible, academically rigorous education for all learners across a growing number of areas. Hibernia College seeks to build upon the first 25 years of its success by further integrating technological advancements into its learner-centred pedagogical ethos to meet the evolving access needs of those seeking professional qualifications. Participating in the CINNTE process is an important step forward on this path.

As the College continues to build on our achievements, it is heartening to see that the panel’s report acknowledges the core foundations and strengths upon which we continue to grow. This includes the culture of collaboration among all members of the College when engaging in projects, as well as a “clear sense of loyalty and community that speaks eloquently of their leadership and culture”. The panel observed that our “values shape decision-making processes, actions and behaviours” within the College, and we will remain faithful to this in our future development.

We appreciate the panel’s recommendation to place our staff at the heart of the College by developing a strategic workforce plan that aligns with our growth ambitions, while ensuring we retain the College’s core values as we strive to achieve our future goals and aspirations. Complementary to this is the development of a clear career structure to allow the College to retain those who contribute to its success. To begin this process, the College will enable professional recognition of our staff achievements in teaching and scholarship through centralised support for Advance HE membership. This will also include ensuring protected research time for staff. College successes in this area are increasing, as evidenced by obtaining external funding for projects and, as noted by the panel, our commitment to the production of journal volumes to capture our students' research — an endeavour supported by all and enabled by our own developing institutional repository.

The panel recognised and commended the College’s efforts to engage stakeholders as part of our review processes, and this commitment to meaningful external partnerships was clearly evidenced as a fundamental value of the College. To bolster this, and as part of the College’s strategy to achieve sustainable growth, the panel’s recommendation to further incorporate data analysis and benchmarking principles into our self-evaluation and review processes will be implemented. The addition of these approaches to our quality assurance and enhancement will aid in maintaining what the panel described as “a transparent system for quality assurance and accountability”. This approach will not only inform our ongoing review mechanisms but also add to our “robust processes for managing risks effectively” and complement the “thorough due diligence” process for all new programmes the College introduces.

The panel recommends that the College undertakes work to increase student engagement in the College’s governance structure. While the College acknowledges that its most productive engagements often occur on a small scale at the student and faculty level, it is committed to building on this approach, which fosters “extensive engagement”. To ensure sustainable and deeper, involvement in governance, the College will leverage insights from a recently completed research project by the Quality Assurance team as a foundation for this work. By furthering this ongoing effort, the College will meet the panel’s recommendation to incorporate the impact on its alumni into the College vision.

In refining our vision and building our future, the panel recommends that the College improves the interoperability of our systems, ensuring that our learning environment is streamlined. In doing so, we can continue to provide “comprehensive and excellent wraparound support for students”, which the panel commended. The College acknowledges the panel's recommendation for greater consistency in placement supervision and is committed to addressing this important area. We believe that our current approach to placement supervision is robust and effective, with feedback from the majority of students indicating high levels of satisfaction; however, we remain committed to continuous improvement and will review our practices to ensure that all students benefit from a consistently high-quality supervision experience. We will use the exemplars of excellent practice noted by the panel (for example, our library supports, which were noted to display a “high level of responsiveness to student needs”) to further enhance the supportive learning environment for students across all facets of College life.

The College is extremely grateful to the members of the CINNTE review team for their insightful comments and stimulating discussion. We feel the review team accurately captured our strengths, passion and vision for our future. Through their interactions with all members of the College, they have provided us with motivation to continue our work with a renewed vigour. This CINNTE review demonstrates the importance of sustained engagement in ongoing review, reflection and improvement. The College will continue to actively engage in both internal and external opportunities for quality assurance reviews and, in doing so, recognises the critical role of these in achieving our future vision.

We are deeply appreciative of the members of QQI’s Tertiary Education Monitoring and Review Unit (TEMRU), who have guided us on the CINNTE journey from the beginning. Their support and guidance throughout were vital in assisting us through the CINNTE process and ensuring that our first engagement with this significant quality assurance review was a positive experience. Finally, our most sincere thanks go to all members of the College, including our students (both past and present), who have engaged in this review and inspire us to continuously improve.

Paul Farrell

Chief Executive Officer

January 2025

# Appendices

## Appendix A: Terms of Reference Institutional Review of Independent and Private Providers

### Background and context for the review

These are the terms of reference for the review of independent and private providers, including those that intend to request the delegation of authority[[2]](#footnote-3) (DA) when it becomes available.

[QQI’s Core Quality Assurance Guidelines](https://www.qqi.ie/sites/default/files/2021-11/qg-1-core-statutory-quality-assurance-guidelines.pdf) have been established for all providers and collectively address the quality assurance responsibilities of those providers. The scope of the guidelines incorporates all education and training leading to QQI awards, other awards recognised in the National Framework of Qualifications (NFQ), or awards of other awarding, regulatory or statutory bodies. The guidelines outline that quality, and its assurance, are the primary responsibility of the provider and review and self-evaluation of quality is a fundamental element of the provider’s quality assurance system. [Sector specific QA guidelines](https://www.qqi.ie/sites/default/files/2021-11/qg-2-sector-specific-qa-guidelines-for-private-and-independent-providers.pdf) have also been published and address the more specific requirements of independent and private providers. Reengagement[[3]](#footnote-4) by those providers confirmed that quality assurance procedures were approved by QQI in accordance with the [Qualifications and Quality Assurance (Education and Training) Act 2012](https://www.irishstatutebook.ie/eli/2012/act/28/enacted/en/html).

A provider’s external quality assurance obligations include a statutory review of quality assurance by QQI. The reviews relate to QQI’s obligation under Section 27(b) of the 2012 Act (to establish procedures for the review by QQI of the effectiveness and implementation of a provider’s quality assurance procedures) and to section 34 of the 2012 Act (the external review by QQI of a provider’s quality assurance procedures).

QQI established its [Policy for Cyclical Review of Higher Education Institutions](https://www.qqi.ie/sites/default/files/2021-11/qp-16-policy-for-cyclical-review-of-higher-education-institutions.pdf) in 2016 which sets out the scope, purposes, criteria and model for cyclical review.

For independent and private providers, the diversity, range and size of organisations varies significantly, and some have been subject to rigorous oversight by QQI regarding their internal quality assurance systems for a lengthy and sustained period. The outcomes of the review will inform the future development of quality assurance and enhancement activities in independent and private institutions and across the sector.

For those institutions that are planning to seek DA, the external institutional review will constitute a first step towards an assessment by QQI.

### Purposes

QQI’s Policy for the Cyclical Review of Higher Education Institutions highlights five purposes for individual institutional reviews. These are set out in the table below.

|  |  |
| --- | --- |
| Purpose | Achieved and measured through |
| 1. | To encourage a quality culture and the enhancement of the learning environment and experience in institutions. | * emphasising the student and the student learning experience in reviews;
* providing a source of evidence of areas for improvement and areas for revision of policy and change and basing follow-up upon them;
* exploring innovative and effective practices and procedures;
* exploring quality as well as quality assurance in the institution;
* piloting a new thematic review methodology.
 |
| 2. | To provide feedback to institutions about institution-wide quality and the impact of mission, strategy, governance and management on quality and the overall effectiveness of their quality assurance. | * emphasising the ownership of quality and quality assurance at the level of the institution;
* pitching the review at a comprehensive institution-wide level;
* evaluating compliance with legislation, policy and standards;
* evaluating relative equivalence with institution-identified benchmarks and metrics;
* emphasising the improvement of quality assurance procedures.
 |
| 3. | To improve public confidence in the quality of independent and private providers by promoting transparency and public awareness. | * adhering to purposes, criteria and outcomes that are clear and transparent;
* publishing a periodic review cycle;
* publishing terms of reference;
* publishing the reports and outcomes of reviews in accessible locations and formats for different audiences;
* publishing brief, easy to read institutional quality profiles;
* evaluating, as part of the review, institutional reporting on quality and quality assurance, to ensure that it is transparent and accessible.
 |
| 4. | To support systems-level improvement of the quality of higher education. | * publication of periodic synoptic reports;
* ensuring that there is sufficient consistency in approach between similar institutions to allow for comparability and shared learning;
* publishing institutional quality profiles.
 |
| 5. | To encourage quality by using evidence-based, objective methods and advice. | * using the expertise of international, national and student peer reviewers who are independent of the institution;
* ensuring that findings are based on stated evidence;
* facilitating institutions to identify metrics and benchmarks for quality relevant to their own mission and context;
* promoting the identification and dissemination of examples of good practice and innovation.
 |

### Review Objectives, Outputs and Criteria

#### Summary of Objectives

The key objectives of the review are summarised under the following headings as follows:

1. Governance and Management – to review the effectiveness and comprehensiveness of the governance and management of quality throughout the organisation.
2. Teaching, Learning and Assessment – to evaluate the arrangements to ensure the quality of teaching, learning and assessment within the provider and a high-quality learning experience for all learners.
3. Self-Evaluation, Monitoring and Review – to evaluate the arrangements for the monitoring, review and evaluation of, and reporting on, the provider’s education, training and related services (including through third-party arrangements) and the quality assurance system and procedures underpinning them.

### Objectives (including indicative matters[[4]](#footnote-5) to be explored)

**Objective 1 – Governance and Quality Management**

To review the effectiveness and comprehensiveness of the governance and management of quality throughout the organisation.

This will include a review of:

* the oversight arrangements and transparent decision-making structures for the implementation of the QA procedures of the provider as set out in the Annual Quality Report (AQR).
* the enhancement of quality by the provider through governance, policy, and procedures.
* the flexibility and adaptability of quality assurance procedures and quality enhancement with the provider’s own mission and goals or targets for quality. To identify innovative and effective practices for quality enhancement.
* the effectiveness and implementation of procedures for access, transfer and progression.

The scope of this objective includes the procedures for reporting, governance and publication. It also incorporates an analysis of the ways in which the provider applies evidence-based approaches to support quality assurance processes, including quantitative analysis, evidence gathering and comparison. Consideration will also be given to the effectiveness of the AQR and ISER procedures within the institution.

The scope of this objective will also extend to the overarching procedures of the provider for assuring itself of the quality of its research activities, where applicable.

The governance and quality management systems would be expected to address:

|  |  |
| --- | --- |
| *Indicative matters to be explored* |  |
| 1. The provider’s mission and strategy
 | * Do the provider’s quality assurance arrangements contribute to the fulfilment of the mission and strategy? How?
* Is the learner experience consistent with this mission?
 |
| 1. Structures and terms of reference for the governance and management of quality assurance
 | * Are the arrangements sufficiently comprehensive and robust to ensure management and governance structures are proportionate and appropriate to support both the education and training activities and the general operations of the institution (e.g. separation of responsibilities, externality, stakeholder input)?
* Is governance visible and transparent?
* Has the provider ensured there are robust structures in place to identify, assess and manage risk? How effective are these arrangements?
* How does the provider ensure the system of governance protects the integrity of academic processes and has institutional wide oversight of its QA standards?
* Do the processes in place demonstrate the provider’s confidence in its capacity for critical self-evaluation and remediation?
 |
| 1. The documentation of quality assurance policy and procedures
 | * How effective are the arrangements for the development and approval of policies and procedures?
* Are policies and procedures coherent and comprehensive (i.e. do they incorporate all service types and awarding bodies?), robust and fit for purpose?
* Are policies and procedures systematically evaluated?
* Are there effective innovations in quality enhancement and assurance?
 |
| 1. Staff recruitment, management and development
 | * How effective are the QA procedures in maintaining and managing a resource base that sustainably supports (i) the quality assurance system and (ii) the programmes of education and training, research and related services offered by the provider?
* How effective are the QA procedures for the recruitment, management and development of staff in the context of all education and training activities and related services[[5]](#footnote-6) offered by the provider?
* How does the provider assure itself as to the competence of its staff?
* How are professional standards maintained and enhanced across the organisation?
* How are staff informed of developments impacting the organisation and how can they input to decision-making?
 |
| 1. Programme development, approval and submission for validation
 | * What arrangements are in place to ensure alignment of programme development activity with the provider’s mission and strategic goals, as well as learner needs?
* Are the arrangements for the approval and management of programme development robust, objective and transparent?
* What arrangements are in place to facilitate and oversee a comprehensive programme development process in advance of submission for validation (e.g. the conduct of research, inclusion of external expertise, writing learning outcomes, curricula etc., professional approval/accreditation)?
* How does the QA system support the development of programmes requiring professional approval / accreditation? What additional measures are in place to support these programmes?
* How effective are those arrangements in meeting and facilitating the standards required by professional, statutory or regulatory bodies (PSRBs), where relevant?
* What impact has increased demand for (i) the use of online technology for programme delivery and assessment and (ii) the provision of short, standalone programmes had on the provider’s resource base? How effective are the QA procedures in supporting these programmes’ developments?
* Are there effective structures in place to support and quality assure collaborative programme development with other providers, both national and transnational?
* How does the institution assure itself that work-integrated learning[[6]](#footnote-7) is fully embedded within the structure and provision of educational programmes so that the taught and work-integrated elements constitute a coherent whole?
* How effectively has the provider managed its responsibility of arranging independent evaluation reports under devolved responsibility (where applicable)?
* What has the provider learned from its experience of devolved responsibility?
 |
| 1. Access, transfer and progression (ATP)
 | * How does the provider measure and monitor access, transfer and progression systematically across all programmes and services?
* How effective are the processes and tools to collect, monitor and act on information on learner progression and completion rates?
* Are there flexible learning pathways, respecting and attending to the diversity of learners?
* Are admissions criteria and processes clear, transparent and fit for purpose?
* Are progression and recognition policies and processes in line with (i) the national policies and criteria for ATP and (ii) the National Framework of Qualifications (NFQ) and (iii) any appropriate European recognition principles, conventions and guidelines including the European Qualifications Framework (EQF)? Are these implemented on a consistent basis?
 |
| 1. Integrity and approval of learner results, including the operation and outcome of internal verification and external authentication processes
 | * What governance and oversight processes are in place to ensure the integrity of learner assessment and results data, which provide the basis for making and certifying QQI awards?
* Have the provider's QA procedures evolved to combat emergent threats to academic integrity? How adaptable are they to continued threats and/or change?
* How does the provider ensure that the processes in place provide for consistent decision-making and oversight across all services, centres, campuses?
 |
| 1. Information and data management
 | * What arrangements are in place to ensure that data are reliable and secure?
* How are data utilised as part of the quality assurance system?
* What arrangements are in place to ensure the integrity of learner records?
* How is compliance with data legislation ensured?
 |
| 1. Public information and communications
 | * Is information on the quality assurance system, procedures and activities publicly available and regularly updated?
* What arrangements are in place to ensure that published information in relation to all provision (including by centres) is clear, accurate, up to date and easily accessible?
 |
| 1. Other Parties involved in Education and Training
 | * How effective is the provider’s integrated system of quality assurance to support collaborative arrangements and partnerships with third parties?
* What arrangements are in place to ensure that the provider’s QA policies and procedures are consistent with European commitments as appropriate?
 |
| 1. Research, Enterprise and Innovation
 | * What arrangements are in place to ensure that the provider has an integrated system of quality assurance in place to underpin and support its research and enterprise activities?
* How effectively does research education and training engage with peer review mechanisms used for research funding and publication?
 |

**Objective 2 – TEACHING, LEARNING AND ASSESSMENT**

Evaluate the arrangements to ensure the quality of teaching, learning and assessment within the provider and a high-quality learning experience for all learners. These will include:

|  |  |
| --- | --- |
| *Indicative matters to be explored* |  |
| 1. The learning environment
 | * Is the quality of the learning experience monitored? How?
* Are modes of delivery and pedagogical methods evaluated to ensure that they meet the needs of learners? How?
* How is the quality of the learning experience of learners engaged in work integrated activities assured?
* Is there evidence of enhancement in teaching and learning?
 |
| 1. Assessment of learners
 | * How is the integrity, consistency and security of assessment instruments, methodologies, procedures and records ensured – including in respect of recognition of prior learning?
* How does the provider assure that the standards regarding the assessment of learners engaged in work integrated learning are maintained?
* Do learners in all settings have a clear understanding of how and why they are assessed and are they given feedback on assessment?
* How is the feedback analysis used to further enhance assessment methodologies?
* Can the QA procedures in place support the management, integrity and retention of learner results data which provide the basis for making and certifying QQI awards?
 |
| 1. Supports for learners
 | * How are support services planned and monitored to ensure that they meet the needs of learners?
* How does the provider ensure consistency in the availability of appropriate supports to all learners across different settings, including work integrated learning?
* Are learners aware of the existence of supports?
 |

**Objective 3 – SELF-EVALUATION, MONITORING & REVIEW**

Evaluate the arrangements for the monitoring, review and evaluation of, and reporting on, the provider’s education, training and related services (including through third-party arrangements) and the quality assurance system and procedures underpinning them. It will also reflect on how these processes are utilised to complete the quality cycle through the identification and promotion of effective practice and by addressing areas for improvement. This will include:

|  |  |
| --- | --- |
| Indicative matters to be explored |  |
| 1. Self-evaluation, monitoring and review
 | * What are the processes for quality assurance planning, monitoring and reporting?
* Are the processes for self-evaluation, monitoring and review (including the self-evaluation report undertaken for the institutional review comprehensive, inclusive and evidence-based?
* Is there evidence of strategic analysis and follow-up of the outcome of internal quality assurance reviews and monitoring (e.g. review reports, external examiner reports, learner feedback reports etc.)?
* How is quality promoted and enhanced?
 |
| 1. Programme monitoring and review
 | * Are mechanisms for periodic review and revalidation of programmes comprehensive, inclusive and robust?
* How are programme delivery and outcomes monitored across multiple campuses (including collection of feedback from learners/stakeholders)?
* How are the activities and processes associated with work integrated learning monitored?
* Is there evidence that the outcome of programme monitoring and review informs programme modification and enhancement?
* Are the outputs of programme monitoring and review considered on a strategic basis by the provider’s governance bodies to inform decision-making?
 |
| 1. Oversight, monitoring and review of relationships with external/ third parties and other collaborative partners.
 | * How does the provider ensure the suitability of the external parties with which it engages?
* Is the nature of the arrangements with each external party published?
* Is the effectiveness of these arrangements monitored and reviewed through provider governance?
 |

### Review Outputs

In respect of each dimension above, the review will:

* evaluate the effectiveness of the provider’s quality assurance procedures for the purposes of establishing, ascertaining, maintaining and improving the quality of higher education, training, and related services;
* identify perceived gaps in the internal quality assurance procedures and the appropriateness, competence, prioritisation and timeliness of planned measures to address them in the context of the provider’s current stage of development; and
* explore achievements and innovations in quality assurance and in the enhancement of teaching and learning.

Following consideration of the matters above, the review report will include specific and high-level qualitative statements on:

* the overall effectiveness of the quality assurance procedures of the provider and the extent of their implementation and enhancement.
* the extent to which the quality assurance procedures can be considered compliant with the ESG.
* the extent to which existing quality assurance procedures adhere to QQI’s Quality Assurance guidelines and policies (as listed in section 3.4).
* identified effective practice and recommendations for further improvement. (These may also be accompanied by a range of ancillary statements.)

The review report may also include recommendations for conditions in reference to each of the objectives.

#### Criteria

The implementation and effectiveness of the provider’s quality assurance arrangements will be considered in the context of the following:

* The provider’s own mission and vision, including objectives and goals for quality assurance.
* [QQI Core Quality Assurance Guidelines](https://www.qqi.ie/sites/default/files/2021-11/qg-1-core-statutory-quality-assurance-guidelines.pdf)
* [QQI Sector Specific Quality Assurance Guidelines for Independent and Private Providers](https://www.qqi.ie/sites/default/files/2021-11/qg-2-sector-specific-qa-guidelines-for-private-and-independent-providers.pdf)
* [Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) 2015](https://www.enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf)
* [Section 28, Qualifications and Quality Assurance (Education and Training) Act 2012](https://www.irishstatutebook.ie/eli/2012/act/28/section/28/enacted/en/html#sec28)
* [QQI’s Policy Restatement and Criteria for Access, Transfer and Progression in Relation to Learners for Providers of Further and Higher Education and Training](https://www.qqi.ie/sites/default/files/media/file-uploads/ATP%20Policy%20Restatement%20FINAL%202018.pdf)

Where appropriate and indicated by the provider, additional QQI guidelines may be incorporated:

* + [QQI Topic Specific Quality Assurance Guidelines for Research Degree Programmes](https://www.qqi.ie/sites/default/files/2021-11/qg-6-topic-specific-qa-guidelines-for-research-degree-programmes.pdf)
	+ [National Framework for Doctoral Education](https://hea.ie/assets/uploads/2017/04/national_framework_for_doctoral_education_0.pdf)
	+ [Ireland’s Framework of Good Practice for Research Degree Programmes](https://www.qqi.ie/sites/default/files/media/file-uploads/Ireland%E2%80%99s%20Framework%20of%20Good%20Practice%20Research%20Degree%20Programmes.pdf)

### The Review Process

The primary source for the review process is the Cyclical Review Handbook for Independent and Private Providers.

#### Review Team Profile

QQI will appoint the review team to conduct the institutional review. Review teams are composed of peer reviewers who are learners; leaders and staff from comparable providers; and external representatives including employer and civic representatives.

The size of the team and the duration of their visit will depend on the size and complexity of the independent and private provider.

QQI will identify an appropriate team of reviewers for each review who are independent of the independent and private provider with the appropriate skills and experience required to perform their tasks. Collectively, the review team will have knowledge of and expertise in:

* Higher education quality assurance processes;
* Governance;
* The advancement of teaching, learning and assessment methodologies;
* Managing research within or across institutions (where applicable);
* International reviews; and
* European standards in higher education and qualification frameworks, e.g. ESG, EQF and Bologna process; and

The team will include international representatives and QQI will seek to ensure diversity among the reviewers. The provider will have an opportunity to comment on the proposed composition of its review team to ensure there are no conflicts of interest. QQI has final approval over the composition of each review team. The roles and responsibilities[[7]](#footnote-8) of the review team members are as follows:

**Chair:**

The chair is a full member and leader of the review ream. Their role is to provide tactical leadership and to ensure that the work of the team is conducted in a professional, impartial and fair manner, and in compliance with the Terms of Reference. The chair’s functions include:

* Leading the conduct of the review and ensuring that proceedings remain focused.
* Organising the work of reviewers with the support of the Coordinating Reviewer.
* Fostering open and respectful exchanges of opinion and ensuring that the views of all participants are valued and considered.
* Facilitating the emergence of evidence-based team decisions (ideally based on consensus).
* Contributing to, and overseeing the production of, the review report within the timeline agreed with QQI, approving amendments or convening additional meetings if required.

**Coordinating Reviewer:**

The coordinating reviewer is a full member of the team and secretary of the review team. Their role is to capture the team’s deliberations and decisions during the proceedings and express them clearly and accurately in the team report. It is vital that the coordinating reviewer ensures that sufficient evidence is provided in the report to support the team’s recommendations. The role of the coordinating reviewer includes:

* Acting as the liaison between the review team and QQI; and, during the main review visit, between the review team and the institutional review co-ordinator.
* Maintaining records of discussions during the planning and main review visits.
* Coordinating the drafting of the review report in consultation with the team members and under the direction of the chair within the timeline agreed with QQI.

**Student Reviewer:**

The student reviewer is a full member of the review team and participates in all aspects of the review. The student reviewer represents the ‘voice of the learner’ and brings a valuable perspective which can inform and enrich discussions. They may have a particular focus on the learner experience and topics of interest might include, for example:

* Academic matters such as the curriculum, assessment, teaching and learning;
* Support services, such as library, IT, sports, societies, welfare and careers services etc.; and
* Learner input into decision-making and involvement in quality assurance.

**External Reviewer(s):**

The external representative reviewer is an equal member of the team and takes part in all aspects of review. The external representative may bring knowledge and expertise of the Irish Higher Education sector more widely and/or contribute to the ‘third mission’ perspective (i.e., represents the economic and social mission of the institution) which can inform and enrich discussions.

By way of example, they may have specialist knowledge of some of the following areas:

* External expectations of graduate skills and competencies;
* Issues and trends in industry or the wider community;
* Responsibilities of independent and private providers of education and training in the Irish HE sector;
* The external perception of the institution and its activities;
* Pedagogy, programme architecture, skills development, teaching, learning and assessment and related quality assurance activities.
* Knowledge of the area identified in any specific enhancement themes for the review;
* Quality assurance practices in other sectors; and
* Good management practices in other sectors.

**All Review Team members:**

The role of all review team members includes:

* Preparing for the review by reading and critically evaluating all written material.
* Investigating and testing claims made in the institutional self-evaluation report (ISER) and other material during the main review visit by speaking to a range of staff, learners and stakeholders.
* Contributing to the production of the review report, ensuring that their particular perspective and voice (i.e. learner, industry, stakeholder, international etc.) forms an integral part of the review.

#### Review Process and Timelines

The key steps in the review process with indicative timelines are outlined below. Specific dates for each provider review will be outlined by QQI in accordance with the published Review Schedule.

|  |  |  |  |
| --- | --- | --- | --- |
| **Step**  |  **Action** | **Timeframe** | **Outcome** |
| Preparation –Terms of Reference (ToR) | Consultation and confirmation of ToR with providers | 9 months before the main review visit (MRV) | Publish ToR |
| Preparation – Institutional Profile(IP) | Preparation of an institutional Profile by each provider (e.g. outlining mission; strategic objectives; local context; data on staff profiles; recent developments; key challenges). | 6 months before the MRV | Publish IP |
| Preparation –Review Team(RT) | Appointment of an expert review teamConsultation with the provider on any possible conflicts of interest | 6-9 months before the MRV | Publish RT Profile |
| Self-evaluation –Institutional Self-Evaluation Report (ISER) | Forwarding to QQI of the institutional self-evaluation report (ISER) and a repository of additional information (optional). | min. 12 weeks before the MRV | Published ISER (optional) |
| Desk review  | Desk review of the ISER by the team  | At least 1 week before the Initial Meeting | ISER initial response provided |
| RT Briefing (via MS Teams) – 2 sessions (half days)  | Session 1: An initial meeting of the review team, including introductions, reviewer training and briefing.Session 2: RT discussion of preliminary impressions and identification of any additional documentation required. | c. 5 weeks after the ISER, c. 7 weeks before the MRV | RT training and briefing is complete. RT identify key themes and any additional documents required. |
| Planning visit (via MS Teams) | A visit to the institution by the chair and coordinating reviewer to receive information about the ISER process, discuss the schedule for the main review visit and discuss additional documentation requests. | c. 5 weeks after the ISER, c. 7 weeks before the MRV | An agreed note of the planning visit. |
| Main Review Visit | To receive and consider evidence on the ways in which the institution has performed in respect of the objectives and criteria set out in the Terms of Reference  | 12 weeks after the receipt of ISER | A short preliminary oral report to the institution |
| Report – drafting stages | Preparation of a draft report by the teamDraft report sent to the institution for a check of factual accuracyInstitution responds with any factual accuracy correctionsPreparation of a final report  | 6-8 weeks after the MRV12 weeks after the MRV2 weeks after receipt of draft report2 weeks after factual accuracy response | QQI review report |
| Report – institutional response | Preparation of an institutional response | 2 weeks after final report | Institutional response |
| Outcomes | QQI considers findings of review report and the institutional response through governance processes.Review report is published with institutional response. | Next available meeting of QQI Awards and Reviews Committee (ARC) | Formal decision about the effectiveness of QA proceduresIn some cases, directions to the institution and a schedule for their implementation |
|  | Preparation of QQI quality profile | 2 weeks after decision | Quality profile published |
| The form of the follow-up will be determined by whether ‘directions’ are issued to the institution. In general, where directions are issued the follow-up period will be sooner and more specific actions may be required as part of the direction. |
| Follow-Up | Preparation of an institutional implementation plan by provider | 3 months after publication of report | Publication of the implementation plan by the institution |
|  | One-year follow-up report to QQI for noting. This and subsequent follow-up may be integrated into annual reports to QQI | 1 year after the MRV | Publication of the follow-up report by QQI and the institution |
|  | Continuous reporting and dialogue on follow-up through the annual institutional reporting and dialogue process | Continuous | Annual Quality ReportDialogue meeting notes |

## Appendix B: Main Review Visit Schedule

**Day 1: Monday 6 October 2024**

|  |  |  |  |
| --- | --- | --- | --- |
| **Time (GMT)** | **Group** | **Role** | **Purpose** |
| 09:00 - 09:30 | Institutional Coordinator and Registrar |   | *Preparatory meeting for Day 1* |
| 09:30 - 10:00 | Private Review Team Meeting |   |   |
| 10:00 - 10:30 | 1. Chief Executive Officer, Academic Dean and Registrar |  | *Private Meeting to discuss institutional mission, strategic plan, including roles and responsibilities for QA and enhancement.* |
|  |
|  |
|  |
| 10:35 - 11:15 | 2. Senior Management Team  | * CEO
* Academic Dean
* Director of IT
* Head of DLD
* CFO
* Registrar
 | *Discuss institutional mission, strategic plan, including roles and responsibilities for QA and enhancement.* |
| 11:15 - 11.45 | Private Review Team Meeting |   |   |
| 11.45 - 12.25 | 3. Board of Directors | * Chair, Board of Directors
* Board Member
* Board Member
* Board Member
* Board Member
* Secretary, Board of Directors
 | *Discuss strategic management and QA structures, including arrangements for QA across the institutions and within schools/ departments.* |
| 12:25 - 12:35 | Comfort Break |  |  |
| 12:35 - 13:15 | 4. Academic Board | * Chair
* Vice Chair
* Secretary
* Staff Member
* Staff Member
* Faculty Member
* Faculty Member
* Staff Member
 | *Discuss mechanisms employed by the Academic Council for monitoring QA & QE and how it ensures effectiveness.* |
| 13:15 - 14:15 | Lunch |   |   |
| 14:15 - 14:45 | 5. VLE Demonstration  | * Head of DLD
 | *To provide review team with a short demonstration and overview of the VLE system in advance of meeting the students.* |
|  |
|  |
|  |
| 14:45 - 14:55 | Comfort Break |  |  |
| 14:55 - 15:45 | 6. Students (both UG and PG) | * MAISE
* PMEP
 | *Discussion with students (both UG and PG) from across the institution, to include representation from different years, disciplines and service users.* |
| 15:45 - 16:10 | Private Review Team Meeting  |   |
| 16:10 - 16:40 | 7. Student Representatives (class reps) | * PMEP Spring 23
* PMEPP Spring 24
* PMEP Autumn 23
* PMEPP Autumn 23
* MAISE
* Nursing Stage 2 (UG)
* Nursing Stage 3 (UG)
 | *Discussion with class reps from across the institution, to include representation from different years, disciplines and service users.* |
| 16:45 - 17:25 | 8. Graduate / Alumni Representatives |  * PMEP graduates
* PMEPP graduates

  | *Discuss student journey while in Hibernia and experience of transitioning into the workforce.*  |
| 17:25 - 17:45 | Private Review Team Meeting  |   |

**Day 2: Tuesday 7 October 2024**

|  |  |  |  |
| --- | --- | --- | --- |
| **Time (GMT)** | **Group** | **Role** | **Purpose** |
| 09:00 - 09:10 | Institutional Coordinator |  | *Preparatory meeting for Day 2* |
| 09:15 - 9:45 | 9. Members of the ISER development group | * Registrar (Chair)
* Academic Dean
* Digital Design Researcher
* Quality, Enhancement and Registration Manager
* Academic Integrity and Assessment Manager
* Digital Design Lead

  | *Discussion on experience of implementing quality assurance throughout the institution.* |
| 9:45 - 9:55 | Comfort Break |  |  |
| 9:55 - 11.25 | 10. Subcommittees of Academic BoardTo include:*(i) Teaching, Learning & Assessment (TLA)(ii) Ethics Committee(iii) Research Committee(iv) Programme Boards* | * Chair of TLA
* Member of Research Committee/Programme Board
* Member of Programme Board
* Member of TLA/Programme Board Member
* Member of Research Committee
* Member of Programme Board and Ethics Committee
* Member of Programme Board
* Member of Programme Board
* Member of Research Ethics Committee/ Programme Board Member
* Chair of Programme Board
 | *Discuss role of the relevant sub-committee(s) in the governance of QA procedures.* |
| 11:25 - 11:55 | Private Review Team Meeting  |   |
| 11:55 - 12:30 | 11. Academic Dean, Programme Directors  | * Programme Director, PME Post-Primary (PMEPP)
* Programme Director, PME Primary (PMEP)
* Academic Dean
* Registrar
* Deputy Programme Director, Nursing
* Programme Director, MA Inclusive and Special Education (MAISE)
* Academic Integrity and Assessment Manager
* School Placement Officer
 | *Discuss how the institution monitors the effectiveness of its QA/QE processes and structures and how it ensures the outcomes are enacted in an appropriate, consistent and timely manner.* |
| 12:30 - 13:15 | 12. Academic Faculty: Teaching staff | * PMEP Faculty Member
* PMEPP Faculty Member
* PMEPP Faculty Member
* Nursing Faculty Member
* MAISE Faculty Member
* PMEP Faculty Member
 | *Discuss how the institution monitors the effectiveness of its QA/QE processes and structures and how it ensures the outcomes are enacted in an appropriate, consistent and timely manner.* |
| 13:15 - 14:15 | Lunch |   |   |
| 14:15 - 14:55 | 13. Academic Faculty: Adjunct staff | * Adjunct Faculty - Nursing CPC
* Adjunct Faculty - PMEP - SPT
* Adjunct Faculty - PMEPP - SPT
* Adjunct Faculty - PMEP - Tutor
* Adjunct Faculty - PMEPP - Tutor
 | *To discuss involvement of Adjunct Faculty in the QA and enhancement of workplace integrated learning and assessment.* |
| 15:00 - 15:45 | 14. Managers and Officers of Student Support Services, including staff responsible for ATP (e.g. Careers Officer, Student Experience Manager, Counsellors)  | * Head of Student Affairs
* Programme Administrators Team Lead
* Academic Integrity and Assessment Manager
* Academic Integrity Champion
* Admissions Team Member
* Library
* Programme and Allocations Officer
* Programme Administrator
* IT Support
 | *To discuss involvement in QA and enhancement.* |
| 15:45 - 16:15 | Private Review Team Meeting  |   |
| 16:15 - 17:00 | 15. External Stakeholders:School principals, co-operating teachers and clinically active nurses. | * Principal PMEP Host School
* Principal PMEPP Host School
* Co-operating Teacher, PMEP Host School
* Co-operating Teacher - PMEPP Host School
* Clinical Placement Coordinator, Nursing
* Preceptor, Nursing
 | *To discuss arrangements re QA with PSRBs and other industry and community partners.* |
| 17:00 - 17:30 | Private Review Team Meeting  |   |

**Day 3: Wednesday 8 October 2024**

|  |  |  |  |
| --- | --- | --- | --- |
| **Time (GMT)** | **Group** | **Role** | **Purpose** |
| 09:00 - 09:20 | Institutional Coordinator |  | *Preparatory meeting for Day 3* |
| 09:25 - 10:05 | 16. Third party partnerships and collaborations (i.e. academic national and transnational) | * Programme Director, Corporate Governance
* Programme Director, MASIE
* Programme Faculty, Corporate Governance
* QA Manager, ICEPE/MAISE Programme

  | *To discuss arrangements re QA/QE including monitoring with collaborative providers and partners in industry.* |
| 10:05 - 10:15 | Comfort Break |  |  |
| 10:15 - 11:05 | 17. Management and Staff involved in the design and delivery of online content and the virtual learning environment | * Head, DLD
* Digital Learning Manager
* Digital Design Manager
* Research and Development Lead
* Content Editor, Team Lead
* Learning Technologist
 | *Session on the virtual learning environment, its role within the institution, its role in the student learning experience, and the QA processes which support it.* |
| 11:05 - 11:30 | Private Review Team Meeting  |  |
| 11:30 - 12:10 | 18. Management and Staff involved in the maintenance and delivery of the IT infrastructure | * Director, IT
* IT Systems Manager
* Technical Support Teal Lead
* Web Applications Analyst
 | *To discuss involvement and role of the IT infrastructure in the student learning experience and functioning of the College.*  |
| 12:10 - 12:20 | Comfort Break |  |  |
| 12:20 - 13:05 | 19. Management and Staff involved in HR and Staff Development, Careers, and the development and management of our Adjunct Faculty | * HR Manager
* Faculty Manager
* SPT Training
* Adjunct Faculty Training
* Adjunct Faculty Training
* DLD/Technology Development for Training

  | *To discuss relevant procedures that support QA & QE among all staff, including the development and training of Adjunct Faculty.* |
| 13.05 - 14.05 | Lunch |   |  |
| 14:05 - 14:45 | 20. Management and Staff involved in the marketing, financial and corporate management of the College | * CEO
* Financial Controller, Finance
* CFO
* Director of Marketing and Business Development
 | *To consider funding financial, corporate and marketing issues to further develop the College, support teaching, and enhance the student experience.* |
| 14:45 - 16:30 | Private Review Team Meeting  |   |

**Day 4: Thursday, 9 October 2024**

|  |  |  |  |
| --- | --- | --- | --- |
| **Time (GMT)** | **Session** | **Group** | **Purpose** |
| 09:00 - 11:00 | Private Review Team Meeting  |   |
| 10:30 - 11:00 | QQI meets with Institutional Coordinator |  | *To gather feedback* |
| 11:00 - 11:30 | QQI meets with Review Team |  | *To discuss team's key findings* |
| 11:30 – 12:00 | Private Review Team Meeting |  |
| 12:00 – 12.30 | Meeting with CEO, Academic Dean and Registrar |    |  *To brief institution on team's key findings and recommendations*  |
| 12:35 – 13:00 | Oral Report | CEO, Senior Management Team and invited Hibernia College representatives |  |
| 13:00 – 14:00 | Lunch reception  |   |
| 14:00 - 17:00 | Private Review Team Meeting  | *Preparation for drafting report* |

# Glossary

|  |  |
| --- | --- |
| **Acronym/Term** | **Definition/meaning** |
| **ACCA** | Association of Chartered Certified Accountants |
| **AI**  | Artificial Intelligence |
| **AICN** | Academic Integrity Champions Network |
| **AQR** | Annual Quality Report |
| **ATP** | Access, Transfer and Progression |
| **CINNTE** | Name/branding for QQI’s first external HEI review cycle |
| **CPD** | Continuous/Continuing Professional Development |
| **DA** | Delegated Authority |
| **EDI** | Equality, Diversity and Inclusion  |
| **EMT** | Executive Management Team |
| **EQF** | European Qualifications Framework |
| **ESG (2015)** | Standards and Guidelines for Quality Assurance in the European Higher Education Area  |
| **Gaeltacht** | Where learners receive an immersive experience while learning the Irish language in an area where it is the predominant spoken language  |
| **GenAI** | Generative AI (capable of generating text, images, videos, or other data using generative models, in response to prompts) |
| **HCQF** | Hibernia College Quality Framework |
| **HEI** | Higher Education Institution |
| **IR** | Institutional Review |
| **IRSC** | Institutional Review Steering Committee |
| **ISER** | Institutional Self-Evaluation Report |
| **IT** | Information Technology |
| **MRV** | Main Review Visit |
| **MSc** | Master of Science |
| **NFQ** | National Framework of Qualifications |
| **NMBI** | Nursing and Midwifery Board of Ireland |
| **PME** | Professional Master of Education  |
| **PSRBs** | Professional, Statutory and Regulatory and Bodies |
| **QQI** | Quality and Qualifications Ireland |
| **RT** | Review Team |
| **SALO** | Student Allocation Liaison Officer |
| **SEC** | Student Engagement Committee |
| **SEND** | Special Educational Needs and Disabilities |
| **SOPs** | Standard Operating Procedures |
| **SWOT** | Strengths, Weakness, Opportunities & Strengths |
| **TREORAÍ** | Reflects the nature of the role of a teacher who supports and guides the student teacher during his/her school placement experience |
| **UDL** | Universal Design for Learning  |
| **VLE** | Virtual Learning Environment |
| **WIL** | Work-Integrated Learning |

1. The process for DA requires a statutory instrument detailing the ministerial regulations of the conditions to be met by institutions seeking DA. [↑](#footnote-ref-2)
2. The delegation of authority (DA) to make awards is the legal mechanism to recognise a provider’s growing autonomy and capacity to take on responsibility for academic quality. DA enables a provider to establish its own award brand and affords it autonomy to establish programmes, or classes of programmes of education and training, which lead to awards that are awards in the National Framework of Qualifications (NFQ). DA is a recognition by QQI that a provider has the rigour, independence and consistency in its programme approval processes and can be entrusted with the responsibility to make reliable decisions regarding the standards of programmes subject to validation and revalidation. [↑](#footnote-ref-3)
3. Re-engagement was a one-off process for legacy providers to establish: (i) Quality assurance procedures approved by QQI in accordance with either Section 29 or Section 30 of the 2012 Act as relevant; and (ii) The provider’s scope of provision i.e. the range of programmes for which quality assurance procedures and organisational capacity are deemed appropriate and within which future programme applications for validation can be made. [↑](#footnote-ref-4)
4. The indicative matters highlighted for each objective do not comprise the full range of areas that could be explored during the review. The review team has the capacity to expand this within the scope of QQI’s Statutory Core QA Guidelines and sector specific guidelines as appropriate. [↑](#footnote-ref-5)
5. This includes those education and training activities leading to awards of awarding bodies other than QQI, such as professional bodies and local provider provision, so that the overall commitments of staff are taken into account by the provider. [↑](#footnote-ref-6)
6. Work-integrated learning (WIL) may take place in a variety of contexts, including but not limited to, practice placement, apprenticeship, applied learning and profession-oriented further and higher education where WIL elements are integral to an educational programme leading to a qualification in the NFQ. [↑](#footnote-ref-7)
7. Further detail on the conduct of reviewers is outlined in [QQI’s Roles, Responsibilities and Code of Conduct for Reviewers and Evaluators](https://www.qqi.ie/sites/default/files/2021-12/qqi-roles-responsibilities-and-code-of-conduct_0.pdf). [↑](#footnote-ref-8)