Quality Assurance Manual

Brothers of Charity Services Ireland,
Quality Assurance Manual for Education and Training
Programmes Version 3.0 February 2024

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Introduction & Context

It is the policy of the Brothers of Charity Services Ireland to operate a Quality Assurance that will comprehensively meet the requirements of Statutory Quality Assurance Guidelines developed by QQI for use by all Providers and HSE Interim Standards New Directions, Service and Supports for Adults with Disabilities.

We recognise that people with an intellectual disability may need support to achieve an appropriate level of confidence and competence in meeting arising needs.   Therefore, it is our policy to provide a comprehensive service, which reflects the will and preference of each person we support.

The Quality Manual for Education and Training Programmes sets out the Brothers of Charity Services Ireland's quality systems framework and outlines the associated rules, policies and procedures. It is a reference document for all staff and learners/trainees, and should be used in conjunction with the QQI Learner Handbook, Tutor/Instructor Handbook, local Learner Induction Booklet, and our Education and Training Programmes Standard Specifications (ETPS).

The management of the company endorse the stated policy and controls and are dedicated to ensure that the quality system will be continuously monitored and updated as necessary through the Education and Training Quality Committee (ETQC)[1]. It will actively involve employees, learners/trainees, and promote an environment of mutual respect and trust.

All relevant Quality Assurance Documents are communicated and explained to all employees through staff training, and all learners through induction.

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[1] See pg.17 National Approach to QA for ETQC Terms of Reference

Quality Objectives

The management and personnel of BOCSI Training Programmes will:

- Implement a Quality Assurance System that will meet the requirements of Statutory Quality Assurance Guidelines developed by QQI for use by all Providers and HSE Interim Standards New Directions, Service and Supports for Adults with Disabilities.

- Ensure that all quality records are maintained, updated as stated in the Quality Manual and comply with the requirements of Statutory Quality Assurance Guidelines developed by QQI for use by all Providers and HSE Interim Standards New Directions, Service and Supports for Adults with Disabilities.

- Ensure that all procedures and controls are carried out as stated in the Quality Manual and comply with the requirements of Statutory Quality Assurance Guidelines developed by QQI for use by all Providers and HSE Interim Standards New Directions, Service and Supports for Adults with Disabilities.

- Ensure that responsibilities are clearly defined, and that staff are aware of particular documentation within the Quality System, and the requirements of Statutory Quality Assurance Guidelines developed by QQI for use by all Providers and HSE Interim Standards New Directions, Service and Supports for Adults with Disabilities.
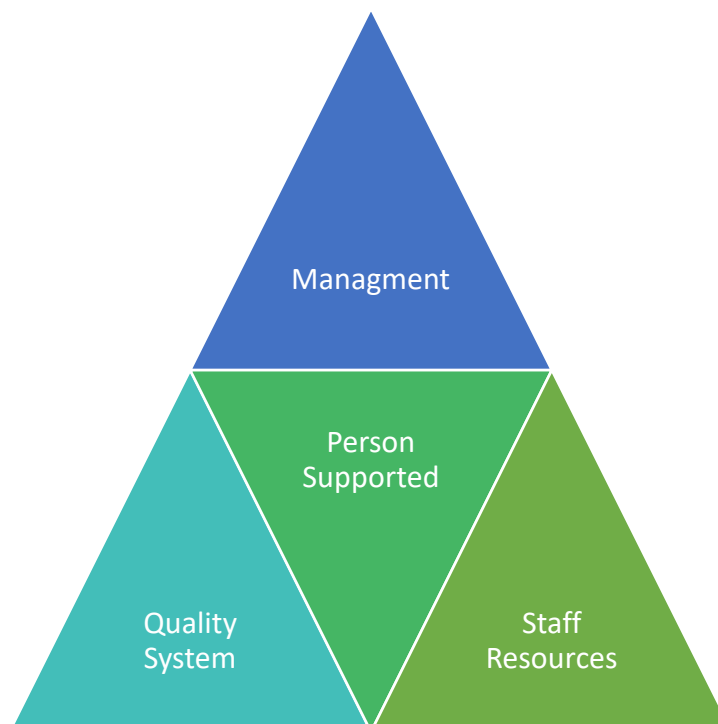
Section 1 Governance

1.1 BOSCI Mission and Strategy

"Belonging to an internationally active movement and rooted in the values of the Christian Gospels, the Brothers of Charity Services Ireland provides quality services to support people who are in danger of being marginalised and strives to create opportunities and choices that develop and maintain connected lives where all are cherished as valued and equal citizens in our communities." Brothers of Charity Services Ireland, Mission Statement (2014).

"Love and Respect in Every Action," Brothers of Charity Services Ireland, Vision Statement

Vision is that which guides the organisation; vision is the ideal and comes from truly seeing the need. Vision is held in the heart; it lends energy and provides both inspiration and direction.

1.2 BOCSI Guiding Principles and Core Values

The Brothers of Charity Services Ethos document 'Going Forward Together (2001)' sets out the principles that underpin our work, clarify and shares the values that motivate us as we respond to our fellow citizens who have an intellectual disability.

The core values of the Brothers of Charity Services that continue to motivate us as a Service are the Dignity and Humanity of each person. How these are expressed has evolved over time with our greater understanding of the rights of all people with a disability, with the changing hopes and expectations of the individuals and families with whom we work, and with the growing expertise within the Services.

The core characteristics of the Brothers of Charity Services which give us our guiding principles are:
- working for inclusion with people who are marginalised;
- striving for the highest possible human dignity in service provision;
- developing caring relationships and inclusive community;
- integrating the best of current trends in service provision;
- valuing a high standard of expertise;
- a progressive approach to the organisation and structure of services;
- a willingness to function within a social framework and to work in partnership with statutory bodies;
- finding final motivation in the Gospel.

1.3 History of the Organisation and Overview of Services

The Brothers of Charity Congregation was founded by Fr. Peter Triest, in Ghent, Belgium in 1807. A deeply spiritual and yet very practical man Triest inspired his young congregation to devote their lives to working with the disadvantaged and marginalised. The Brothers of Charity opened their first Irish facility for people who suffered from a mental health illness in Waterford in 1883.

Today our Services focus on providing support services to people with an intellectual disability in Ireland. The Services are located in counties Clare, Galway, Roscommon, Limerick, Cork, Kerry, Waterford and Tipperary. The Services are made up of an overall total of approximately 6,524 people who access our services annually, and their families and some 3,531 staff (2783.35 whole time equivalent).

The Services offer service responses in local communities, promoting and supporting positive engagement and interaction between those who use our services and their community, and supporting them to participate in and be included in all facets of community life as equal and valued citizens. The Services work in partnership with local communities, agencies and organisations to initiate and develop increasingly inclusive opportunities for, and with, the individuals we support.

The Brothers of Charity Services attempts to ensure a personal response to the wishes, hopes and dreams of each individual supported. We adopt a person centred approach to service delivery, one in which individuals are assisted and supported by the Services to identify their life goals through their individual personal plan and are supported to achieve these goals. The Brothers of Charity Services in Ireland is a learning organisation whose responses are based on best practice, and in full recognition of the right of each person to self-determine their life goals and wishes. We listen to those we serve and, subject to available resources, endeavour to provide individuals with high quality supports that best suit their wishes and requirements. These are the tenets by which we operate. The organisation has developed and implemented a quality system within the Brothers of Charity Services Ireland, for the delivery of Education and Training Programmes in accordance with Statutory Quality Assurance Guidelines developed by QQI for use by all Providers and HSE Interim Standards New Directions Service and Supports for Adults with Disabilities.

1.4 BOCSI Articles of Memorandum and Association

Please see supporting document: Memorandum and Articles of Association (PDF - 740KB):

https://www.brothersofcharity.ie/pdfs/memo%20and%20articles%20BOSCI.pdf

1.5 Management Structure

The Services of the Brothers of Charity in Ireland are governed and directed by a National Company - Brothers of Charity Services Ireland - whose Board of Directors is made up of individuals chosen for their particular experience and expertise. The National Company currently has five regions, located throughout the West, Mid-West, South and South East of Ireland. Each region has its own annual budget received mainly from the HSE.

The National Company and each of the subsidiary regions adhere to and promote the ethos and principles of the Brothers of Charity in the management and delivery of the services. In delivering our Service responses we are committed to a person centred approach and aim to provide, in as far as possible, individual supports for people in order that they may identify and achieve their personal life goals and live ordinary lives in their communities. Our Services are measured using an accredited quality system - Council on Quality and Leadership (CQL). Our Services are also monitored and inspected by HIQA. The Chief Executive, who reports to the Board of Brothers of Charity Services Ireland, is responsible for the management and executive functions of the organisation and also fulfils the role of Company Secretary

The National Office supports the National Board and its Committees, National Teams and Working Groups as well as the National Leadership Team(NLT). The NLT comprises the Directors of Services/Service Leaders of each Service Region and the Central Management Team. The National Office acts, as appropriate, as the single point of contact for external agencies and bodies.

The Education and Training Quality Committee (ETQC) reports to the Head of Advocacy, Safeguarding, Quality and Training, who is the lead on the National Quality Committee. Through the head of advocacy, safeguarding, quality and training the ETQC can access such committees as: The Quality Committee; National Training Committee; and the National Policy Group.[2] It is also the channel by which the ETQC reports to the National Leadership Team.

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[2] See Appendices for Terms of Reference

Locations of Brothers of Charity Services in Ireland
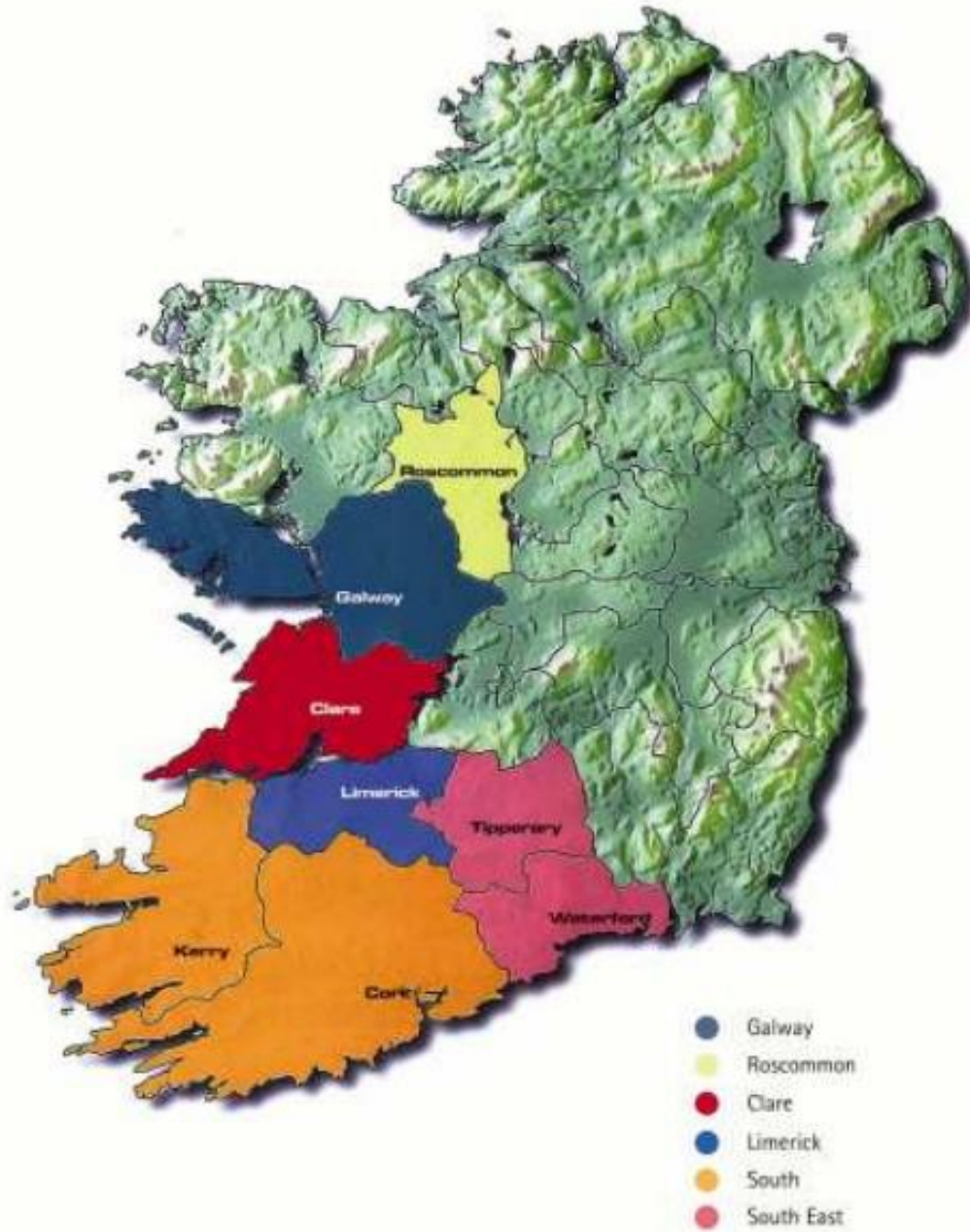
BOCSI National Structure Chart

National Leadership Team (NLT)	NLT / Board of Directors
National Committees	Energy Efficiency · Risk Mngt. · Data Protect. · National Policy Develop · Health & Safety · **National Head of Advocacy, Safeguarding, Quality &Training** · Freedom of Info. · Human Resource Management · Safeguarding & Advocacy · National Finance
Education and Training Quality Committee	ETQC Membership (**National Head of Advocacy, Safeguarding, Quality &Training**)
Service Region	Clare · Cork
Programme	Streetwise · Caritas
Learners	Learners/Trainees

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The Role of the National Board

The main purpose of the Company is to deliver services to people with an intellectual disability in Ireland as set out in the Constitution of the Company. The Company's overall responsibility is to ensure that the organisation as a whole is well managed and operates within its agreed objectives and priorities, within the law, and within allocated budgets.

The National Board provides Service Motivation, Service Guardianship and Service Leadership and governs with the aid of its various committees.

Committees to the National Board

Audit Committee

Appointed by the Board, the main objective of the Brothers of Charity Services Ireland Audit Committee is to support the Board in fulfilling its function by providing independent and timely advice to the Board on areas within its remit. It will ensure that there is full control over the income, expenditure and assets of the Brothers of Charity Services Ireland and ensure that all of its resources are used effectively in fulfilling its responsibilities.

Advocacy, Safeguarding, Quality and Training and Risk and Risk Regulation, Health and Safety Committees

Appointed by the Board, the main objective of the Brothers of Charity Services Ireland Advocacy, Safeguarding, Quality and Training and Risk and Risk Regulation, Health and Safety Committees is to support the Board to fulfil its function by providing independent and timely advice to the Board on areas within its remit, to ensure that clear and effective Quality and Risk Management systems are in place, and that the safety of those who use the Services is safeguarded.

BOCSI has HSE funded Rehabilitative Training Programme models in place. The Quality Assurance system for formal content is accredited by QQI. The QA structure of the programmes is managed via the Education and Training Quality Committee (ETQC) which is a subgroup of Advocacy, Safeguarding, Quality and Training Committee.

Nominations Committee

Appointed by the Board, the main objective of the Brothers of Charity Services Nomination Committee is to oversee the arrangements for selection and rotation of members of the Board of the Brothers of Charity Services.

Remuneration Committee

Appointed by the Board the main objective of the Brothers of Charity Services Ireland Remuneration Committee is to oversee the employment practices of the Brothers of Charity Services Ireland and ensure that they comply with the Public Sector Pay Policy.

Each committee acts in accordance with the rules and procedures (Terms of Reference) agreed by the Board and report to the Board as required. There are currently four committees in compliance with the Code of Practice for the Governance of State Bodies.

The Role of the Board Members

Board members are appointed by the National Board and the Regional Leader of the Congregation. Board members are expected to:

- attend board meetings on a regular basis and be well prepared in advance of the meeting;
- contribute to decision-making and share responsibility for the board's decisions;
- contribute to the work of any committees established by the board;
- represent the board at meetings and events as required;
- attend training events and keep up to date with subjects relevant to the organisation's work;
- share corporate responsibility for decisions taken by the board as a whole;
- maintain confidentiality in regard to matters discussed at board meetings;
- be loyal to the company and be conscious when speaking in public of the need to maintain the good reputation of the company;
- contribute to the development of strategies, policies and plans for the company;
- monitor and review performance without interfering in the day-to-day running of the company;
- disclose any personal interest or profit which may conflict with the interests of the company;
- be aware of the obligations of board members under the Companies Acts 2014.

Delegated Powers to the Chief Executive

The day to day management of the Brothers of Charity Services Ireland is a matter for the Chief Executive and their Central Management Team. This includes:

- implementing the board policy;
- implementing the recruitment and remuneration policy of the company;
- staff management, motivation and leadership;
- ensuring appropriate asset maintenance, health and safety, and risk management systems are in place;
- developing and implementing the agreed strategic plan;
- monitoring the objectives and a budget of each Service region;

- providing line management for the Directors of Service, Service Leader and Central Management Team; and
- ensuring the organisation operates within the required statutory standards, for example HIQA Standards in Care, and relevant statutory regulations.

Role of the Chief Executive- Key Accountabilities

To develop and gain approval for the strategies, policies and plans necessary to ensure that the Board delivers on its agreed budget and other service targets as set out by the National Board.

1. To recruit, lead, motivate and develop the staff of the company in accordance with the policies of the National Board to ensure that they contribute to the fullest extent possible to the achievement of the key objectives of the company in a professional, flexible and co-operative manner.
2. To ensure that appropriate systems are developed, implemented and kept under review in order that the key objectives in terms of budget, resource allocation, service provision, community participation and monitoring are met in the most effective manner.
3. To ensure that the necessary financial recording and reporting systems are in place (and kept under review) to meet all statutory and operational requirements.
4. To promote and monitor the development of the Brothers of Charity vision, mission and ethos within the Services and within projects, activities and enterprises associated with the Services.
5. To seek new resources to meet identified needs and to negotiate with the local area funders of services for the resources required.
6. To ensure compliance with all relevant statutory regulations.

The Chief Executive shares his/her responsibilities in a task oriented way with the Directors of Service, Service Leaders and their Local Management Team. The Chief Executive works with the Board and the Directors of Service/Service Leader to ensure the implementation of the Board policies in relation to service motivation, service guardianship and service leadership.

1.6 Service Provision- A General Overview of BOCSI

The Brothers of Charity Services endeavours to offer services in local communities, promoting and supporting positive engagement and interaction between those who use our services and their community, and supporting them to participate in and be included in all facets of community life as equal and valued citizens. We work in partnership with local communities, agencies and organisations to initiate and develop increasingly inclusive opportunities for, and with, the people who use the Brothers of Charity Services.

The Brothers of Charity Services offers a range of comprehensive day, residential, respite and multidisciplinary supports and services to adults and children with an intellectual disability, and their families.

Services include:

- Early Assessment Intervention
- Development and Pre-School Services
- Health Related Support Services
- Educational and Training Services
- Advocacy Support
- Residential Care
- Home Share
- Day Activation for Children and Adults
- Vocational Preparation
- Supported Living Arrangements
- Personal Development Training
- Family and Sibling Support
- Supported Employment
- Crisis Intervention
- Respite Services
- Services for Children and Adults with Autism
- Pastoral Care
- Support of Elderly Persons with Intellectual Disability
- Community School Age Support, and
- Integrated Leisure Activities.

We work in partnership with Brothers of Charity Housing Associations, mainstream Housing Associations and Local Authorities in the provision of appropriate residential accommodation.

1.7 National Corporate Guiding Principles of the Brothers of Charity Services, Ireland

The corporate guiding principles have come about following a wide consultation process. They have been broken down under four headings and each of the six Service Region's strategies are developed in line with these principles:

a. Person Centred Services

- Listen to people in our services to discover their needs and wishes and seek to develop supports and services to meet these needs.
- Respect the rights of individuals with intellectual disability to make informed decisions regarding their own lives.
- Provide opportunities to make choices and facilitate a range of Service and options.
- Develop person centred quality services and supports of a high standard of expertise. Seek to develop services based on the best of current trends and internationally recognised best practice.
- Support individuals to make their own decisions and speak for themselves. Support the voice of our service users to be heard both inside and outside our services. Support the development of advocacy in our services.

b. Inclusion

- Work as bridge builders to enable individuals to live ordinary lives in ordinary places.
- Support people to develop enhanced social roles and contribute to their local community.
- Use ordinary settings to support individuals and provide specialist services in such settings.

c. Partnership
Work closely with policy makers to influence polices to reflect our mission and issues of importance to our service users.
- Work towards developing partnership with statutory bodies and other agencies in developing services.
- Work in partnership with local communities in developing services and supports for people in our services.
- Support individuals involved in our services including service users, families.
- Support Staff members to develop autonomy and make relevant decisions as locally as possible.

d. Enabling Structures

- Support the development of enabling structures in each Service Region.
- Support the development of the autonomy of each Service Region, and in turn, supporting each element of the Service Region best placed to promote the inclusion of each individual in their local community.

- Work towards the development of a strong National Company which will support and guide the implementation of the national strategy and the development of the six Service Regions.
- Support each Service Region in working and learning together in the fulfilment of common objectives.
- Support the development of leadership in our services which will facilitate the implementation of our Ethos and National Strategy.

- Work to enable the organisation to adopt a consistent and high standard of service provision under the leadership of the Brothers of Charity Services.

1.8 Service Arrangements

The HSE require by statute an agreement to manage the arrangement of services to be delivered on its behalf, health and personal social services. The Health Acts empower the HSE to enter into an arrangement with the Service Provider to provide health and personal social services. Each Region of the Brothers of Charity Services has service agreement/s with their local HSE according to their Community Health Care Organisations (CHO) Area.

Please refer to the document at the link below/or see supporting document for further details on section 38 Disability Providers:
https://www.hse.ie/eng/services/publications/non-statutory-sector/section-38-documentation.html

Map of Community Health Care Organisations (CHO) Areas
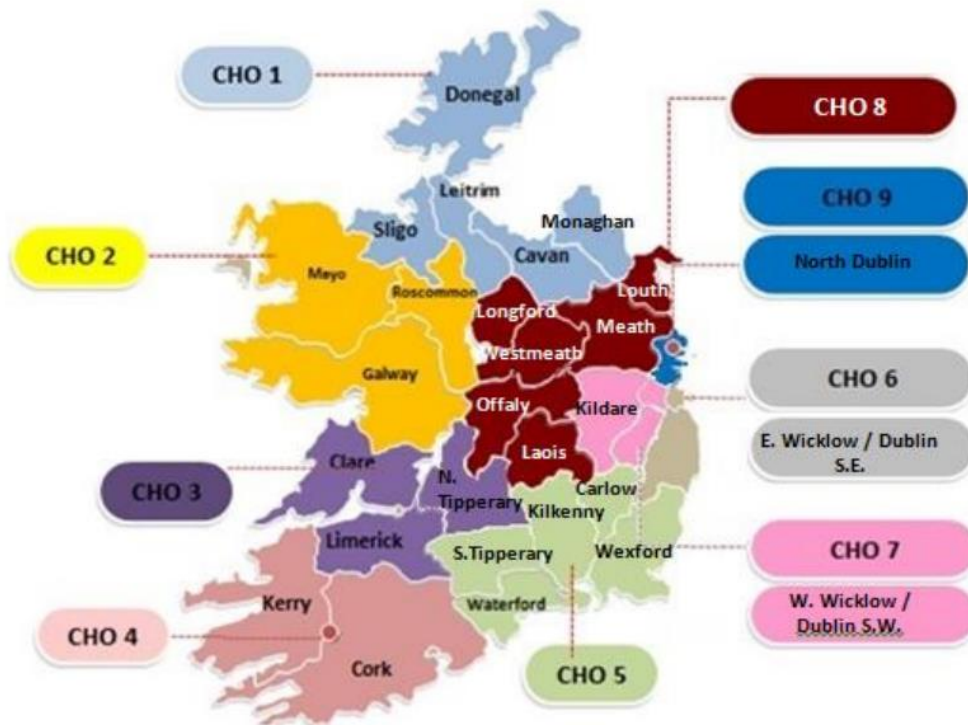
1.9 Corporate Governance

As of the 31st December 2016 the six subsidiary Brothers of Charity Service Companies were merged with the single shareholder company resulting in one company – The Brothers of Charity Services Ireland CLG.

This company provides Governance for all of the Services of the Brothers of Charity Services in Ireland and is responsible for corporate governance compliance.

The membership of the Board is:

Board Chairman: Bro. A.T. Hassett
Bro. J. O'Shea
Bro. N. Corcoran
Mr. J. Hayes
Mr. P. McGinley
Mr. J. Barry
Ms. M. Allen
Mr. J. Delahunty
Ms. G. Larkin
Mrs. A. Geraghty
Ms. S. Allen
Ms. E. Cusack

Company Secretary: Mr. M. Hennessy, Chief Executive Officer

1.10 Clinical Governance

Clinical governance is a framework through which healthcare teams are accountable for the quality, safety and satisfaction of patients in the care they deliver.

The Brothers of Charity Services Ireland Education and Training Programmes are Rehabilitative Training Programmes funded by the HSE and are subject to Clinical Governance for Quality and Safety.

The BOCSI has developed policies and procedures in relation to Child and Adult Safeguarding. Each region has a Designated Officer responsible for dealing with any Safeguarding concerns. All managers and staff members receive training in Safeguarding. See the following supporting documentation:

- Brothers of Charity Services Ireland. *National Policy for the Safeguarding of Vulnerable Adults at Risk of Abuse*. (2015). 2015/NP06(a).
- Brothers of Charity Services Ireland. National Procedures for the Safeguarding of Vulnerable Adults at Risk of Abuse. (2015). 2015/NP06(b).

1.11 Risk Management

The BOCSI is committed to the delivery of high quality effective services and to ensure, as far as possible, the safety of the people who use our Services, our employees, assets, and the public and to ensure that the Services are not financially or operationally disrupted. It will meet this duty by ensuring that risk management plays an integral part in the governance of the organisation at a strategic and operational level.

The organisation employs a National Risk Management Policy and Procedure. This risk management policy and procedure outlines a standardised approach to the identification, analysis, evaluation, treatment, communication, monitoring and escalation of risk.

Risk Governance & Reporting Structure

National Leadership Team
- Chaired by the Chief Executive this team consists of: Directors of Service, National Heads of: Finance; Risk & Regulation, Health & Safety; HRM; Advocacy, Safeguarding, Quality & Training; ICT; and Procurement.

National Risk Management Team
- Chaired by the National Head of Risk & Regulation, Health and Safety this team consists of a representative from each Region.

Senior Management Team
- Chaired by the Director of Service this team is made up of the Heads of each Function within the Region.

Education/Training Manager
- Manages Academic Risk Register, and Training and Education teams for delivery of programmes.

Programme Coordinator
- Manages Local Risk Register, and day to day delivery of programmes.

Direct Supports
- Observes and reports risks as they arise.

Please refer to the following supporting documentation for information on Risk Management:

- BOCSI. *National Risk Management Policy* (2013). 2013NP10. Updated 2022.
- Local and Academic Risk Registers

Section 2 Documented Approach to Quality Assurance

The Brothers of Charity Service Ireland shall comply with all the statutory regulations and enactments relating directly or indirectly to the provision of the service, with particular regard to the Health Act 2007 (Care and Support of Residents in designated centres for persons - Children and Adults- with disabilities Regulations 2013) or Health and Safety at Work Act 2005 (SHWW Act 2005) and New Directions Interim Standards (2012-2016).

As a service provider we are responsible for the development, maintenance, provision and internal quality assurance (QA) of our own programmes; and have procedures for assessment and evaluation of those programmes.

National QA Approach   2.1 National QA Approach

The BOCSI Advocacy, Safeguarding, Quality and Training Committee enables and supports the development of a learning organisation that promotes best practice and empowers service users and staff. This committee plays a pivotal role in the development and implementation of the Brothers of Charity Services Ireland Strategic Plan and supports and facilitates three main areas of activity within the services:

1. The implementation of internal and external quality systems.

2. The promotion of the personal and continuous professional development of staff in the services with particular reference to the vision of the organisation and to international best practice.

3. A range of organisational development projects that reflect a human rights-based approach to service delivery that promotes and supports service users to direct their own lives.

The BOCSI complies with a number of *external quality standards* including:
- Quality & Qualifications Ireland (QQI)
- New Directions Interim Standards set by the HSE
- Health Information and Quality Authority (HIQA)
- The Council on Quality and Leaderships (CQL)
- Limerick and Clare; and Cork Education and Training Board's Quality Assurance Systems

ETQC Terms of Reference

Education and Training Quality Committee (ETQC),
Brothers of Charity Services Ireland (BOCSI)

Terms of Reference v2.0

The BOCSI Education and Training Quality Committee (ETQC) committee was appointed under the direction of the National Leadership Team (NLT) to ensure oversight of all academic processes with Quality and Qualifications Ireland (QQI) in regard to engagement by BOCSI as a national entity. This committee is the senior unit of academic governance within BOCSI for all QQI accredited Education and Training Programmes for people supported by the organisation as approved by the BOCSI Chief Executive Officer.

The ETQC holds responsibility for all matters pertaining to the development and provision of QQI accredited Education and Training Programmes. This committee brings together all supporting policies and procedures from BOCSI and the QQI, to ensure best practice in every aspect of provision.

The learner/trainee is the focal point of these programmes and the quality of their journey is defined by the standards to which we work. Therefore, our goal is to promote innovation and excellence in every aspect of our practice.

Purpose and Scope:

As the senior academic unit for decision-making, the ETQC is an independent platform, and is the authority for any query relating to matters of QQI accredited academic programmes within BOCSI.

The purpose of this committee is to ensure the documented approach to Quality Assurance is maintained and updated accordingly as outlined in the documents below:

- BOCSI Education and Training Standard Specifications v1.0 2022
- BOCSI Quality Manual for Education and Training Programmes v1.0 2022
- BOCSI QQI Learner-Trainee Handbook 2022
- BOCSI QQI Tutor Handbook 2022

- BOCSI Education and Training Programme Learner and Trainee Local Induction Booklets 2022
    - Caritas Trainee Induction Booklet
    - Streetwise Learner Induction Booklet
- QQI Core Statutory Quality Assurance Guidelines, developed by QQI for use by all Providers, April 2016/QG1-V2 ©QQI

Committee Structure and Attendance:

- Number / Size: Minimum of 6, maximum of 10 to include equal representation from each Education and Training Programme.
- Committee Representation: External Chairperson, Internal Vice-Chairperson (rotate every 12 months), BOCSI Head of Advocacy, Safeguarding, Quality & Training, 3 from each programme area, and 2 external members.
- Duration of Committee: Permanent Committee.
- Frequency of Meetings: Monthly, with additional meetings when required.; combination of MS Teams and face-to-face.
- *Mandatory* attendance required of a minimum of 1 staff member from each programme.

Committee Membership:

- External Chairperson
    - ➢ We require that appropriate candidates for this voluntary position would have a minimum of 3 years' experience in Programme Coordination/Quality Assurance in the FET sector.
- Vice-Chairperson
- BOCSI Head of Advocacy, Safeguarding, Quality & Training
- Clare Panel Members:
    - Education and Training Manager
    - Programme Coordinator
    - Senior Day Support Facilitator
- Cork Panel Members:
    - Programme Manager
    - QQI Coordinator
    - Person Centred Planning Facilitator
- External Panel Members:
    - Limerick and Clare ETB QA representative; Clare
    - University of Cork Representative; Cork

Reporting Mechanism:

The Education and Training Managers report to Regional Managers, who in turn report to Service Leads. Service Leads then report to the National CEO/Board.

- An external independent Chairperson to be appointed via call for Expressions of Interest
- BOCSI Head of Advocacy, Safeguarding, Quality & Training, as committee member, is the formal channel to CEO / National Leadership Team and Board of Directors for communication in regard to corporate sign-off and approval.

Specific Outputs Required- Responsibilities of Committee:

Specific output of this committee is the completion of the QQI awards certification process. The Committee is to update the BOCSI National Office of achievements via an Annual Programme Review Report. This committee maintains oversight of quality standards and any changes in practices in the programmes.

Relationship to Other Committees:

- National Quality Committee
- National Leadership Team
- National Policy Development and Review Group

Consultation with other committees as needed.

Decision Making Process:

- Decisions require a minimum of 6 members in attendance. Majority vote, with External Chairperson holding the determining vote.
- Duration of meeting, flexible.
- Minute Taker: Internal member of committee, position to rotate with Vice Chairperson annually.
- Minutes to be circulated to committee members and made available to National Board.
- Previous minutes to be proposed and seconded at each meeting.

Related Policies, By-Laws, and Existing Systems:

- HSE Interim Standards for New Directions, Services and Supports for Adults with Disabilities, 2016
- BOCSI Policy on Access to Education, Training and Employment for Adults Supported by the Services, 2015/NP10, 2021
- The Council on Quality and Leadership (CQL) Framework for Quality Monitoring and Enhancement
- QQI Core Statutory Quality Assurance Guidelines, developed by QQI for use by all Providers, April 2016/QG1-V2 ©QQI
- Statutory Instrument 367 of 2013, under the Health Act 2007 (Care and Support of Residents in Designated Centred for Persons [Children and Adults] with Disabilities) Regulations 2013
- Disability Act 2005
- Health Act 2007
- Equality Act 2000-2004
- Education for Persons with Special Educational Needs Act (EPSEN) 2004
- Citizens Information Act 2007
- Employment Equality Acts 1998 & 2004
- European Convention on Human Rights Act 2003
- Assisted Decision Making (Capacity) Act 2015
- Health and Safety at Work Act 2005
- National Policy on Education, Training and Employment for adults Supported by the Services. (2021) [3]

Budget and Resources:

Monthly meetings conducted via MS Teams; face-to-face meetings scheduled as required.

Subgroup/Working Groups:

If the requirement arises for research and development / analysis in any programme area a sub-group can be formed via the committee to gather data and return comment to the ETQC for the purpose of programme improvement and development.

Under the BOCSI *Internal QA*, as set out by the Education and Training Quality Committee (ETQC), each programme is subject to the following quality measures:

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[3] As a committee established within the BOCSI, we reference all current National and Local Policy and Procedures.

- **Self-Evaluation**:
  - Annual Programme Evaluation
  - Self-Evaluation Checklists

- **Self-Monitoring**:
  - Learner/Trainee Module/Course Feedback
  - Learner/Trainee Evaluation Forms
  - Senior Tutor/Instructor Feedback Form
  - Learner/Trainee Completion/Certification Rates
  - Individual Training Plan and Person-Centred Plan Goal Setting Processes
  - Staff Supervision and Performance Enhancement Goal Setting Processes
  - Annual Programme Questionnaires

Education and Training Quality Committee Structure Chart

National Committees	Energy Efficiency	Data Protect.	Risk Mngt.	Health & Safety	Policy Development	**National Head of Advocacy, Safeguarding, Quality & Training**	Human Resource Management	Finance	Safeguarding & Advocacy	Freedom of Info.

Education and Training Quality Committee (ETQC)

ETQC

Results Approval Panel

Programme

Data & Information — Programme & Curriculum Development — QA Policies and Procedures — Programmes (Caritas & Streetwise) — Internal Verifier

Learners & Stakeholders

Stakeholder Feedback
Learner/QQI/ HSE/ New Directions

External Authentication

EA Process

HSE

Learner/Trainee Recruitment

* All National Committees accessible via Quality and Risk Committee.
National Head of Advocacy, Safeguarding, Quality & Training is member of the sub-committee ETQC.

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2.2 Policy for Quality Assurance

It is the policy of the BOCSI to promote, achieve and maintain excellence in quality in the management and provision its programmes and services.

The BOCSI's commitment to excellence and continuous improvement is a fundamental aspect of the company that includes:

1. Service Provision and Business Management
2. Compliance with Local and National Policies and Procedures
3. Compliance with National/International Quality Standards and Legislation
4. Compliance with quality requirements in Individual Service Agreements with learners/trainees

The following quality assurance systems have been put in place to ensure best practice:

- A comprehensive Quality Assurance Manual is in place adhering to BOCSI policy, procedure, and to QQI Core Statutory Quality Assurance Guidelines.
- **Education and Training Quality Committee (ETQC)** established as the senior unit of academic governance to provide oversight and compliance within the Brothers of Charity Management structures.
- Specific roles/job descriptions in place to employ suitably qualified persons to ensure academic programme development, delivery, and oversight.
- BOCSI has in place a Risk Management Policy (2020) in place. The risk management process can be used to evaluate any risk pertaining to academic integrity, any aspect of provision and learner supports, and to ensure safe and effective programme delivery for the learner profile.
- Education and Training Programme Standard Specifications (ETPS) have been developed and are managed to include all processes of evaluation.
- Education and Training Learner/Trainee QQI Handbook in place to support information for learners.
- BOCSI Instructor- Tutor QQI Handbook in place
- Comprehensive local Learner/Trainee Induction Booklets.

Programme Quality Assurance Teams Structure
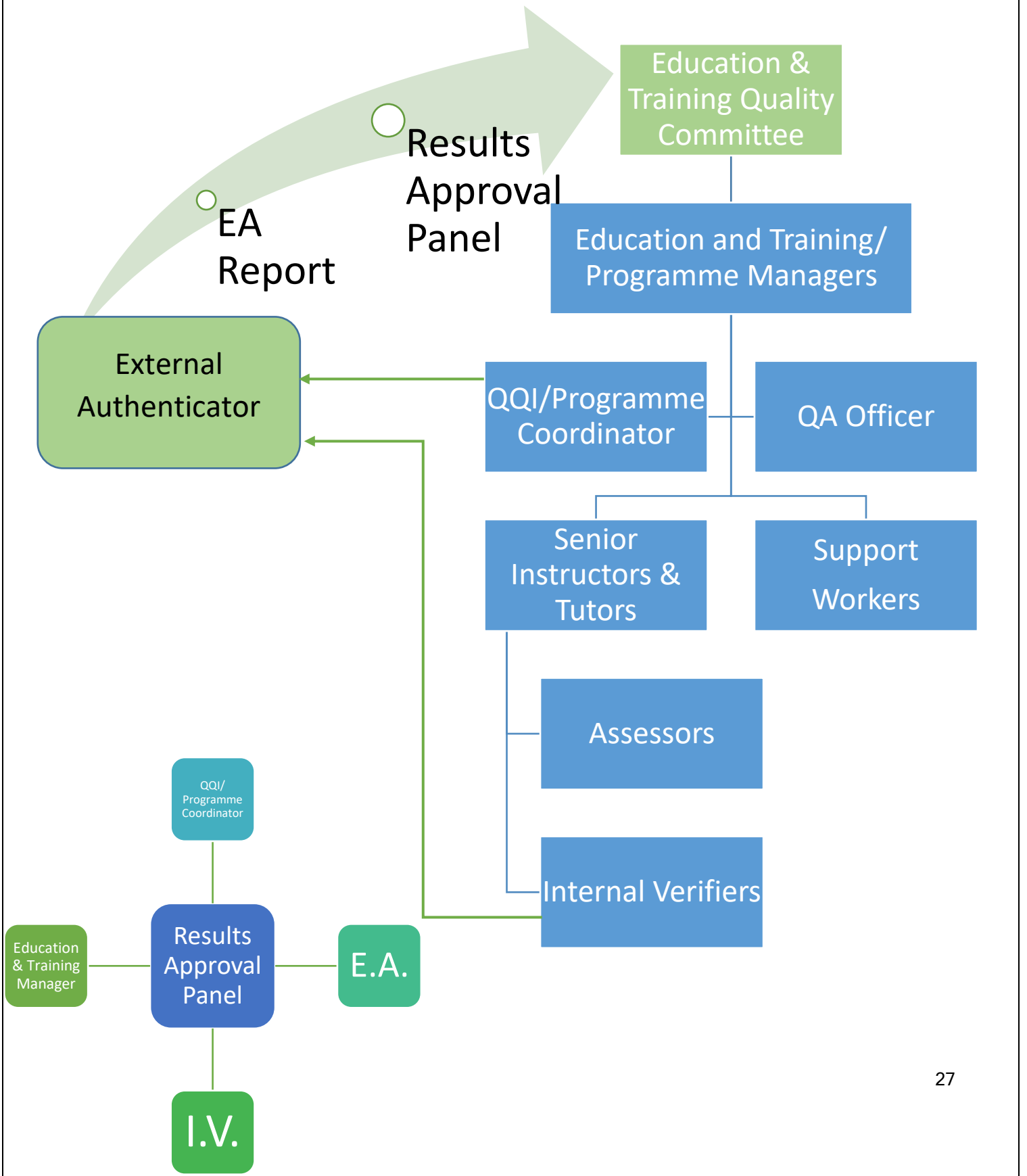
2.4 BOCSI Funding and Awarding Bodies

Funding is allocated on an annual basis, with budgets protected and ring-fenced. Each region has a financial manager to provide oversight and ensure resources are ring-fenced.

2.5 BOCSI Mandatory QA Systems

Mandatory Quality Assurance Systems		
QA System	**Legislation/Regulation**	
Rehabilitative Training — HSE Feidhmeannacht na Seirbhíse Sláinte Health Service Executive / QQI AWARD **New Directions**	HSE Interim Standards for New Directions 2016.	Qualifications and Quality Assurance (Education and Training) Act 2012. **REVISED** **Updated to 21 October 2020**
Vocational Training — SOLAS An tSeirbhís Oideachais Leanúnaigh agus Scileanna Further Education and Training Authority / QQI AWARD **Quality Assurance System**	Qualifications and Quality Assurance (Education and Training) Act 2012. **REVISED** **Updated to 21 October 2020**	
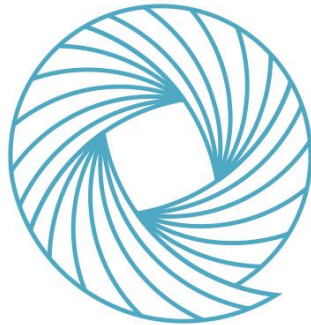
QQI Core QA Guidelines

The BOCSI is a provider of Further Education and Training offering QQI Awards and must conform to the QQI's Core Statutory Quality Assurance (QA) Guidelines published under the Qualifications and Quality Assurance (Education and Training) Act 2012.

All providers offering programme leading to QQI awards must comply with these QA guidelines.

The following eleven core areas underpin the BOCSI QA System.

1. Governance and Management of Quality
2. Documented Approach to QA
3. Programmes of Education and Training
4. Staff Recruitment, Management and Development
5. Teaching and Learning
6. Assessment of Students
7. Supports for Students
8. Information and Data Management
9. Public Information and Communication
10. Other Parties Involved in Education and Training
11. Self-evaluation, Monitoring and Review

Limerick and Clare ETB Training System Standard

The BOCSI is a second provider of Vocational Training on behalf of the Limerick and Clare ETB. The Limerick and Clare ETB owns the validated programmes with ultimate responsibility for quality assurance. An ongoing process of monitoring and evaluation is in place via the Senior Development Officer.

New Directions

'New Directions' Review of Day Services and Implementation Plan (2012-2016) sets out the HSE's approach to supporting adults with disabilities who use day services in Ireland. New Directions identifies twelve supports that should be available to people with disabilities using 'day services,' and 7 themes for improved services and supports for people. The principles of which are based on person-centeredness, community inclusion, active citizenship and high quality services and supports. New Direction Interim Standards apply to services and supports for adults with disabilities which are funded by the HSE, whether they are operated by public, private or voluntary bodies or organisations.

The BOCSI Education and Training Programmes are HSE funded Rehabilitative Training Programmes, are classified as 'Day Service' and subject to New Directions Interim Standards.
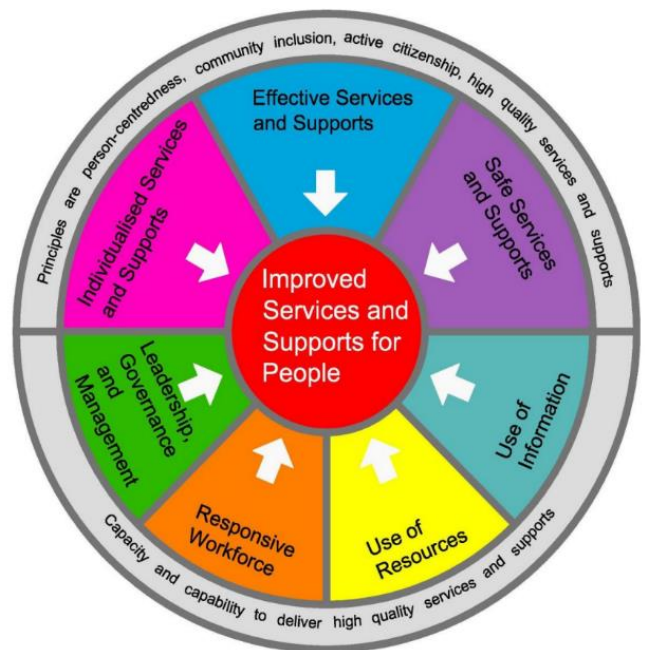
The Council on Quality and Leadership (CQL)

CQL is a non-profit organisation based in the United States that specialises in quality assessment and accreditation for organisations that support people with intellectual disability across the world. CQL defines and measures quality from the person's perspective and wants to know how well the organisation understands each person supported and how the services and supports provided meet those individual needs. The CQL quality system is called Personal Outcomes Measures.

CQL promotes excellence in Person Centred Services and supports that lead to increased quality of life.

The focus is on the three important foundations:

1. Basic Assurances- which promotes accountabilities for fundamental and non-negotiable requirements for all services and supports provided.

2. Personal Outcome Measures- which are used to identify peoples' quality of life outcomes, plan supports and gather information and data about individual outcomes.

3.Evidence Based Practices- CQL is dedicated to the definite re-assurement and improvement of personal quality of life.

2.6 QQI Registered Centres

The BOCSI has two centres registered QQI centres; one in the Mid-West, in Clare and one in the Southern Region, in Cork.

Mid-West Region - Streetwise Training Programme, Ennis, Co. Clare

As part of the Brothers of Charity Services Ireland, Education and Training Programmes, the Streetwise Programme is delivered in partnership with the HSE. It is aimed towards adults with I.D. and Autism to be supported as a unique person to develop personal, social and work/job skills. Staff work with the person to assist with developing independence and understanding, so they can progress in life, accessing fulfilling experiences relevant to their interests, wishes, and abilities.

On the Streetwise Programme, Learners can access modules from levels 1-4 on the National Framework of Qualifications.

<u>**Contact**</u>:
Kevin Delaney
Education & Training Manager
Streetwise Programme

Unit 1 Clonroad Campus
Ennis, Co. Clare
Tel: (065)6843798

Southern Services - Caritas Training Programme, Guarranedarragh, Co. Cork

As part of the Brothers of Charity Services Ireland, Education and Training Programmes, Caritas Training Centre provides vocational training for adults with an intellectual disability. Training and education are the two primary routes available to those with disabilities toward realising their full potential. The Caritas Foundation Level Training Programme provides the participants with the basic personal, social and work-related skills which will enable each trainee make a successful transition from dependency to greater levels of adult independence.

On the Caritas Training Programme, Learners can access modules from levels 1-3 on the National Framework of Qualifications.

<u>**Contact**</u>:
Carolann Corkery
Training Manager
Caritas Training Centre
Doughcloyne Industrial Estate
Sarsfields Road, Co. Cork
Tel: (021) 4345439

Section 3 Programmes of Education and Training

The underlying principle of the Brothers of Charity services is to provide the best quality of life for the people with an intellectual disability in an atmosphere that is holistic, person-centred, and respects the rights and dignity of every human being.

Education and Training are an integral part of this service which aims to empower and enable all people with a disability to achieve their maximum independence and to live a fulfilling life. The service recognises that training programmes should be equally accessible where the focus is on individual needs, support and assistance rather than eligibility criteria or definitions of disability. The courses designed and delivered should be flexible both in terms of course content and duration to cater for the wide range of individual needs and abilities. In addition, structured training programmes encourage people to aspire and work towards higher goals and options.

The Education and Training offered to individuals within the BOCSI is Rehabilitative/Vocational Training, which aim to:

• Provide trainees with the opportunity to acquire the knowledge, attitude and experience necessary to progress into employment, further training or education, self-employment or other work opportunities.

• Provide a basis from which to enhance their personnel effectiveness and their ability to appraise realistically their potential and prospects.

• Provide the opportunity to develop their self-advocacy skills and so become progressively more responsible for negotiating their own development within their community.

• To make a successful transition from dependence to greater independence, autonomy and occupational integration.

Programmes at this level are learner/trainee centred, integrated and progressive, involving skill sampling and work orientation where possible. Assessment is continuous in relation to the achievement or individual goals and related where appropriate to pre-determined standards.

Employment plays a central role in every individual's life not just in terms of the monetary reward but also as an advocate of self-esteem and value within the community and a forum whereby personal relationships are initiated and maintained. In view of this fact and the decline of opportunities for people with disabilities to enter the labour market there is an increasing need for the continuing improvement of skill levels and personal and social development of people with disabilities. Initiatives such as work experience, supported and open employment encourage more active participation by local employers and assist in the integration of people with intellectual disabilities into the wider community.

In a time of ongoing change, we are continuously endeavouring to broaden the experiences for each trainee and to accommodate development and to provide different opportunities to each person we support.

Please refer to the following supporting document for information on Education and Training:

BOCSI. *Access to Education, Training, and Employment for Adults Supported by the Services* (2015). 2015NP10. Updated 2021.

3.1 Programme Development and Approval

It is the policy of the BOCSI to ensure that all Education and Training Programmes are developed and approved in line with funding and awarding body requirements and the BOCSI's Mission, Vision and Values. Pre-existing programmes cannot be accessed by other centres without the successful completion of the Programme Development and Approval Process in full. In the instance of pre-existing programmes, it is possible that both the feasibility study (regional) and the programme development process can be submitted in the same request to the NLT.

The development and approval of existing and new programmes include:

- Programme Proposal / Business Case
- Development of National Education and Training Programme Specifications
- Programme Evaluation Process
- Internal Approval Process
- External Validation Process
- Local Education and Training Programme Standard Specifications (ETPS)
- Vocational Training Programme Managed in partnership with Limerick and Clare ETB as a business model via a business plan.

The development and approval of education and training programmes must be conducted in a systematic way allowing for internal and external consultation with stakeholders including time for programme evaluation. Prior to engaging in the process, the required resources need to be identified and approved via the BOCSI Management structure to allow for a feasibility study to be undertaken, and to ensure that the resources remain in place to complete the programme development process. The BOCSI Management structure will be made aware at the beginning of the process that there may be a call for additional resources if required to complete the programme development and approval process.

Please refer to the following supporting documents for details on Programme Development and Approval:

BOCSI. *National Policy & Procedure on Programme Development and Approval in QQI Validated*
      BOCSI *Education and Training Programmes,* 2023

Education and Training Programmes Specification (ETPS)

Education and Training Programmes Specifications are in place to support and enhance the overall delivery of learning to each learner/trainee. Historically, this document was part of the oversight process of the HSE CHO teams.

The ETPS is a Quality Assurance document in the framework for the delivery of the education and training programmes.

QQI Accredited Programme Development & Approval Process
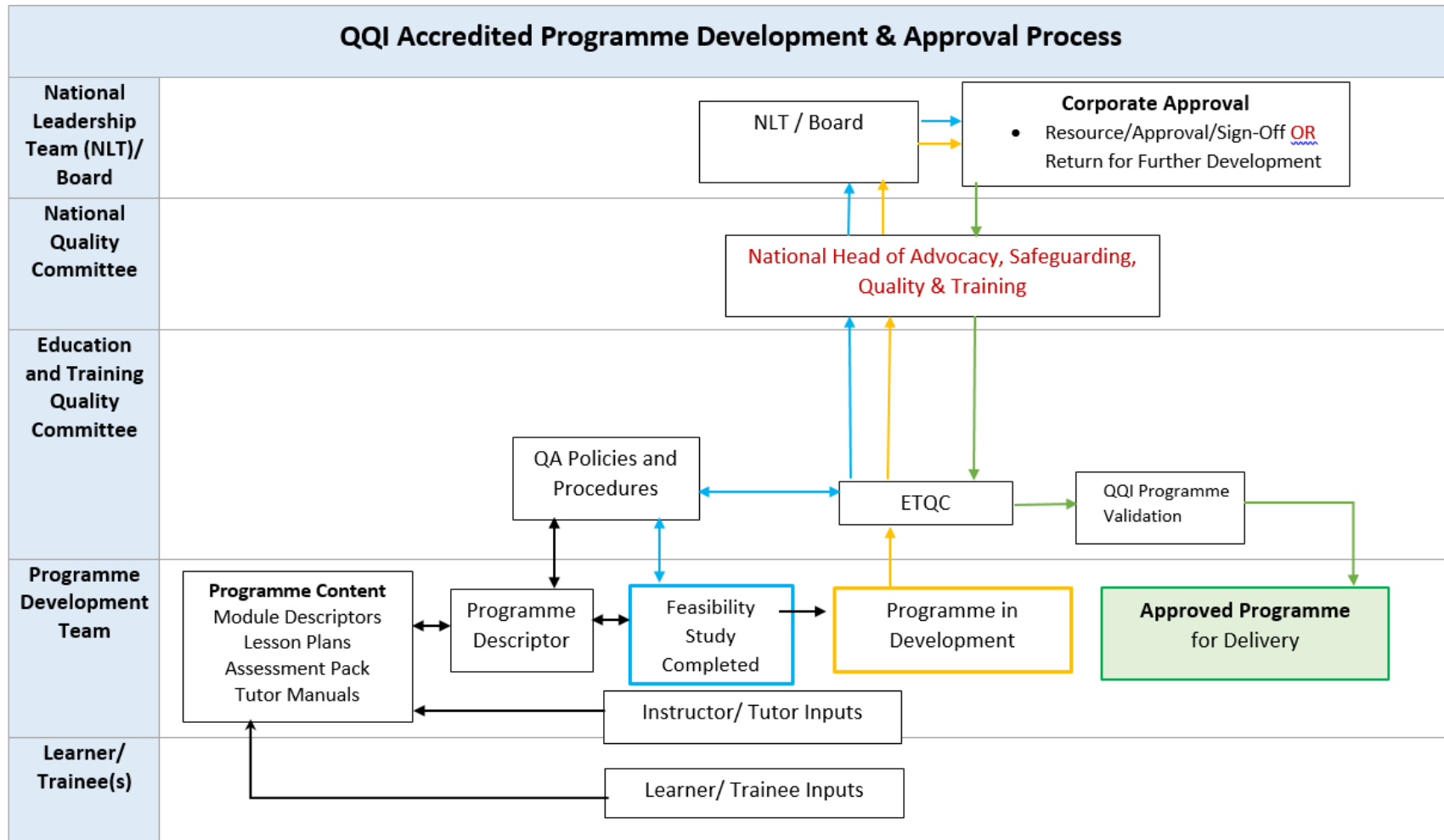
3.2 Programmes and Implementation

All BOCSI Education and Training Programmes must be designed in line with the BOSCI's Mission, Vision and Values and embrace inclusion.

All programmes must be developed in line with the stated aims, objectives, and learning outcomes for each programme as set out in award specifications.

It is the policy of the BOCSI to ensure programmes are developed in line with the BOCSI Policy on Access to Education, Training and Employment for Adults Supported by the Services, and the National Framework of Qualifications. All programmes include information about Access, Transfer and Progression and specific outcomes.

All programmes must comply with National and Local Education and Training Specifications prior to commencing training.

3.2.1 Implementation and Delivery

Both pre-existing and newly validated programmes can be in place in centres and the oversight of QA and programme content is the responsibility of the Education/Training Manager who is a member of the ETQC. Therefore, the manager's knowledge will be concurrent with all QA procedures, including the National Policy & Procedure on Programme Development and Approval in QQI Validated BOCSI Education and Training Programmes. The Education/Training Manger and local team will conduct a series of team training and development events which would include:

- Tutor Collaboration Meetings
- Exploring and Developing QQI Resource Library
- Engaging with External Partners and Providers
- Regular Guidance via the mandated person from the ETQC
- Training via FET Sector where available
- Programme Duration and Academic Calendar
- Monitor QQI Updates

The Education/Training manager will advise the ETQC when the teams' preparation is complete and schedule programme delivery.

Please refer to the following supporting documents for details on Programme Development and Approval:

BOCSI. *National Policy & Procedure on Programme Development and Approval in QQI Validated* BOCSI *Education and Training Programmes,* 2024

National Framework of Qualifications

3.3 Learner/Trainee Admissions, Progression and Recognition

Information for Learners/Trainees

It is the policy of the BOCSI to ensure learners/trainees are provided with clear and accurate information about the programmes they wish to attend and the awards they wish to pursue. Under the 2012 Education and Training Act all learner/trainees will be provided with information on:

- Awards
- Access, Transfer, and Progression Options
- Protections for Enrolled Learners (should programmes cease)

For further information, please refer to the supporting documents *BOCSI QQI Learner/Trainee Handbook* and *Local Learner/Trainee Induction Booklets*.

Admissions

The Brothers of Charity Services Ireland National Policy on Applications for Service/Supports, Transfers, and Withdrawal of Service/Supports, is guided by our vision statement "Love and Respect for All Towards a Full and Valued Life" and our ethos document. It is characterised by an

individualised approach to service delivery with an emphasis on designing supports based on the person being supported needs, choices and wishes.

The Brothers of Charity Services Ireland shall ensure that application procedures and practices take account of the need to protect residents from abuse by their peers in compliance with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 No. 24.(1)(b).

The National Policy on Applications for Service/Supports, Transfers, and Withdrawal of Service/Supports Policy and Procedures have been developed to: -

- Outline the services available;
- Identify who we provide supports to;
- Clarify how to apply for services;
- Ensure each application for admission to a Designated Centre is determined on the basis of transparent criteria in accordance with the Statement of Purpose as outlined in the Care and Support of Residents in Designated Centres Regulations 2013 No. 24. (1)(a).
- Outline procedures on Applications, Transfers and Discharges;
- Outline procedures on Appeals.
- Outline regulatory requirements pertaining to Applications for Service/Supports, Transfers, and Withdrawal of Service/Supports as outlined in Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013.

Criteria for admission

The BOCSI provide services to;

- People with Intellectual Disabilities/Autism
- Supports are only provided to people who have received relevant funding from the HSE.

Applications

BOCSI is committed to the provision of high-quality services working with individuals who are referred to our service. The application, and transfer process is outlined below:

1. Individuals seeking services are assessed by the HSE Day Service Opportunities Officer to establish level of need, funding and establish suitability for training.
2. All potential learners/trainees are referred to the relevant training programme by the HSE.
3. A visit and tour of facilities is organized between the Programme Coordinator, the new referral, and their family; details of training programme and service delivery are discussed.
4. A sample period of a week at the centre is organised for the potential new referral.

5. Once the sample is complete, the New Referral and Family contact the HSE to indicate their training programme preference.
6. The HSE then issues a referral letter to the relevant training programme.
7. Once the letter is received, the Programme Coordinator contacts the new referral and parents/guardian to arrange an induction meeting to complete the administrative requirements for admissions.
8. Upon completion of all paperwork, the admission is referred to the Admissions Committee.
9. The Admissions Committee reviews and considers all applications for each region.
10. A letter is forwarded to parents notifying of the outcome of their application.
11. Training entry form is completed. This form is sent to the HSE while a copy is enclosed in learner's training folder located in the training location.

Appeals

The Brothers of Charity is a service provider. Those learners who are not eligible for Education and Training Programmes may secure a placement in Day Place. If unsuccessful in securing a placement Parent/Guardian may appeal to the Manager of Disability Services, HSE who may intercede in their behalf.

Protection for Enrolled Learners (PEL)

BOCSI has ensured that Protection for Enrolled Learners' (PEL) arrangements are in place to safeguard learners attending **education and training programme;** these protections are consistent with the requirements of Part 6, Section 65 of the Qualifications and Quality Assurance (Education and Training) Act, 2012. This arrangement is in place for all learners assigned a place **on either the Caritas or Streetwise Programmes**.

Direction provided by QQI on PEL requirements:

"Programmes that exceed three months in duration are liable to PEL under the legislation. However, we note that the programmes that you offer are between levels 1 and 3 on the NFQ. QQI does not charge award/certification fees for any programme at levels 1 – 3 on the NFQ. In view of the pending establishment of a national Learner Protection Fund for the purpose of PEL, we propose that on an interim basis that PEL will not be required in respect of your programmes at Levels 1 – 3. This is consistent with our approach to the award/certification fees.

The above is without prejudice to your return in respect of the QQI/DFHERIS questionnaire in relation to PEL liable programmes."

Level 4 Programme

Arrangements are in place between the Limerick and Clare Education and Training Board and Brothers of Charity Services Ireland to comply with Section 65(4) (a) of the Qualifications and Quality Assurance (Education and Training) Act 2012 in respect of all learners on the Level 4 programme, leading to a QQI Award. This arrangement covers the full period of accreditation of the programme, will cover a maximum of 26 learners enrolled on the programme at any given time.

In the event that the Brothers of Charity Services Ireland ceases to provide the programme, before their learners have achieved the above award, we the Limerick and Clare Education and Training Board have agreed that the learners on the above programme(s) may transfer into the following similar programme at this organisation so that they can complete the programme.

Access, Transfer and Progression

Exits

On completion of training, a training exit form must be completed, signed by the manager and forwarded to the Day Opportunities Officer in the HSE.

Each Tutor/Instructor completes an End of Training Report and all completed modules etc. are entered the RT folder.

The Tutor/Instructor who monitors the training programme completes an end of training report form which details modules undertaken, certification achieved and completes an end of training evaluation form with the learner.

A Learner/Trainee may exit a programme at any time, however this would involve consultation with management, parent/guardian and support team. Following this should the learner still wish to leave the service a home visit by the social worker is arranged and a withdrawal from service form is completed.

Transfers

Transfers apply to changes of location between and within service areas and to transfers from other areas/organisations to the Brothers of Charity Services Ireland. For people within an education and training programme the need for a transfer should be identified as part of their Individual Training Plan. The following should be completed prior to a transfer taking place:

- A current plan should be reviewed and updated.
- The plan should include a profile of the person transferring.
- All relevant information, including resources available to the person transferring, should be discussed and agreed between service areas.
- A timeframe for transfer should be agreed.

Progression

The Limerick and Clare; and Cork Education and Training Boards Ireland have courses that may be suitable for transfers or progression on completion of BOCSI Education and Training Programmes. Both the Limerick and Clare and Cork ETB's deliver courses from Level 1-6 on the NFQ.

The following courses are available through BOCSI Vocational Training Programme (Clare) and may be suitable options for progression:

- QQI Level 3 Employability Award; 3M0935

- QQI Level 3 Community Living; SPA 340098
- QQI Level 3 Introductory Skills; SPA 340106
- QQI Level 4 Retail Skills; 4M1998

If a learner/trainee has achieved certification at QQI Level 3, there is a progression option at Mary Immaculate College, Limerick.

  o QQI Level 4; Certificate in General Learning and Personal Development; 4M2010

If a learner/trainee has achieved certification at QQI Level 3 or 4, there is an option at University College Cork where learners can progress to study the Active Citizenship course.

If a learner/trainee has achieved certification at QQI Levels 5 and 6 there are options in universities, institutes of technology and private third level colleges. There is a programme called the Higher Education Links Scheme (HELS) allows further education learners with specific awards to access a wide range of third level courses in most of Ireland's universities and institutes of technology. Under this scheme a number of places are reserved by higher education institutions, for QQI applicants for entry to a range of 3rd level courses. When quotas apply, QQI applicants compete with other QQI applicants for places.

Programme Monitoring and Review

This occurs through learner evaluation forms and learner feedback, as well as schedules ITP meetings. An in- house data base exists which tracks trends and data pertaining to progression routes quantifying training and progression/exit routes as well as levels undertaken.

Please refer to the following supporting document for details on Access, Transfer and Progression:

BOCSI. *National Policy on Applications for Service/Supports, Transfers, and Withdrawal of Service/Supports*. (2017). NP201/21.

Section 4 Staff & Human Resources

4.1 Human Resources & Training Departments

The BOCSI Human Resources (HR) and Training Departments provides a range of planning and compliance services in staff recruitment, development and retention. The continued development of relationships with trade unions and the various funding bodies is an essential component of this service. The HR department undertakes the advertisement, recruitment, and staff retention processes in conjunction with the Service Management structures.

The Training Department undertakes to establish a framework for assessing and addressing the ongoing training and development needs of frontline staff.

The position of Employee Welfare Officer was established as a further support mechanism for staff through the development of employee assistance programmes.

Property maintenance, canteen/catering facilities, laundry, Health and Safety and transport services are managed through local structures.

4.2 Staff Recruitment and Selection

It is the policy of BOCSI to recruit and retain staff of the highest calibre with the qualifications and experience necessary to provide an efficient and effective service in a manner which is fair and consistent with the legislative requirements of the Employment Equality Acts of 1998 and 2004.

Personnel performing specific assigned tasks shall be qualified on basis of appropriate education/training and or experience as required. Personnel shall demonstrate appropriate attitude and behaviour in line with the circumstances and values of the organisation. Each role within the training Centre has a clearly defined job description and qualifications criteria relevant to the post.

Management shall:
- Recruit and select personnel on the basis of capability to satisfy defined job descriptions and person specifications.
- Provide a work environment that fosters excellence and a secure work relationship.
- Establish procedures for personnel development.
- Ensure that all personnel recognise their involvement and influence on the quality of training provided to trainees.
- Encourage contributions that enhance quality training by being responsive to staff feedback and by acknowledging achievements.
- Review at appropriate intervals the factors that affect personnel's commitment to provide quality training.

Please refer to the following supporting document for details on Staff Recruitment:
BOCSI. *Staff Recruitment and Selection Policy* Draft (2023).

Please refer to the following supporting document for details on Staff Training and Development:
BOCSI. *National Staff Training and Development Policy* (2020).

BOCSI HR Staff Recruitment and Selection Process

HR Dept.

- Job description developed with Line Manager
- Approval for recruitment of position
- Prepare job advertisement
- Interview Panel created and interview schedule confirmed
- Reference Checks and Garda Vetting undertaken
- Make offer to successful candidate(s)

Manager

- Complete vacancy review form and submit to HR
- Informal queries to manager for job
- Shortlist for interview
- Manager confirms location, setup, and employee start date.

HR Admin

- Job advertisement placed
- Applications received via candidate manager
- All documentation made available to panel members with schedule
- Complete post-interview screening and inform candidates.
- Prepare and issue contract, relevant docs, and training dept. links
- Inform Manager & ICT Dept.

Candidate

- Candidate submits application
- Attend interview and submit documentation
- Commence Employment

Interview Process

- Conduct Interviews
- Candidate Selection and return interview selection process to HR Dept.

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4.3 Garda Vetting

The Brothers of Charity Services Ireland are committed to the need for the continuing review and strengthening of procedures in the area of recruitment and selection of staff particularly in relation to the validation of information supplied by candidates on their application form and pro-active verification of references from previous employers. As staff employed in our services have access to vulnerable individuals we will strictly enforce the recommendations of the Department of Health & Children in relation to obtaining Garda Vetting in respect of all new employees entering our services.

Garda Vetting Process

The Garda Vetting process is administered by the Human Resources Department and this procedure is operated on a strictly confidential basis. The Head of Human Resources for the Services together with specific Human Resources staff are the nominated staff members responsible for the Vetting process. No one else may initiate Garda Vetting procedures.

4.4 Academic Staff Criteria

The BOCSI Staff Recruitment and Selection Policy clearly outlines the job/role description and personal and professional competencies required.

Programme Management	Programme Delivery
Education and Training/Manager	Tutor/Instructor
Programme/QQI Coordinator	Assistant Instructor
	Support Worker

Interview Process for Tutor/Instructor Roles
Prior to attending for interview candidates for these positions will be given a task brief via email for completion and submission on attendance for interview. This submission is graded as part of the interview process. (See below)

Module Title: Self-Advocacy	Assessment Code: 3N0553
Unit 3: Brief	**Weight: 50%**
Title: Practicing Self-Advocacy	

Title:	**Practicing Self-Advocacy**
Learning Outcome(s) Addressed:	**SA5** Demonstrate an awareness of self by exploring strengths, interests, ability to share problems, ability to make choices, knowing what you want, emotions, areas for improvement, goals **SA6** Communicate effectively by recognising factors which contribute to and impede communication including context, timing, clarity of message, status, body language **SA7** Demonstrate an understanding of the self-advocacy methodologies required to find solutions to real or fictional personal issues by using a range of advocacy skills on identified issues, identifying relevant support person/organisation, being clear about what you want, planning appropriate methodology, implementing plans **SA8** Evaluate, with guidance, own performance of the skills of advocacy by reflecting on areas where performance was satisfactory and where it could be improved.
Instructions:	We would like you to develop a scheme of work to address the identified Learning Outcomes SA5-SA8. This should reflect various learning strategies engaging the learner, to include: • clear class project outlines / lesson plans / activities • time-frames • process of evaluating learner engagement / assessment methodologies • proposed location / delivery format by tutor

It is the culture of the organisation that individuals we support are included in the interview panels/process. Their feedback is also recorded and reflected in the final marking process.

Please refer to the following supporting document for details on Staff Recruitment:
    BOCSI. *Staff Recruitment and Selection Policy* (Draft Under Review) (2023).

4.5 BOCSI Code of Practice

Staff members of the BOCSI shall undertake and abide by the Code of Practice the and the fundamental values that underpin the activities of the BOCSI, and shall embody the principles of good practice in all their actions. As outlined in 'BOCSI Code of Practice for all Persons Who Support Adults Using the Brothers of Charity Services. 2015/NP07(c). 2021'

The key principals underlying this Code of Practice are that staff will:

1. Treat all people who are supported by our services with dignity and respect;
2. Protect the rights and promote the independence and interests of people who are supported by the service;
3. Respect the rights of people who are supported by our services whilst seeking to ensure that their behaviour does not harm themselves or other people;
4. Strive to establish and maintain the trust and confidence of people who are supported by our services;
5. Support people who are supported by our services to protect themselves from danger or harm, using least restrictive practices;
6. Uphold public trust and confidence in the Brothers of Charity Services Ireland;
7. Be personally accountable for the quality of their work and take responsibility for maintaining and improving their knowledge and skill.

Please refer to the following supporting documents for details on Code of Practice:

BOCSI (2019). *Code of Practice for all Persons Who Support Adults.* V4. 2015/NP07(c).

https://www.brothersofcharity.ie/pdfs/code-of-practice-adults-2008.pdf

4.6 Staff Development

The BOCSI, as a learning organisation, values and is committed to the continuous learning and development of Staff. This is recognised as essential for the provision of a good quality services, effective performance and the achievement of strategic and operational goals. Training and Development provides a mechanism for building skills and competencies of employees including knowledge, understanding and values through a range of different learning methods. The organisation is committed to equality of opportunity for all staff.

Together, the staff team work to support and deliver training and support to Learner/Trainees for the duration of their Education and Training Programme. All BOCSI staff access Continuous Professional Development training, and refresher courses through the Brothers of Charity, Local ETB's and Education Centres to enhance and hone their skills so that they may continually deliver a

quality service to our Learner/Trainees. All staff abide by the Brothers of Charity ETHOS and uphold its values and principles.

Please refer to the following supporting documents for details on training and Development:

BOCSI. *National Staff Training and Development Policy* (2017). 2017NP23. Updated 2020.

Each of the five Brothers of Charity Services Ireland regions has its own Human Resources Department and Manager.

Brothers of Charity Services Ireland Human Resource Departments:

Colette Geoghegan
Human Resource Manager
Brothers of Charity Services Ireland Mid-West (Clare)
Banner House
Clare Road
Ennis, Co. Clare
colette.geoghegan@bocsi.ie
Phone: 065 6849400

Yvonne Cummins
Human Resource Manager
Brothers of Charity Services Ireland – Southern Services
Lota, Glanmire
Cork
yvonne.cummins@bocsi.ie
Phone: 021 4821012

Section 5 Teaching and Learning

The BOCSI is committed to ensuring that every individual we support can enjoy the benefits of inclusion in education, training and vocational opportunities. The Programmes are committed to the concept of life-long learning, and respects and values the steps each individual takes in their life to realise their goals. As an organisation, we encourage each individual supported to access life-long learning and where possible we will provide support through education and training programmes. We will also identify and source appropriate supports to facilitate their learning needs.

The BOCSI is committed to creating a learning environment that will enhance the skills, knowledge, learning abilities and enthusiasm of individuals so they can participate fully in the workplace and in the community.

5.1 Induction

On commencement of a BOCSI Education and Training Programme, each learner receives Induction Training. The education and training programmes include a course determination/induction phase for the initial 4 months, which includes Learner Induction and the development of an *Individual Training Plan (ITP).* The programme is then divided into eight *domains* or fourteen *project areas* each incorporating a range of core modules, which are covered in induction training and then selected to achieve individual goals. These goals are reviewed every 4 months and new goals are then set for the following period. Timetables are developed and reviewed as goals are identified and achieved.

All new referrals to a BOCSI Education and Training Programme are provided with a comprehensive Induction Booklet, which provides the foundation for training during the course determination/induction phase.

On completion of Induction Training, Senior Tutor/Instructors will complete induction records and support learners/trainees to develop an ITP to achieve their next goals.

Learner/Trainee induction covers the following internal and external aspects of Education and Training:

Induction	
Table of Contents and Checklist:	
1.	Welcome Letter
2.	General Info
3.	General Safety & Code of Conduct
4.	Programme Aims and Objectives
5.	Learning Structures
6.	Contract of Placement
7.	Individual Service Agreement
8.	Staff & Contact Info
9.	Holiday / Team Meeting List
10.	Key Worker System
11.	Individual Training Plans (ITPs)
12.	Person Centred Plans (PCPs)
13.	Personal Outcome Measures (POMs)
14.	Sample Timetable
15.	CEEP
16.	PEEP
17.	Self-Advocacy at Streetwise
18.	Local & County Advocacy Representatives
19.	Independent Advocates
20.	Safeguarding – Handout & Video
21.	Designated Officer
22.	First Aid/ Health and Safety
23.	BOCSI Education & Training Policy
24.	Complaints Procedure
25.	GDPR – General Data Protection Regulation
26.	New Directions
27.	Complete Induction Record

External Induction	
Documents to be Reviewed as Part of Learner Induction	
28.	International Agreement on the Rights of Disabled People
29.	Covid-19 Supports & Easy Read
30.	QQI Learner Manual

5.2 Learner/Trainee Feedback

Feedback is a fundamental element of continuous improvement and quality assurance. In order for the BOSCI to establish the exact needs and expectations of our learners/trainees, and stakeholders, feedback is regularly sought throughout the duration of service provision. Feedback is by collected and analysed through:

- Programme Self-Evaluation
- Programme Review
- Learner Programme Feedback
- Learner Module Feedback
- ITP feedback in line with Academic Calendar
- Regular Keyworker Check-ins
- Fortnightly learner-led advocacy meetings
- Annual Review: Consultation with Individuals Receiving Services & Supports
- Annual Review: Questionnaire for Families and Stakeholders

5.3 Communication with Learners/Trainees

The BOCSI promotes an open communication approach, where all forms of communication are equally valued, promoted and used as per each learner/trainee's needs. The Services are committed to clear and effective communication across the organisation, underpinned by the belief that effective communication:

- Assists individuals supported by the services in making informed choices towards a full and valued life.
- Promotes good quality service provision.

Learners/Trainees are encouraged to communicate and provide feedback on their individual and collective experiences and are consulted when developing programmes, assessments, and services.

Please refer to the following supporting documents for details on Communication with learners/trainees:

BOCSI. *Policy on Communication with Individuals Supported by the Services* (2022). 2015/15.
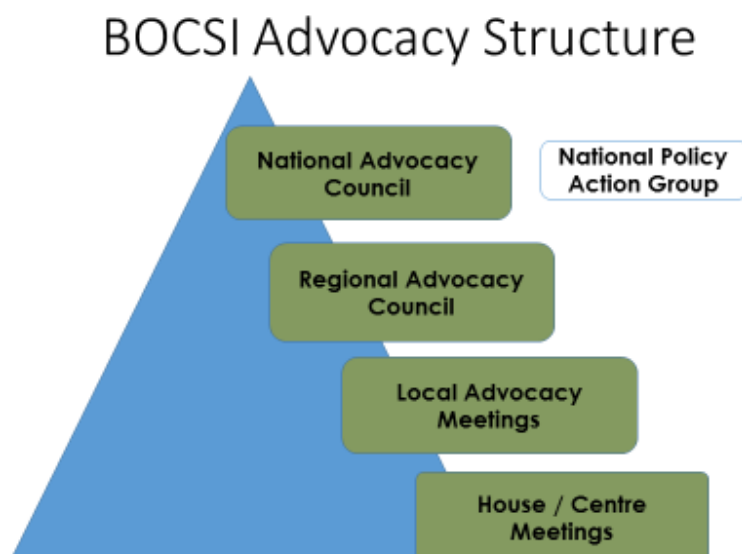
5.4 Advocacy

Advocacy is about people speaking up for themselves and others. As a service provider, we must listen and respond to what people are saying about their own choices, needs, wishes and views. Self-Advocacy is when an individual speaks-up for themselves through their chosen method of communication.

Advocacy is the process through which people are given a voice. They are given the tools and knowledge to enable them to express their views themselves or through an "Advocate" - a person who communicates the views and requirements of the individual to a wider platform in services.

Structure

The Brothers of Charity Services recognise the rights of the individual, and support the system of Advocacy throughout their services. Within the Brothers of Charity services, the National Advocacy Council represents all of the people who use our services, and offers their talents, experiences and views to the wider organisation. Local groups elect the Local Advocacy Council, which in turn nominates members to the National Advocacy Council. The National Advocacy Council meets with the Chief Executive's Forum on a bi-annual basis.

The National Advocacy Council was formed in 1998 to support a key principle of the Brothers of Charity Services that the people who use our services are formally involved in the local, regional and national operation of our Services and remain an integral part of our governance structure. At a local level, advocacy groups are established where individuals are supported to speak and act on their own behalf and on the behalf of others via peer advocacy. Each Region of the Services has a Regional Advocacy Council which deals with issues which need to and can be addressed at regional level. Each Regional Advocacy Council elect representatives to the National Advocacy Council who meet bi-annually with the Chief Executive's Forum at which issues of national concern are raised and addressed. Each Regional Advocacy Council also meets annually with the relevant subsidiary Board.

BOCSI Advocacy Structure

- National Advocacy Council
- National Policy Action Group
- Regional Advocacy Council
- Local Advocacy Meetings
- House / Centre Meetings

Charter of Rights

The Human Rights Charter 2021, developed by the National Advocacy Council in line with the United Nations (UN) Convention on the Rights of Persons with Disabilities is reviewed and discussed with each learner/trainee upon induction. The Charter sets out the rights and responsibilities of the learner/trainee and is an integral part of all aspects of training.

Duty of Staff

Self-advocacy is a vital dimension of our services, therefore it is the duty of each staff member to encourage and aid people who use our services to exercise choice and express their opinions. Each service for adults has an elected Self-Advocacy Group to represent the interest of people who use our services.

With the introduction of Person Centred Planning, a framework for Advocacy, it is essential that all Staff members are aware that the people they serve have the right to speak up for themselves. It is the duty of all staff members of the Brothers of Charity Services to listen to people who use our services and act on any issues that may arise

5.5 Information for Learner/Trainees

The following is a list of methods through which learner/trainees can receive information relating to any relevant area of a programme:

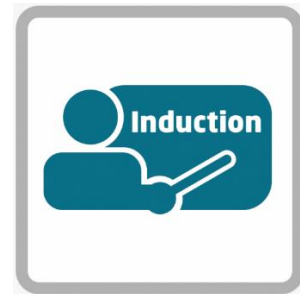**Facebook**   **Instagram**   **Whatsapp Info Group**   **Induction**

Advocacy Meetings   **Brochures**   **Internet/Webpages**   **Notes/Letters**

Easy Read & Accessible Documents   **Open Days / Information Evenings**

5.6 Compliments, Comments, and Complaints

The Brothers of Charity Services is committed to providing a high quality service to all. People who use the service are recognised as stakeholders in our services and their views are solicited in the preparation of national, regional and local strategies, policies and plans.

Individuals and families also give feedback on their experience of service; this is a right and is welcome, as it helps the Brothers of Charity Services Ireland to improve continuously. The National Health Strategy 'Quality and Fairness' includes in its vision "A Health System that encourages you to have your say, listens to you, and ensures that your views are taken into account". It also refers in Action Point 49, to proposed legislation and statutory complaints procedures.

The service is mindful that at times people who use the service may wish to make a comment or compliment about the service they have received. Equally, they may wish to make a complaint if they feel they did not receive as good as a services as they expected. As a result, and in keeping with the BOCSI open policy, a procedure has been introduced which facilitates all who avail of our service and their families/guardians to make comments, compliments or complaints about the service provided.

Organisational Chart for Complaints Procedures
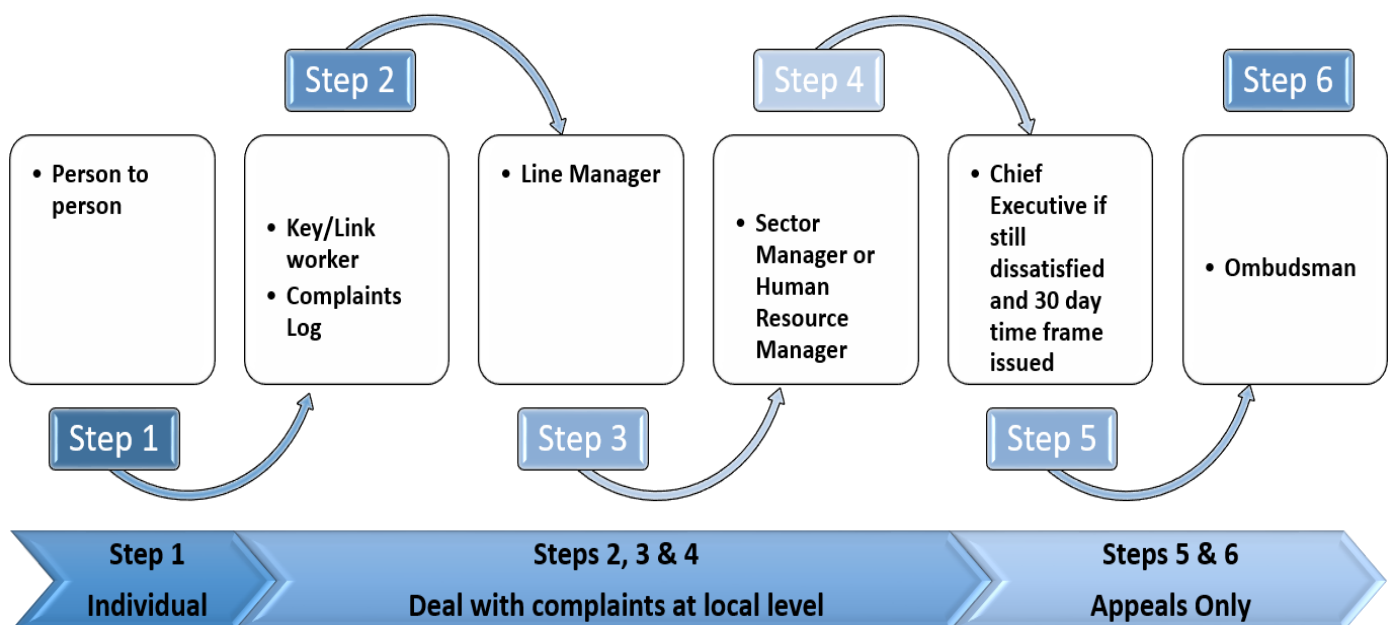
Complaints Appeals Process
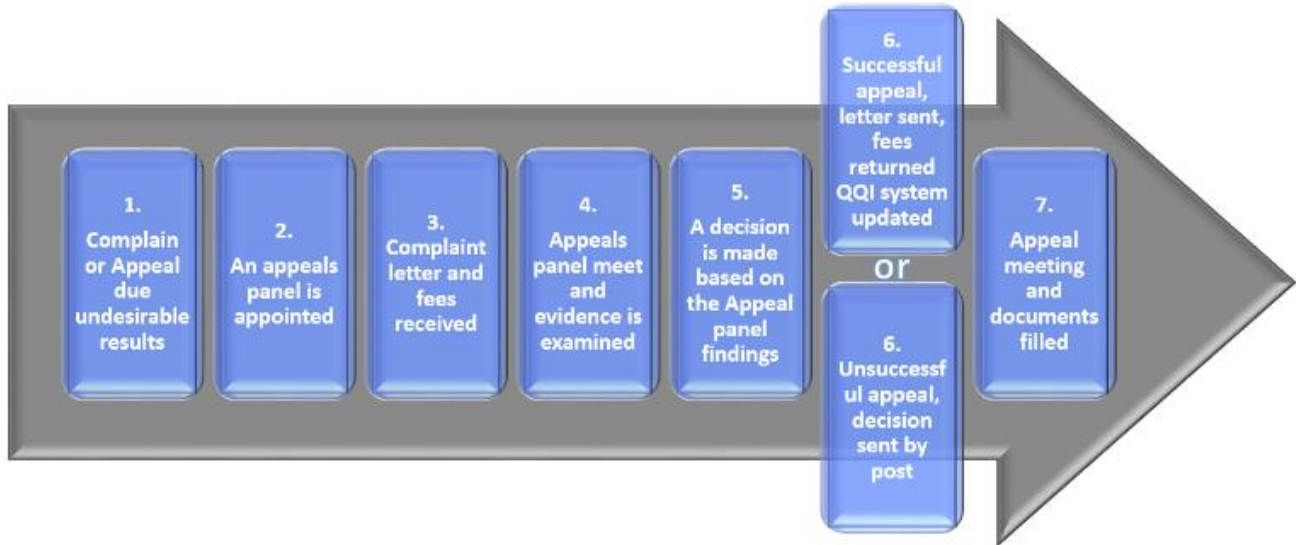
Please refer to the following supporting documents for details on the Complaints Procedure:

BOCSI (2021). *Policy for the Management of How to Handle Complaints.* 2021/NP42.

5.7 Cross Collaboration and Community of Practice

BOCSI Training Programme Tutors/Instructors engage in cross collaboration training in teaching, learning and assessment to ensure staff are concurrent in best practice. This is facilitated by:

- Meetings held on Microsoft Teams every 6 weeks facilitated by both QQI coordinators and rotating tutors/instructors between both regions to discuss programmes, assessment methods, resources and general sharing of ideas under a prearranged theme.

- Tutors/instructors in both regions have shared access to a Teaching and Learning Resource Library which includes resources methodologies, instructions, briefs, resource websites, and lesson plans, digital workbooks etc. regularly updated and reviewed.

- The Academic Calendar facilitates one pre-arranged training day in the academic year for Tutors/Instructors to meet in person. This day is to facilitate the sharing ideas, practices, and strategies to support learner engagement. Planning of such events is to include input from academic staff from the ETB (FET) and academic sectors. Also, to include training facilitated/provided by ETB or other academic bodies in the interest of continued professional development and engagement in community of practice.

Section 6 Assessment of Learners

6.1 Quality Assuring Assessment

In assessing learner/trainees for certification, it is our policy to comply with the criteria and procedures set down by the awarding bodies.

Quality assured assessment ensures learner/trainees have access to the National Framework of Qualifications (NFQ), enabling them to progress through the levels.

Assessment is quality assured through the following processes:

- **Assessment Activities**:
  - Internally developed Learner/Trainee Progress Record, Photo and Video evidence, Collections of Work
  - QQI Assessment Techniques
    - Assignment
    - Project
    - Portfolio/Collection of Work
    - Skills Demonstration
    - Examination
    - Learner/Trainee Record

- **Senior Tutor/Instructor Assessment Process**
  - Assessment processes, policies and procedures implemented
  - Assessments devised/applied in line with validated programme
  - Learner/Trainee evidence marked
  - Assessment results recorded
  - Assessment decisions and associated documentation made available

- **Authentication Process**
  - Internal Verification of the Process and Results
  - External Authentication
  - Results Approval Process
  - Appeals Process

Please refer to the following QA documents for specific details on all aspects of the *Assessment Process*:

1. Appendix 2:

- BOCSI Education and Training Programmes Assessment Regulations

2. BOCSI Education and Training Programmes Tutor/Instructor Handbook

Quality Assuring Assessment Process

Assessment – Assessor Role

a. Assessment processes, policies, and procedures implemented
b. Assessment instruments devised/applied in line with validated programme
c. Learner evidence marked
d. Assessment result(s) recorded
e. Assessment decisions and associated documentation made available to the authentication process

Authentication Process

a. Internal verification
  i. Application of all assessment procedures verified
  ii. Outcome of the assessment process monitored i.e. the assessment results on a sample basis
b. External authentication
  i. External authenticator(s) assigned to moderate results

Results Approval Process (RAP)

a. Results Approval Panel established
b. Assessment results approved and signed-off
c. Results made available to learners

Appeals Process

Appeals process implemented

Request for Certification

All learner results submitted to QQI for certification

6.2 Assessment Certification

The certification body for the formal learning paths in the programmes is Quality and Qualifications Ireland (QQI).

6.3 Recognition of Prior Learning (RPL)

The BOCSI is committed to recognising prior certified learning as part of its commitment to promoting equality of access, lifelong learning, and progression options onto all our education and training programmes.

Prior certified learning attained outside of the Common Award System (CAS) is subject to the 5-year rule as per QQI guidelines.

Informal learning pathways are also acknowledged and a learner may identify that they require less time within the education and training programme i.e. to achieve a specific award only.

Please refer to the following supporting documents for details on RPL:

> BOCSI. *Recognition of Prior Learning for Learners/Trainees on QQI Validated BOCSI Education and Training Programmes, Policy & Procedures*. (2023)

6.4 Certification of Appeals

It is the policy of the BOCSI Education and Training Programmes to ensure fair and consistent assessment of learners/trainees. BOCSI operates an appeals process to enable learners/trainees to appeal assessment results from programmes with an awarding body. E.g. QQI

Only approved results can be formally appealed by the learner/trainee. All results are approved through the BOCSI Results Approval Panels.

Please refer to the following supporting documents for details on Appeals:

> BOCSI. *Appeals Process for Learners/Trainees on QQI Validated BOCSI Education and Training Programmes, Policy & Procedures.* (2023)

6.5 Malpractice

BOCSI Education and Training Programmes are committed to ensuring assessment integrity at all stages of the assessment process. The BOCSI Quality Assurance Policies set out the arrangements for protecting the integrity of the assessment process and the subsequent validity and currency of learner/trainees' results. To this end, BOCSI has developed and produced procedures which address any instance of assessment system malpractice.

> Please refer to the following QA documents for specific details on all aspects of ***Assessment Malpractice:***
>
> **1. Appendix 3**:
>
> - BOCSI Education and Training Programmes Procedure for Managing Assessment System Malpractice
>
> **2.** BOCSI Education and Training Programmes Senior Tutor/Instructor Handbook

Section 7 Supports for Learners

7.1 Overview

Individuals enter into BOCSI Education and Training Programmes through the referrals process undertaken by the HSE. As part of the admissions process, individual needs are identified and funding is requested to implement the appropriate supports around each learner.

Multi-Disciplinary Supports

The following are the multidisciplinary supports available to Persons Supported within BOCSI.

• Occupational Therapy
• Physiotherapy
• Psychiatry
• Psychology
• Social Work
• Speech & Language Therapy

One of the fundamental principles of the BOCSI is that of Team Working. Frontline staff together with multidisciplinary support services, form part of the Team to support the Person Supported in their development. Our multidisciplinary teams share common goals, but, to a large extent, work independently of one another, each representing their own disciplines and using discipline-specific skills. Each team member is aware of each other's activity and share resources and feedback to team meetings on the service user's progress. The advantage of this model of team working is that members are highly skilled in their speciality areas. All multi-disciplinary professionals are guided by best practice, which is informed by their Code of Professional ethics, current research and literature and legal requirements.

Designated Officer

The Brothers of Charity Ireland have responsibility to protect and promote the welfare of those they provide support to and to provide a safe environment. This responsibility also extends to ensuring that all individuals are treated with dignity and respect. If there is a concern or suspicion of abuse, the Designated officer is available to guide and support the process of ensuring Learners/Trainees are safe. There is Designated Officer (DO) assigned to each region of the BOCSI.

Maintenance

Within Brothers of Charity Services Ireland, all centres have access to a maintenance team and maintenance Office who oversees the safety and procurement of premises. In line with the Health and Safety Act, it is the responsibility of each staff member to alert management to any risks.

7.2 Individual Training Plan (ITP)

An Individual Training Plans (ITP) is an individualised plan to support a person's learning and development around life, social, and basic work skills. An ITP is person-centred and is led by the needs and abilities of the person and is developed in collaboration with them and their circle of support (family/guardians, Key-worker and staff team, allied health care, and other stakeholders). ITPs provide for recording assessment outcomes, setting learning goals, and planning future learning experiences. ITPs are monitored by Key-workers and regularly reviewed, through quarterly ITP Planning and Review Meetings.

An ITP outlines:
- Individual Priority Goals
- Detailed Plan of Action
- Supports and Services required by each individual

ITPs are integral to Rehabilitative Training, and BOCSI Education and Training Programmes.

7.3 Person Centred Plans (PCP)

The **PCP** focuses on key domains of life such as Home, Work, Health, Finance, Autonomy, Valued Social Roles, Social Inclusion, Learning Growth & Experience, Leisure, Communication, Identity & Culture, Relationships, Life Transitions and Rights. The PCP details that which the individual considers important to them and what they need and want for a good life.

7.4 Personal Outcome Measures (POMs)

The **POMs** system is a person-centred discovery process, exploring the presence, importance, and achievement of outcomes, along with the supports that help people achieve those outcomes. With POMs, people receiving services share what really matters to them, including their hopes, dreams, and aspirations. POMs in an accredited person centred planning system developed in the United States by the Council on Quality and Leadership (CQL), and utilised by BOCSI.

Section 8 Information and Data Management

8.1 GDPR

For the purpose of the Data Protection Act and the General Data Protection Regulations (GDPR) the BOCSI is the Data Controller of personal and sensitive data of all those to whom we provide Services and those who work within the Services.

The BOCSI is committed to our obligations under the regulatory system and in accordance with the GDPR regulations. We maintain a robust and structured programme for compliance and monitoring. We carry out risk assessments to ensure that our compliance processes, functions, and procedures are fit for purpose.

In order to fulfil its obligations as a Service Provider the Brothers of Charity Services Ireland is required to create and process records which hold both personal and sensitive data. These records are kept 'in confidence' and processed in strict accordance with the privacy and data protection rights of the individual. The BOCSI shares records only for the purpose of compliance with service delivery, health, and regulatory requirements. Data will be disclosed where required or authorised by law and in line with the General Data Protection Regulations.

The protection and security of the data we process is of paramount importance to us and we have developed data specific protocols for any breaches relating to the GDPR and the Data Protection Laws. Please refer to the following supporting documents for details on GDPR and Data Protection:

- Brothers of Charity Services Ireland (2020). *Data Protection Handbook: A practical guide for Brothers of Charity Services staff to the Data Protection Act 2018 & The General Data Protection Regulations v2.*

- Brothers of Charity Services Ireland (2019). *Data Breach Procedures*. 2019/NP36

- Brothers of Charity Services Ireland (2019). *Subject Access Request (Under GDPR and Data Protection)* Procedures for Staff. 2019/NP37

8.2 Files and Record Keeping

In order to fulfil its obligations as a Service Provider, the BOSCI is required to create and process records which hold both personal and sensitive data. The records are kept in confidence and processed in strict accordance with the privacy and data protection rights of the individual.

The organization will keep in place a record and files record system that maintains the balance between the rights of the individual beings supported confidentially and the needs of the organisation in relation to the availability of information to individuals, their families, stakeholders, and those who require access to the information to effectively do their work. Effective records management is necessary to ensure that they are protected and preserved as evidence to support current and future activities to ensure current and future accountability.

The Files and Record Keeping Procedure:

- Sets out the procedures for maintaining files and record keeping in the BOCSI.
- Provides a framework to facilitate the consistent management of records which aids efficiency and accountability.
- Ensures that security and confidentiality of records are of the highest standard.
- Ensures preservation of records of permanent value and establish archival criteria to maintain and assure continued access to appropriate records.
- Is part of an organization's broader function of Governance, Risk Management and compliance and is primarily concerned with managing the evidence of an organization's activities as well as the reduction or mitigation of risk.

Please refer to the following supporting documents for details on Files and Record Keeping Procedures:

- BOCSI (2014) *Files and Record Keeping Procedure*. (Procedure No. 2014-12) Revision 1. (Updated 2023)
- BOCSI (2019) *National Confidentiality Policy.* (NP2019/33)

The key system for ~~client~~ information collection and storage is the BOCSI is the Online Information System (OLIS) which is designed to hold the personal details of all persons supported by BOCSI. Access to OLIS is restricted to key personnel in each programme. Information is stored securely on IT systems which are developed and managed by the National IT Department.

8.3 Data Retention & Destruction

A wide variety of records are held by the Brothers of Charity Services these records include health and social care records, financial records, human resources records and general administrative records. The following supporting document outlines the minimum retention period and final disposition requirements for records and applies to records of all types regardless of the medium on which they are held:

- BOCSI (2014) *Files and Record Keeping Procedure*. (Procedure No. 2014-12) Revision 1: Appendix 1 BOCSI Records Retention Schedule. (Updated 2023)

Section 9 Public Information and Communication

9.1 Public Information

The BOCSI facilitates effective two-way communication with our learners, staff, trainers, awarding bodies and other stakeholders. We are committed to providing our clients, learners, teaching and administrative staff, and the public with up to date and relevant information relating our training programmes. We believe that, to be effective, communication must be two ways and inclusive of diversity. Therefore, we are committed to provide accurate information about our programmes and services and to seek constructive feedback so that we can make our programmes and services as relevant as is possible.

9.2 Communication Values

- We strive to communicate in a professional and appropriate manner at all times and in all contexts.
- We communicate clear, accurate, objective and up-to-date information internally and externally
- We have effective systems in place that facilitates ongoing two–way communication and receipt of data and feedback from key stakeholders.
- We communicate in an honest, timely and open manner with courtesy and respect.
- The language we use is clear, concise, easily understood and written with the audience in mind
- The media we use is appropriate to the message and the audience.
- Information published in respect of programmes leading to awards on the NFQ complies with the spirit and the requirements of the 2012 Training and Education Act.

9.3. Advertisements

The BOCSI facilitates effective two-way communication with the public/prospective learners. Information about BOCSI Education and Training Programmes is made available through:

- HSE Day Service CHO Opportunities Officers
- Local Programme Brochures
- Open Days and Information Sessions

# Section 10 Other Parties Involved in Education and Training (Stakeholders)

As a disability service provider, BOCSI, Day Services (including Education and Training Programmes) are guided by HSE's New Directions. Under New Directions, providers have a responsibility to ensure that people can participate as local citizens in their own community.

10.1 Health Service Executive

The BOCSI is a first provider to the 9 HSE Community Healthcare Organisations (CHO) areas. BOCSI validate all programmes offered on HSE funded programmes with QQI. Therefore, the BOCSI are responsible for quality assurance of these programmes.

- Caritas Programme, CHO4
- Streetwise Programme, CH03

The nine Community Health Care Organizations are outlined in the diagram:
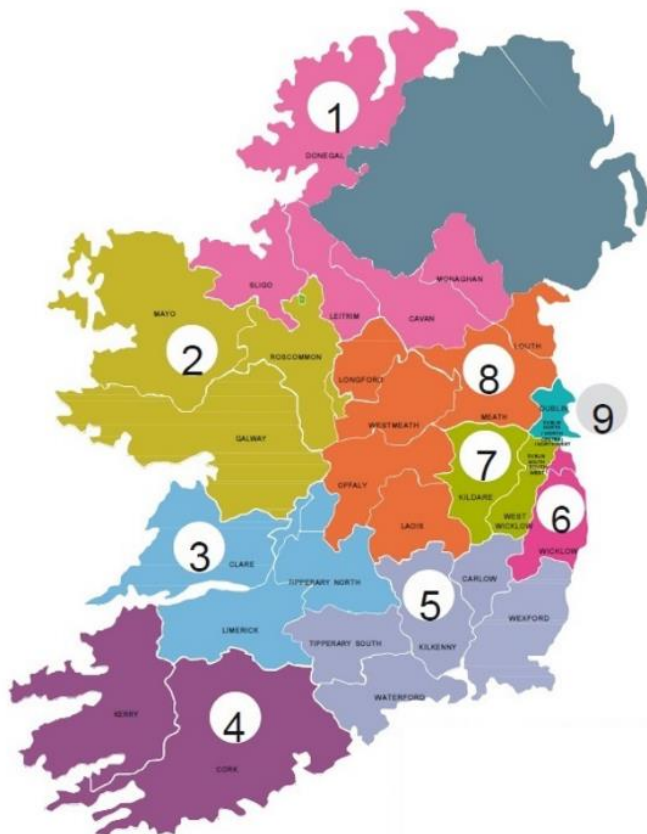
10.2 Limerick and Clare ETB

The BOCSI maintains a second provider relationship with the Limerick and Clare ETB, in County Clare, in regard to delivery of Vocational Training Programmes. The Limerick and Clare ETB owns the validated programmes with ultimate responsibility for quality assurance. The BOCSI incorporates all aspects of the Limerick and Clare ETB quality assurance system into its overall QA system.

10.3 Mary Immaculate College, Limerick

The Clare Region has worked in partnership with Mary Immaculate College on providing integrated education experiences and programmes since 2010. This relationship continues to deliver inclusive options and experiences as a QQI level 4 programme.

10.3 Department of Education

The Department of Education funds hours for tuition that offers literacy and numeracy support to learners.

Section 11 Self Evaluation, Monitoring and Review

11.1 Self-Evaluation, Monitoring and Review

The BOCSI is committed to delivering high quality service to all. It is the policy of the BOCSI to implement a system of self-evaluation, self-monitoring, and review of programmes in line with quality assurance requirements to include:

- Annual Self-Evaluation of Programmes
- Annual Programme Evaluation
- Annual Programme Improvement Plan
- Annual Quality Assurance Review

11.2 Self-Evaluation

Self-Evaluation helps to determine the success of a programme and related services and identify areas for improvement. As a provider offering programmes leading to QQI certification we have a s part of their current quality assurance system, a requirement to monitor, evaluate and improve, on an ongoing basis, the quality of programmes and services it offers to Learner/Trainees. This is achieved through a process of self-evaluation.

According to Quality and Qualifications Ireland's *Core Statutory Quality Assurance Guidelines developed by QQI for use by all Providers v2, 2016*:

"Review and self-evaluation of quality, including review of programmes of education and training, research and related services, is a fundamental part of the provider quality assurance system. The purpose of such self-evaluation is to review, evaluate and report on the education, training, research and related services provided by the provider and the quality assurance system and procedures which underpin these. In doing so, existing effective practices are identified and maintained, while areas needing improvement are addressed."

BOCSI Education and Training programmes engage in the following methods of **self-evaluation**:

- Annual Self-Evaluation Checklists

- Programme Evaluation

- Programme Improvement Plan

BOCSI Education and Training programmes employ the following quality measures as a means of **self-monitoring**:
- o Service Improvement Meetings / Management Meeting Reviews

- o Learner/Trainee Module/Course Feedback

- Learner/Trainee Evaluation Form

- Senior Tutor/Instructor Feedback Form

- Learner/Trainee Completion/Certification Rates

- Individual Training Plan and Person-Centred Plan Goal Setting Processes

- Staff Supervision and Performance Enhancement Goal Setting Processes

- Annual Programme Questionnaires

- Assessor Reviews and Reports

- Internal Verification Findings

- External Authentication Findings

Additionally, BOCSI Education and Training Programmes are subject to the following internal and external audits:

Internal Audits
- Comments, Compliments, and Complaints

- File and Record Keeping Audits

- Finance

- Fire Safety

- Health and Safety

- Infection Prevention and Control

- Medication Management

- Programme Standard Evaluations

- Risk Management

- Safeguarding

- Transport

- Work Experience Oversight and Feedback

Objective of the Internal Audit is to verify adherence to the service standards and the implementation and effectiveness of the quality system. Internal audits shall be carried out systematically on each component of the organisations training service on an element by element basis.

Internal audits shall be planned on an annual basis at a management review meeting where a schedule and team of auditors are organised for the coming year. These audits shall be performed and recorded in accordance with documented procedures by personnel who are independent of the specific activities or areas being audited.

Guidelines and documentation used by auditor will be those specified in the relevant policy/procedure or by the Senior Management Teams. See Appendix 9-10 for full list of relevant policies and procedures.

An Audit Report Shall be completed and forwarded to the centre following the audit. Audit records shall be maintained and made available for management review.

<u>External Audit</u>
- o Department of Education (Streetwise)
- o Health and Safety Authority
- o HSE Interim Standards for New Directions - Day services for adults with disabilities/ HSE Day Service Opportunity Officers Department
- o Quality and Qualifications Ireland

11.3 Programme Evaluation

The BOCSI are committed to completing internal programme reviews on a regular basis. All programmes are reviewed annually as part of the Self-Evaluation processes.

All programmes will complete a Programme Evaluation Report and subsequent Programme Improvement plan.

The *Programme Evaluation Report* includes the following:

- Programme Summary
- Programme Statistics
- Evaluation Methodology
- Executive Summary
  - Grades of areas to include:
    - Communications
    - Equality
    - Staff Recruitment and Development
    - Access, Transfer and Progression
    - Programme Development, Delivery and Review
    - Fair and Consistent Assessment of Learners
    - Protection for Learners
- Detailed Findings; Strengths, Areas for Improvement and Recommendations of the following:
  - Programme Design and Content
  - Programme Delivery
  - Assessment of Learning
  - Associated Services and Resourcing
  - Attainment of Programme Objectives

The *Programme Improvement Plan* is based on recommendations from the Programme Evaluation Report and detail recommendations, agreed actions and identify individuals responsible for implantation.

11.4 Quality Assurance Review

The Quality Assurance Review (QAR) is a fundamental part of our quality assurance systems. The BOCSI continuously monitor our services to ensure standards are met and maintained and will take place at least once a year, and more frequently if required. The approach is collaborative at all times throughout the QAR. The QAR can be full, themed, or upon request of management.

The aim of the QAR is to ensure compliance with organisational and funding body requirements.

The following may be taken into consideration during the QAR (this list is not comprehensive):

- Programme Evaluation Report and Improvement Plan
- Audits (External & Internal)
- Learner/Trainee Feedback and Advocacy Findings
- Family/Stakeholder Feedback
- Programme Outcomes
- Conformance e.g. ETPS, BOSCI Policy and Procedures, New Directions, and/or Relevant Legislation

11.5 Corrective Action

The BOCSI service shall respond to the QAR and address any matters arising in a timely and professional manner to ensure programme delivery standards. Once correction action has been taken BOCSI shall ensure preventative measures are undertaken to prevent reoccurrence of matters arising.

11.6 Policy Evaluation and Review

The BOCSI is a national organisation and therefore all policies and procedures are reviewed and implemented via the national board and/or the lead role in each region.

11.7 Insurance

BOCSI is covered by the state claims agency insurance with additional cover in place via Marsh Ireland.

Glossary of Terms	
BOCSI	Brothers of Charity Services Ireland
BSP	Behaviour Support Specialist
CEO	Chief Executive Officer
CETB	Cork Education and Training Board
EA	External Authentication
ETB	Education and Training Board
ETQC	Education and Training Quality Committee
GDPR	General Data and Protection Regulation
HIQA	Health Information and Quality Authority
HSE	Health Service Executive
I.D.	Intellectual Disabilities
ITP	Individual Training Plan
IV	Internal Verification
OLIS	Online Information Systems
PCP	Person Centred Plan
PDT	Programme Development Team
POMs	Personal Outcome Measures
QA	Quality Assurance
QBS	QQI Business System
QED	Quality Enhancement and Development
QQI	Quality and Qualifications Ireland
RPL	Recognition of Prior Learning
RT	Rehabilitative Training

SDSF	Senior Day Service Facilitator
ETPS	Education and Training Programme Standards
VT	Vocational Training

Appendices

Appendix 1- Definitions

Adjudication: the formal giving or pronouncing of a judgement.
- An unbiased, impartial and inclusive system that provides equity of opportunity

Appeal (Learner/Trainee) is the process whereby a Learner/Trainee can appeal an assessment result that they consider to be unfair.

Appeal of Malpractice Findings: process whereby an individual can appeal a malpractice finding.

Appeal of Sanctions (Learner/Trainee/Trainee Only): process whereby a Learner/Trainee/Trainee can appeal the sanctions imposed as a result of an assessment system malpractice finding.

Appeals of Malpractice Findings Reviewer: person appointed to consider the evidence in support of the appeal of an assessment system malpractice finding.

Appeals of Sanctions Reviewer: person appointed to consider the evidence in support of the appeal of sanctions imposed as a result of a substantiated assessment system malpractice finding.

Assessment Coordination ensures that assessments provided, organised or procured training are planned, coordinated and administered in accordance with the assessment procedures for the training programme.

Assessment Co-ordinator: person who ensures that assessments in BOCSI provided, organised or procured training are planned, coordinated and administered in accordance with the assessment procedures for the training programme.

Assessment Event is an occasion of formal testing, usually for summative purposes.

Assessment Evidence is created during the assessment event or as part of an assigned assessment task and includes assessment scripts, coursework, projects, portfolios, work competence schedule workbooks, logbooks, soft copy evidence etc. Learner/Trainee assessment evidence must be the work of the Learner/Trainee.

Assessment Instruments are used to assess a Learner/Trainee's attainment of required standards of knowledge, skills and/or competence. Assessment instruments include implements such as written, oral and practical tests, including project and portfolio briefs

Assessment is the process whereby Learner/Trainee performance in a range of areas is established to ensure that the knowledge/skill/competence is demonstrated to meet the requirements of the National Awards Standards for the award.

Assessment Materials are any material relating to the carrying out of an assessment, e.g. assessment instruments, test papers, drawings, supports and equipment, specifications and records.

Assessment Methods are mechanisms devised for assessment purposes, e.g. including multiple choice, practical demonstrations, written answers, portfolios, projects, assignments.

Assessment Plans clearly identify the stages in the training programme when assessment will occur and the type of assessment that will take place at each stage.

Assessment Process: all assessment related activity, including the design and development of assessments, assessment strategies and techniques, the co-ordination of assessment, the

conduct of assessment, marking of assessment, internal verification, external authentication, results approval process and certification process.

Assessment Programmes detail the various methods by which progress is recorded and attainment is measured, i.e. practical tests, multiple choice tests, short answer tests and coursework or profiles. An assessment programme also identifies the stage in the training programme when assessment takes place.

Assessment Record: mechanisms for recording that an assessment event has taken place and which document the assessment outcomes for each Learner/Trainee/Trainee. Assessment records may be electronic or paper.

Assessment Schedules specify the dates on which named assessments will be held in a specified training location.

Assessment Specifications are detailed statements of the items to be addressed through a specified assessment approach when designing any block of training.

Assessment Supervision involves overseeing the implementation of an assessment and may also involve overseeing the conduct of assessments. Assessment Supervision requires the invigilation of the assessment process in the context of formal assessments and must ensure that the conduct and integrity of assessments comply with the Award Councils' and' Quality Assurance requirements.

Assessment System: an assessment system consists of the regulations, procedures, processes, assessment specification, and assessment plan and assessment instruments that used to facilitate the assessment of a Learner/Trainee/Trainee's achievement of the standards associated with an award.

Assessment: process whereby Learner/Trainee/Trainee performance in a range of areas is established to ensure that the knowledge/skill/competence is demonstrated to meet the requirements of the National Awards Standards for the award.

Authorised Persons are those who are permitted to access an assessment location, as appropriate, before during and after an assessment. Authorised persons include: Learner/Trainees who are registered to undertake the assessment in question, personnel responsible for the conduct and supervision of assessments, other support personnel as necessary, e.g., IT support staff, readers, etc.

Awarding Body/Awards Council: a recognised organisation that has the authority to offer qualifications and awards.

Awards are conferred, granted or given by an Awards Council and which records that a Learner/Trainee has acquired a standard of knowledge, skill or competence.

BOCSI Manager: Is the person within BOCSI with responsibility for training programmes/courses that are provided, organised or procured within their area of accountability.

Competence is the proven ability to use knowledge, skills and personal, social and/or methodological abilities, in work or study situations and in professional and personal development.

Conducting an Assessment involves assessing Learner/Trainees' performance and related knowledge in a range of areas, to ensure that the knowledge/skills/competence demonstrated meet the requirements of the National Standards for the award. In the BOCSI Education and Training Programmes, an assessment is usually conducted by the instructors/trainers of the programme.

Conflict of Interest: any issue that might unfairly influence, or appear to influence, the outcome of an investigation.

- Consistency in terms of assessment procedures, including marking and grading
- Construct Validity: Does the assessment method measure the intended specified learning outcomes or introduce and measure some other abilities which were not required in the specified learning outcome? For example, inappropriately high level of language in the question paper or demanding keyboard skills required to complete the test but not required by the specified learning outcomes in the award standard.
- Content Validity: Is the assessment strategy, structure and methodology based on award standards, curriculum aims and learning outcomes?
- Copying any assessment material without permission

External Authentication is the independent review of the assessment process for a particular training programme, carried out by examining a sample of assessments in terms of:

External Authentication Personnel conduct external authentication of the assessment process for a particular programme (see above)

- Face Validity: Does the assessment meet stakeholder and Learner/Trainee expectations? Is it the kind of assessment strategy you might expect to find in a particular programme?

Fair and Consistent Assessment involves the following:

- Giving or receiving help from another Learner/Trainee or any other person, where such help is forbidden

- Having, using, or attempting to use any unauthorised material in an assessment, namely mobile phones, books, notes, electronic aids or other materials

- Impersonation

Impersonation is the act pretending to be another person.

Internal Verification is the process by which BOCSI reviews the assessment process and provisional assessment results on a sample basis ~~and conducts peer reviews~~, to ensure adherence to National Award Standards.

Internal Verification Personnel conduct internal verification of the assessment process and internal verification of assessment results as per the Education and Training Programme Standard Specifications and/or the requirements of the relevant Awarding Body/Bodies. Internal verification personnel may also be responsible for assessment coordination. It is possible for internal verification personnel to conduct assessments, but they cannot verify their own assessment decisions or the process used in reaching them.

Investigator: person who completes the inquiry.

Irregularity: typically, an accidental omission or mistake which is detected by the assessment process, is corrected, and which does not impact on the validity of the assessment process.

Knowledge is the cognitive representation of ideas, events or happenings.

Learner/Trainee/Trainee Malpractice: assessment system malpractice committed by a Learner/Trainee/Trainee.

Learner/Trainee/Trainee: person who is acquiring, or who has acquired, knowledge, skills or competence as per the learning outcomes of a particular programme/course.

Malpractice: any act or practice that brings into question the validity or integrity of the assessment process and that normally arises due to one or more non-accidental factors.

National Award Standards are the benchmarks for all assessment activity conducted for the purposes of national recognition of the achievement of those standards through an award. The format of National Award Standards will also specify assessment requirements for an award.

- Obtaining an assessment paper ahead of its release
- Openness and transparency

~~**Peer Review** is the process whereby the assessor of a particular course and a subject matter expert review results to ensure assessments were marked in line with the relevant award standard and the assessment specification. Peer review is carried out on a sample basis.~~

Plagiarism is defined as copying the words of others, or using someone else's work or ideas and passing them off as one's own. If a Learner/Trainee uses the words or ideas of someone else, he or she must clearly state where they came from.

- Planning and implementation of assessment arrangements that are appropriate to the standards set out in the in programme's learning outcomes

Programme (s): learning experience designed and offered by a provider, based on predetermined National Awards Standards and leading to an award.

Provider: is an organisation or person that provides education and/or training services.
- Provision of adequate opportunities and resources for Learner/Trainees to prepare for assessment

Reasonable Accommodations are concerned with enabling individuals with disabilities to enjoy equal benefits and conditions to their non-disabled peers in accessing and participating in training and assessment. This may require a training provider to take reasonable account of Learner/Trainees with disabilities' needs and requirements in the training environment. What reasonable accommodation entails varies from Learner/Trainee to Learner/Trainee, depending on their individual needs and requirements.

Re-check of Assessment involves checking and ensuring that all parts of an assessment have been properly recorded and that there are no errors in the recording, collating or combining of marks which determined the result. This is the first stage of an appeals process.

Recognition of Prior Learning (RPL) is a systematic recognition process to enable individuals to enter programmes and attain full awards based on prior learning experiences, regardless of how that learning was acquired.

Relevant Manager has overall responsibility for assessments run in a training location. The assessment manager provides support and guidance to all assessment personnel in the Training Centre/external trainer/second provider environment.

Reliability in an assessment is the confidence one can have in the fairness of the result. Outcomes of assessments should be as consistent as possible. Those conducting assessments should produce similar results when using the same assessment for similar groups of Learner/Trainees. Measures should be used to reduce the variability in grading that may be due to those conducting assessments, the assessment instruments or the assessment methods.

Repeat is defined as an opportunity afforded to a Learner/Trainee who fails to meet the required standard in an assessment to repeat an equivalent assessment. Only referred or pass grades can be awarded in repeat assessments.

Resit is defined as an opportunity afforded to a Learner/Trainee who abandoned an assessment due to sickness, emergency, etc., to re-sit an equivalent assessment. In such cases normal marking and grading policy applies.

Results Approval Panel is a panel convened to formally review and approve assessment results and authorise requests for certification.

Review of Assessment is the reconsideration in detail of all or part of the existing assessment material by internal assessment personnel and reconsideration of a full set of results. This is the second stage of an appeals process, subsequent to a recheck and prior to a possible final appeal.

Sanction: action imposed as a result of an assessment system malpractice.

~~**Second Provider** is a person or body external that is contracted/ agreed to conduct all or part of an education or training programme.~~

Skill is the goal-directed performance of a task, underpinned by know-how of the procedural knowledge required.

Staff Malpractice: assessment system malpractice committed by provider Staff.
- The assessment process, to ensure adherence to National Assessment Procedures

- The technical content of the assessment and the consistency of assessment marking against the assessment specification and standards set out in the marking criteria

- **Validity** essentially means fitness for purpose. To be valid an assessment measures what it was intended to measure. There are different types of validity:

Appendix 2- Terms of Reference for BOCSI National Quality Group

[DRAFT] Terms of Reference for BOCSI National Quality Group

Purpose:

This working group is to support regional quality departments to:

- Implementation the Council on Quality & Leadership Quality Enhancement Accreditation process.

- Achieve compliance with HIQA regulations.

Term:
- The work of this group will be ongoing.
- The composition should be reviewed at least every three years.
- Should the group be disbanded, this should be the decision of NLT/ CEO.

Membership/Group Composition:
- This working group will have at least one representative drawn from the Quality and training department in each Region.
- The group will comprise of six members maximum.
- A quorum to ensure meetings proceed will be at least four members.

Responsibilities/ Objectives/ AIMS:

1. To support the progression of the CQL accreditation process in all regions.
2. To ensure all quality initiatives are aligned with the Strategic aims of the organisation.
3. To share information on quality initiatives to ensure efficient use of resources in piloting new ideas.
4. Keep abreast of any learning from Regulatory inspections.
5. Contribute to consultations which impact Quality of Life of people supported.

Accountability:

This working group reports on its work to the National Head of Advocacy, Safeguarding, Quality & Training. The working group is ultimately accountable to the CEO who maintains overall governance oversight of the BOCSI with assurances to the Board of Directors.

Review:
- Minutes/ Actions of meetings of this working group will be shared with the National Head of Advocacy, Safeguarding, Quality & Training.
- Any relevant recommendations will be shared with the National Leadership Team via the National Head of Advocacy, Safeguarding, Quality & Training.

Working Methods

- This working group will meet via MS Teams or other online platform with face-to-face meetings an exceptional occurrence.
- The group will meet once per month to fulfil its responsibilities.
- The on-going quantum of meetings will be decided by NLT based on evolution of service needs.
- Note taking for meetings will be rotated among members.
- Meetings will be Chaired by National Head of Advocacy, Safeguarding, Quality & Training.

Amendment, Modification or Variation of Terms of Reference

The Terms of Reference of this group will be amended, modified or varied on written instruction from the CEO.

Appendix 3- Terms of Reference for BOCSI National Training Group

[DRAFT] Terms of Reference for BOCSI National Training Group

Purpose:
This working group is to support regional training departments in the implementation of the BOCSI Staff Training and Development policy.

Term:
- The work of this group will be ongoing.
- The composition should be reviewed at least every three years.
- Should the group be disbanded, this should be the decision of NLT/ CEO.

Membership/Group Composition:
- This working group will have at least one representative drawn from the Quality and training department in each Region.
- The group will comprise of six core members.
- A quorum to ensure meetings proceed will be at least four members.

Objectives:
6. To progress, monitor and evaluate the development of a comprehensive Learning Management System.
7. To liaise with other National groups within the organisation as required.
8. To ensure all staff training is aligned with the Strategic aims of the organisation.
9. To share information on training initiatives to ensure best practice across all regions and quality training is available to all staff.
10. Ensure all staff have access to mandatory and essential training in a timely manner.

Accountability:
This working group reports on its work to the National Head of Advocacy, Safeguarding, Quality & Training. The working group is ultimately accountable to the CEO who maintains overall governance oversight of the BOCSI with assurances to the Board of Directors.

Review:
- Minutes/ Actions of meetings of this working group will be shared with the National Head of Advocacy, Safeguarding, Quality & Training.
- The National Head of Advocacy, Safeguarding, Quality & Training will attend meetings on a quarterly basis.
- Any relevant recommendations will be shared with the National Leadership Team via the National Head of Advocacy, Safeguarding, Quality & Training.

Working Methods

- This working group will meet quarterly face to face with remainder of meetings via MS Teams or other online platform.
- The group will meet initially once per month and thereafter as determined by the working group to meet its objectives, as agreed by NLT.
- The position of chair and note taker will be rotated amongst the group.

Amendment, Modification or Variation of Terms of Reference

The Terms of Reference of this group will be amended, modified or varied on written instruction from the CEO.

Appendix - 4 Terms of Reference for The National Policy Review Committee

The main purpose of this committee is to monitor, develop and review all National Policies and Procedures, Guidelines and Governance Statements. The Committee is comprised of four staff directly involved in policy development. The Chairperson will be appointed by the Chief Executive for a one-year period after which the function of the committee will be review by the Chief Executive.   The Committee will report to the National Board through the Chief Executive.

TERMS OF REFERENCE

In order to fulfil this purpose, the committee will:

- Compile and maintain a list of policies in operation within the Services.

- Identify any policy gaps within the Services and notify on the need for new policies

- Identify policies which need to be reviewed

- Ensure that each policy reflects the ethos, mission and values of the Brothers of Charity

- Using current regional and national policies as a resource develop a template and agree standard terminology for use throughout the services when drafting policies

- Ensure that all documents consulted in the development of policies and procedures are referenced and that all drafts are numbered and dated.

- Consult with relevant internal and external sub-committees, specialist groups, in the development of policies

- Invite further personnel to participate when specific policy areas require expertise.

- Liaise with other agencies and bodies in relation to national standards, statutory requirements, and regulations when developing policies, in particular the HSE and HIQA.

- Formulate a robust monitoring system for policy development

- Recommend on the development of easy to read policies where appropriate.

- Keep abreast of issues related to legislation and best practice and new technologies which impact on the development and relevance of policies.

Meetings:
- Meetings will take place quarterly, or as dictated by the work load.

- Consideration must be given to the effective use of resources when arranging meetings.

Reporting:

- Within the first three months the Committee will develop a time framed work plan and present it to the Chief Executive for agreement.

- The Chairperson of the Committee will update the Chief Executive on a quarterly basis or more as appropriate on progress.

BOCSI

Education and Training Programme

Assessment Regulations

Overview

Assessment Regulations underpin the planning, coordination, conduct, marking and storage of assessments, the recording and approval of results, and the verification and authentication of all assessments leading to the request of an award from recognised bodies whose awards are within or aligned with the National Framework of Qualifications (NFQ).

This document is one of a number of documents that has been prepared to meet the requirements of the Qualifications (Education and Training) Act. The documents and systems listed below are also related to assessment:

- Appeal of Assessment Result Procedure
- Procedures for Managing Assessment System Malpractice
- Learner/Trainee Guide to Assessment
- Quality Assurance Assessment Policy and Operating Procedures
- Policy on Assessment Development, Marking and Grading
- Programme Standards Specification

Scope

The document applies to **all** education/training and assessment activities conducted within and by Brothers of Charity Services Ireland Education and Training Programmes Quality Assurance (QA) Systems. The document provides all assessment personnel with a set of overarching guidelines which will enable a common approach to assessment practice across all activity. As such, the regulations are designed to encompass best practice in assessment in the broadest sense.

Where the contents of this document differ from the regulations of an Awarding Body, regulations of the Awarding Body take precedence. Non-conformance with the requirements outlined in this document or any of the above-listed documents constitutes a non-conformance with the quality assurance policy and procedure.

Feedback and Review

This document will be reviewed 12 months after its publication. During this time, the contents will not be subject to change. Comments and feedback relating to the document can be sent to the Programme Manager or the Programme Coordinator These will be taken into consideration when carrying out the review.

Introduction

What is the purpose of the Assessment Regulations?

The purpose of the Assessment Regulations is to ensure that assessment of Learner/Trainees is fair and consistent and is administered in line with Education and Training Programme Specifications and relevant awarding body requirements.

What are the Assessment Regulations?

The Assessment Regulations cover:

- Planning and coordination of assessment
- Preparing for, conducting and concluding assessment events
- Marking assessments
- Handling Learner/Trainee assessment non-attendance or lateness, and deferral or deadline extension requests
- Handling Learner/Trainee assessment rechecks, reviews, and re-sits, repeats and appeals.
- Maintaining the security of assessment
- Conducting internal verification and external authentication
- Conducting the results approval process
- Requesting certification
- Maintaining assessment records and evidence
- Providing assessment adaptations and Learner/Trainee supports to meet the needs of Learner/Trainees with disabilities

Where there is any lack of clarity or a conflict of interpretation between all other duly approved QA procedures impacting on assessment or certification and this document, the content of this document takes precedence.

Where do the Assessment Regulations Apply?

This document applies to **all** assessment activities conducted within BOCSI Education and Training Programmes operating within the BOCSI QA systems. These regulations cover all assessment processes undertaken by a Learner/Trainee which are an agreed part of the validated programme leading to an award.

These regulations do not deal with any specific arrangements that may put in place for assessment under Recognition of Prior Learning (RPL). BOCSI may decide to produce additional arrangements for RPL, and specific RPL regulations may result in a separate publication, or amendments and/or additions to this document.

Assessment Regulations

Section 1.   The Assessment Process

Throughout the assessment process:

1.1   The relevant Programme Coordinator has overall responsibility for the assessment process.

1.2   All assessment duties are assigned to designated persons who are briefed prior to the assessment process.

1.3   Assessment duties are carried out in a way that preserves the integrity of the assessment process, assessment instruments, assessment evidence and records.

1.4   Any record, as defined in the Freedom of Information Acts, 1997 and 2003, is made available according to FOI procedure[4].

1.5   All assessment personnel are responsible for the accurate completion and sign-off of all relevant assessment documentation.

1.6   Conflicts of interest are declared and managed[5].

1.7   The rights of Learner/Trainees are at all times respected and Learner/Trainees are treated with confidentiality, fairness, courtesy and dignity. In carrying out their duties assessment personnel do not engage in any activity that constitutes bullying, harassment, or discrimination.

Section 2.   Planning the Assessment Process

2.1   **Design**: The assessment for each programme should be planned in advance of commencing learning and assessment activities and should be in line with national criteria. A holistic approach, which considers the assessment load and the needs of Learner/Trainees, should be taken and assessment plans documented. The tendency to over assess should be avoided.

Assessment plans will:

    a.   Reflect relevant Awarding Body and BOCSI policy guidelines and procedures on assessment, including the grading and marking of assessments.

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[4]   The Freedom of Information Reference Manual (Section 15) provides a guide to the functions, structure and records of the BOCSI Programme. A copy of the 2010 edition is available upon request or online: http://foi.gov.ie/files/2010/09/Short_Guide_to_FOI_Acts.pdf

[5]   Conflict of interest in the assessment process refers to any situation which compromises, or appears to compromise the objectivity of personnel involved in the assessment process (e.g. conducting an assessment in which a family member or friend is being assessed / the same person undertaking the conduct and verification of the same assessment).

b. Address the learning outcomes in the award standard.

c. Include information on appropriate assessment methods for the programme.

d. Outline the weighting and duration of assessments.

e. Contain marking criteria, outlining expected standards of attainment for particular grades.

f. Indicate the Learner/Trainee's expected performance.

g. Include information on recognition of prior learning, where appropriate.

h. State when and how Learner/Trainees will be informed of assessment outcomes.

i. Indicate when performance feedback will be provided to Learner/Trainees.

j. Include information on repeats and appeals processes.

2.2 **Delivery**: Assessment schedules should be devised locally for each programme and should specify the date, time and location of a named assessment and at what stage in training programmes the assessment takes place.

Section 3. Coordinating the Assessment Process

Coordination of the assessment process ensures that:

3.1 Resources and personnel are in place to support the coordination of the assessment as specified.

3.2 Communication mechanisms for the dissemination of information on assessment to assessment personnel and Learner/Trainees are in place and implemented.

3.3 Assessment personnel are briefed on, have access to and comply with the relevant elements of:

   a. Assessment policy and procedures contained in the BOCSI QA Handbook and the relevant elements of the Education and Training Programme Standards Specifications

   b. BOCSI Assessment Regulations

   c. Relevant legislation regarding Equality, Health and Safety, etc.

   d. BOCSI Procedures for Managing Assessment System Malpractice

   e. Any additional Awarding Body requirements if relevant

3.4 Responsibilities related to the assessment are clearly assigned (see Appendix 1 for a description of responsibilities in the assessment process).

3.5 Assessment personnel are technically competent to carry out the roles assigned to them.

3.6 The training needs of assessment personnel related to assessment are identified and addressed.

3.7 Assessment personnel have sufficient resources to enable them to fulfil their responsibilities.

3.8 Approved assessment procedures are implemented for each programme.

3.9 Assessment arrangements and schedules are established.

3.10 A system for the approval and coordination of reasonable accommodation requests is in place. (As set out in Appendix 2).

3.11 A process for dealing with issues of compassionate consideration is in place. Acceptable reasons for requesting compassionate consideration include:

   a. Sickness, as evidenced by a doctor's medical certificate

   b. Family bereavement

   c. Other reasons that are accepted by the relevant Programme Manager

3.12 Arrangements are in place for internal verification ~~(on conduct of assessment process, results and peer review)~~ and the relevant personnel briefed in advance of assessment.

3.13 Arrangements are in place for external authentication and the relevant personnel briefed in advance of assessment.

3.14 Arrangements are in place for results approval and the relevant personnel briefed in advance of assessment.

Section 4. Preparing for the Assessment Event

When preparing for an assessment event the regulations outlined below apply:

4.1 Learner/Trainees are provided with all relevant assessment information in advance of assessment[6]. Responsibility for dissemination of the information is assigned locally. Information provided is in a format appropriate to the Learner/Trainees and includes:

- a. The Learner/Trainee Guide to Assessment[7]
- b. Availability of Learner/Trainee supports related to assessment
- c. Assessment rechecks, review and repeat process details
- d. Learner/Trainee Instructions
- e. Learner/Trainee assessment appeals process details
- f. Sanctions that may be incurred if Learner/Trainees do not conform with assessment regulations (e.g. stopping the issuing of certificates)

4.2 The most appropriate and current version(s) of an assessment is selected for use.

4.3 Approved supports requested by Learner/Trainees with a disability are put in place (see Appendix 2) and the Learner/Trainee is informed of the arrangements within the timeframe specified by operational procedure.

4.4 Assessment support personnel for reasonable accommodation purposes (if required) are approved in advance of assessment and are briefed on their role and conduct (see Appendix 2).

4.5 Learner/Trainees are informed of when assessment(s) will take place, and when they will receive provisional assessment results.

4.6 Relevant assessment personnel are familiar with the full requirements of the assessment process including:

- a. Assessment policies and procedures contained in the BOCSI QA Handbook
- b. The BOCSI Assessment Regulations
- c. BOCSI Education and Training Programme Standards Specifications
- d. The relevant Assessment
- e. The Guidelines and procedures for managing assessment system non-conformances.

4.7 All assessments, assessment locations and assessment instruments adhere to current Health and Safety legislation.

4.8 The conditions and layout of the assessment location are as specified for the assessment event.

4.9 All required equipment is in working order.

4.10 The time and date settings on PC's are set to the correct time and date.

4.11 A copy of the Assessment Regulations is available during assessment.

4.12 A clearly legible sign should be affixed to the door(s) of the assessment location indicating an assessment is underway and only authorised persons have access to the assessment location as appropriate to the assessment technique.

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[6] Assessment information is provided via Learner/Trainee induction, publications such as the Learner/Trainee Guide to Assessment, ongoing information on assessment provided in class by instructors/trainers and various other methods as deemed appropriate locally.

[7] Easy-to-Read version is also available.

Section 5. Conducting the Assessment Event

When conducting an assessment event, the regulations outlined below apply:

5.1   Only authorised individuals have access to the assessment location during the assessment.

5.2   Learner/Trainee identity is verified and recorded. If the Learner/Trainee is not known to the relevant assessment personnel, proof of identity is provided.

5.3   If proof of identity is not presented and the identity of the Learner/Trainee cannot be confirmed, or impersonation is suspected, the individual in question will not be allowed to sit the assessment and the relevant Programme Manager must be notified.

5.4   Electronic communications devices, not required as part of the assessment,[8] must be switched off and left in the designated area along with any other unauthorised materials and Learner/Trainee possessions such as coats, bags and books, etc.[9]

5.5   Where mathematical or statistical tables are required, these will be provided at the assessment location. Learner/Trainees will not be permitted to use their own.

5.6   Where calculators are required in an assessment, only non-programmable calculators may be used. A Learner/Trainee may use their own non-programmable calculator.

5.7   The attendance and non-attendance of Learner/Trainees is recorded.

5.8   If a Learner/Trainee advises assessment personnel of sickness directly before the assessment commences, the regulations for deferrals apply (see Section 7).

5.9   Learner/Trainee instructions on assessment are given to Learner/Trainees verbally and/or in writing by the relevant assessment personnel.

5.10   Learner/Trainees are informed by the relevant assessment personnel of the start and finish times of the assessment.

5.11   The time allotted for assessment is strictly observed.

5.12   The assessment is run in accordance with the conditions of testing as detailed in the assessment programme.

5.13   On-line assessments are carried out in accordance with discrete assessment instructions and Learner/Trainees comply with the on-line system requirements.

5.14   Silence is maintained throughout written theory tests, PC-based assessments etc.

5.15   Learner/Trainees do not help each other or interfere with each other's work.

5.16   Where any non-conformance with assessment regulations by a Learner/Trainee is observed, (e.g. suspected cheating/use of proscribed materials), the Procedures for Managing Assessment System Malpractice must be adhered to[10].

5.17   Learner/Trainees should not remove, or attempt to remove, any assessment material unless specified.

5.18   Learner/Trainees are supervised at all times.

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[8]   For example, mobile phones, smart phones lap tops etc – all of which must be switched off.

[9]   Except in cases where a reasonable accommodation allows for the use of a particular electronic communications device / book or other support by a particular student.

[10] The suspected incident must be recorded immediately and the relevant Programme Manager must be informed. An investigation must take place immediately on the conclusion of the assessment. On completion of the assessment, the Learner/Trainee in question must be advised of the alleged malpractice and warned that their assessment may be declared null and void and that disciplinary procedures may ensue.

5.19   If admitted, Learner/Trainees arriving late to an assessment event are not allocated extra time, except under the conditions outlined in Footnote 13.

5.20   Learner/Trainees are not allowed to leave an assessment location during the first 15 minutes of an assessment[11].

5.21   If a Learner/Trainee cannot continue with an assessment due to sickness or unforeseen emergency, this is recorded. (See Sections 8.3 and 9.5).

5.22   Learner/Trainees do not leave the assessment location unless authorised.

5.23   In the event of a disturbance during the assessment, e.g. fire alarm, the assessment location is evacuated in accordance with local procedures:

   a.   Learner/Trainees leave all assessment materials in the assessment location.

   b.   Time lost during the emergency evacuation is documented and Learner/Trainees should be accommodated to settle back into the assessment event and complete the assessment.

   c.   If the assessment supervisor is of the view that the integrity of the assessment process has been/may have been compromised due to the disturbance, the assessment event should be suspended and recorded.

   d.   Online assessments are abandoned and rearranged for another date.

5.24   If a Learner/Trainee engages in any unsafe practice, his or her assessment is suspended immediately and the unsafe practice is addressed. Once the unsafe practice has been rectified the Learner/Trainee may carry on with the assessment. In instances where an unsafe practice cannot be rectified, the assessment is stopped, the Learner/Trainee is asked to leave the assessment location and the assessment is recorded as an attempt.

5.25 Incorrect, impractical or unsafe assessment items that materialise during an assessment   are dealt with.

5.26   In the event of a suspected or alleged instance of non-conformance with assessment regulations, the Procedures for Managing Assessment System Malpractice are adhered to.

5.27   Learner/Trainee complaints in relation to the assessment process are documented and investigated in accordance with organisational complaints procedures.

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[11]   This does not apply in cases where reasonable accommodations allow for rest breaks during an assessment or in cases where the assessment is less than 15 minutes.

Section 6. Concluding the Assessment Event

When concluding an assessment event, the regulations below apply:

6.1   Learner/Trainees are reminded to check that the information required on the front of their assessment script has been correctly completed and that they print their first and surnames in the relevant fields of all assessment documentation. In the case of PC-based assessments, Learner/Trainees must ensure that their files are saved to the designated format/location, if applicable.

6.2   Learner/Trainees are instructed to collate and securely attach all documents used during assessment before submitting them to the relevant assessment personnel.

6.3   All copies of the Learner/Trainee's Instructions/Test Questions are accounted for and returned to the designated place.

6.4   All relevant assessment documentation[12] is completed and signed off.

6.5   Any suspected non-conformances with Assessment Regulations are recorded.

Non-conformances with Assessment Regulations are noted and reported to the relevant personnel and dealt with as per Procedures for Managing Assessment System Malpractice

Section 7. Non-Attendance or Lateness, Deferral Requests or Deadline Extension Requests

With regard to the assessment non-attendance, deferral of an assessment or a deadline extension, the following regulations apply[13]:

7.1   Deferral requests are made in writing by the Learner/Trainee and must state the reason for the deferral request.

7.2   Requests for deadline extensions are made in writing by the Learner/Trainee and must state the reason for the deadline extension request.

7.3   Learner/Trainees who do not turn up for assessment must submit a written explanation to the relevant instructor/trainer within two working days of the missed assessment.

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[12]   Assessment report forms, attendance sheets and seating plan.

[13]   Acceptable reasons for request of a deferral of assessment non-attendance or lateness, deferral of assessment, or extension to a deadline include:

    a.   Sickness, as evidenced by a medical certificate

    b.   Family bereavement

    c.   Other reasons that are accepted by the relevant assessment personnel and the relevant Programme Manager

Section 8. Marking of Assessment

All results are provisional until approved by the Results Approval Panel (see Section 13).

When marking assessments, the regulations below apply:

8.1   Assessments are marked in accordance with the Policy on Assessment Development, Marking and Grading.

8.2   Non-attendance at an assessment by a Learner/Trainee without a valid reason[14] is recorded as an attempt.

8.3   Evidence of attendance at an assessment by a Learner/Trainee is recorded as an attempt, except in the case of Learner/Trainees who could not continue with an assessment due to sickness or unforeseen emergency (see also 5.22 and 9.5).

8.4   Learner/Trainee assessment evidence is verified as the Learner/Trainee's own work via an authorship statement[15] or other appropriate means must be submitted in the case of portfolios, projects, coursework etc.

8.5   If plagiarism is suspected, it must be recorded and dealt with in line with the malpractice document.

8.6   Learner/Trainee performance is marked in accordance with directions outlined in the assessment marking instructions.

8.7   Learner/Trainee assessment results are recorded and collated using approved documentation and systems.

Section 9. Learner/Trainee Assessment Rechecks, Reviews, Re-sits, Repeats and Appeals.

When administering assessment, rechecks, reviews, resits, repeats and appeals, the following regulations are adhered to:

9.1   Assessment personnel are familiar with the rules governing rechecks, reviews, re-sits, repeats and the Learner/Trainee Assessment Appeals Process.

9.2   Learner/Trainees are facilitated in receiving feedback on their assessment, including viewing their marked assessment(s) as appropriate.

9.3   Learner/Trainees are advised on the processes and procedures relating to repeats and appeals of assessment(s) prior to assessment.

9.4   Learner/Trainees who fail to meet the minimum requirements of an assessment are afforded the opportunity to repeat an equivalent assessment in accordance with the policy on repeats.

9.5   Learner/Trainees who cannot continue assessments due to sickness or unforeseen emergency are afforded the opportunity to re-sit the assessment (see also 5.23 and 8.3).

9.6   Where a specified number of assessment attempts pertain[16] the relevant conditions will be adhered to.

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[14]   See Footnote 13.

[15]   Signed declaration that the work presented for assessment is the author's own work and does not include the unacknowledged work of any other person, organisation or body.

[16]   Learner/Trainees who do not reach pass standards shall comply with the existing rules on repeats printed in assessment programmes.

9.7   Re-sit and repeat assessments are conducted in the same conditions outlined in Section 5: Conducting the Assessment Event.

9.8   An equivalent assessment is selected for re-sit and repeat assessments, where applicable.

9.9   All requests for rechecks, reviews, repeats and appeals are processed in accordance with quality assurance procedures and relevant timeframes.

Section 10.   Security of Assessment Documentation

To guarantee assessment security and integrity, the following regulations are adhered to:

10.1   All assessment information and related documentation is treated as confidential.

10.2   Security procedures are applied at all times during:

    a. assessment development

    b. transit of assessment papers to and from assessment locations

    c. distribution of assessment documents to assessment personnel and Learner/Trainees

    d. marking of assessment

10.3   Assessment papers are printed only as needed.

10.4   All assessment papers are collected after the assessment event.

10.5   Following an assessment event, assessment papers – including unused assessment papers, Learner/Trainee answer sheets and model answers – are not copied or reproduced electronically, and are returned to a designated place. Unused assessment papers will then be destroyed in a secure manner. Regulations for the storage and retention of assessment documentation are adhered to as outlined (see Section 17).

10.7   The relevant Programme Manager and relevant assessment personnel are informed if the security of an assessment is breached by theft, loss, damage, unauthorised disclosure, fire or any other circumstances.

10.8   In the event of an alleged breach of assessment security, Procedures for Managing Assessment System Malpractice are adhered to.

Section 11.   Internal Verification of Assessment

When implementing internal verification processes, the following regulations are adhered to:

11.1   The internal verification of assessment is organised and conducted as per the Education and Training Education and Training Programme Standard Specifications and/or the requirements of the relevant Awarding Bodies.

11.2   Internal verification personnel are fully briefed on the role of internal verification of the conduct of the assessment process, internal verification of results, peer review and the relevant sampling strategy to be used.

11.3   Assessment personnel do not internally verify assessments on which they have instructed, supervised, conducted or marked.

11.4   The appropriate documentation and evidence is made available to the internal verification personnel.

11.5   Assessment process is reviewed to ensure that correct procedures have been consistently applied throughout.

11.6   Internal Verification Reports are completed, dated and signed by the relevant internal verification personnel.

11.7   Any non-conformances or matters of concern identified are documented in the Internal Verification Report in accordance with Programme Standards Specification.

11.8 All documentation arising from internal verification is made available to external authentication personnel, Results Approval Panel and others as appropriate.

11.9 Issues raised in the Internal Verification Reports are addressed by the Results Approval Panel.

11.10 Confidentiality is maintained throughout the internal verification process

Section 12. External Authentication of Assessment

External authentication of assessment is arranged by the designated Programme Coordinator. When implementing external authentication processes, the following regulations are adhered to:

12.1 The external authentication of assessment is conducted as per policy and procedures and the requirements of the relevant Awarding Bodies.

12.2 The external authentication of assessment is carried out on a sample basis in line with a national sampling strategy.

12.3 External authentication personnel are fully briefed on the role of external authentication.

12.4 External authentication personnel are suitably qualified to moderate assessment results in accordance with standards outlined in the Award Specification[17].

12.5 The appropriate documentation and evidence is made available to the external authentication personnel.

12.6 External Authentication Reports are completed, dated and signed by the relevant external authentication personnel.

12.7 Any non-conformances or matters of concern identified are documented in the External Authentication Report.

12.8 External Authentication Reports are made available to the relevant personnel.

12.9 Issues raised in the External Authentication Reports are addressed by the Results Approval Panel.

12.10 Confidentiality is maintained throughout the external authentication process.

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[17] QQI Core Statutory Guidelines

Section 13. Results Approval

When conducting the results approval process, the following regulations are adhered to:

13.1   The results approval process is organised and conducted as per the Programme Standards Specification.

13.2   All provisional assessment results are processed through the Results Approval Panel (RAP).

13.3   Results are approved by the chair of the RAP as having complied with quality assurance procedures and awarding body Quality Assurance requirements.

13.4   Actions agreed during the results approval process are documented and dealt with appropriately, prior to requesting certificates.

13.5   All results approval documentation is fully signed off and retained on file.

13.6   Following authorisation from the Results Approval Panel, certification is requested from the appropriate Awarding Body upon this authorisation.

Section 15. Learner/Trainee Feedback

When giving or receiving assessment feedback, the following regulations are adhered to:

15.1   During a programme, Learner/Trainees are provided with timely, accurate and constructive feedback on their assessment(s). Learner/Trainees who require feedback when a programme has been completed must be facilitated.

15.2   Feedback received from Learner/Trainees is made available to the relevant personnel for the purpose of continuous improvement of programmes and services.

Section 16. Processing of Certificates

When processing requests for certification, the following regulations are adhered to:

16.1   Records submitted for certification must be accurate and quality assured.

16.2   Alleged non-conformance to assessment regulations will result in the postponement of the relevant certification requests until the matter has been investigated and satisfactorily resolved (See Procedures for Managing Assessment System Malpractice).

Appendices

Appendix 1.   Responsibilities in the Assessment Process

Responsibilities relevant to the Management of the Assessment Process

Assessment management ensures the allocation of resources, time, expertise and staff development to support all stages of the assessment process. The Programme Coordinator has overall responsibility for the integrity and operations of the assessment process.

Assessment Coordination Responsibilities

Assessment coordination ensures that assessments provided, organised or procured training are coordinated and administered in accordance with the assessment procedures for the training programme.

Within BOCSI, assessment coordination is typically undertaken by the QQI/Programme Coordinator.

Assessment Supervision Responsibilities

Assessment supervision ensures that the conduct and integrity of assessment complies with the Awards Councils' and BOCSI quality assurance requirements. This includes:

- Supervising tests and assessments
- Ensuring regulations, legislative, and health and safety requirements are observed
- Undertaking relevant administration
- Completing required reports
- Verifying Learner/Trainee identity in assessment

Assessor Responsibilities

The Learner/Trainee's performance and related knowledge is assessed in a range of areas to ensure that the knowledge, skill and competence demonstrated meet the requirements of the national standards for the award. Assessor responsibilities include:

- Assessing Learner/Trainees' work against assessment criteria appropriate to the award standard
- Allocating marks in accordance with marking and grading criteria
- Ensuring that the grading applied is fair and consistent
- Giving results and providing feedback

Within each programme, the Instructor is often responsible for both assessment supervision and assessing. External to BOCSI, assessing may be undertaken by the Tutor/Instructor and/or person responsible for assessment supervision.

Internal Verification Responsibilities

Internal verification is the review and evaluation of the assessment process and provisional results by persons other than those involved in course delivery and assessment for the programme in question. Internal verification includes checking assessment procedures have been applied and the checking/monitoring of the conduct of assessment and of assessment results to ensure Learner/Trainee evidence exists and that results and grades are properly computed and recorded.

Those responsible for internal verification must:

- Review assessment documentation and records
- Check that all assessment procedures were adhered to
- Monitor results
- Acknowledge good practice and identify any non-conformances/corrective actions
- Complete, date and sign the Internal Verification Report
- Communicate findings to relevant assessment personnel and to management
- Carry out any other administrative duties related to internal verification
- Make all documentation arising from Internal Verification available to external authentication personnel, the Results Approval Panel, and others as appropriate

Internal verification of the assessment process and results is undertaken by the Programme Standards Coordinator or other personnel responsible for assessment coordination.

External Authentication Responsibilities

External authentication is the independent review of assessment processes and results. The purpose of external authentication is to ensure the credibility of assessment processes and ensure that assessment results have been marked in a valid and reliable way in compliance with the requirement of the National Standard for the award. External authentication personnel provide independent confirmation of fair and consistent of Learner/Trainees and ensure consistency of assessment results against the national standards.

External authentication includes checking and authentication of internal verification reports, sampling a range of Learner/Trainee evidence and moderating assessment results in accordance with standards outlined in the Award Specification[18]. It also involves the provision of constructive feedback to Programme Management, completion of External Authentication Reports, outlining areas for improvement and good practice, and providing recommendations on assessment results for consideration by the Results Approval Panel.

Results Approval Panel Responsibilities

The Results Approval Panel (RAP) is a decision making forum which formally reviews and approves provisional assessment results and authorises requests for certification. The RAP reviews all information submitted, including the External Authentication Report, the Internal Verification Report

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[18] QQI Quality Assuring Assessment Guidelines for Providers *2018

along with all appropriate assessment-related records and reports. Having adjudicated on the evidence presented the RAP will then make a decision on the authorisation of certificate requests.

Appendix 2.   Adaptation of Assessments to Meet the Needs of Learner/Trainees with Disabilities

Reasonable accommodation is provided for all Learner/Trainees; Learner/Trainees who wish to request additional support during assessments must make their course instructor aware of their needs prior to assessment. The Learner/Trainee will be supported by their Keyworker to complete the Learner/Trainee Request for Assessment Support Form for processing, with supporting evidence (where required). This form must be completed as early as possible but no later than four weeks prior to the commencement of assessment. This is to allow for the reasonable accommodation to be facilitated.

Individualisation

As a general rule, an adaptation to the form of delivery, which makes learning possible, will also assist in making assessment possible. The Learner/Trainee is usually the best authority on what form of delivery is the most effective and the same method(s) may then be possible during any assessment. However, it is important that the standard of the assessment is not diminished. Only the method(s) by which the Learner/Trainee demonstrates his/her attainment of the standard can be adjusted.

Rest Breaks

Supervised rest breaks either inside or outside the assessment area should be allowed as is appropriate. A rest break *can be flexible according to individual needs*, e.g. 15 minutes every hour as opposed to one 30-minute period during a three-hour assessment. The time so used should not be deducted from the time allowed (where specified) to complete the assessment.

Split Sessions

Splitting the assessment into two or more sessions may be an appropriate alternative for some students.

Extra Time

In the case of assessments that are based on time, additional time of up to 25% is the usual rule of thumb.

Readers[19]

A reader is a person provided to assist a disabled student by reading assessment questions aloud without suggesting the answer. A reader is a person who, on request, will read to the Learner/Trainee:

    a. The entire or any part of the assessment;

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[19] A reader or writer/scribe should not normally be the Learner/Trainee's own Tutor/Instructor but there may be circumstances where this is necessary. Only in exceptional circumstances, and subject to approval by the relevant Programme Manager, may a relative/somebody known to the Learner/Trainee act as a writer/scribe.

b. Any part of the Learner/Trainee's answers (exactly, as they are 'spoken').

Readers are typically used by people with visual impairments, people who tire easily, people who have extreme muscle weakness and people with learning difficulties.

Only one reader per Learner/Trainee is permissible and the assessment should take place in a separate room or area. Such provision may give rise to the need for extra Assessment Supervision personnel.

Writers/scribes[20]

A writer is a person who will, on request, write the answers exactly as given or dictated by a Learner/Trainee. A writer may also act as a reader and is often used in similar circumstances to a reader. As in the case of a reader, only one writer per Learner/Trainee is permissible and the assessment should take place in a separate room or area. Such provision may give rise to the need for extra assessment supervision personnel.

Sign language Interpreters[21]

Sign language Interpreters must be qualified to interpret sign or other similar types of language. Only one Sign Language Interpreter per Learner/Trainee should be used. The assessment for Learner/Trainees (usually those who are deaf or hard of hearing) should take place in a separate room or area. Such provision may give rise to the need for extra assessment supervision personnel.

For extra transparency it may be necessary to video-tape the assessment for translation later. Similarly, some Learner/Trainees may prefer to sign their answers directly to video. A signed response should be transcribed to print by someone proficient in sign language. Any words or phrases re-interpreted for the Learner/Trainee should be underlined and noted in the question paper.

Overwriting

Overwriting involves rewriting a question on an examination paper in such a way as to make it as explicit as possible. It is a technique primarily used with Learner/Trainees who are deaf or hard of hearing or who have a learning difficulty. Overwriting should be **in pen** on the answer paper. This is done by assessment supervision personnel in situ. Where extensive modifications are necessary, a separate sheet of paper with the questions written in full should be attached by staple to the original answer paper. Technical terminology should not be overwritten. In case of doubt about technical terminology a subject matter expert can be consulted. **Care must be taken to retain the original emphasis of the question.**

Computers

The use of computers by disabled Learner/Trainees may be necessary as their primary means of communication, for example, for Learner/Trainees with physical impairments for whom writing is difficult, for Learner/Trainees with visual impairments/blindness and for Learner/Trainees with learning disabilities such as dyslexia.

The definition of a 'computer' generally refers to hardware and/or software which facilitate effective communication for people for whom this may not otherwise be possible. It may be

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[20] See Footnote 24

[21] Only in exceptional circumstances, and subject to approval by the relevant Programme Manager, may a relative/somebody known to the Learner/Trainee act as a sign language interpreter.

standard equipment, e.g. the use of word processing software by someone with motor difficulties which impede handwriting or may be specially adapted, e.g. speech synthesisers and text enlargement software/hardware for people with visual impairments.

Where voice activated software is used, the assessment should take place in a separate room or area. Such provision may give rise to the need for extra assessment supervision personnel. It is the responsibility of the assessment/training location to supply the appropriate hardware/software.

Audio-tapes

Audio-taped assessments and responses are useful in some cases, e.g. visual impairment, motor difficulties. The centre should supply the assessment tape and a blank tape to Learner/Trainees at the same time as other Learner/Trainees. However, in order to minimise disruption to other Learner/Trainees, the person should either use headphones or complete their assessment in a separate room or area. Such provision may give rise to the need for extra assessment supervision personnel.

Braille, braille-mate, braille 'n speak, braille 'n print, etc.

Braille is generally, though not extensively, used by Learner/Trainees who are blind or visually impaired. It is generally advised that the Braille machine is attached and adapted to a printer which will produce a printed text. The responses of the Learner/Trainee should not be printed until after the end of the assessment time, as the noise levels may be too high for other Learner/Trainees. The assessment/training location should supply the printer, braille paper and/or the computer print-out paper.

The use of CCTV (closed circuit television)

This is a technological aid that magnifies print. It is usually used for Learner/Trainees with visual impairments. The Learner/Trainee can read the assessment paper as well as his/her answers from a TV screen. The Learner/Trainee uses the base under the screen to write and this is simultaneously magnified on the screen.

Enlarged print to A3 size

Some Learner/Trainees, usually those with visual impairments, may simply require their assessment papers in enlarged print, i.e. A3 size paper.

Examination papers in colour

Some Learner/Trainees, especially those who have dyslexia, may require their assessment paper in a colour other than black and white - for example, black on yellow, or black on grey. A gloss/highly sheen coated paper may also be unsuitable. The Learner/Trainees themselves should be consulted.

Other technologies

The whole area of new technologies and access to information is rapidly changing. The opportunities for Learner/Trainees to demonstrate their abilities are increasing with the advent of assistive devices like the 'true-type talking microphone' − a device which with practice can

type onto a computer screen a person's spoken word. Such technologies are also becoming more accessible in terms of general availability and price.

GUIDE FOR ASSESSOR

The aim of this guide for assessors is to provide information relating to the Education and Training Programme Standards Specification with regard to the function of assessing.

An Assessor must show evidence of having assessed the Learner/Trainee evidence presented using a **red pen/ink**. The overall grade/mark or result awarded is recorded and initialled by the assessor on the front page of any written assessment including portfolio/project work. The typical evidence of the assessor having reviewed and marked/graded the Learner/Trainee assessment evidence is as follows:

Assessment Technique Used	Instructor Evidence of Marking/Scoring
Short answer questions	Each answer should be ticked to indicate the evidence has been reviewed. In the situation where each answer has allocated marks or a grade, the marks or grade awarded should be written at the end of the answer.
Written essays, assignments, and projects	Each page should be initialled or ticked to indicate the evidence has been reviewed. In the situation where marks or grades are allocated the marks or grades awarded should be written at the end each assessment criterion achieved.
Multiple choice questions	Each question should be marked to indicate if the Learner/Trainee has given the correct answer or not.
Learner/Trainee record / journal	The type of Learner/Trainee record or journal can vary depending on the course level and nature of the assessment. Evidence of assessor having viewed the assessment can include: • Written assessor comments and feedback on the Learner/Trainee evidence • Log book – each section is signed and dated where specified in the log book or initialled by the assessor and dated (where logs books are completed over a period of time) • Diary – if completed on a weekly basis and where specified should be signed by assessor and dated at the end of each week, where not specified, the diary should be ticked or initialled at the end of each page, to indicate it was reviewed • Personal record, each page should be ticked or initialled at the end of each page, to indicate it was reviewed.
Portfolio / collection of work	Each page should be initialled or ticked to indicate the evidence has been reviewed. In the situation where marks or grades are allocated, the marks or grades awarded should be written at the end each assessment criterion achieved and/or at the end of each exercise/activity.
Skills demonstration / practical test	Not all skills demonstrations/practical tests produce evidence of the task having been completed. In a number of cases, the live skills demonstration is the actual process or the task of doing for example, shampooing hair, checking the wheel alignment of a vehicle. In such situations, it is important that the records relating to the assessment event are fully and accurately completed at the time the event is occurring, so as to ensure fairness and objectivity.

	Also, these records become the evidence in the event of a Learner/Trainee appealing a result. Where it is practical to do so, evidence of the skills demonstrations should be retained. Assessment evidence can take for example, the form of photographic, video, audio or other electronic forms of the skills demonstration task or process being carried out or its output.

Instructor concerns regarding Learner/Trainee evidence

If an assessor has any concerns or suspicions of plagiarism or cheating by a Learner/Trainee, assessor should immediately bring their concerns to the relevant Programme/QQI Manager with responsibility for the assessment.

The assessor will record in the Assessor Report the specific of his/her concerns or suspicions in Q.3.

Issues with marking/scoring criteria

a) Where an assessor identifies an error with the marking/scoring criteria the assessor must operate within the assessment guidelines in as far as is practicable and use their professional judgement as appropriate. The assessor in identifying any anomaly with the marking/scoring criteria should:

- Record in the assessor report that there is an issue and outline the issue/error in the "*comment section*" of the report (Q.2).

- Record in the assessor report under "*Please record any comments / recommendations / corrective or preventative actions*" the nature of this error and the correct criteria the assessor believes should be in the scoring/marking criteria.

- Record in the assessor report under "*Please record any issues/recommendations for the Results Approval Panel*" any recommendations he/she has for the Results Approval Panel, taking into consideration the error identified in the scoring/marking criteria.

- The issue must be logged on the Issues Log as a non-conformance, when logged by the Assessor, the report must contain the Issue Log reference number, so that the Programme/QQI Coordinator knows the issue has already been logged.

b) Where an assessor identifies an issue in relation to clarity, typo or phraseology pertaining to the Learner/Trainee instructions or the marking/scoring criteria, and the assessor should:

- Record the specifics of this in Q.1 or Q.2, as appropriate, in the assessor report.

- Record in the assessor report under "*Please record any comments / recommendations / corrective or preventative actions*" the nature of this issue and the suggested improvement relating to this issue.

- The issue should be logged on the Issues Log as a suggested improvement, when logged by the Assessor the report must contain the Issue Log reference number so that the Programme/QQI Coordinator knows the issue has already been logged.

Assessment Supervisor and Assessment Report

SECTION 1	
Course/Project Name	
Assessment Location Address:	
Module Title:	
Assessment Title:	**Assessment Type:**

SECTION 2	Yes	No	N/A	Comment
Q1 Did the assessment location have all the necessary materials, equipment and resources to conduct the assessment effectively?				
Q2 Were there any issues with the supervisor and/or candidate instructions for this assessment?				
Q3 During the assessment did any issue arise, or unforeseen even occur?				
Q4 Did any breach/suspicion of breach of assessment regulations occur?				

Please record any comments/recommendations/corrective or preventative actions

Seating Plan/Layout plan must be in place for written and computer based tests. Submit this report immediately the Programme Manager if non-conformances are identified. In all other cases, submit this report with the assessment results. Second providers retain a copy of this report on file.

SECTION 3	Yes	No	N/A	Comment
Q1 Were there any issues with the assessment instruments for this assessment?				
Q2 Were there any issues with the assessor guidelines and marking instructions?				
Q3 Is there any concern/suspicion of a breach regarding the assessment scripts/evidence presented?				

Please record any comments/recommendations/corrective or preventative actions:

Attach any supporting documentation

Please record any comments/recommendations for the Results Approval Panel:

I confirm that I have marked and scored the learners assessment sin line with the approved marking/scoring/assessment criteria:

Assessment Supervisor Name:

Assessment Supervisor Signature:

Date:

LEARNER IDENTIFICATION/ATTENDANCE SHEET

	Learner	Print Learner Name	Learner Signature
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			

Signed Assessment Supervisor _____ **Date**_____

Note: If the assessment supervisor is someone other than the course Tutor/Instructor/trainer, the learner's identification must be confirmed by the course Tutor/Instructor/trainer or verified by photographic evidence.
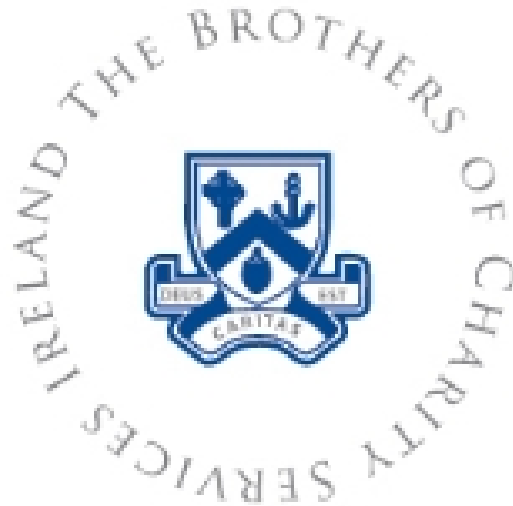
BOCSI Education and Training Programmes Procedures for Managing Assessment System Malpractice

TABLE OF CONTENTS

1.0 Introduction

Purpose

BOCSI is committed to ensuring assessment integrity at all stages of the assessment process. The BOCSI Quality Assurance Policies set out the arrangements for protecting the integrity of the assessment process and the subsequent validity and currency of Learner/Trainee/Trainees' results. Where the contents of this document differ from the regulations of other Awarding Bodies, regulations of that Awarding Body take precedence.

BOCSI recognises however, that on occasion, the integrity of the assessment process may be breached and consequently places high importance on how such occasions are addressed and managed. In particular, it is the view of the organisation that there must be a strong emphasis on the development and application of procedures that ensure that any assessment malpractices are addressed promptly and appropriately. It is important that these are applied consistently across the organisation and that they maximise resolution. Lastly, it is also important to ensure communication of these instances throughout the organisation, so that lessons can be learned and the process of continuous improvement and quality enhancement can be facilitated.

To this end, BOCSI has developed and produced these procedures which will apply to all assessment arising from training provided, organised or procured by BOCSI Education and Training Programmes.

1.2 Scope

This document provides information on:
- The definition of assessment system malpractices

- Roles and responsibilities

- Notification and reporting of assessment system malpractice

- The conduct of an investigation

- Reporting requirements

- Outcomes of an investigation

- Sanctions

- Appeals

This document is intended for use by all Staff involved in the management, coordination, conduct, assessment or verification of assessment of programmes that are either provided, organised or procured by, where BOCSI is directly responsible for the quality assurance of the assessment.

2.0 Definition of an Assessment System Malpractice

An assessment system malpractice is any act or practice which brings into question the validity or integrity of the assessment process and which normally arises due to one or more non-accidental factors.

Two categories of malpractice exist:
1 <u>Learner/Trainee/Trainee Malpractice</u>: malpractice committed by a Learner/Trainee during the course of the assessment process.
2 <u>Staff[22] Malpractice</u>: malpractice committed by Staff relating to the assessment process.

2.2 Learner/Trainee/Trainee Malpractice

In instances where Learner/Trainees/trainees are responsible for assessment system malpractices, Staff should refer to the Assessment Regulations for more information.
The following are examples of malpractice by Learner/Trainees/trainees[23]:

- Plagiarism by copying or passing off work as one's own.
- Unauthorised removal of assessment material from the assessment location.
- Use of electronic communication devices or other unauthorised materials during the assessment.
- Assisting other Learner/Trainees during the assessment.
- Collusion by working collaboratively with other Learner/Trainees, beyond what is allowed.
- Copying from another Learner/Trainee.
- Fabrication of results and/or evidence.
- Behaving in such a way as to undermine the integrity of the assessment event.
- Impersonation by pretending to be someone else in order to produce the work for another or arranging for another to take one's place in an assessment.
- Engaging in unsafe practices.

In the majority of cases, instances of suspected malpractice that arise during an assessment event will be dealt with promptly by the Assessment Supervisor and in accordance with the Assessment Regulations. These instances must be recorded by the Assessment Supervisor in the Assessment Supervisor's Report[24] in accordance with the Education and Training Programme Standard Specifications (ETPS).

Instances of suspected malpractice that arise during an assessment event will normally be notified, either directly or via the Assessment Supervisor's Report, to the QQI/Programme Coordinator within two days of the event. However, the relevant Education and Training/Programme Manager must be informed in all cases.

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[22] Staff in this context includes: BOCSI Staff and Second Provider Staff.
[23] The examples provided do not constitute an exhaustive list.
[24] Assessment Supervisor & Assessor Report.

The Education and Training/Programme or their nominee, in conjunction with the QQI/Programme Coordinator, will review the information available on conclusion of the assessment event and decide if the instance of suspected malpractice warrants further investigation. Where the instance warrants further investigation, the procedures outlined in this document must be utilised. In addition, due regard must also be given to Learner/Trainees by ensuring that the communication and appeals sections of this document are adhered to. All instances of irregularities should be recorded.

2.3 Staff Malpractice

Malpractice can be committed by Staff relating to the assessment process. The following are examples of malpractice by Staff:

1. Serious negligence which results in failure to apply defined assessment processes e.g.
   - negligence by any persons involved in the assessment process which causes (or is capable of causing) unacceptable loss, damage or injury
   - failure to follow proper/required procedure

and/or

2. The conduct of assessment with disregard for prescribed requirements e.g.
   - non-adherence to health and safety requirements, defined assessment procedures or rules, or not using defined equipment or tools
   - use of unapproved Staff to conduct or assess an assessment
   - loss of required Learner/Trainee assessment evidence.

and/or

3. A deliberate action that compromises the validity of the assessment process e.g.
   - proven fraudulent activity in relation to the assessment process and/or the issuing of certificates
   - manipulation of assessment data
   - deliberate falsification of documentation including:
     - assessment results
     - requests for certificates

2.4 Definition of an Assessment System Irregularity

   - providing Learner/Trainees/other unauthorised Staff with access to a controlled assessment instrument or other information relating to the content in advance of an assessment event
   - amendment to assessment papers outside the agreed protocol

3.0 Notification and Reporting of Alleged Assessment System Malpractices

Assessment system irregularities are typically accidental omissions or mistakes which are detected by mechanisms within the assessment system, are corrected, and which do not impact on the validity of the assessment. These could include test administration errors, missing assessment data, and transcription errors etc. which are detected and rectified. All instances of irregularities should be documented and addressed in line with the ETPS.

3.1 Initial Notification

It is important to distinguish between irregularities and malpractices. The decision on whether an issue is deemed to be considered an assessment system irregularity or alleged malpractice will relate to the intent, scale or fraudulent nature of the incident by the offender. An issue that may initially be adjudged to be an assessment system irregularity could after preliminary investigation be determined to be an alleged malpractice issue. Where such an issue is deemed to be an alleged malpractice, the procedures outlined in this document must be utilised.

3.2 Education and Training/Programme Manager

Any person involved in assessment, from design to implementation, has a responsibility for ensuring the integrity and validity of the assessment system. Alleged malpractices may be identified by a variety of sources[25]. In all cases where an alleged malpractice is identified, it must be notified to the relevant Manager, with responsibility for the operation of the programme, as per protocol. Notification may be either verbal and/or in writing.

3.3 QQI/Programme Coordinator

If notified of an alleged malpractice, the relevant Manager:
- Informs the QQI/Programme Coordinator, and where appropriate another authorised assessment co-ordinator[26], of the alleged malpractice to suspend the requesting of certification for assessments associated with the alleged malpractice.
- Logs the alleged malpractice incident on the Issues Log
- Informs the Awarding Body of the alleged malpractice where certificates have already been requested or issued.
- Is responsible for facilitating and/managing the investigation into the alleged malpractice in a timely manner.
-

If notified of an alleged malpractice, the QQI/Programme Coordinator or another authorised assessment co-ordinator:

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[25] Typically, these might be: Tutor/Instructors, QQI/Programme Coordinators, Assistant QQI/Programme Coordinators, Internal Verifiers, External Authenticators, Assessors/Supervisors, Learner/Trainees, Second Provider Staff, other external parties.

[26] Detailed descriptions of this and other roles in the assessment system can be found in Appendix 1 of the BOCSI Assessment Regulations.

- Ensures certificates are not requested for assessments associated with the alleged malpractice pending the outcome of the investigation.
- Informs the relevant manager where certificates have already been requested or issued.

4.0 Conduct of an Investigation

All notified alleged assessment system malpractices must be investigated.

Note: Investigations of alleged malpractice by BOCSI staff will be undertaken in conjunction with the appropriate **HR Policies**.

4.1 Communication with Party/Parties to be Investigated

The Education and Training/Programme Manager shall be responsible for communicating in writing to the party to be investigated, in relation to the alleged assessment system malpractice(s)[27].

- The initial communication shall:
- Provide notification that an allegation of an assessment system malpractice has been received.
- Advise that the BOCSI Procedures for Managing Assessment System Malpractices contains full details of how the investigation will be conducted.
- Emphasise that the investigation will be carried out in a discreet and confidential manner.
- Avoid implying or suggesting that conclusions have already been determined or that decisions have been made in respect of the application of corrective actions.

4.2 Appointment of Investigator(s)

The Education and Training/Programme Manager will decide who should undertake the investigation in consultation with his/her team[28].

In certain cases, a special investigation may be undertaken by:

- An external investigator appointed by the Area Manager
- Internal Audit.[29]

4.3 Conflict of Interest

Conflict of interest means any issue that might unfairly influence, or appear to influence, the outcome of an investigation. Possible Conflict of Interest relates to situations where Staff:

- Were engaged in any aspect of the assessment process (including quality assurance functions[30]).
- Have a personal relationship or family relationship with the party being investigated.
- Have a professional relationship with the party being investigated, that may be perceived to unfairly influence the investigation process.

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[27] Communication to BOCSI Staff of alleged assessment system malpractice will be in accordance with HR Policies.

[28] One or more persons may be assigned to complete the investigation.

[29] Where Internal Audit conducts the investigation(s), such investigation(s) shall be conducted in accordance with normal Internal Audit procedures.

[30] Quality Assurance functions can consist of: internal verification on the conduct of assessment process, peer review, internal verification of results, external authentication, results approval, appeal process, certification auditing or monitoring etc.

This means that any person who has a possible conflict of interest should not be involved in any investigation or subsequent making of judgments. The person(s) alleging that a malpractice has occurred is also prohibited from subsequent involvement in handling the alleged malpractice, once the initial facts have been investigated.

The Education and Training/Programme Manager shall be responsible for ensuring that a conflict of interest does not arise and that all members of an investigation panel sign a declaration to that effect (see Appendix 2). In cases where real or apparent conflict of interest is identified, alternative arrangements must be put in place.

4.4 Natural Justice

Those responsible for conducting an investigation shall establish the full facts and circumstances of any alleged assessment system malpractice. It should not be assumed that an allegation equates to proof of a malpractice. Any investigation into an alleged malpractice shall have due regard to the principles of natural justice. As such, it is necessary that those responsible for managing the conduct of any investigation must ensure adherence to these principles. This includes ensuring that:
- All investigations do not disadvantage the person against whom the allegation is made and are concluded within 40 working days from the date of the notification to the Education and Training/Programme Manager of the alleged malpractice[31].
- The parties in question are made aware of the allegation and are given the opportunity to respond.
- Care is taken to avoid conflict of interest (see Section 4.3).

The party/parties against whom an allegation is made should therefore:
- Know what evidence exists to support that allegation.
- Know the possible consequences should an assessment system malpractice be proven.
- Have the opportunity to consider their response to the allegations (if required).
- Have an opportunity to submit a written statement.
- Have an opportunity to seek advice (as necessary) and to provide a supplementary statement (if required).
- Be informed of the applicable appeals procedure, should a decision be made against him or her.
- Be informed of the possibility that information relating to a particular malpractice may be shared with other relevant parties.

4.5 Establishing the Facts within the Investigation

The investigating party should endeavour to obtain all the relevant facts about the alleged assessment system malpractice. This may be done through (some or all of) the steps outlined below:
- Review of allegation details.
- Interview with the party being investigated.

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[31] In exceptional circumstances where there are a number of persons involved or other circumstances, the investigation may take longer. In such situations the parties must be advised in writing of expected date for conclusion of the process.

- Interview with Staff and or management connected to the course, project or alleged malpractice.
- Interview with Learner/Trainees connected to the course, project or alleged malpractice.
- Interview with the other relevant parties.
- Written statement(s) from the party being investigated.
- Written statement(s) from Learner/Trainees connected to the course, project or alleged malpractice.
- Written statement(s) from Staff connected to the course, project or alleged malpractice.
- Written statement(s) from other relevant parties.
- Review of related assessment reports (Assessment Supervisor's Report, Assessor's Report, Internal Verification Report, Peer Review Report, External Authentication Report and Monitoring reports).
- Other related records.

4.6 Confidentiality

Confidentiality is a key aspect in the conduct of an investigation into an alleged malpractice, due to the risk of reputational damage to parties involved. In order to ensure confidentiality is maintained before, during and after an investigation, the following conditions should apply:
- Material relating to any allegations, findings or conclusions must not be made known to any parties, either internally or external to BOCSI, beyond those key to the investigation.
- It is not necessary to inform all parties being interviewed of the details of meetings with other parties unless there is a specific relevant matter to be raised.
- The name or other details of the party making the malpractice allegation should not be divulged to the party/parties to be investigated without consent.
- All material relating to the investigation must be held and stored in a secure manner. Material relating to a given investigation should be stored together on a single file. Each file should have a unique code to identify the investigation. Copies of electronic material should also be held with this file.

4.7 The Investigation Report

Typically, the report that results from the investigation of an assessment system malpractice shall contain the following:
- Number of Learner/Trainees affected and/or implicated.
- How the alleged malpractice was identified and notified to the relevant Education and Training/Programme Manager.
- The nature of the malpractice and the specific assessment procedure(s) or assessment rule(s) or assessment regulation(s) that has/have allegedly been breached, as well as the award details.
- Details of the scope of the investigation carried out.
- The findings:
  - details of the procedure, rule and/or regulation that is alleged to have been breached
  - a statement of the facts as described by all parties
  - details of any mitigating factors.

- Conclusion (whether the malpractice allegation is substantiated or unsubstantiated).

The investigating party should not adjudicate on the report findings.

The report will be signed and dated by the investigating party. Any written statements, notes of interviews or other relevant documentation reviewed or obtained as part of the investigation must be filed separately and securely as part of the investigation process. The Report Form template (see Appendix 3) should be used.

4.8 Report Findings Adjudication

The investigation report is submitted to the Education and Training/Programme Manager. The Education and Training/Programme Manager adjudicates on the report findings and notifies the person(s) involved in writing as to whether the allegation has been substantiated or not. Where the allegation is substantiated the notification will include details of the appeal process in regard to the findings.

5.0 Communicating the Findings

The Education and Training/Programme Manager is responsible for ensuring that the notification of the alleged assessment system malpractice investigation finding is communicated to the relevant parties within 10 days from the date of receipt of the investigator's report.

The finding of an investigation into an alleged assessment system malpractice maybe:
- Unsubstantiated Assessment System Malpractice
- Substantiated Assessment System Malpractice.

Note: Templates for this communication can be found in Appendix 5a/b.

5.1 Unsubstantiated Assessment System Malpractice

If the assessment system malpractice is found to be unsubstantiated, the Education and Training/Programme Manager will convey the findings of the investigation, in writing within the timeline specified, to the person(s) involved. The Education and Training/Programme Manager will arrange for the Issues Log to be updated in line with Section 10.4 of this document.

5.2 Substantiated Assessment System Malpractice

Where the allegation is substantiated, the Education and Training/Programme Manager will convey the findings of the investigation, in writing within the timeline specified, to the person(s) involved.

In addition, the notification to the person must also outline the Assessment System Malpractice Appeal process and the timeline in regard to the appealing the findings (Section 6.0).

5.3 Communicating the Findings to other persons

In addition, the Education and Training/Programme Manager will convey, as appropriate, the outcome of the assessment system malpractice investigation in writing to the:
- QQI/Programme Coordinator
- Area Manger and/or where relevant:
- Relevant Awarding Body

6.0 Appeal of Assessment System Malpractice Finding

If the person(s), against whom the substantiated assessment system malpractice finding is made, disagrees with the finding they may initiate an appeal.

1. Appeals by Learner/Trainees in relation the Assessment System Malpractice findings will be dealt with in accordance with **Section 6.1**.

2. Appeals by BOCSI staff in relation to the findings must be undertaken in line with **HR Policies**.

3. Appeals by Second Providers in relation the findings will be dealt with in accordance with **Section 6.1**.

6.1 Basis for an Appeal of an Assessment System Malpractice Finding

Where an assessment system malpractice allegation is substantiated, the appellant may initiate an appeal of those findings. An appeal must be made, in writing, within 10 working days from the date of the notification of the findings.

The grounds on which the appeal process can be activated are as follows:
- The alleged malpractice was not dealt with in accordance with procedures.
- The regulations did not adequately cover the circumstances relating to the malpractice.
- New information has become available that was not available to the investigation.

6.2 Making an Appeal of the Findings

To make an appeal, the appellant must:
- Complete the relevant application form[32] setting out clearly the grounds for the appeal, including any further relevant evidence supporting the appeal.

- Submit the completed form, within 10 working days from the date of the notification of the findings, to the relevant Education and Training/Programme Manager with responsibility for the operation of the programme.

6.3 Appeal Application Approval

The Education and Training/Programme Manager will determine if the application meets one of the criteria listed for activating the appeal and will inform the appellant, in writing, of the decision within 10 working days of receiving the written application.

The Education and Training/Programme Manager will notify the appellant in writing of the decision:
- To proceed with the appeal application.

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[32] Appendix 6a/b: Template for Application Form for Appeal of Assessment System Malpractice Finding.

- Not to proceed with the appeal application. The reason for not granting the appeal must also be provided to the appellant.

6.4 Appeal of Findings Process

- The appeals process must be concluded within 20 working days i.e. from the date the relevant Education and Training/Programme Manager approves an appeal to proceed to the date the appellant is notified of the appeal outcome.

- The Education and Training/Programme Manager will appoint an Appeal of Findings Reviewer[33] to conduct the appeal.

- The Appeals of Findings Reviewer will examine the application made and consider the evidence in support of the grounds for appeal. The reviewer will conduct the appeal on the basis of the appeal grounds (Section 6.1). Depending on the nature of the appeal, the reviewer may consult with additional persons on a case by case basis.

- The relevant Education and Training/Programme Manager will ensure that all relevant information, documentation, staff, project Staff and Learner/Trainees are made available to the Appeal of Findings Reviewer, including, if required, arranging meetings between all relevant parties.

6.5 Adjudicating on the Appeal of the Findings Decision Outcome

- The Appeals of Findings Reviewer will complete a report on their findings in regard to the appeal and will issue the report to the relevant Education and Training/Programme Manager within 10 working days of the request to do so.

- The Education and Training/Programme Manager will present the report to the Education and Training Quality Committee (ETQC) who will adjudicate on the findings. The ETQC will inform the BOCSI Manager of the adjudicated findings in regard to the appeal outcome decision.

6.6 Communicating the Findings Appeal Decision Outcome

The relevant Education and Training/Programme Manager with responsibility for the course/assessment will inform the appellant of the appeal outcome in writing, within 10 working days of receiving the report from the Appeals of Findings Reviewer. (**Note:** Templates for this communication can be found in Appendix 7a/b).

- The Education and Training/Programme Manager will convey the outcome of the appeal where relevant to the:
  - o QQI/Programme Coordinator
- Where an appeal is upheld, the Education and Training/Programme Manager will arrange for the Issues Log to be updated in line with Section 10.4 of this document.

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[33] The Appeals of Findings Reviewer will hold appropriate expertise and is independent of the process.

7.0 Sanctions for Assessment System Malpractice

Depending on the findings of an investigation and the outcome adjudicated, further steps, such as sanctions or disciplinary action, may be required.

Where an assessment system malpractice outcome is determined and sanctions and/or disciplinary action are being considered, in such instances:

1. Where Learner/Trainee sanctions are being considered, the relevant Education and Training/Programme Manager in compliance with the relevant policies relating to Learner/Trainee Code of Conduct, will decide on the sanctions.

2. The application and notification of sanctions against BOCSI staff will be in line with current **HR Policies**.

7.1 Communicating the Sanctions (Learner/ Trainee Only)

- If no appeal has been lodged, after 10 working days from the date of issue of notification of the Assessment System Malpractice finding, the Education and Training/Programme Manager can proceed to notify the party, in writing, of any sanctions being imposed.

- The notification will include, details of the Assessment System Malpractice Sanction Appeal process including the timeline for an appeal of a sanction (see Section 8.0).

7.2 Implementation of Sanctions (Learner/ Trainee Only)

If no appeal has been lodged, after 10 working days from the date of issue of the notification of sanctions being imposed for an Assessment System Malpractice, the Education and Training/Programme Manager can proceed to implement the sanctions

8.0 Appeal of a Sanction Imposed for an Assessment System Malpractice

If the person(s) against whom the assessment system malpractice has been substantiated disagrees with the sanctions imposed, they may initiate an appeal.

1. An appeal by a Learner/Trainee/Trainee in relation any sanction imposed for an Assessment System Malpractice must be addressed through the following procedures.

2. Appeals by BOCSI staff in relation to any sanction relating to Assessment System Malpractice must be undertaken in line with **HR Policies**.

8.1 Basis for an Appeal of Assessment System Malpractice Sanction (Learner/ Trainee Only)

An appellant may appeal a sanction imposed in regard to a substantiated assessment system malpractice. An appeal must be made, in writing, within 10 working days from the date of the notification of the sanction.

The grounds in which the appeal process can be activated are as follows:
- The sanction is excessively punitive in relation to the malpractice incident.
- The alleged sanction was not in accordance with policy.

8.2 Making an Appeal of the Sanction (Learner/ Trainee Only)

To make an appeal, the appellant must:
- Complete the relevant application form[34] setting out as clearly as possible the grounds for the appeal, including any further relevant evidence supporting the appeal.

- Submit the completed form, within 10 working days from the date of the notification of the sanction, to the relevant Education and Training/Programme Manager with responsibility for the operation of the programme.

8.3 Appeal Application Approval (Learner/ Trainee Only)

- The Education and Training/Programme Manager will determine if the application meets one of the criteria listed for activating the appeal and will inform the appellant, in writing, of the decision within 10 working days of receiving the written application.

- The Education and Training/Programme Manager will notify the appellant in writing of the decision:
  - To proceed with the appeal application.

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[34] Appendix 8: Template for Application Form for Learner/Trainee Appeal of Sanction Imposed for an Assessment System Malpractice.

o   Not to proceed with the appeal application. The reason for not granting the appeal must also be provided to the appellant.

8.4 Appeal of Sanction Process (Learner/Trainee Only)

- The appeals of sanction process must be concluded within 20 working days i.e. from the date the relevant Education and Training/Programme Manager approves an appeal to proceed to the date the appellant is notified of the appeal outcome.

- The Education and Training/Programme Manager will appoint an Appeal of Sanction Reviewer[35] to conduct the appeal. The relevant Education and Training/Programme Manager will ensure that all relevant information, documentation, is made available to the reviewer.

- The Appeals of Sanction Reviewer will examine the application made and consider the evidence in support of the grounds for appeal. The reviewer will conduct the appeal with on the basis of the appeal grounds (see Section 8.1). Depending on the nature of the appeal, the reviewer may consult with additional persons on a case by case basis.

8.5 Adjudicating on the Appeal Decision Outcome (Learner/Trainee/Trainee Only)

- The Appeals of Sanction Reviewer will complete a report on their findings in regard to the appeal and will issue the report to the relevant Education and Training/Programme Manager
- The Education and Training/Programme Manager will submit the report to the Area Manager who will adjudicate on the findings. The Area Manager will inform the Education and Training/Programme Manager of the adjudicated findings of the sanction appeal decision outcome.

8.6 Communicating the Sanction Appeal Decision Outcome (Learner/ Trainee Only)

- The relevant Education and Training/Programme Manager with responsibility for the course/assessment will inform the appellant of the appeal of the sanction outcome (as adjudicated by the ETQC), in writing, within 10 working days of receiving the Appeals Reviewer Report. (**Note:** A template for this communication can be found in Appendix 9).
- The Education and Training/Programme Manager will convey the outcome of the appeal, where relevant, to the:
   o   QQI/Programme Coordinator

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[35] The Appeal of Sanction Reviewer will hold appropriate expertise and is independent of the process.

9.0 Certification

Regardless of the outcome of the assessment system malpractice investigation, it is imperative that the certification process is not unnecessarily compromised, and that where applicable, Learner/Trainees/trainees receive certificates with minimal delay, following, and in accordance with, the investigation outcome. Consequently, as soon as the investigation outcome is communicated, one of the following steps should be taken:

- In cases where certificates had already been requested or issued by the Awarding Body, Education and Training/Programme Manager will inform the Awarding Body of the outcome of the investigation certification implications.

or

- If the processing of certificate requests has been suspended pending an investigation outcome, the Education and Training/Programme Manager will inform the QQI/Programme Coordinator whether or not the processing of certificate requests can proceed.

10.0 Corrective/Preventative Action and Follow-Up

Where the assessment system malpractice is substantiated, the relevant Education and Training/Programme Manager in conjunction with the ETQC will decide on the corrective and/or preventative actions and follow-up to be taken.

10.1 Corrective Actions: Learner/ Trainee Redress

All corrective actions will be logged through the Issues Log. Where the marking and/or conduct of assessments have been compromised (not by Learner/Trainees/trainees), any Learner/Trainee/trainee impacted shall be given the opportunity to re-sit the assessments as soon as possible, without any penalties being applied to the Learner/Trainee. Where appropriate, the necessary supports shall be put in place.

10.2 Corrective and/or Preventative Actions for Improving Assessment Processes or Conduct

- Corrective actions and/or preventative actions arising from malpractice incidents for improving assessment processes or conduct may include:
- Reminding Learner/Trainees of the rules governing assessments.
- Amendments to Learner/Trainee information on assessments.
- Refresher briefing for assessment Staff.
- Suggested amendments to the assessment brief.
- Suggested amendments to assessment rules, procedures and/or regulations.
- Other appropriate measures.

10.3 Communication of Corrective Actions

The Education and Training/Programme Manager will convey details of the corrective actions and follow-up where relevant to the:
- Learner/Trainee/Trainee
- Senior Tutor/Instructor
- QQI/Programme Coordinator
- ETQC
- Other relevant parties.

10.4 Updating the Programme Standards Specification Issues Log

The Education and Training/Programme Manager will arrange for the Issues Log to be updated as follows:
- Where an assessment malpractice is unsubstantiated, the Issues Log is closed and the resolution is inputted as allegation unsubstantiated.

- If the appeal of the malpractice findings is upheld, the Issues Log is closed and the resolution is inputted as allegation unsubstantiated.

- The Issues Log can be updated to denote the status of the outcome and should be closed when corrective and/or preventative action is implemented.

Appendices

Appendix 1 : Template for Declaration regarding Conflict of Interest
Appendix 2 : Alleged Assessment System Malpractice Report Template
Appendix 3 : Letter / Application Templates
Appendix 4 : Notification of Appeal of Learner/Trainee Sanction

Appendix 1: Template for Declaration regarding Conflict of Interest

Declaration regarding Conflict of Interest
for Persons involved in the Investigation of an Alleged Malpractice with the BOCSI Assessment System

Conflict of interest means any issue that might unfairly influence, or appear to influence, the outcome of an investigation. A conflict of interest for a person investigating an alleged malpractice with the BOCSI assessment system shall be deemed to exist if the Staff:
- *Were engaged in any aspect of the assessment process (including quality assurance functions).*
- *Have a personal relationship or family relationship with the party being investigated.*
- *Is perceived to have a professional relationship with the party being investigated that may unfairly influence the investigation process.*

Where a conflict of interest exists, there can be no involvement in the investigation of the alleged malpractice, or the decision-making surrounding the outcome of the alleged malpractice.

Re: Issues Log Reference Number: Date:

Training Provider: Area:

This is to certify that, as far as I am aware, no conflict of interest exists in relation to my participation in the investigation of the above-mentioned alleged assessment system malpractice.

Signed: Date:

Name (Block Capitals): _____

Position: _____ Organisation: _____

Appendix 2: Alleged Assessment System Malpractice Report Template

SECTION 1: GENERAL

Provider Details			
Programme Provider[36]			
Address			
Course Code			
Provider Contact Name		Position	
Contact Number		Email Address	
Assessment Details			
Award Details (Type/Level)			
Title of Assessment			
Assessment Location			
Description of Alleged Malpractice			
Date of Alleged Malpractice		Time of Alleged Malpractice	
Number of Learner/Trainee Impacted		Number of Learner/Trainee Implicated (if any)	
Nature of Learner/Trainee Impacted			
Certification Status at time of Allegation Notification (tick as appropriate)			
Certificates not requested and will not be progressed until process is concluded			
Certificates have been issued and are to be retrieved and held pending outcome			
Certificates have not been issued and will be held until process is concluded			
Certification will not be impacted			

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[36] BOCSI Programme Centre, Second Provider, Approved Education/Training Organization

SECTION 2: INVESTIGATION REPORT

If this section is not applicable, please tick ☐

Investigation		
Name (s) of person (s) spoken to/met		
Documents Reviewed		
Evidence Reviewed		
Investigation Findings		
Supporting Documents/Evidence/Testimony		
Allegation substantiated	Yes	No
Investigation Report submitted to Programme Manager	Date:	
Signed (Investigator)		
Print Name		Date:

SECTION 3: FINDINGS ADJUDICATION AND COMMUNICATION OF FINDINGS

If this section is not applicable, please tick ☐

Findings Adjudicated by BOCSI Manager		
Malpractice Allegation Findings	Substantiated ☐	Unsubstantiated ☐
Comment		
Signed (Manager)		Date:

Communication of Adjudicated Findings				
	Communicated to: (As relevant)	Please Tick	Date	Informed by
Adjudicated Findings	Investigated Party or Parties	☐		
	QQI/Programme Coordinator	☐		
	Programme Manager	☐		
Other party informed (specify)				

SECTION 4: APPEAL OF ASSESSMENT SYSTEM MALPRACTICE FINDING

If this section is not applicable, please tick ☐

Appeal of Assessment System Malpractice Finding				
Appeal Application received by Manager	Yes	☐	Date:	
Note				
Appeal Application Approved to Proceed	Yes	☐	No	☐
Reason(s) for not granting appeal				
Appellant notified in writing	Yes	☐	Date:	
Appeal Reference Number(s)				

Basis for an Appeal Assessment System Malpractice Finding (please tick)	
Malpractice not dealt with in accordance to procedure	
Regulations not adequately cover the circumstances relating to malpractice	
New information available that was not available to investigation	

Appeal of Assessment System Malpractice Finding		
Name of Appeal Finding Reviewer:		Contact Number/Email:
Name(s) of Person(s) spoken to/met		
Documents Reviewed		
Evidence Reviewed		
Appeal Decision Outcome (including justification)		
Report submitted		

Adjudication on the Appeal of Finding Decision Outcome				
Appeal Upheld as adjudicated	Yes	☐	No	☐
Signed (BOCSI Manager)			**Date:**	

Communication of Appeal of Finding Decision Outcome				
	Communicated to:	Please Tick:	Date:	Informed by:
Appeal of Findings Decision Outcome	Appellant			
	PSC			
	Programme Manager			
	BOCSI Manager			
Other party informed				

SECTION 5: SANCTIONS FOR ASSESSMENT SYSTEM MALPRACTICE (LEARNER/TRAINEE ONLY)

If this section is not applicable, please tick ☐

Sanction		
The Sanction(s) Recommended		
Approved: Signed (BOCSI Manager)		**Date:**

Communication of the Sanction				
	Communicated to:	Please Tick:	Date:	Informed by:
Sanction being imposed	Relevant Learner/Trainee/Trainee(s)			
	PSC			
	Programme Manager			
	BOCSI Manager			
Other Party Informed				

SECTION 6: APPEAL OF ASSESSMENT SYSTEM MALPRACTICE SANCTION (LEARNER/TRAINEE ONLY)

If this section is not applicable, please tick ☐

Appeal of Assessment System Malpractice Finding				
Appeal Application received by Manager	Yes	☐	Date:	
Note				
Appeal Application Approved to Proceed	Yes	☐	No	☐
Reason(s) for not granting appeal				
Appellant notified in writing	Yes	☐	Date:	
Appeal Reference Number(s)				
Basis for an Appeal of a Learner/Trainee/Trainee Sanction (please tick)				
Sanction excessively punitive in relation to the malpractice incident				
The sanction was not in accordance with policy				
Appeal of a Learner/Trainee/Trainee Sanction				
Name of Appeal Sanction Reviewer:			Contact Number/Email:	
Name(s) of Person(s) spoken to/met				
Documents Reviewed				
Evidence Reviewed				
Appeal Decision Outcome (including justification)				
Report submitted				
Adjudication of Appeal of the Sanction Decision Outcome				
Appeal Upheld as adjudicated	Yes	☐	No	☐
Signed (BOCSI Manager)			**Date:**	

Communication of Appeal of Sanction Decision Outcome				
	Communicated to:	Please Tick:	Date:	Informed by:
Appeal of Findings Sanction Outcome	Appellant			
	PSC			
	Programme Manager			
	BOCSI Manager			
Other party informed				

SECTION 7: CORRECTIVE AND/OR PREVENTATIVE ACTION, ISSUES LOG CLOSURE AND CERTIFICATION

If this section is not applicable, please tick ☐

Corrective and/or Preventative Action (Describe where applicable)	
Corrective action for Learner/Trainee redress	
Corrective action for improving assessment process or conduct	
Other	

Communication of Corrective and/or Preventative Action			
	Communicated to:	Date:	Informed by:
Corrective Action			

Issued Log Closed				
Assessment System Malpractice Unsubstantiated	Yes ☐	Issues Log Closed	Date:
Appeal of Malpractice Findings Upheld	Yes ☐	Issues Log Closed	Date:
Implementation of Corrective Action and/or Preventative Action	Yes ☐	Issues Log Closed	Date:

For Certificates Held		
Certificate(s) released after investigation	Yes ☐	Date:
Awarding Body Notified	Yes ☐	Date:

Appendix 3a: Notification of Investigation Letter Template (Learner/Trainee/Trainee only)

NAME
ADDRESS 1
ADDRESS 2
ADDRESS 3

Reference Number:

Date: <dd/mm/yy>

Subject: Alleged breaking of our assessment rules (**malpractice**)

Dear Mr/Ms < Name>,
It has come to our attention that you may have broken the rules of our assessment system (malpractice) relating to: (*delete as appropriate*)

<Assessment Title> held at <Location> on <date>.
<Assessment Event> held at <Location> on <date>.
<other - specify what the alleged malpractice relates to, when and where it is alleged to have occurred if known>

Next steps
We are going to investigate this alleged malpractice. Our investigator will contact you soon. I want to assure you that we will carry out this investigation in a **discreet, confidential and fair manner**. Our investigation will follow the BOCSI Procedures for Managing Assessment System Malpractice. I attach a copy of these procedures and our Information for Learner/Trainee on Learner/Trainee Assessment System Malpractice document.

If you require any further information, contact me. Please keep this letter and use the reference number above when you contact me about this matter.

Yours sincerely,

_____
<Name>
Manager

Appendix 3b: Notification of Investigation Letter Template

NAME
COMPANY NAME (if applicable)
ADDRESS 1
ADDRESS 2
ADDRESS 3

Reference Number:

Date: <dd/mm/yy>

Subject: Alleged Assessment System Malpractice

Dear Mr/Ms < Name>,

I wish to inform you that it has come to our attention that an assessment system malpractice may have occurred relating to: (*delete as appropriate*)
<Assessment Title> held at <Location> on <date>.
<Assessment Event> held at <Location> on <date>.
<other - specify what the alleged malpractice relates to, when and where it is alleged to have occurred if known>

BOCSI intends to conduct an investigation into the alleged malpractice in accordance with BOCSI *Procedures for Managing Assessment System Malpractice,* (copy attached). You will be contacted by the Investigator appointed to investigate the alleged assessment malpractice in due course.

I wish to assure you that the investigation will be carried out in a discreet and confidential manner, and will have due regard to the principles of natural justice for all parties concerned.

If you require any further information please do not hesitate to contact me. Please quote the reference number above in all your correspondence with BOCSI in this regard.

Yours sincerely,

_____
<Name>
Manager

Appendix 3c: Notification of Assessment System Malpractice Investigation Finding (Learner/Trainee/Trainee only)

NAME
ADDRESS 1
ADDRESS 2
ADDRESS 3

Reference Number:

Date: <dd/mm/yy>

Subject: Finding of the alleged malpractice investigation

Dear Mr/Ms < Name>,

I am writing to tell you about the finding of our investigation into the malpractice allegation. We have **<upheld / not upheld >** (*delete as appropriate*) the allegation.

(In the case of an allegation that has been upheld*)*
<If you want to appeal this finding, you must complete the attached application form and return it to me **within 10 working days** from the date of this letter.

If you require any further information, please do not hesitate to contact me. Please **keep this letter** as you will need the above reference number to complete the appeal form (if you are taking one) and when you contact us on this matter.

Yours sincerely,

_____
<Name>
Manager

Appendix 3d: Notification of Assessment System Malpractice Investigation Finding

NAME
COMPANY NAME (if applicable)
ADDRESS 1
ADDRESS 2
ADDRESS 3

Reference Number:

Date: <dd/mm/yy>

Subject: Assessment System Malpractice Investigation Finding

Dear Mr/Ms < Name>,

BOCSI has completed its investigation into the alleged assessment system malpractice in accordance with BOCSI *Procedures for Managing Assessment System Malpractice.* I wish to inform you that the finding of this investigation is that the malpractice allegation is <unsubstantiated/substantiated> (*delete as appropriate*).

(In the case of substantiated malpractice)
<Please note that you may initiate an appeal of the finding of this investigation, in writing, within 10 working days from the date of this letter. An application form for the appeal of the assessment system investigation finding is enclosed with this letter>.

If you require any further information please do not hesitate to contact me. Please insert the reference number above in all your correspondence.

Yours sincerely,

_____
<Name>
Manager

Appendix 3e: Template for Application Form for Appeal of Assessment System Malpractice Finding (Learner/Trainee only)

Application Form for Learner/Trainee Appeal of Assessment System Malpractice Finding

Instructions

Please complete **all** parts of this form in BLOCK letters. Send it to the Education and Training/Programme Manager who wrote to tell you about the assessment system malpractice finding. Please do this within **10 working days** from the date of their letter.

Name:		
Address:		
Reference Number (You will find this on your letter):		
Contact Number:		
Email Address:		
Reason for your appeal (please tick one box only)		
Malpractice was not dealt with in line with procedures		
Regulations did not adequately cover the circumstances around the malpractice.		
New information is now available that was not available to the investigation		
Please explain your reason for this appeal application		
Print Name:		
Signature:		Date:

FOR INTERNAL USE ONLY				
Report Completed	Yes	☐	No	☐
Signature:				
Date:				
File Reference Number:				

Appendix 3f: Template for Application Form for Appeal of Assessment System Malpractice Finding

Application Form for Appeal of Assessment System Malpractice Finding

Please complete this form in BLOCK letters and send to the BOCSI Manager who sent the letter notifying you of the assessment system malpractice finding. <u>The BOCSI Manager must get this form no more than 10 working days from the date of the letter sent to you.</u> Please quote the Reference Number on this application.

Name:	
Address:	
Reference Number (You will find this on your letter):	
Contact Number:	
Email Address:	
Reason for your appeal (please tick one box only)	
Malpractice was not dealt with in line with procedures	
Regulations did not adequately cover the circumstances around the malpractice.	
New information is now available that was not available to the investigation	
Please explain your reason for this appeal application	
Print Name:	
Signature:	Date:

FOR INTERNAL USE ONLY		
Report Completed	Yes ☐	No ☐
Signature:		
Date:		
File Reference Number:		

Appendix 3g: Notification of Appeal of Assessment System Malpractice Finding Outcome (Learner/Trainee only)

NAME
ADDRESS 1
ADDRESS 2
ADDRESS 3

Reference Number:

Date: <dd/mm/yy>

Subject: Appeal of our assessment system malpractice finding

Dear Mr/Ms < Name>,

We have reviewed your appeal of the malpractice finding based on <insert grounds>. You appeal has been **<upheld/not upheld>** (*delete as appropriate*).

We used our BOCSI Procedures for Managing Assessment System Malpractice to reach this decision.

If you require any further information, contact me. Please keep this letter and use the reference number above when you contact me about this matter.

Yours sincerely,

_____
<Name>
Manager

Appendix 3h: Notification of Appeal of Assessment System Malpractice Finding Outcome

NAME
COMPANY NAME (if applicable)
ADDRESS 1
ADDRESS 2
ADDRESS 3

Reference Number:

Date: <dd/mm/yy>

Subject: Appeal of Assessment System Malpractice Finding

Dear Mr/Ms < Name>,

Further to your appeal application of the Assessment System Malpractice Finding on the grounds of <insert grounds>, BOCSI has concluded its appeal process in accordance with BOCSI *Procedures for Managing Assessment System Malpractice.* The outcome is that your appeal is <upheld/not upheld> (*delete as appropriate*).

If you require any further information please do not hesitate to contact me. Please insert the reference number above in all your correspondence.

Yours sincerely,

_____
<Name>
Manager

Appendix 3i: Template for Application Form for Appeal of Assessment System Malpractice Sanction (Learner/Trainee only)

Application Form for Learner/Trainee Appeal of Sanction Imposed for an Assessment System Malpractice

Instructions

Please complete **all** parts of this form in BLOCK letters. Send it to the BOCSI Manager who wrote to tell you about the malpractice sanction. Please do this within **10 working days** from the date of their letter.

Name:		
Address:		
Reference Number (You will find this on your letter):		
Contact Number:		
Email Address:		
Why are you appealing the sanction? (please tick one box only)		
The sanction was too severe in relation to the malpractice incident		
The sanction was not inline with BOCSI Policy		
New information is now available that was not available to the investigation		
Explain why you are applying for this appeal		
Print Name:		
Signature:	Date:	
FOR INTERNAL USE ONLY		
Report Completed	Yes ☐ No ☐	
Signature:		
Date:		
File Reference Number:		

Appendix 4: Notification of Appeal of Learner/Trainee Sanction

NAME
ADDRESS 1
ADDRESS 2
ADDRESS 3

Reference Number:

Date: <dd/mm/yy>

Subject: Result of your appeal of assessment malpractice sanction

Dear Mr/Ms < Name>,

We have reviewed your appeal of the assessment malpractice sanction on the grounds of <insert grounds>. Your appeal is <**upheld/not upheld**> (*delete as appropriate*).

We used our Procedures for Managing Assessment System Malpractice to reach this decision.

If you require any further information, contact me. Please keep this letter and use the reference number above when you contact me about this matter.

Yours sincerely,

_____
<Name>
Manage

Internal verification is the process by which the provider's assessment policies and procedures relating to planning, managing and operationalising all aspects of assessment practices will be internally verified i.e., monitored by the provider itself.

The process includes checking that the provider's assessment procedures have been applied across the range of assessment activities from planning to finalising results including checking/monitoring the accuracy of assessment results to ensure learner evidence exists and that results and grades are correctly computed and recorded.

Internal verification should take place on a sampling basis. Internal verification is undertaken by the assignment of one or more internal verifiers. Based on the provider's sampling strategy, (see sample value for n) the internal verifier will verify i.e. monitor the Assessment Process including the accuracy of the assessment results.

The Internal Verification Process The outcome of the internal verification process is an internal verification report.

A sample template for the internal verification reports is provided below.

Role of the Internal Verifier(s)

The role of the Internal Verifier is to systematically check that the provider's assessment procedures have been applied consistently across assessment activities and to verify the accuracy of assessment results. Internal Verifier(s) are designated Instructors/Tutors working in BOCSI Education and Training Programmes.

 The Internal Verifier(s) will:

Check that the provider's assessment procedures were adhered to:

This process includes ensuring all assessment material(s) submitted by the Learner/Trainee *(Portfolio of Work, Video/Audio Recordings, Artefacts/Craft pieces, Worksheets/workbooks, Skills demonstrations evidence etc*.) have been correctly completed signed & dated according to each Specific Learning Outcome in the module as outlined in the respective briefs and marking sheets, verifying that all assessments by the Instructor/Tutor were carried out fairly and consistently.

Monitor Assessment Results on a sample basis

Produce an Internal Verification Report (Appendix 6-Internal Verification Documents)

*Internal Verifiers, in their capacity as Instructors/Tutors, <u>Do Not</u> verify the procedures they have personally conducted within their own programs. Instead, given the presence of a minimum of two Internal Verifiers, they undertake the verification of each other's procedures and assessment material submitted by the learners.

Verification of Assessment Procedures

Internal verification checks that the provider's assessment procedures have been applied consistently across assessment activities.

The internal verification process will ensure;

Provider's assessment procedures are adhered to

Learning has been assessed using the techniques and instruments as indicated in the validated programme

Assessment results are documented and recorded as per the provider's procedures.

Verification of Assessment Results

The internal verification process will involve the verification of assessment results on a sampling basis. This involves checking that assessment evidence is available for all learners presented and that results are recorded, and grades are assigned according to QQI requirements.

This is achieved by applying systematic checks of the evidence presented by a sample of learners. The Internal Verifier(s) will ensure:

evidence is available for learners presented for an award (i.e., evidence for all minors is available for the major award)

evidence is generated as per the technique identified in the Award Specification and using appropriate instruments as indicated in the validated programme

assessment results are available for each learner

that marks are totalled, and percentage marks are calculated correctly

the percentage marks and grades awarded are consistent with QQI grading bands

In devising an effective internal verification process the provider should consider the following:

· The number of assessors: (Minimum of two verifiers)

· The number of learners

· The number, range and diversity of awards being offered

· The number of centres within the provider's remit.

A sample of assessment results are internally verified prior to being submitted for external authentication and results approval.

Assessment Evidence

Learner's assessment evidence for the upcoming certification periods will be in one of the three approved authorised platforms adhering to the guidelines for Digital Assessment for QQI Certification and the Assessment Online Specific Instructions. The procedures below outline how this evidence will be verified by each centre.

Options for Presentation of Portfolios

(1) Hard copy portfolios

(2) Soft copy portfolios are presented on one of these platforms:

OneDrive, Moodle, MS Teams, USB Device (Video/Audio files held on USB with Learners name clearly visible, digital folders clearly labelled and each file /image/clip etc. clearly labelled in relation to each SLO of the module.

(3) Mixture of hard and soft copy portfolios (E.g. USB device attached securely to Portfolio).

IV Procedure

All assessment marks must be uploaded to QBS in advance of IV taking place and QBS Authentication Report by Learner Group by Minor Award Results Sheets must be made available to the IV Personnel. All learner evidence must be gathered and saved to one location per learner. Evidence may be a mixture of hard and soft copy; in this case all hardcopy (physical/paper based) evidence should be kept together and all softcopy (digital/electronic) should also be kept together on one of the authorised platforms as per the Digital Guidelines for QQI Assessment.

General Role of the IV Personnel/Team for all Internal Verification

Once all portfolios have been handed in to the IV Personnel/Team, they can internally verify all results and evidence using the - Internal Verification Checklist Levels 1-4. See Appendix 6- Internal Verification Documents.

One checklist per module for each learner group must be completed. Use of this checklist is intended to support the IV process and completed checklist(s) should be stored along with other QA documentation;

The IV Personnel/Team must ensure all sections on the IV Checklists are completed; Particular attention should be taken to ensure the following:

A minimum of 50% of a representative sample of the class group is IV'd;

Extra vigilance is observed to ensure that marks have been totalled and transferred correctly from individual marking sheets to module results summary and to the QBS;

Evidence is present for all Learning Outcomes;

Alternative Assessments are clearly identified;

All digital evidence is accounted for;

Learners have submitted Assessment Cover Sheets for all evidence

BOCSI Training Programme Assessment Procedures have been followed.

Complete the Module Results Summary Sheet included in the Internal Verification Report (Appendix 6), which includes verification that they have checked, recorded and verified all or the sampled learner results and evidence.

The QQI Learner Marking Sheets located at the back of each module descriptor must also be included, these are now also available in Word format.

The completed Module Results Summary Sheet will be included/uploaded to the QBS system with the assessment evidence, along with the Checklists. This is dependent on the format of the Assessor Folder (i.e., hard or soft copy format)

Sign all "Authentication Report by Learner Group by Minor Award Results" Sheets that have been selected for sampling;

If an issue is discovered, this is reported to the designated person(s) and the outcome of this issue must be noted on the IV Report or logged via the Issues Report. See Appendix 5- BOCSI Education and Training Programmes Procedures for Managing Assessment System Malpractice; Issues Log.

Complete the Internal Verification Report

References

QQI (2018) Quality Assuring Assessment Guidelines for Providers Revised 2013 (Version 2 Revised

2018). QQI. Available from https://www.qqi.ie/sites/default/files/2021-10/quality-assuringassessment-guidelines-for-providers-revised-2013.pdf [March 16th, 2023]

QQI (2020) Implementing Contingency Arrangements For Alternative Assessment and Authentication

Processes: Guidance for Further Education & Training Providers. QQI. Available from

https://www.qqi.ie/Downloads/Contingency%20Arrangements%20Guidance%20for%20FET %20Providers.pdf [March 16th, 2023]

QQI (2020) Covid-19 – Updates from QQI. QQI. Available from

https://www.qqi.ie/Articles/Pages/COVID-19---Updates-from-QQI.aspx [March 16th, 2023]

Internal Verification Report Sample

Registered Provider/Centre Name:	Rehabilitative Training Programme, Brothers of Charity Services, Clare
Registered Number:	**07040179: Centre No. 38095C**

Named award(s) and codes (Include Major and Minor awards) Named award(s) for which results are being internally verified (sampled)	▪ **LIST AWARD TITLES/CODES**

Date of internal verification:	DATE

Internal verifier(s): (names and signatures of staff member(s) carrying out the internal verification)	1. Name: Signature:
	2. Name: Signature:
	3. Name: Signature:

Assessment processes and procedures	**Verification** of adherence to provider's assessment procedures. Commentary should be provided as appropriate.
Basis on which sample of Learner/Trainee evidence was selected (i.e. Identify Learner/Trainee groups and total Learner/Trainee population being sampled and sample size selected)	**Learner/Trainee Group Size: 17** **Learner/Trainee Population Being Sampled: 17 (all)**
Assessment procedures *I (we) confirm that the assessment procedures as agreed through this provider's quality assurance have been applied across all assessment activities for this award.* *Tick as appropriate* | Yes	√
No	| 	Comment as appropriate *(If 'No' – identify issues arising and corrective action taken)*

Internal verifier(s)

Name…Moureen Kelly, Zelma Power……………………………………………....

Signature: …………………………...………Date:……………………………………

Internal verification

Monitoring assessment results

Total number of Learner/Trainees for whom evidence were sampled: 17………..   *Number of Learner/Trainees in the sample: 17.........................*

Please complete for each named award/group of Learner/Trainee results verified	*Is the documentation available and completed correctly? e.g. rmark sheets, Learner/Trainee records*		*Is sufficient and reliable assessment evidence available for all Learner/Trainees presented?*		*Was the evidence generated in accordance with appropriate assessment techniques and instruments?*		*Have marks been correctly totalled and grades awarded in line with QQI requirements*		
Named award title	Yes	No	Yes	No	Yes	No	Yes	No	Comments/action points (if 'No' please identify issues/make recommendations)
AWARD TITLE/CODE									

**Internal Verification Report on the Conduct of the Assessment Process
(Checklist and Comment Form)**

To be carried out in line with ETPS

Internal Verification Report on the Conduct of the Assessment Process

SECTION 1 – GENERAL INFORMATION			
Training/ Programme Type			
Date of verification		**Time of verification**	
Course/ Programme Name			
Course/ Programme Code			
Assessment location Address		Is this the same address as:	
		Programme Location	**Yes** ❑
			No ❑
Module title			
Assessment title			
Assessment Supervisor Name			

SECTION 2				
Q.1	**For the Assessment event**			⬚ **Comment**

		Yes	No	N/A	Comment
1.A)	Are all necessary materials, equipment and resources to conduct the assessment at the location?	Yes ❏	No ❏		
1.B)	Was the test pack secure?	Yes ❏	No ❏	N/A ❏	
1.C)	Did the test pack contain all the necessary documentation and sufficient quantities of test papers/instructions for the assessment event?	Yes ❏	No ❏	N/A ❏	
1.D)	Is there a seating plan for the assessment event?	Yes ❏	No ❏	N/A ❏	
1.E)	Is the layout of the test location appropriate for the assessment?	Yes ❏	No ❏		
1.F)	Where any computers or other devices were used to conduct the assessments, were they synchronised with the actual year, month, date and time (GMT)?	Yes ❏	No ❏	N/A ❏	
1.G)	Did the Assessment Supervisor have a copy of the rules/regulations governing assessment?	Yes ❏	No ❏		

	SECTION 3				
Q.2	**The Assessment event**				**Comment**
2.a)	Did all learners taking the assessment sign the attendance sheet?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.b)	Was the correct version of the assessment used?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.c)	If the test is a repeat, is the test paper an alternative version to previous version used?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.d)	Did each learner receive the necessary instructions, datasheets, materials and drawings as appropriate?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.e)	Were the learners instructions read to the learners?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.f)	Were all learners given clear and specific instructions regarding their conduct during the assessment event?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.g)	Were all learners advised of the test duration (starting & finishing times)?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.h)	Was advance approval obtained for any learner assessment support?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.i)	Where assessment support personnel were present during the assessment, did they receive an appropriate briefing on their role and conduct prior to the assessment event?	**Yes** ❑	**No** ❑	**N/A** ❑	
2.j)	Was anyone else present during the assessment event (other than Assessment Supervisor, Learners being assessed, Learner Assessment Support Personnel)	**Yes** ❑	**No** ❑	**N/A** ❑	
2.k)	Was a second person in attendance at the venue during the assessment event?	**Yes** ❑	**No** ❑	**N/A** ❑	

2.l)	Were there any Health and Safety concerns?	**Yes** ❏	**No** ❏	

SECTION 4					
Q3	**During the Assessment**				**Comment**
3.a)	Were learners supervised at all times, where applicable?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.b)	Did the assessment supervisor provide any technical advice relating to the assessment (other than clarification of instructions)?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.c)	Did the learners receive appropriate notification of the time remaining?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.d)	Did the assessment finish in line with the assessment duration?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.e)	Were learners instructed to cease work when the assessment time concluded?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.f)	Were learners reminded to sign and date all written work?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.g)	Were all assessment papers, learner instructions, datasheets, materials and drawings, collected at the end of the assessment?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.h)	Were all practical work test pieces identified correctly?	**Yes** ❑	**No** ❑	**N/A** ❑	
3.i)	Was the attendance sheet signed off by the Assessment Supervisor?	**Yes** ❑	**No** ❑		
3.j)	Were any unforeseen event(s) during the assessment dealt with in accordance with assessment rules/regulations?	**Yes** ❑	**No** ❑		
3.k)	Was there any breach or suspected breach of assessment regulations?	**Yes** ❑	**No** ❑		

SECTION 5				
Q4	**Assessment Documentation/Records**			**Comment**
4.a)	Were there any anomalies identified in the supervisor test / assessment instructions?	**Yes** ❑	**No** ❑	**N/A** ❑	
4.b)	Were there any anomalies identified in the learner test / assessment instructions, datasheets, materials and drawings?	**Yes** ❑	**No** ❑	**N/A** ❑	
4.c)	Was the Assessment Supervisor's part of the Report completed and signed?	**Yes** ❑	**No** ❑	**N/A** ❑	
4.d)	Were arrangements in place for secure storage of records / assessment evidence after the test?	**Yes** ❑	**No** ❑	**N/A** ❑	
4.e)	Were arrangements in place for secure storage of practical work test pieces until the marking of the test occurs?	**Yes** ❑	**No** ❑	**N/A** ❑	

| 4.f) | Where requested by BOC, were previous continuous improvement actions implemented? | **Yes** ❑ | **No** ❑ | **N/A** ❑ | |

SECTION 6	
Details of persons met in conducting the internal verification of process:	
Name	**Position/Function**

Feedback received from persons met as part of the verification process:

Summary of Internal Verification findings:

Continuous improvements recommendations:

Copy of report given to:	Name		Date	
	Job Title			
	Name		Date	
	Job Title			

Are there any corrective/ preventative action arising? **Yes** ❏   **No**❏
Please comment:

Internal Verifier Name: print name	
Internal Verifier signature:	**Date:**
Assessment Supervisor signature:	**Date:**

Appendix 8- External Authentication Documents

This template is provided as a tool for providers and external authenticators. A provider may however devise their own external authentication report.
They must ensure the Process outline for external authentication is adhered to and verified in the report.

Registered Provider/Centre Name:	
	Brothers of Charity Services Clare, Rehabilitative Training Programme
Registered Number:	
	07040179: Centre No. 38095C
Date of external authentication Process:	

External Authentication Report	
Indicate sample basis and sample size: **17 out of 17**	The basis on which the sample was selected should be identified here. i.e. the sample was taken for Named Award 'X' from Learner/Trainees across 3 centres. Total number of Learner/Trainees = 220 Sample size ($\sqrt{n}$ selected across the spread of grades) = 15 Where the sample is taken from across more than one centre, the centres included in the sample should be listed in this report.

Named award(s) and codes for sample selected (Major and component award(s) for which results are being externally authenticated)	LIST AWARD TITLES AND CODES
External authenticator details	Name: Address/contact detail:

Report on Moderation of Assessment Results						
Please complete for each named award/group of assessment results being authenticated	Have the results been internally verified by the provider?		Was the evidence assessed in accordance with techniques outlined in the Award Specification?		Are the results presented consistent with national standards for the award? (If no, identify results which have been changed.		Comments/Action Points (If 'No' identify issues/make recommendations).
Component award title	Yes	No	Yes	No	Yes	No	Comments
AWARD/CODE							

175

Component Awards moderated	N/A
Number of grades changed	N/A
% of grades changed	N/A

Describe examples of good practice observed/identify concerns:	
Outline areas for improvement	

Signatures:	External authenticator: Name Date:
	Provider: Brothers of Charity Services Clare, R.T. Date: Name/Internal Verifier

This report will be made available by the Provider to the QQI Monitor.

Kevin Delaney
Unit 30 Clonroad Business Park
Clonroad
Ennis, Co. Clare

Re **External Authentication Assignment**

Dear Kevin,

I agree to undertaken the role of External Authenticator for your centre for October QQI Certification period. As agreed, I will visit the centre on DD/MM/YYYY to externally authenticate. In addition to this I will complete the paper work associated with this role in 1-2 days.

External Authenticator Assignment Letter In preparation for my visit I will need from the centre the following documentation.

1. Details of the Award/component awards (modules)**:**

Award Component Titles and Codes

2. The sampling strategy that I will apply and Learner/Trainee groups/lists from which the sample is to be selected.

3. A copy of assessment instruments i.e briefs/examination papers for each of the above component awards. Marking schemes and outline solutions.

4. If available in advance, the internal verification report.

Where possible, appropriate staff should be available, on the day of the visit;
I will forward an agenda for my visit in advance of the day.

Signed: _____ **Date:_____**

The role of the external authenticator is to provide independent authentication of fair and consistent assessment of Learner/Trainees in line with QQI requirements and national standards. This code of practice identifies the key areas of the role and the standards or professionalism which External authenticators are expected to maintain. External authenticators must undertake to work within this code of practice.

The external authenticator will undertake to:
- exercise their role with utmost integrity and professionalism when undertaking external authentication for a provider
- comply with QQI's policies and procedures specifically in relation to awards and assessment
- fully comply with the provider's policies and procedures
- inform the provider of any potential conflict of interest which may compromise their role
- Inform the provider of availability
- communicate appropriately with the provider and inform them of planned visits and information required

External Authenticator/Code of Practice
- provide constructive feedback to the centre management and staff
- compile an external authentication report on time and based on an independent evaluation of the process and procedures.

Name of external authenticator: <u>Name</u>

Signed ………………………………   Date …………………………………

Formula for Calculating √*n*

The table below calculates the √n. When calculated add 1 to achieve the formula √*n + 1*

Number of Learner/Trainees (ranges)	Value for √*n*
0 ⟶ 12	
12 ⟶ 144	12
144 ⟶ 168	13
169 ⟶ 195	14
196 ⟶ 224	15
225 ⟶ 256	16
257 ⟶ 289	17
290 ⟶ 324	18
325 ⟶ 361	19
361 ⟶ 400	20

The Provider's Assessment Process

Overview: Key Stages

1.   Assessment

- establish and implement assessment policies, processes and procedures
- devise assessment instruments, marking schemes and assessment criteria
- assess and judge Learner/Trainee evidence
- record outcome

2.   Authentication Process

a) Internal verification
- verify that all assessment procedures have been applied
- monitor the outcome of the Assessment Process i.e. the assessment results on a **sample** basis

b) External authentication
- assign an external authenticator per major award/field area based on broad award/field of learning expertise
- external authenticator to moderate assessment results by sampling Learner/Trainee evidence by applying the providers sampling strategy

3.   Results Approval
- establish a Results Approval Panel
- approve and sign-off assessment results
- make results available to Learner/Trainees

4.   Appeals Process
- establish an Appeals Process
- allow a minimum of 14 days for Learner/Trainees to lodge an appeal of the assessment process or result
- process all appeals

5. Request for Certification
- submit all Learner/Trainee results to QQI
- when doing so, advise about results under appeal

Appendix 9- Results Approval Panel Documents

Course/Programme Title		Training Provider	
		BROTHERS OF CHARITY	
Award Code	**Award Type & Level**	**Award Title**	**Location**
Contact Name		**Telephone Number**	

Results Approval Form and Course Assessment Summary Sheet

DECLARATION: I confirm that the assessments have been carried out in line with the BOCSI Education and Training Programme Specifications and Quality Assurance processes. I confirm that the Learner/Trainees have been informed of their provisional results.

	Signature	**Print Name**	**Date**
Instructor/Assessor			
Instructor/Assessor			
Programme Coordinator			

DECLARATION: The Education and Training Manager, on behalf of the Results Approval Panel confirms that these results have been agreed and approved. These results have been subject to the assessment quality assurance process as specified in the Education and Training Programme Standards Specifications and as agreed with the relevant awarding body. This includes internal verification of results and external

authentication on a sampling basis. Certificates have been authorized and will be ordered for the Learner/Trainees listed overleaf (subject to the elapse of the time period allowed for an appeal).

Education & Training Manager			

DECLARATION: I confirm the assessment events relating to these results were included in the sample frame for internal verification; the supporting documentation has been checked for completeness and accuracy and that any issues identified with the assessment process, results and documentation have been raised with the appropriate bodies.

	Signature	Print Name	Date
Internal Authenticator			
Internal Authenticator			

RESULTS APPROVAL PANEL						
The results overleaf were discussed at the results approval panel meeting on _____						
Any Issues arising (√ as appropriate)	☐	**No Issues**	☐	**Non-Conformance**	☐	**Minority View**
Results Approval Panel Discussion						
Identified Action/Outcome				**By Whom:**		**Date**
Meeting Decisions: All results were reviewed; it was agreed Learner/Trainees will be put forward for submission on _____						

	Note: All Learner/Trainees registered on the course must be listed on this form regardless of whether they left the course or did not meet the standard.		
	Modules/Assessment (Overall Module Result)		Modules Key: √: Completed X: Not Assessed
No	**Learner/Trainee**		
1.		Comments/Notes: Please refer to Authentication Report attached for details of module(s) assessment (s). Unless indicated all modules deemed successful.	
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

No.	Learner/Trainee		Assessment	Result Approved by Results Approval Panel	Date	Approved by the Chairperson of the RAP	Input By
		Amendment to a Result as Approved by the Results Approval Panel					
1							
2							
3							
4							
5							

Where an amendment has been approved, the corresponding result on the previous page must have a strike through (bottom left to top right)

TRAINING STANDARDS OFFICE USE ONLY- CERTIFICATE REQUEST			
	Signature	Print Name	Date
Results inputted/certificates requested by:			
Certificates checked against the Course Summary Assessment Sheet by:			

Results Approval Panel Terms of Reference

Introduction

The purpose of this document is to give background and clarity on the operation of the Results Approval Process in line with the requirements stated in the ETPS. The Results Approval Panel (RAP) is <u>the final step</u> in the quality assurance process for fair and consistent assessment of learners. It occurs after external authentication and in advance of certificate requesting.

The results approval process applies to all assessments leading to awards for learners. All Results are provisional until approved by the RAP. Certification may not be requested from any awarding body in advance of the approval of results agreed at the results approval panel meeting and the completion of the relevant Course Summary Assessment Sheet and Results Approval Form. To authorise a request for certification, the Chair of the RAP must sign the Course Summary Assessment Results and Approval Form following the Results Approval Meeting.

Role of the Results Approval Panel

The RAP must ensure that all assessments submitted to the panel are comprehensively and thoroughly reviewed. The role of the RAP is to ensure that:

2.1 Results are fully quality assured and signed off by authorised persons prior to submission to QQI /Awarding body.

2.2 Appropriate decisions are taken regarding the outcome of the assessment, verification and authentication processes.

2.3 Assessment procedures are observed.

2.4 Appropriate evidence and records are available.

2.5 Suspected irregularities are notified to the QQI/Programme Coordinator.

2.6 Any non-conformances are identified and notified to the QQI/Programme Coordinator who will arrange for them to be logged on the Issues Log.

2.7 Review any recheck outcomes which are unsatisfactory to the learner.

Membership

The RAP is composed of fixed and occasional members. A minimum of 3 people are required to ensure the assessment decisions are valid. The Chair of the RAP is the relevant Education and Training/Programme manager with overall responsibility for the programme.

Fixed Members:

> Relevant Education and Training/Programme Manager (Chair)
>
> QQI/Programme Coordinator
>
> Internal Verifier for the Programmes
>
> Another e.g. Programme Co-ordinator, Senior Instructor-Tutor

Occasional Members: The Chair may invite other members for a particular section of the meeting as appropriate e.g. Assessor, Senior-Tutor/Instructors, Independent subject matter specialist etc.

3.1 The Chair is responsible for appointing members to the RAP. In doing so, the Chair must ensure that conflicts of interest are avoided.

3.2 Members will carry out their roles without bias and will make their determinations based on the information provided to the Panel

3.3 Only the fixed members of a RAP can approve results. Occasional members will not have voting rights on the approval of results nor participate in the decision making process.

4 Decision Making
4.1 Minutes of the RAP will be produced outlining the issues discussed and decisions reached. These minutes will form part of the assessment record and must be retained by the centre and be made

available for auditing and monitoring purposes. The contents of the minutes are confidential and must not be circulated to unauthorised personnel.

4.2 A key outcome of each meeting is that the results approval form is completed for the relevant learners and signed off as appropriate by relevant assessment personnel and the chair of the results approval panel.

4.3 Only the fixed members of the panel are asked to approve results. The fixed members of the panel should strive to reach consensus on all results approved at the meeting. In the event of a disagreement, fixed panel members, who have a difference from the majority view, will have their views recorded if requested. In instances where opinion on a results approval decision is evenly split, the Chair will have the casting vote.

4.4 In instances where the panel has been made aware of /suspects irregularities or malpractice in a particular assessment(s), the Chair must notify the QQI/Programme Coordinator in line with procedures.

4.5 Any documentation provided to members during the RAP meeting must be returned to the Chair at the end of the meeting.

5 Conduct of the Results Approval Process

5.1 The relevant Education and Training/Programme Manager convenes a RAP meeting as required.

5.2 The Course Summary Assessment and Results Approval Form along with the external authentication reports, internal verification of assessment results checklist and where applicable, assessors and supervisors report, internal verification reports on the conduct of assessment process. and peer review reports are presented for each programme as appropriate by the Internal Verifier.

5.3 The panel discuss each set of results including any concerns and suggests appropriate corrective or improvement actions, if required.

5.4 Other personnel may be invited to attend for a particular section of the results approval meeting as appropriate.

5.5 The panel considers the reports and approves the final results. Panel decisions are recorded and the chairperson arranges for relevant parties to be notified.

5.6 The Chair arranges for the relevant personnel and learners to be informed of the approved results, ensuring that where there has been a change to provisional results that the learner is informed of the changed result and is made aware of the Assessment Appeals Process.

5.7 The Course Summary Assessment and Results Approval Form is completed and signed off by the Chair on behalf of the fixed panel members who approved the results.

5.8 Minutes are prepared in a timely manner and kept on file.

5.9 The Course Summary Assessment and Results Approval Form signed by the Chair of the RAP is the authorisation to submit the approved results to the QQI/Programme Coordinator for requesting certification.

5.10 The Chair will ensure that any non-conformances identified are notified to the QQI/Programme Coordinator who will arrange for them to be logged on to the Issues Log.

Results Approval Meeting Agenda

Date of Meeting: _____

Present:

Apologies:

Agenda

1. Minutes

2. Review of Certification Audits

3. Review of any issues arising from the Assessment Supervisor/Assessor Reports

Self-Evaluation and Results Approval Panel   4. Review the status and any issues arising from the

Authentication and Verification

   a. External Authentication

   b. Internal Verification of Assessment Results

   c. Internal Verification on the Conduct of Assessments

5. Review the status of any non-conformances/suggested improvements

6. Review the status any continual improvement actions

7. Review the status of any rechecks/reviews requested by learners

8. Review any results that have a specific recommendation (made by the assessor) to the Results Approval Panel

9. The specific results for approval and the decision outcome

10. Any other business

* Note: Ensure that all decisions made by the fixed panel members for specific set of results are recorded in the minutes (and record the fixed panel members for those decisions)

Appendix 10- Self-Evaluation Documents

Grading Scale:

3 = Strength   There is plentiful evidence to indicate that achievement in this area is above average. This is an example of good practice which should be disseminated.

2 = Acceptable   There is evidence that achievement in this area meets expectations. With further development, this could become an area of strength

1 = For Improvement   There is little or no evidence that achievement in this area meets expectations. Improvement is needed.

Provider:		Programme	
Evaluators			
Date:			

Question	Comment / Evidence Type(s)	Grade
Communications		
Are learners able to give feedback on their individual and collective experiences? Are there any barriers to communication?		
Is information relevant to programmes and services consistently available to the staff involved in their delivery?		
Are staff able to contribute feedback and suggestions for the improvement of the programme(s) and associated services		
Are communications media for supplying information to and receiving feedback from the local community, employers and other external agencies effective?		
Communications: – Average Grade		

Question	Comment / Evidence Type(s)	Grade
Equality		
Is there an Equality Plan in place? Are staff trained to implement it?		

Question	Comment / Evidence Type(s)	Grade
Is it known if any person has experienced discrimination in access to the programme or services? Is there a mechanism in place for this to be known by the provider/		
Equality:- Average Grade		
Staff Recruitment and Development		
Are the staff involved in programme delivery well matched to their role and clear about their job specifications?		
Have new staff had access to an effective induction process?		
What percentage of staff have availed of staff development over the past two years?		
Are staff development issues regularly reviewed by management?		
Staff Recruitment and Development – Average Grade		
Access, Transfer and Progression		
Do learners feel that they have adequate information about the programmes and its associated services to enable them to successfully participate in it?		
Are the following available to prospective learners on entry to the programme(s)? • Clear administration arrangements • Statements of entry requirements and selection criteria • Appeals mechanism?		
Have learners gained exemption from all or parts of a programme / assessment for an award on the basis of recognition of prior learning?		

Question	Comment / Evidence Type(s)	Grade
Have current learner supports / programme adaptations been successful in addressing the needs of learners? Have additional supports been requested?		
Access, Transfer and Progression: – Average Grade		
Programme Development, Delivery and Review		
Does the need which led to the development of this programme still exist?		
Is there a document which sets out the programme structure, delivery and assessment methodologies? Is this available to learners and other interested parties		
Have such programme documents been checked and approved by management as being in accordance with Mission, demand, assessment policy and resource availability?		
Are delivery styles used on the programme(s) appropriate to the needs of learners?		
Does the programme team meet to review programme delivery and other issues? Is the information acquired used effectively?		
Are timetables adhered to?		
Are up to date records of learner participation and progress readily available to staff and learners?		
Are the resources necessary for successful achievement by learners of the programme objectives allocated to and maintained on the programme(s)?		

Question	Comment / Evidence Type(s)	Grade
What is the programme completion rate for this programme i.e. what percentage of those who began the programme have attained the target award?		
Are the requirements of Health & Safety legislation being complied with?		
Has this programme been reviewed on a regular basis and the findings considered by management?		
Programme Development, Delivery and Review – Average Grade		

Fair and Consistent Assessment of Learners		
Are learners satisfied with the level of information and feedback they have received on their assessments?		
Are learners and staff satisfied with the security and integrity of assessment processes and materials?		
How successful has the reasonable accommodations procedure been in facilitating participation in assessment by those who otherwise, due to personal circumstances, may have been unable to do so? Is there data available on this?		
Are assessors consistent in their marking of learner assessments?		
Has the assessment carried out by external parties been fair, consistent and contributing to learner achievement?		
Are the standards being achieved by learners consistent with the national standards for the award(s) available on this programme?		
Has the process of returning data to QQI for certification purposes been found to be accurate and reliable?		
Has the procedure for Corrective Action been used? Has it been effective in addressing non conformances in assessment practice?		
Has the learner appeal system been effective in addressing concerns of individual learners regarding their assessments?		
Fair and Consistent Assessment of Learners – Average Grade		
Protection for Learners		

Are learners aware of their position in the event of a programme ending prematurely?		
Protection for Learners – Average Grade		
Sub-contracting / Procuring Programme Delivery		
When programme delivery has been procured through the use of another provider, have consistent criteria been applied and formal agreements arrived at?		
Have the reports submitted by contracted providers and our monitoring arrangements been sufficient to maintain confidence in the quality of procured programmes?		
Sub-contracting / Procuring Programme Delivery – Average Grade		

Programme Evaluation Report

Provider Name:	
Provider No.	
Address	
Phone / Fax / email / website				
Manager / Principal / Director Name	
Report Date	
Programme Title	Certificate in General Learning and Personal Development
Report Author(s)			
External Evaluator	Name	Job Details
Timeframe covered by Evaluation	From	To

_____   _____

Manager / Coordinator   Date

_____   _____

External Evaluator   Date

Programme Summary

Enter here a brief outline of the programme, to include its aims, objectives, learner profile and target award(s)

Programme Statistics

No. Learners who started in period:	
No. Learners who achieved an award in period:	

Evaluation Methodology

Enter here a description of how the evaluation was conducted and what sources of information were used. In particular, explain how the views of learners were included and how the external evaluator was involved.

Executive Summary

Enter in this table the grades for this programme as assigned on the evaluation checklist.

Grading Scale:

3 = Strength   There is plentiful evidence to indicate that achievement in this area is above average. This is an area where practice should be disseminated elsewhere.

2 = Acceptable   There is evidence that achievement in this area meets expectations. With further development, this could become an area of strength

1 = For Improvement   There is little or no evidence that achievement in this area meets what is expected. Improvement is needed.

Policy Area	Average Grade
Communications	
Equality	
Staff Recruitment and Development	
Access, Transfer and Progression	
Programme Development, Delivery and Review	
Fair and Consistent Assessment of Learners	
Protection for Learners	

List the main strengths and areas for improvement found in relation to this programme. They should be bullet-listed In descending order of priority

Strengths

.

Areas for Improvement

.

List the main recommendations made in relation to this programme.

Recommendations

.

Detailed Findings

Programme Design and Content

To consider: *(these are prompts only. Other questions should also be considered as highlighted by the evaluation checklist)*

How has the design and content of the programme met the needs of learners in terms of access, transfer and progression and achievement of awards. Have learners been completing the programme or dropping out? Is there sufficient information available on which to base decisions regarding demand, content, learner need etc? Is the demand for the programme from learners, employers, other providers still evident? Are all the requirements for the award(s) being met? Is the design and content of the programme accommodating of learner diversity?

Strengths

.

Areas for Improvement

.

Recommendations

.

Programme Delivery

To consider: *(these are prompts only. Other questions should also be considered as highlighted by the evaluation checklist)*

Are delivery methods appropriate to learner needs? Have adaptations been identified? Are learner supports and information adequate? Are learners kept informed of their own progress? Are the teaching and learning materials adequate for purpose? Are timetables /schedules being adhered to? Are learners encouraged to take responsibility for their own learning? How well are the needs of learners with diverse needs being addressed? Are staff confident and content in their roles? Is staff development keeping pace with the demands on staff? Is the programme being reviewed on a regular basis and are staff facilitated to contribute to the review?

Strengths

 .

Areas for Improvement

 .

Recommendations

 .

Assessment of Learning

To consider: *(these are prompts only. Other questions should also be considered as highlighted by the evaluation checklist)*

Is the administration of assessment and learner registration happening effectively? Are assessment strategies appropriate to learner needs and programme design? Is assessment fair to learners and consistent as carried out by assessors? Are the reports of external verifiers / monitors / examiners reviewed and acted upon? Is the standard achieved by learners consistent with national standards? Are reasonable accommodations available to learners with disabilities? Are exemptions from assessment given where a learner has evidence of prior achievement? Are records of assessment maintained securely?

Strengths

.

Areas for Improvement

.

Recommendations

.

Associated Services and Resourcing

To consider: (*these are prompts only. Other questions should also be considered as highlighted by the evaluation checklist.*)

Are the resources available to allow staff to deliver the programme effectively? Do learners have access to the materials and facilities essential for successful participation in the programme? Is there sufficient access for staff and learners to reference materials and I.T. resources as appropriate? Are facilities safe and well maintained? Is access to services available to all learner groups?

Strengths

.

Areas for Improvement

.

Recommendations

.

Attainment of Programme Objectives

To consider: (*these are prompts only. Other questions should also be considered as highlighted by the evaluation checklist.*)

Are the objectives of the programme being reached? Are the objectives clearly enough defined? Are learners leaving the programme early? Are the reasons for early drop out known and understood? Are attainment levels comparable across all learner groups? Is the demand for this programme still evident?

Conclusions:

Recommendations

Provider Name:	
Provider No.	
Manager / Principal / Director Name	
Programme Title	

Programme Improvement Plan

Recommendation From Self Evaluation Report	Action Agreed	By Whom	By When
Programme Design and Content			
Programme Delivery			

Recommendation From Self Evaluation Report	Action Agreed	By Whom	By When
Assessment of Learning			
Associated Services and Resourcing			
Attainment of Programme Objectives			

Signed: *Date:*

_____   _____   209

Appendix 11- Feedback Forms

Senior Instructor-Tutor Feedback Form
Title of Programme/Module: Tutor/Instructor Name:
1. To what extent is the level and content of the module appropriate to the needs of each individual Learner?
2. Do any of the learners require further education/training on this topic/ module?
3. Comment on the assessment of learning outcome process;
4. What opportunities/supports are there for learners to apply the learning?
5. Are the premises and other resources adequate?
6. Conclusions regarding the degree to which the programme/module activity is successful:
7.General comments / Recommendations for Improvement

Senior Tutor/Instructor Signature: _____

Date: _____

Learner Name:	Title of Programme / Module		
Q.1 Did the education/training meet your learning objectives?		Yes ☐	No ☐
Comment:			
Q.2 How do you intend to apply what you learned?			
Comment:			
Q.3 Was the programme / module delivered clearly?		Yes ☐	No ☐
Comment:			

Learner/Trainee Feedback Form

Q.4 Was the aim of the programme / module explained?		Yes ☐	No ☐
Comment:			
Q.5 Was the classroom suitable to the programme / module?		Yes ☐	No ☐
Comment:			
Q.6 How would you rate the following? (Please tick)			

	Excellent	Good	Fair	Poor
Resources & equipment				
Approachability of Tutor/Instructor				
Handouts				
Exercises/assessments				
Overall Tutor Support				
Q.7 Have you any suggested improvements regarding this module / programme?	Yes ☐	No ☐		
Comment:				

Learner/Trainee Programme Evaluation	
Name:	
Programme Title:	

In this programme I learned:

_____

_____

_____

_____

The area(s) I did well:

_____

_____

_____

_____

The area(s) I had difficulty with:

_____

_____

_____

_____

I would like to learn more about:

_____

_____

_____

_____

My next step(s)

_____

_____

_____

_____

Comments:

Please sign and date appropriately as indicated in the space below:

Learner's Signature _____   Date: _____

Instructor/Assessor Signature _____   Date: _____

Streetwise Learner Feedback Form

odule	Good	Average	Poor	Comments
Craft				
Cookery				
Soccer				
Food Choice & Health				
Relaxation				
Personal Safety/ Personal Care				

Module	Good	Average	Poor	Comments

	Good	Average	Poor	
Using Technology				
Mosaic				
Drama				
Computers				
Communications				
Athletics				

Module	Good	Average	Poor	Comments

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Gym				
Literacy / Numeracy				
1-1 Literacy / Numeracy				
Community				
Basketball				
Swimming				
Streetwise Meeting				

Learner Signature: _____   Date: _____

Key Worker Signature: _____   Date: _____

Caritas Training Centre

Programme module Title:

_____

 3 = Yes / Excellent (Strength, this is an example of good practice)

Caritas Learner/Trainee Evaluation **2** = Sometimes/ good /Ok (Acceptable meets expectations; could become an
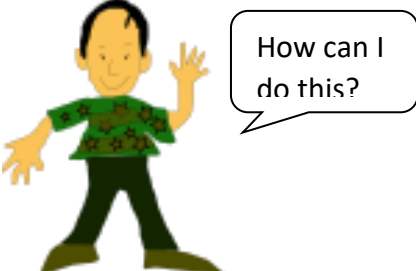
area of strength)

 1 = No /don't know/ Not good (No evidence; improvement is needed)

Please circle or mark your answer in the boxes

Please add more information by writing or drawing how <u>YOU</u> feel

PROGRAMME DEVELOPMENT DELIVERY & REVIEW	
In _____ I get to talk about my QQI course How can I do this?	
I feel talking, communicating or expressing myself is easy in this programme	
Does anything stop me from communicating in this programme? if you have any ideas of what might help you Circle, write or draw your ideas below:	

Like…Communication book, schedules, confidence, pictures/p.e.c.s, computer, drawing, writing, typing, easier work sheets, etc

Which way of learning suits you best?

☐ class /studio/workshop delivery

☐ group discussions

☐ one to one

☐ Trips & community learning

The way this QQI course is taught is…
(mark at side)

This QQI course is taught too slow, too fast, or at a perfect pace (circle one below)
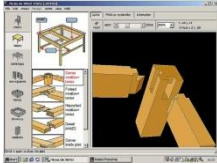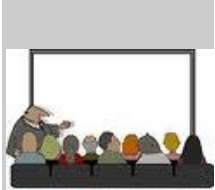
| Slow | Fast | Perfect |

The QQI briefs, information or Handout sheets I receive in this programme are……
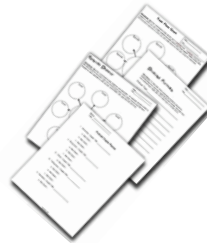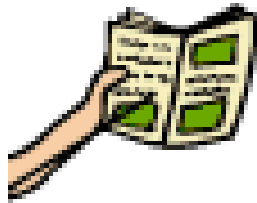
There are supports in this programme to help me in my work if I needed them

Do you have ideas what else we could do to help & support you in your learning?
Please draw or write this here:

I am given information about health and safety in this programme

Annual Review:

Consultation with Individuals Receiving Services & Supports

Annual Programme Questionnaires

http://www.google.ie/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=0CAcQjRxqFQoTCKampejxi8kCFYK0FAodFJEPHA&url=http://2012books.lardbucket.org/books/job-searching-in-six-steps/s12-01-what-to-do-before-during-and-a.html&psig=AFQjCNFoYV2J0ngEAjIddadgvRI2etFCDg&ust=1447452079857889

In advance of supporting a learner to complete this questionnaire the Manager/Programme Coordinator should explain the following:

We want to find out what is good about this programme (Streetwise) and what needs improvement.

We will be looking at files, visiting the programme and talking Streetwise learners, families and staff.
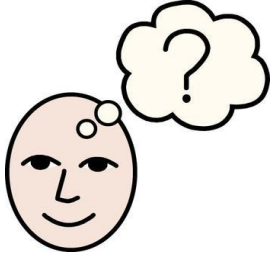
We would like to know what you think about Streetwise but you don't have to answer any of the questions if you don't want to.

Name of Programme: _____

Name of individual completing the questionnaire (optional):_____

What year are you at Streetwise? _____

	(1) Do you like coming to Streetwise?
	(2) Is there anything that you would like to change?

	(3) Do you choose your own classes, activities and goals?
http://www.google.ie/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=0CAcQjRxqFQoTCK-fh_yMjckCFcMdDwod7tcAOw&url=http://www.telegraph.co.uk/finance/personalfinance/money-saving-tips/jessicainvestigates/11482400/Post-Office-gave-me-kroner-instead-of-euro.html&bvm=bv.107406026,bs.1,d.d24&psig=AFQjCNFNYF02ILRjk6WoEKXApiQsus6YXQ&ust=1447493853990567	**(4) Do you have access to your community?**
	(5) Do you have a Person Centred Plan? Yes ☐ No ☐ Comments: **If yes.......who decided the goals ? Are things happening around the goals you have chosen ? Are you being supported to achieve your goals ?**

	(6) Do you get on well with the staff that support you? Do you feel they know you and understand you?
	(7) Who would you talk to if you have a worry or complaint?
	(8) Do you feel safe here? Yes ☐ No Comments:
	(13) What puts a smile on your face?

BROTHERS OF CHARITY SERVICES
ANNUAL REVIEW: QUESTIONNAIRE

Programme Name	Streetwise
Programme Type	Rehabilitative Training
Name of Reviewer	
Date of Review	

1. Are you satisfied with the quality of support that your family member receives?

2. Do you feel that the needs of your family member are being met by the service?

3. Do you think your family member is listened to and respected?

4. Do you think your family member is supported to make choices in their daily life?

5. Do you feel you are listened to and respected?

6. Are you satisfied with the level of communication regarding the support of your family member?

7. Is there any aspect of the service that you think could be improved?

8. How would you rate the overall quality of the service/supports your family member receives? Please Circle

1	2	3	4	5
Poor	Didn't Meet all my Expectations	Good	Better than I expected	Excellent

Additional Comments or Feedback

_____

_____

_____

_____

If you wish this feedback to remain anonymous do not complete Name and Signature.

Name of Family Member:

Signature of Family Member:

Date:

Thank you for taking the time to complete this satisfaction questionnaire.

Caritas Training Centre

(Module *i.e., "Personal Safety"*)

Component Title:	
Component Code:	
Course(s)	
Level	

Sample Scheme of Work

A. Briefing Notes for Staff

(Aims of the module which outlines the general purpose of the module and what skills/ Learner/Trainees can expect to cover through coursework.)

Order	Name	Learning Activity	Content	Resources	AFL/Assessment
1.	Title of brief/Learning activity.	Specific learning outcome as outlined in module descriptor and or brief (SLO)	What the brief/domain covers and how it will be delivered step by step correlating to each brief.	List of resources used/needed for specific task/brief *(Camera/video recorder/computer/ iPad/worksheets/ Collage/Whiteboard/*	Assessment style/type specific to brief: *(Skills demonstration/photo graphic evidence/signature/ Testimony/*

				Handouts/Case Studies/Games/ Visual Aids/Printer/Art materials/ etc)	*self-evaluation/tutor verification/ Video evidence/audio recording/receipts*
2.	Task 1:				
3.	Task 2:				
4.	Task 3:				
5.	Task 4:		.		
6.	Task 5.	.			

C. Final Assessment

Learner/Trainees are assessed through skills demonstrations and a completed portfolio of work.

INDIVIDUAL PLAN REVIEW MEETING	
Name of Individual:	**Date of Review:**
Name of Person Completing Review:	**Next Review Date:**
Name of Those Involved/Consulted in Review of Plan:	**Name of Co-ordinator / Programme Coordinator:**
Number of Actions Achieved to Date:	**Number of Actions Not Yet Achieved:**
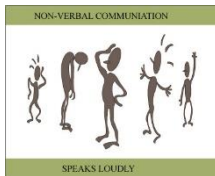
Sample ITP Form

Domain & Goals	What / Action Required	How	By Whom	Date (outcome achieved/addressed)
Choose an item. (Type Goal Here)				

Choose an item. (Type Goal Here)			

	Module	Domain Ref	Objectives	TPS Ref	By Whom	Date Achieved/ Addressed
<u>1</u>	Reading L1	<u>Ed and Lifelong Learning</u>	1. Recognize some familiar words independently including some that are commonly used and personally relevant 2. Interpret some common symbols and signs in familiar contexts 3. Demonstrate awareness of text conventions, print material and the alphabet, e.g. reading from left to right, top to bottom, concept of a sentence, brand names and logos on print materials, recognizing cues and clues, seeking the amount payable on a bill 4. Make sense of simple personally relevant sentences containing familiar words 5. Use word identification strategies, e.g. context of words, sight sounds, word endings 6. Identify the nature of familiar documents, e.g. bills, junk mail, instructions	TPS: Literacy & Numeracy pg59 - 65		
<u>2</u>	Writing L1	<u>Ed and Lifelong Learning</u>	1. Write some familiar words for different purposes, e.g. own name and address 2. Transcribe simple information in specific order, e.g. phone number, days of the week 3. Write for different personal and socially relevant audiences, e.g. personal shopping list/reminder, sending a card/postcard, sending a text message, competition entry 4. Use some rules of writing appropriately, e.g. use of capital letters to start a sentence, write a sentence correctly	TPS: Literacy & Numeracy pg59 - 65		
<u>3</u>	Quantity & No. L1	<u>Ed and Lifelong Learning</u>	1. Name one- and two-digit whole numbers from 0-10 2. Recognise the relationship between numerical value and groups of objects, up to and including 10 3. Record one- and two-digit numbers 4. Recognise the language of mathematics in everyday situations using elementary language, e.g. greater than, less than, bigger than, farther than 5. Apply number bonding between 0 and 10	TPS: Literacy & Numeracy pg59 - 65		

4	Data Handling L1	Ed and Lifelong Learning	1. Identify the use of data in everyday life e.g. the numbers of people who want tea/coffee 2. Gather data with one criterion following clear instructions 3. Sort data using one criterion e.g. grouping counters indicating preferences for tea 4. Communicate information relating to data e.g. of note more than two variables			
5	List & Spk L1	Communicaiton	1. Listen to obtain information, e.g. weather forecast, talking clock, traffic report 2. Follow clear succinct instruction in familiar contexts 3. Explore ideas and new vocabulary that is relevant and appropriate to a personal situation, orally e.g. planning a holiday or social event 4. Interact appropriately in a narrow range of formal and informal social situations, e.g. in relation to greeting, leaving, seeking information/assistance from an employer/doctor/family member/friend 5. Express opinions, facts and feelings in response to familiar and/or personal situation, e.g. using speech, gesture or signing as appropriate 6. Communicate about the past, present and future activities	TPS: Int Skills; Communications pg 31		
6	Non Verbal Comm L1	Communicaiton	1. Use appropriate non-verbal behaviour to secure and maintain the attention of another 2. Communicate an idea/request non-verbally 3. Respond to body language, e.g. facial expression, gesture 4. Respond to common place signs and symbols, e.g. exit, no entry, hazard symbols 5. Sequence images/symbols associated with a familiar activity and or process, e.g. loading a washing machine, turning on a mobile 6. phone/microwave, using a public pay phone, car parking station, vending machine, looking at a short cartoon strip, supermarket express checkouts, mixing a food product such as soup/babies bottle	TPS: Int Skills; Communications pg 31		
7	Personal Care L1	Ed and Lifelong Learning	1. List routines in daily personal care practices, e.g. hair care, dental care, daily hygiene practices and getting treatment for minor infections 2. Practice essential skills that promote personal hygiene, e.g. washing, dental care, care for clothes 3. Identify a range of personal care products, e.g. soaps, shampoo	TPS: Personal Hygiene & Personal Appearance pg 12 –		

	Personal Care 				13; Care of Clothes pg 24	
8	Personal Safety L1 	Vuln & Safeguards	1. Recognise symbols relating to personal safety in a given location, e.g. red traffic light meaning stop, fire exit sign 2. Name situations at home/in community/workplace that put personal 3. safety at risk, e.g. stranger-danger, travelling at night 4. Demonstrate safe practice for frequently encountered potential risk situations in the daily environment, e.g. crossing a road safely, 5. cooking, fire drill, travelling with a companion, seeking help or clarification when uncertain 6. Identify people with responsibility for safety in everyday situations, e.g. workplace supervisor/health and safety officer, Garda	TPS: Personal Safety pg 17; Safety in the Home pg 26		
9	Food Choice & Health L1 (theory) 	Nutrition	1. Identify some common foods that area associated with healthy eating 2. Identify common benefits of healthy eating, eg energy, good skin and hair, healthy heart 3. Identify some common characteristics of food, eg raw/cooked, hot/cold, sweet, sour, salty, spicy 4. Follow short instructions to help prepare a meal 5. Demonstrate appropriate personal food hygiene and safety practices	TPS: Ind Liv Skills; Kitchen Mgt & Basic Cookery pg 19 – 20		
10	Cookery – Practical 	Home Nutrition	Baking	TPS: Ind Liv Skills; Kitchen Mgt & Basic Cookery pg 19 - 20		

1 1	Computer Skills L1 Using Technology L1	Ed and Lifelong Learnin g	1. Identify significant components parts of a computer, e.g. mouse, monitor, keyboard, printer 2. Use a mouse/joystick/input device for simple functions, e.g. to click, double click, click and drag, use different pointer shapes 3. Use a software package, e.g. a game, educational/personal software 4. Enter short text/graphics with appropriate input device 5. Name possible uses for selected software package 1. Identify technology in common use 2. Identify the symbols on familiar technological devices, e.g. on/off switch, temperature symbols 3. Use simple technological equipment for home/personal and workplace/educational use, requiring up to two functions, e.g. household appliance, telephone, swipe/clock system 4. Pay attention to safe practice	TPS: Work Skills; Informatio n Tech pg 42		
1 2	Woodwork	Ed and Lifelong Learnin g		TPS pg 48		
1 3	Art & Design	Ed and Lifelong Learnin g		TPS pg 41		

14	PE & Sport, Health Related Fitness	Health		TPS pg 18, 25, 38, 40 - 41		
15	Advocacy	Respect and Rights		TPS pg 32		
16	Community Skills	Community Inclusion		TPS pg 25, 27 – 30, 38		
17	Work Experience	Employment/		TPS pg 55 - 58		

		Meaningful Day				
18	Integrated Classes	Community Inclusion		As per topic		
19	Relationships & Sexuality	Relationships		TPS pg 15, 37		
20	Relaxation Techniques	Ed and Lifelong Learning				

Barriers Identified		
Give details of the barriers identified under the category of supports, resources, or other. State the Domain where the barrier exists.		
Supports	**Resources**	**Other**
Solution to barrier actioned in plan: Tick √ ☐Yes ☐ No	Solution to barrier actioned in plan: Tick √ ☐Yes ☐ No	Solution to barrier actioned in plan: Tick √ ☐Yes ☐ No
Barriers which cannot be actioned- for escalation by Programme Coordinator:	Barriers which cannot be actioned- for escalation by Programme Coordinator:	Barriers which cannot be actioned- for escalation by Programme Coordinator:

Signed Learner:		Keyworker:		Date:	

Issues Log

Provider Name:		Location:	
Course/ Programme Code:		Module:	
Date:			

Issue Arising/Raised

Issues Log & Guide

Review Requested By:	
Date Submitted:	
Review Panel Date:	
Recommended Actions: (Attach extra pages if necessary)	
Manager Signature:	

Date Addressed:		By Whom:	

Issues Log Guide

Provider Name:	Insert Provider Name e.g. Streetwise/MIC	Location:	e.g. Limerick
Course/ Programme Code:	e.g. CGLPD S001/S002	Module:	Module that the Issue relates to (If any)
Date:	Insert Date		

Issue Arising/Raised	
Provide a detailed description of the Issue.	

Review Requested By:	Insert the name of the person brining the issue forward
Date Submitted:	Insert the date the issue was brought forward
Review Panel Date:	Insert the date of the next Review Panel Meeting according to the calendar provided.
Recommended Actions: (Attach extra pages if necessary)	Record the Review Panel outcome/decision.

Manager Signature: To be signed by the relevant manager			
Date Addressed:	Insert date actions were taken to address the issue.	By Whom:	Insert the name of the person responsible for taking action/addressing issue.

For a Learner/Trainee to activate the appeals process there must be a basis for the request. Outlined below are the conditions in which the appeal process can be activated: -

a. Learner/Trainee believes that test / assessment results were recorded, collated or combined inaccurately

b. Learner/Trainee believes that test / assessment was marked inappropriately

c. The test / assessment regulations were not properly implemented

d. Test conditions did not comply with test specification. An appeal on these grounds will be considered if the Learner/Trainee has reported the situation to the Assessment Supervisor during or immediately after the test. This will be documented in the Assessment Supervisors report.

e. The regulations did not adequately cover the Learner/Trainee's circumstances

Conditions for Activating the Appeals Process

f. Compassionate or medical circumstances existed which were not taken into account

g. Circumstances exist that may not have been covered by the test / assessment regulations

h. The Learner/Trainee believes that significant performance-related information was not considered by the assessor

i. There is evidence of irregularity in the conduct of the test/assessment, which might have affected its outcome

j. New information becomes available that was not available to the original assessor
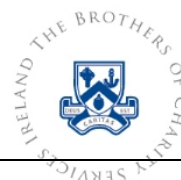
Date	
Provider Name	
Programme Title	
Programme Code	

Details of Documents/Forms Submitted *(Please Tick)*

Checklist for Submission of Certificate Requests

Internal Verification of Assessment Results (*Results Approval Checklist)*	Yes ☐ No ☐
External Authenticator Report	Yes ☐ No ☐
Results Approval panel Meeting Minutes	Yes ☐ No ☐
Copy of QQI Exemption Claim Form included for each exemption being requested	Yes ☐ No ☐ N/A ☐

Issues Requiring Action

Manager (Provider): _____   Date: _____

PSC Signature: _____   Date: _____

Learner/Trainee Request for Assessment Support and Approval Form

Learner/Trainee Details					
For completion by the Learner/Trainee *(with assistance if required)*					
Learner/Trainee Name:			PPS Number:		
Instructor Name:					
Details of the Specific Need(s)					
Learner/Trainee Signature:			Date:		

Assessment Title	Assessment Code	Test Title	Test Code	Date

For Use by Education and Training Office Only	Yes	No	N/A
Is medical evidence or relevant support documentation attached?			
Has the Learner/Trainee been informed of the specific arrangements?			
Has the QQI/Programme Coordinator been advised of the approved arrangements?			
Note/Comment			

Outline details of the specific support arrangements approved for the assessments listed below.

Where there is an additional cost to the provision of Learner/Trainee assessment support, has relevant Manager approval been obtained?	**Yes** ❑	**No** ❑	**N/A** ❑
QQI/Programme Coordinator Signature:	Date:		

Programme/Course Title	Programme/Course Code	Location of Assessment Event	Tutor/Instructor Name	Course Start Date	Course Finish Date

Requested/Notified By		Date	Programme Type			Date Received by PSC:

For Assignments, Collection of Course Work, Learner/Trainee Records, Portfolios, Programmes:									Internal Use Only	
Title of Module	Module Code	Title of Assessment Event	Assessment Cod	Number Required	Number of Learner/Trainees	Start Date	Programme Completion Date	Repeat	Version Number	Date of Dispatch
Notification of Assessment Event / Assessment Request Form								1☐ 2☐		
								1☐ 2☐		
								1☐ 2☐		
								1☐ 2☐		

For Examinations, Skills Demonstrations:									Internal Use Only	
Title of Module	Module Code	Title of Assessment Event	Assessment Code	Number Required	Number of Learner/Trainees	Date	Start Time	Repeat	Version Number	Date of Dispatch
								1☐ 2☐		
								1☐ 2☐		

								1 ☐ 2 ☐		
								1 ☐ 2 ☐		

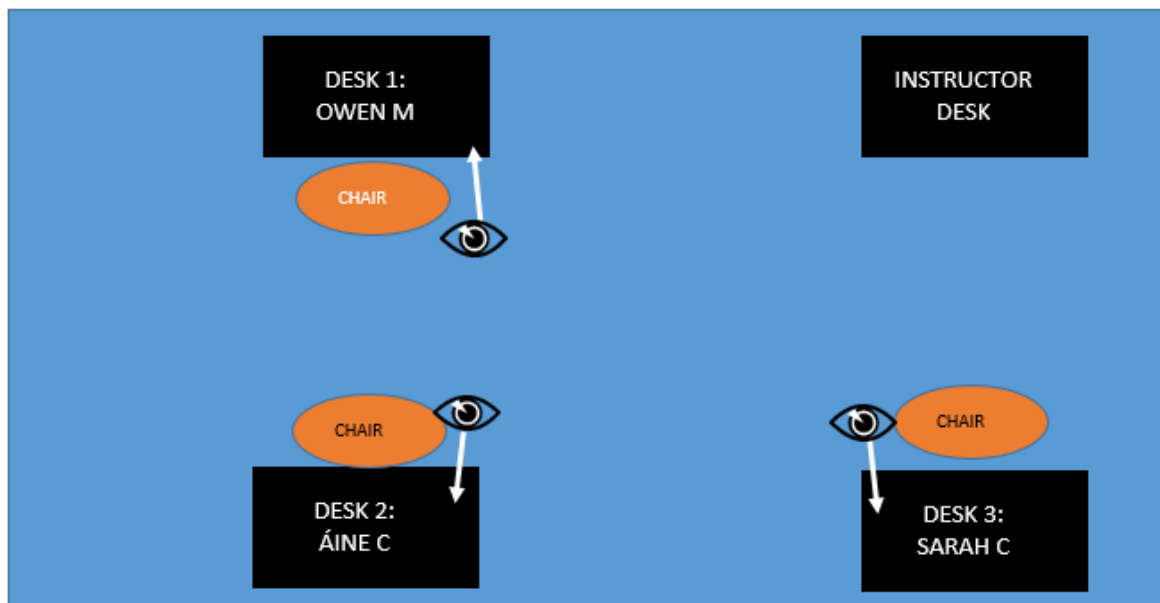|	
Comments/ Special Needs Requirements:	

Exam Seating Chart Sample

ITS 4N1125: TERMINOLOGY EXAM
SEATING CHART

Assessor: Moureen Kelly

Date: 26/02/2015

CLASSROOOM:

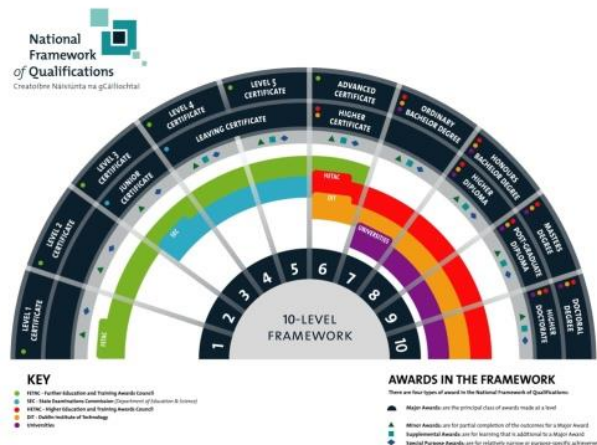Learner Signature: _____ Date: _____

Assessor Signature: _____ Date: _____

Name:_____

P.P.S. No:_____

Date of Birth:_____

Training for Life & Work Plan

Training for life 1 & 2 & Training for Work level 3 - are part time programmes to be achieved at the individual Learner/Trainees own pace. These programmes lead to a major certificate level 1 or 2 certificate in General learning and level 3 Employability Skills. In Caritas each Learner/Trainee will start by experiencing sampling and following this, with the support of staff will select from the programmes offered.

Training for Life/Work programmes are created to meet individual Learner/Trainee's needs and abilities. Each programme module will use content which interests and enhances the Learner/Trainee's knowledge, development, competency and confidence; within a supportive & encouraging environment. The aim of the overall programme is to assist Learner/Trainees in achieving and or enhancing life skills, to enable Learner/Trainees to progress within training and provide further education and/or employment opportunities.

During the three years Learner/Trainees also have the opportunity to **transfer** from programmes leading to QQI awards at level 1 to QQI awards at 2 to QQI awards at level 3 within Caritas Training Centre. Learner/Trainees may **progress** to level 4 accessing programmes in the community, through further training / education, supported employment and sheltered occupation services after Learner/Trainees leave Caritas Training Centre

QQI Certification Fee Waiver Request

Date: _____

Name PRINT):   _____

Address: _____

Mobie No: _____   Landline: _____

Email PRINT)   _____

PPS No. _____   D.O.B.: _____

Coure Title: _____

QQI Certification Fee Waiver Request

QQI Level: Tick Level: ☐ 3   ☐ 4   ☐ 5   IMPORTANT

Major Award: Are you working towards a QQI Major Award   ☐

Progamme Start Date: _____

Certification Waiver** <u>PLEASE NOTE:</u>

Fees: If the following apply to you. Please tick, otherwise you are liable for:

€20 certification fee per component certificate

€50 if after completing this course if you achieve a Major Award:

IMPORTANT   **<u>Are you a Medical Card Holder:</u>**   ☐

If YES, your medical Card Number: _____

Please be advised that as and from July 2014, candidates for QQI Level 4 who hold a Medical Card or are dependent on parents or guardian who is the holder of a Medical Card, are not liable for certification fees.

IMPORTANT   **<u>Are you in receipt of Department of Social Welfare Payments/Grant:</u>** ☐

If YES, Name of Local Office: _____

Social Welfare recipients are exempt from fees.

Signature of Applicant: _____   Date: _____

Signature of Parent/Guardian: _____   Date: _____

VERIFYING OFFICIAL (Tobe completed by Programme Coordinator who can verify Learner/Trainee satisfies waiver requirements.)

Programme Coordinator Name: _____

Programme Coordinator Signature: _____   Date: _____

FOR INTERNAL USE ONLY:

Programme Standards Coordinator: _____   Date: _____

☐   Waiver Granted   ☐   Waiver Denied

Comments:

Sample Marking Sheet

Level 1	Marking Sheet	Computer Skills M1T11	QQI

Learner/Trainee's Name: _____ PPSN: _____

Learning Outcomes The Learner/Trainee can:	(✓)	Explanatory Information (where the evidence for this Learning Outcome can be found in the Learner/Trainee's portfolio of assessment)
CS1 Identify significant components parts of a computer, e.g. *mouse, monitor, keyboard, printer*		□ Identification-Matching Ex. □ Photo evidence **Worksheets**: □ Labelling □ Terminology □ Matching □ The Keyboard □ What Am I?
CS2 Use a mouse/joystick/input device for simple functions, e.g. *to click, double click, click and drag, use different pointer shapes*		□ Photo evidence □ Skills Demo
CS3 Use a software package, e.g. *a game, educational/personal software*		□ Photo evidence □ Print outs □ Skills Demo e.g. Game Playing
CS4 Enter short text/graphics with appropriate input device		□ Photo evidence □ Print outs □ Skills Demo e.g. Opening word and entering short text (name)
CS5 Name possible uses for selected software package		Photo evidence **Worksheets**: ❑ Software Packages

(✓) indicates that the Learner/Trainee has achieved the Learning Outcome

This is to state that the evidence presented in the attached portfolio is complete and is the work of the named Learner/Trainee.

Learner/Trainee's signature: _____ Date: _____

Sample Portfolio Dividers

	Level 1	Computer Skills M1111	QQI

CS1: Identify significant components parts of a computer, e.g. *mouse, monitor, keyboard, printer*

Streetwise RT

	Level 1	Computer Skills M1111	QQI

CS2: Use a mouse/joystick/input device for simple functions, e.g. to click, double click, click and drag, use different pointer shapes

Streetwise RT

	Level 1	Computer Skills M1111	QQI

CS3: Use a software package, e.g. a game, educational/personal software

Streetwise RT

	Level 1	Computer Skills M1111	QQI

CS4: Enter short text/graphics with appropriate input device

	Level 1	Computer Skills M1111	QQI

CS5: Name possible uses for selected software package

Learner Record of Receiving Provisional Results

Learner Name:		Learner PPSN:			
Programme/Module Name:		Programme/Module Start Date:			

I confirm that I have received the following provisional results and am aware that these results are subject to a results approval process

	Assessment Title	Assessment Code	Test Title	Test Code	Provisional Result	Learner Signature	Date
1							
2							
3							
4							
5							
6							
7							
8							
9							

Note: Learners should contact their Tutor/Instructor/Trainer if they have any queries with regard to their provisional results.

Appendix 13- Staff Supervision/ Performance Enhancement Forms

BROTHERS OF CHARITY SERVICES IRELAND

Staff Support and Supervision Record

Supervisee	**Supervisor**
Name:	**Name:**
Staff ID:	**Staff ID:**
Position:	**Position:**
Work Location:	**Work Location:**
Date of Last Supervision Meeting:	**Date of This Supervision Meeting:**

Supervisee's Agenda	**Supervisor's Agenda**

Follow-on Items from Last Meeting:

Summary of Discussion:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Decisions made	Responsibility	Date

Signed: _____   **Date:** _____
         Supervisee

Signed: _____   **Date:** _____
         Supervisor

Performance Enhancement

EMPLOYEE NAME		EMPLOYEE ID	
ROLE		WORK LOCATION	
DATE OF LAST REVIEW		DATE OF THIS REVIEW	

Review Performance/goals against agreed objectives for the past 12 months (to be completed by Staff Member & Reviewer)

List specific goals for the next review period (to be completed by Staff Member & Reviewer)

Are there any areas of your job that you are unclear about (to be completed by Staff Member)

Relationships (Families/Friends/Communities) (to be completed by Staff Member and Reviewer)

What support and training do you need from me as your direct supervisor in order for you to excel in your job? (to be completed by Staff Member and Reviewer)

Additional comments by Reviewer/Staff Member (to be completed by Staff Member and Reviewer)

Staff Member:	Date:

Reviewer	Date:

Appendix 14- Relevant BOCSI National Policies and Procedures

Brothers of Charity Services Ireland (2021) *National Policy on Application for Services/Supports, Transfers and Withdrawal of Services and Supports*.

Brothers of Charity Services Ireland. *National Person Centred Planning Policy* (Draft)

Brothers of Charity Services Ireland (2022) *National Policy on Communication with Individuals Supported by the Service*.

Brothers of Charity Services Ireland (2021), *Policy on Access to Education, Training and Employment for Adults Supported by the Services,* 2015/NP10.

Brothers of Charity Services Ireland. (2015) *National Policy for the Safeguarding of Vulnerable Adults at Risk of Abuse*. 2015/NP06(a).

Brothers of Charity Services Ireland. *National Procedures for the Safeguarding of Vulnerable Adults at Risk of Abuse*. (2015). 2015/NP06(b).

Brothers of Charity Services Ireland (2013) *National Risk Management Policy*. 2013NP10. Updated 2022.

Brothers of Charity Services Ireland, *Recruitment and Selection Procedure* (2014). 2014-06. Updated 2020

Brothers Charity Services Ireland (2019). *Code of Practice for all Persons Who Support Adults.* V4. 2015/NP07(c).

Brothers of Charity Services Ireland (2017). *National Staff Training and Development Policy*. 2017NP23. Updated 2020

Brothers of Charity Services Ireland (2021). *Policy for the Management of How to Handle Complaints.* 2021/NP42.

Brothers of Charity Services Ireland (2020). *Data Protection Handbook: A practical guide for Brothers of Charity Services staff to the Data Protection Act 2018 & The General Data Protection Regulations v2.*

Brothers of Charity Services Ireland (2019). *Data Breach Procedures*. 2019/NP36

Brothers of Charity Services Ireland (2019). *Subject Access Request (Under GDPR and Data Protection)* Procedures for Staff. 2019/NP37

Brothers of Charity Services Ireland (2014) *Files and Record Keeping Procedure*. (Procedure No. 2014-12) Revision 1.

Brothers of Charity Services Ireland (2019) *National Confidentiality Policy.* (NP2019/33)

Appendix 15- Legislation that Underpins Service Provision

Please click on the hyperlink below for details on each relevant piece of legislation:

Health Act 2007
https://www.irishstatutebook.ie/eli/2007/act/23/enacted/en/html

*Statutory Instrument 367 of 2013, under the Health Act 2007 (Care
and Support of Residents in Designated Centred for Persons [Children and Adults] with Disabilities)
Regulations 2013*
https://www.irishstatutebook.ie/eli/2013/si/367/made/en/print

Disability Act 2005
https://www.irishstatutebook.ie/eli/2005/act/14/enacted/en/html

Equality Act 2000-2004
https://www.irishstatutebook.ie/eli/2004/act/24/enacted/en/html

Education for Persons with Special Educational Needs Act (EPSEN) 2004
https://www.irishstatutebook.ie/eli/2004/act/30/enacted/en/html

Citizens Information Act 2007
https://www.irishstatutebook.ie/eli/2007/act/2/enacted/en/html

Employment Equality Acts 1998 & 2004
https://www.irishstatutebook.ie/eli/1998/act/21/enacted/en/html

European Convention on Human Rights Act 2003
https://www.irishstatutebook.ie/eli/2003/act/20/enacted/en/print

Assisted Decision Making (Capacity) Act 2015
https://www.irishstatutebook.ie/eli/2015/act/64/enacted/en/html

HSE Interim Standards New Directions (2016)
https://www.hse.ie/eng/services/list/4/disability/newdirections/interim%20standards%20for%20new%20directions%20report.pdf