

## SECTION 2: DOCUMENTED APPROACH TO QUALITY ASSURANCE

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### Supporting Documents:

1. **Standards and Guidelines for Quality Assurance in the European Higher Education Area – ESG, 2015.**
2. **Policy on Quality Assurance Guidelines – QQI, April 2016.**
3. **Statutory Quality Assurance Guidelines developed by QQI for use by all Providers – QQI, April 2016.**
4. **Statutory Quality Assurance Guidelines developed by QQI for Independent/Private Providers coming to QQI on a Voluntary Basis – QQI, April 2016.**
5. **Topic Specific Statutory Quality Assurance Guidelines developed by QQI for Providers of Blended Learning Programmes – QQI, March 2018.**
6. **Re-engagement with QQI Policy and Criteria for Renewed Access to QQI Validation for Voluntary Providers of Higher Education and Training – QQI, June 2014.**
7. **Academic Council and Sub-Committee Minutes**
8. **Annual QA Reports**
9. **Module/Tutor/Student/Graduate/Stakeholder/End-of-Year Surveys**

### 2.1 Documented Policies and Procedures

This QA document (QuAD), incorporating key policies and procedures is a 'living document' that is updated annually by the College. The progression and development of the QA approach and associated documentation from 2003 to date is outlined at the start of this document (pp. iii-vii). Section 1 above details the review process undertaken in 2018.

In College, the implementation of the QA policies and procedures is the responsibility of all OTC staff and associate staff. The updating of the QA document (manual) is undertaken by the Head of Quality & Academic Affairs and ratified by the Academic Council.

The Open Training College uses policies, procedures and guidelines to inform and structure operational activity, developments and strategic planning with regard to QA. Some areas operate under all three component(s) encompassing a policy, procedure(s) and guideline(s). Other aspects of College activity operate under procedures and some under guidelines. This operational basis is subject to ongoing review and development. The current re-engagement process and associated

review of QA has generated a number of new policies and procedures and identified a body of work that will be ongoing with regard to additional policies, procedures and guidelines.

No.	Policy Title	Procedure/Guidelines/ Protocol/Code	Notes	Action
1801	Policy on Policy Development	Guidelines on Policy Development	New policy - 2018	Embedded through re-engagement process
1802	Protection of Enrolled Learners (PEL) Policy	+ Procedures	New policy – 2018: Developed from existing procedures	Embedded
1803	Social Media Policy	No procedures	Updated and Expanded policy-2018: Developed from earlier policy and existing procedures	To embed
1804	Recognition of Prior Learning (RPL) Policy	+Procedures	Updated and Expanded policy-2018: Developed from earlier policy and existing procedures	Embedded – now includes fuller expression of procedure
1805	Academic Awards Policy	Conferring Procedure	Updated and Expanded policy-2018: Developed from earlier policy and existing procedures	Embedded – new expression
1806	Exit Award Policy		New policy - 2018	Embedded
1807	Student Learning Support and Pastoral Care Policy	Guide to Learning Support and Pastoral Care Services	Updated policy – 2018: Developed from earlier policy and existing procedures	Embedded – new expression
1808	General Data Protection Regulation (GDPR) Policy	Procedures for Data Protection	New policy- 2018 Supported by existing procedures and guidelines	To embed: Action plan to be fully implemented
1809	Risk Management Policy	Risk Management Process (+Appendices – Use of) = Procedures	New policy- 2018 - Developed from earlier existing procedures	To embed – Additional training for Managers
1701	Plagiarism Policy	+ Procedures	Existing policy - updated	Embedded
1702	Equality Policy	Admission procedures	Existing policy - updated	Embedded
1703	Complaints Policy	+ Procedures	Existing policy - updated	Embedded
1705	CPD Policy	Procedures for Identifying CPD Needs	Existing policy - updated	Embedded
1706	Collaborative Policy	+ Procedures	Approved 2016 - QQI	Embedded
1707	Word Count Policy	Admin. procedures	Existing policy - updated	Embedded, SHB
1708	Acceptable Usage of Elearning Environment Policy	Admin. procedures	Existing policy - updated	Embedded, QuAD + SHB
1710	Student Fees Policy	Admin. procedures	Existing policy - update	Embedded
1711	Home Work Policy for Student Based Work	Working Arrangements/Guidelines	Existing policy - updated	Embedded – Staff handbook
1712	Supervision Policy	Guidelines for Supervision	Existing policy - updated	Embedded – to be developed further for 2019 CORU
1713	Workshop attendance Policy	Admin. procedures	Existing policy - updated	Embedded, SHB

1714	Verification of Tutor Qualification Policy	+ Procedures	Existing policy - updated	Embedded
Pr001		3.1 Procedures for the Design and Approval of New Programmes	Existing procedure - updated	Embedded
Pr002		3.2.1 Equality of Access to programmes and services	Existing - Admissions Procedures	Embedded
Pr003		Entry procedures and criteria for the programme	Existing - Admissions Procedures	Embedded
Pr004		3.4 Procedures for Programme Review, Validation and Revalidation of Programmes and Awards	Existing procedure - updated	Embedded
Pr005		6.4.2 Cross-Marking Procedures	Existing procedure - updated	Embedded
Pr006		6.4.3 Procedures for Corrective Action	Existing procedure - updated	Embedded
Pr007		6.4.4 Procedures for External Examination	Existing procedure - updated	Embedded
Pr008		Student handbook - Section 6: Assessment procedures	Existing procedures - updated	Embedded
Pr009		Procedures for the Provision of Supports to Students with Disabilities and Specific Learning Difficulties	Existing procedures - updated	Embedded
C001		Code of Conduct for OTC staff	Existing code – updated	Embedded
C002		Workshop etiquette (Student Code)	Existing code – updated	Embedded – Student handbook
C003		SMH Code of Conduct for employees	Existing code	Embedded - SMH
SMH001	Research Ethics Policy	+Procedures	Existing policy	Embedded
SMH002	Freelance Contracting Policy	+Procedures	Existing policy	Embedded
SMH003	Safety Statement	Policies and Procedures	Existing policy	Embedded
SMH004	Recruitment and Selection	+Procedures	Employee Handbook: SMH	Embedded
SMH005	Probation	+Procedures	Employee Handbook: SMH	Embedded
SMH006	Disciplinary	+Procedures	Dignity at work: SMH Employee Handbook	Embedded
SMH007	Grievance	+Procedures	Dignity at work: SMH Employee Handbook	Embedded

Table 3: Policies and Procedures

\*This table contains selected St. Michael's House policies only. \*\*A full outline of Administration Procedures for OTC is held and regularly updated internally in *QA Review of Administration Function* (OTC. V.2020).

## **Definitions**

In the QA system the following definitions are used:

- 1. Policy** - policies set out the College's position/view/approach to/on a matter. They are informed by the principles of the College and seek to give clarity to stakeholders on a range of areas.
- 2. Procedures** are actions, the 'how to' of the implementation of a policy.
- 3. Guidelines** provide practical advice in developing or complying with a policy or procedure. Procedures and guidelines can overlap.
- 4. Code of Practice** is a written set of rules/expectations that employees and/or students of the College are expected to follow.

The remainder of this section details the framework for Policy Development (*Policy on Policy Development* and the associated *Guidelines*). This is followed by an overview of the areas where QA policy and procedures apply and the QA documentation generated in that area. This section concludes by outlining the College approach to the review of the effectiveness of QA.

### POLICY ON POLICY DEVELOPMENT OPEN TRAINING COLLEGE

#### 1. Purpose

The purpose of this policy is to define the process by which College policies are to be developed, approved and maintained. Through using a consistent policy development process and format it should be possible to hold policies that are:

- a) appropriately developed and regularly updated;
- b) easy to find, read and understand;
- c) consistent with the College's mission;
- d) compliant with applicable laws and regulations;
- e) reduce risk; and
- f) promote best practices across the College community.

It is acknowledged that this new policy, of which it is the first of its type within College, shall take some time following its approval and introduction to become the format that is used by all the development team. It is expected that as new policies are developed or existing policies are reviewed/amended, that they shall adhere to the provisions set out in this policy.

#### 2. Scope

This Policy applies to all areas and staff of the College; academic, support and administrative. These are all hereinafter collectively referred to as the 'College'.

### **3. Policy Statement**

College policies shall be:

- a) Developed according to the process set out in this policy;
- b) Presented in a standard and common format;
- c) Formally approved by an appropriate level of College management;
- d) Accessible to all parties with an interest in the policy's subject matter;
- e) Kept up to date and current within a framework of an organized system of change control;
- f) Clearly described as policies and kept separate from related documentation such as procedures, guides and other types of related documentation.

All individuals who are responsible for the drafting, updating, approval and distribution of College policies shall comply with this policy. Internal policies, where they exist and apply to the operations of College units, shall not be in conflict with this policy.

The requirements for the formulation and issuance of College policies set out in this policy ***shall not apply to those College policies in existence before this policy was approved. However, where an existing policy is reviewed or replaced in future after the date of approval of this policy***, the requirements set out in this policy shall be applied.

#### ***A) Policy development***

The Policy Owner shall be responsible for the drafting of new or revised College policies, ensuring policies are up to date, consulting with interested parties and for steering the policy through the levels of College management required for approval. The Policy Owner in consultation with the Head of Quality & Academic Affairs shall also arrange for the policy's publication, when approved, on the College website.

#### ***B) Policy format***

The drafting of College policies shall adhere to the format set out in the Policy Template referred to below in the section on related documentation. The format may be amended but only to the extent necessary to add clarity to a policy. Certain sections of the policy template are mandatory and shall be used when drafting a policy. Other sections of the policy template are optional and the Policy Owner is not required to apply them unless they add further clarity to the policy and they deem it appropriate to do so.

### ***C) Policy approval***

Policies that have a College wide scope must be approved by the Academic Council. In general, the responsibility for promoting compliance with a policy will rest with the Policy Owner unless as specified otherwise within the policy.

### ***D) Accessibility***

The majority of policies will be accessible and published on the College website and by any other means as deemed appropriate. Confidential policies, which are for staff use only, will be published on the College Shared Folder or in the Staff Handbook if appropriate.

### ***E) Regular review***

The Policy Owner for each policy shall be responsible for keeping the policy up to date and for ensuring that only approved versions of the policy are accessible via the College website.

Each policy shall state the date on which it was approved by Council. Except where a separate process or authority for making changes to a policy are included within the policy, the amendments to existing policies and the development of new policies shall follow the development and approval process as outlined in sections (a) and (c) above. The Head of Quality & Academic Affairs shall assist Policy Owners in implementing a process of regular review and shall provide guidance to Policy Owners in relation to complying with the requirements of this policy.

### ***F) Separation of policies from related guidance material***

Policies are to be clearly designated as a policy in their title. Other guidance material which assists in the understanding or implementation of a policy shall not be inserted as text within the policy. Such material shall be referred to in the “Related Documentation” section of the policy.

## **4. Definitions**

### ***College Policy***

A policy is a statement of intent which can be used to guide decisions. A policy may stand on its own or can be implemented through procedures, protocols or one of the other document categories indicated in the “Related Documentation” section below.

A College policy has a broad application or impact throughout the College across both academic and support areas. They can assist in promoting compliance with applicable laws or regulations, best practice, ethical norms, pursuit of the College’s mission or in the promotion of efficiencies. They can also assist in the reduction of risk.

College wide policies are approved by the College Academic Council (AC).

Saint Michael's House (SMH) approves policies across a range of areas that are reserved functions for College and these include policies incorporating the arrangements for the recruitment and remuneration of staff and for disciplining, suspending or dismissing staff. SMH also approves policies on Leave, Working from Home, Risk, Health and Safety, Quality, Equality, Respect and Dignity, Research Ethics, Policy for Contracting the Service of Freelance Trainers, Employee Handbook, Probation Policy, Safety Statement, Grievance Policies and Procedures (Employee Handbook) and Records Retention Policy.

New policies or amendments to existing policies outside of the reserved functions of College may be brought to SMH, at the discretion of the College Director.

Once approved, compliance with a College policy is mandatory.

### ***Procedure***

A procedure is a guideline or series of interrelated steps which can assist in the implementation of a policy. Procedures establish who, what, where and when in relation to a given activity as well as establishing accountability in support of the implementation of a policy. College procedures shall:

- be written in a format that is easy to follow;
- be published separately from the policy to which they relate;
- be reviewed and updated on a regular basis to check for compatibility with the most recent versions of the related policy; and
- require formal approval by senior executive levels of the College.

### ***Policy Owner***

The Policy Owner is the appropriate person (academic or support unit) of the College whose responsibility covers the subject matter of the policy. The Policy Owner shall be responsible for the substance of policy documents and for promoting compliance with the policy unless as specified otherwise within the policy.

## **5. Related Documentation**

### **1) Policy template**

The policy template sets out the prescribed layout to be used when drafting College policies.

## 2) Guidelines on Policy Development

The guidelines on policy development set out the issues to consider when drafting College policies.

<b>Policy Title:</b>		Policy on Policy Development
<b>OTC Policy No.</b>		<b>1801</b>
<b>Version</b>		1.0
<b>Date approved:</b> Sept. 2018	<b>Date policy will take effect:</b> Sept. 2018	<b>Date of Next Review:</b> 3 years later
<b>Approving Authority:</b>		Academic Council
<b>Document Owner/Contact:</b>		Head of Quality & Academic Affairs
<b>Supporting documents, procedures &amp; forms of this policy:</b>		<ol style="list-style-type: none"> <li>1. Policy Template</li> <li>2. Guidelines on Policy Development</li> </ol>
<b>Audience:</b>		Public – accessible to anyone
<b>Reference(s)</b>		<p>Policy on Quality Assurance Guidelines – QQI, April 2016.</p> <p>Statutory Quality Assurance Guidelines developed by QQI for use by all Providers – QQI, April 2016.</p> <p>Statutory Quality Assurance Guidelines developed by QQI for Independent/Private Providers coming to QQI on a Voluntary Basis – QQI, April 2016.</p>

	<p>Topic Specific Statutory Quality Assurance Guidelines developed by QQI for Providers of Blended Learning Programmes – QQI, March 2018.</p> <p>Re-engagement with QQI Policy and Criteria for Renewed Access to QQI Validation for Voluntary Providers of Higher Education and Training – QQI, June 2014.</p>
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## 2.2.2 Guidelines on Policy Development

### Introduction

These guidelines are intended for members of staff who are engaged in the process of developing new policies and/or amending existing policies. The guidelines originate from the 'Policy on Policy Development', which was approved by the Academic Council in September 2018. These guidelines were drafted to assist staff in all stages of policy development from the initiation of a new or amended policy through to having an approved policy published on the College's website. The guidelines were drafted by the Head of Quality & Academic Affairs (HQ&AA) and any queries or suggestions regarding the guidelines should be directed to the HQ&AA.

### Definitions

Definitions of words and phrases used throughout these guidelines are shown below.

#### ***Policy Owner***

The Policy Owner is the appropriate person (academic or support unit) of the College whose responsibility covers the subject matter of the policy. The unit shall be responsible for the substance of policy documents and for promoting compliance with the policy unless as stated otherwise within the policy.

## Related Documentation

Throughout these guidelines the documents listed below will be mentioned. Staff involved in policy development should refer to these related documents when developing a new policy or amending an existing one.

### 1) Policy on Policy Development

This policy governs the process by which College policies are to be developed, approved, published and maintained. Once approved, the policy will support the guidelines on policy development set out here.

### 2) Policy Template

The policy template is designed to assist Policy Owners in organising the content and format of a policy according to the 'Policy on Policy Development' referred to above.

## Policy Development and Management

Figure 8 (diagramme) gives an overall view of how College policies should be developed, published and maintained. The aim of these guidelines is to assist Policy Owners in meeting the requirements of the framework for policy management. There are many stakeholders involved in the process of developing and maintaining a College policy and they will be referred to as necessary throughout this guide. However, it is not possible to list all stakeholders as some of these will vary from policy to policy.

Policy Owners are responsible for the development, maintenance, and regular review and updating of existing policies. Once the decision to develop a new policy, or amend an existing policy, has been taken the steps set out in these guidelines should be followed.

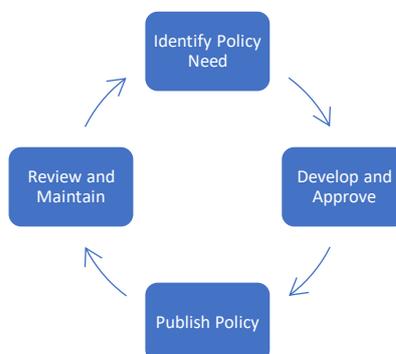


Figure 8: Policy Management Cycle

The sequential steps in the Policy Management Cycle above are as follows.

### **Step 1: Identify Policy Need**

The first step in the process to develop a new College Policy, or to amend an existing one, is to identify the need to do so. It is primarily the responsibility of the Policy Owner to identify this need. Policy Owners are responsible for the substance of the policy documents and for promoting compliance with the policy. A new policy may be developed to set out the College's position in regard to a new issue or a new set of circumstances. Alternatively, an existing policy may need amendment if the circumstances on which it is based change, or where the existing policy is no longer appropriate for whatever reason.

### **Step 2: Drafting a Policy**

When drafting a new policy, or amending an existing one, Policy Owners should consider the points referred to below.

#### **Consider the draft document's designation as a "College Policy"**

Prior to the approval by the Academic Council of the College's first 'Policy on Policies' in 2018 there was no guidance on how an official College Policy should be presented or what it should address. Policy Owners should review the guide to consider whether the new policy being developed or the current policy under review meets the definition of a policy.

#### ***a) New Policies***

Prior to drafting a new policy, the Policy Owner should consider whether the proposed policy meets the definition for a valid College policy. It may be more appropriate to designate the document as a 'Procedure' or 'Regulation'.

#### ***b) Existing Policies on renewal or review***

For existing policies that are undergoing a process of renewal or review, policy Owners are advised to use the same criteria as outlined in (a) above in determining whether the revised policy continues to meet the definition of a College Policy. It is expected that some documents formerly categorised as 'Policies' will, on review and comparison against the definition of a policy, be reclassified under another category of document. It may also be the case that some former policies will be extensively amended to extract those elements that are more suitable for publication in separate documents such as 'Procedures', 'Protocols' or one of the alternative categories once the template for policies is used. The HQ&AA will assist Policy Owners with this.

### **Brevity**

While it may not be possible or desirable in all cases, in general College Policies should be relatively brief and not exceed 4 - 5 pages in length. Where references are made to the means by which a policy is to be implemented, through procedures, protocols or an alternative document category, Policy Owners should refer to these in the policy and list them as separate documents in the 'Related Documentation' section. It is not necessary to quote extensively from these documents as they shall be available for reference elsewhere.

### **Consider the audience**

Policies shall in general be written for a general audience and shall be available publicly on the College's website. Therefore, when drafting a policy, the Policy Owners should use clear and precise language, brief sentences and common words. It is good practice to avoid the use of jargon and where it is used to include a definition of the word or phrase in the definitions section of the policy.

### **Step 3: Policy Template**

A template for College Policies is available on the College's website under the 'Policies' section. The template is designed to assist Policy Owners in organising the contents of a policy.

### **Sentence Structure**

- a) Policy Owners shall keep sentences short and to the point.
- b) Policy Owners shall avoid padding or language which does not add to the clarity of text contained within the policy.
- c) Policy Owners shall use active language that adds to the clarity of text. Active language is clear and direct and requires the assignment of responsibility i.e. 'person X shall do activity Y' rather than 'activity Y may be done'.
- d) Policy Owners shall avoid using words such as 'should' or 'may' in the policy statement section. As compliance with a College Policy is mandatory the action words used in the policy statement section should reflect this.
- e) Policy Owners shall avoid using words such as 'ensure', 'certify', 'guarantee' as these may place an obligation on a unit or officer of the College that, in practice, are very difficult to deliver or achieve.
- f) Policy Owners shall note that where a policy contains rules that they are to be stated first and any exceptions from the rules shall be stated and highlighted separately in a subsequent section or paragraph.
- g) Policy Owners shall use consistent terms throughout the policy. Where a technical phrase or staff position is referred to it shall be stated once and where possible thereafter referred to by its acronym e.g. Student Support & Development (SS&D).

- h) The policy shall refer to forms and other documents by title. These are to be listed in the 'Related Documentation' section of the policy.

#### **Step 4: Policy Approval**

The process by which policies are approved is set out in the 'Policy on Policies'. Policy Owners are responsible for steering draft policies through the required approval process.

#### **Step 5: Publishing a Policy**

Once a policy is approved it will, in the vast majority of cases, be necessary to publish the policy on the College's website.

#### **Step 6: Periodical Review of Policies**

Once a policy is approved it shall be necessary for the policy to be periodically reviewed to check that it is still appropriate and correct. This role is primarily the responsibility of the Policy Owner but senior management at Executive level may also be involved. The length of time between reviews will vary from policy to policy.

#### **College activities subject to quality assurance policies and procedures**

All College activities are subject to the quality assurance policies and procedures. This includes but is not limited to:

- the identification and development of new programmes
- all elements of the Supported Open Learning (SOL) Model
  - the open learning materials and readings
  - workshops and lectures
  - student supports
  - assessment procedures
  - Online Learning Environment (MyOTC)
- equipment and facilities
- management and administration
- partnership work with agencies and representative bodies
- stakeholder involvement
- ancillary College activities
- staff development and support
- the effectiveness of QA

In the development and implementation of the quality policies and procedures the College is committed to:

- the involvement of stakeholders;
- publication of the outcomes of quality monitoring;
- regular review of the effectiveness of the quality assurance procedures;
- on-going resourcing of the quality assurance function of the College.

## 2.2 A Comprehensive System: The Review of QA

### Annual Review

The quality assurance systems and procedures of the College are reviewed annually – usually over the summer period in preparation for the following academic year. Previously this review was based solely on the *European Standards and Guidelines for Quality Assurance*<sup>1</sup> detailed below but from 2016 it is also based on:

- Policy on Quality Assurance Guidelines – QQI, April 2016
- Statutory Quality Assurance Guidelines developed by QQI for use by all Providers – QQI, April 2016
- Statutory Quality Assurance Guidelines developed by QQI for Independent/Private Providers coming to QQI on a Voluntary Basis – QQI, April 2016
- Topic Specific Statutory Quality Assurance Guidelines developed by QQI for Providers of Blended Learning Programmes – QQI, March 2018

### ***ESQ (2015) Quality Standards:***

Standard 1. Overarching Policy for Quality Assurance

Standard 2. Programmes and Awards - Design of new Programmes

Standard 3.(a) Student-centred Learning and Teaching

Standard 3.(b) Student-centred Assessment

Standard 4. Student Admission, Progression, Recognition and Certification

Standard 5. Teaching Staff

Standard 6. Learning Resources and Student support

Standard 7. Information Management

Standard 8. Public Information

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<sup>1</sup> Standards and Guidelines for Quality Assurance in the European Higher Education Area. (2015) ENQA

Standard 9. On-going monitoring and periodic review of Programmes

Standard 10. Cyclical External Quality Assurance - Institutional Review (Based on current QQI policy).

### **Institutional Review**

The College is committed to the process of Institutional Review, under the remit of QQI, on a 7 year cycle and which includes a thorough review of the effectiveness of the Quality Assurance arrangements of the College.

The objectives of the Institutional Review are:

- To enhance public confidence in the quality of education and training provided by the institution and the standards of the awards made;
- To contribute to coherent strategic planning and governance in the institution;
- To assess the effectiveness of the quality assurance arrangements operated by the institution;
- To confirm the extent that the institution has implemented the National Framework of Qualifications (NFQ) and procedures for access, transfer and progression;
- To evaluate the operation and management of delegated authority where it has been granted;
- To provide recommendations for the enhancement of the education and training provided by the institution.

The process for conducting Institutional review is as follows:

**1. QQI and Terms of Reference:** Prior to commencing the review process the specific terms of reference will be discussed and agreed with QQI. The College will commit to the pre-defined terms of reference as well as any additional necessary areas as determined by current status or activity of the College, or as directed by QQI.

**2. Formation of the internal audit team:** An Internal Audit team will be formed. The membership of this team will be determined by the terms of reference for the review and the specific areas of responsibility and expertise of the relevant staff. A team leader will be appointed who will take on the responsibility of leading the team, agreeing time-bound plans, delegating tasks and actions, and monitoring the progress of the review.

**3. Review of each objective area:** A desk-based review of each area of the terms of reference will be conducted, with reference to the QQI Policy for Cyclical Review of Higher Education Institutions

(2016). The findings of each review will be published in a separate report, which will also specify the process followed in conducting that review.

**4. Stakeholder consultation:** Consultation with relevant identified stakeholders to further investigate the topics and to confirm the findings of the desk-based reviews will be carried out. Details of groups/individuals consulted with, methodology and findings will be published.

**5. Self-Evaluation Report:** Findings of 3 and 4 above will be considered by the Internal Audit Team and will contribute to the Self-Evaluation Report. This report will also detail the recommendations that have arisen from the review process. The Self-Evaluation Report will be sent to QQI for consideration.

**6. External Peer Review:** The entire process as described will be subject to the scrutiny of an external peer review panel, appointed by QQI, during a visit to the College. Following this visit the panel will produce a report detailing their findings and any additional recommendations they may have for the College.

## 2.3 Integration with Blended Learning and Online Learning Strategy

**The most pertinent elements relating to Blended Learning (BL) and Online Learning (OL) in this section are:**

- Meeting European standards
- Documented policies and procedures relating to Blended Learning (BL) & Online Learning (OL)
- Policy development takes account of BL/OL
- Regular review of policies and procedures
- External peer review
- Publication of this BL/OL Strategy

**Blended Learning:** This section meets “*Topic Specific Statutory Quality Assurance Guidelines for Providers of Blended Learning Programmes*” (QQI, 2018), in relation to the following:

- i. This usually means there needs to be a strategy and plan, an appropriate investment of time, money and other resources to develop capacity and resources to deliver high quality blended learning that will offer learners a consistent, enjoyable and effective learning experience.
- ii. The provider’s strategy, infrastructure and policies systematically address and enable existing or planned arrangements for blended learning (incorporating online learning).
- iii. Policies, regulations and processes (including administration) are fit-for-purpose in the context of blended learning.
- iv. Fees policy and processes which take note of online provision.
- v. Arrangements for quality management in general are consistent with the Core Statutory QA Guidelines for all providers and topic- or sector-specific guidelines as appropriate.
- vi. The provider has approved and published expectations for the overall quality of the blended learning provision, including expectations on the effectiveness and accessibility of learning resources and other learning materials to support online provision. The provider also has approved and published expectations for the effective delivery of teaching and learning and assessment in a blended learning context, which are available to stakeholders.
- vii. Make available benchmark or specification documents for learning resources and information specific to monitoring and evaluation of the effectiveness of learning resources and the learning environment. These are all considered as part of a programme validation and review process.

**Online Learning:** Indicators, for mapping and monitoring:

(Adapted from: ENQA - *Considerations for quality assurance of e-learning provision*, 2018)

<b>INDICATORS</b>
<ul style="list-style-type: none"><li>• E-learning is part of the overall strategy for the institution's development as well as the policy for quality assurance.</li></ul>
<ul style="list-style-type: none"><li>• The institution uses a clearly articulated policy framework and governance structure when deciding on the adoption of new technologies to ensure the expected quality of e-learning provision.</li></ul>
<ul style="list-style-type: none"><li>• The institution takes into account the European, national, and local policies, as well as ethical and legal considerations when designing its policy for quality assurance and its internal quality assurance system.</li></ul>
<ul style="list-style-type: none"><li>• Specific e-learning criteria for external quality assurance procedures (institutional or programme evaluation) are publicly available.</li></ul>



