

International College for Personal and
Professional Development (ICPPD)
2022

Annual Quality Report (ICPPD)
Reporting Period 2020-2021

[ICPPD]

2022

Annual Quality Report (ICPPD)
PART A: INTERNAL QA SYSTEM
Reporting Period 2020-2021

PREFACE

The **Annual Quality Report (AQR)** (formerly AIQR) forms part of Quality and Qualifications Ireland's (QQI) quality assurance (QA) framework of engagement with Higher Education Institutions (HEIs). The AQR provides documentary evidence of the development and evolution of each institution's internal quality system. It provides QQI with assurance that internal QA procedures have been established and are being implemented consistent with regulatory requirements.

The AQR, particularly part A, should assist with **document management** in the institutional review process and will facilitate institutions in providing review teams with procedural QA documentation in preparation for the external review process. It is an important part of the evidence base considered by external **review teams** as part of QQI's CINNTE cycle of institutional reviews, demonstrating that the institution's internal QA system is aligned with QQI's Core and relevant Sector- and Topic-specific Statutory QA Guidelines, and with the European Standards and Guidelines for Quality Assurance in the European Higher Education Area 2015 (ESG). It enables the review team to satisfy itself of compliance with these requirements for the purpose of the institutional review process.

Each AQR is **published in full on QQI's website**, providing transparency on the HEIs' assurance and enhancement of quality to external stakeholders. (As such, institutions should ensure that their submissions do not contain any data that they consider to be commercially sensitive.) Collectively, the AQRs comprise a single national repository of quality assurance practice in Irish higher education institutions.

Each year, QQI produces a synthesis report of the key themes highlighted across the AQRs, primarily arising from Part B of the reports.

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Guidelines on Completing the Report

The AQR is aligned with QQI's Core, Sector and Topic-specific Statutory Quality Assurance Guidelines and with the ESG (2015). A mapping of the ESG to QQI Core QA Guidelines is included in Table 1 below; the structure of Part A of this report template aligns with the first column of the table. Additional guidance on completing this template and reference material is included in each section. Institutions should adhere to this guidance and have regard to QQI Core, Sector and Topic-specific Statutory Quality Assurance Guidelines. **The guide text within each section should be deleted before submission of the report.**

Submission Process and Timeline

The deadline for submission of the AQR each year is in February of the relevant year, with the call for submission sent to institutions in November of the preceding year. Once the call for submission has been made, QQI will provide access to QQI's provider portal, QHub, to the designated institution contact(s) to facilitate submission of the report. Through QHub, each institution will have access to an editable version of its AQR for the previous reporting period. This document can then be amended/updated to reflect any changes or developments that occurred during the current reporting period before submitting the final report to QQI.

Completing the AQR

- When completing the AQR template, all relevant colleagues in the institution should be consulted.
- Consider whether external audiences will be able to understand the terminology used (particularly local abbreviations and acronyms); it may be helpful to include a glossary.
- Aim to avoid duplication in the report - where information is relevant to more than one section, the first mention may be referenced in subsequent sections.
- Provide reflections on what worked well, but also what may have been tried but did not work.

Report Structure

Part A: Internal QA System

Part A of the AQR comprises a record of each institution's current QA policies and procedures and should provide links to those policies and procedures. Private HEIs may provide links to the policies and procedures approved by QQI during initial access to validation (IAV) or reengagement. It is the responsibility of each HEI to ensure before submission of the AQR that all links are correct and functional, and that the policies and procedures referred to are the most up-to-date versions available. Given that the AQR is submitted in respect of a discrete reporting period, it may be helpful for institutions to establish a SharePoint/OneDrive folder (or similar) for each reporting period that contains the current versions of their policies and procedures, and that hyperlinks to these versions of the documents be provided in the AQR

Part A is to be completed only if there have been **material** changes to QA policies and procedures during the reporting period. Such changes may include the approval and implementation of new policies or procedures, or significant amendments to existing ones.

Part B: Quality Assurance (QA) and Quality Enhancement (QE)

Part B of the AQR documents and captures QA activities, developments and enhancements undertaken by institutions **during the reporting period** and their **impact**. Insofar as is possible, institutions should demonstrate in Part B how plans set out in the previous AQR were progressed during the reporting period - these may be plans linked to strategic objectives, to reengagement advices, or to institutional review recommendations.

Case Studies

In each reporting period, QQI may request updates on specific thematic areas or may invite the institution to submit case studies in response to specific topics. Further, institutions may include case studies to share good practice on topics of their choosing, demonstrating QA and QE in action. In formulating case studies, institutions are encouraged to reflect on and highlight areas that may be of interest to other institutions and would benefit from wider dissemination. Further guidance is provided in Part B.

Links to Reference Documents Cited in this Template¹

Legislation

- [Qualifications and Quality Assurance \(Education and Training\) Act 2012 \(as amended\)](#)
- [Regional Technical Colleges Act 1992 \(as amended\)](#)
- [Technological Universities Act 2018](#)
- [Universities Act 1997](#)

QQI Documents

Statutory QA Guidelines (QAG)

- [Core QAG](#)
- [Sector-specific QAG for Independent/Private Providers](#)
- [Sector-specific QAG for Designated Awarding Bodies](#)
- [Sector-specific QAG for Institutes of Technology](#)
- [Topic-specific QAG for Providers of Statutory Apprenticeship Programmes](#)
- [Topic-specific QAG for Providers of Research Degree Programmes](#)
- [Topic-specific QAG for Blended Learning](#)

Other QQI Policy Documents

- [QQI's Policy for Collaborative Programmes, Transnational Programmes, and Joint Awards, 2012](#)
- [QQI's Code of Practice for Provision of Programmes of Education and Training to International Learners, 2015](#)
- [QQI Policy Restatement on Access, Transfer and Progression, 2015](#)

Other National/International References

- [European Standards and Guidelines for Quality Assurance in the European Higher Education Area \(2015\)](#)
- [IHEQN Guidelines on Collaborative Provision](#)
- [National Policy Statement on Ensuring Research Integrity in Ireland](#)
- [Ireland's Framework of Good Practice for Research Degree Programmes, 2019](#)
- [HEA National Framework for Doctoral Education](#)
- [The Salzburg Principles](#)
- [The Salzburg II Recommendations](#)
- [SOLAS Code of Practice for Employers and Apprentices](#)
- [UN Sustainable Development Goals](#)

¹ These links will be updated as further guidance documents are published.

PART A: INTERNAL QA SYSTEM

Table 1

Table 1 Mapping of ESG (2015) to QQI QA Guidelines (QAG)				
AQR Part A Section	QQI QAG Core Sub-section No.	QAG Core Sub-section Title	ESG Standard No.	ESG Standard Title
1.0 - Internal QA Framework	2.1	Governance and Management of Quality	1.1	Policy for Quality Assurance
	2.2	Documented Approach to Quality Assurance		
2.0 - Programme Development and Delivery	2.3	Programmes of Education and Training	1.2	Design and Approval of Programmes
4.0 - QA of Research Activities and Programmes			1.9	On-going Monitoring and Periodic Review of Programmes
8.0 - Monitoring and Periodic Review				
5.0 - Staff Recruitment, Development and Support	2.4	Staff Recruitment, Management and Development	1.5	Teaching Staff
2.3 - Teaching, Learning and Assessment	2.5	Teaching and Learning	1.3	Student-centred Teaching, Learning and Assessment
	2.6	Assessment of Learners		
3.0 - Learner Resources and Supports	2.7	Supports for learners	1.6	Learning Resources and Student Support
6.0 - Information and Data Management	2.8	Information and Data Management	1.7	Information Management
7.0 - Public Information and Communication	2.9	Public Information and Communication	1.8	Public Information
2.0 - Programme Delivery and Development	2.10	Other Parties Involved in Education and Training	1.9	On-going Monitoring and Periodic Review of Programmes
8.0 - Monitoring and Periodic Review			1.2	Design and Approval of Programmes
9.0 - Details of Arrangements with Third Parties				
2.0 - Programme Development and Delivery	2.11	Self-evaluation, Monitoring and Review	1.9	On-going Monitoring and Periodic Review of Programmes
8.0 - Monitoring and Periodic Review			1.10	Cyclical External Quality Assurance
4.0 - QA of Research Activities and Programmes	QAG for Providers of Research Degree Programmes			

Introduction and Overview of Institution

This is the AQR for ICPPD for the reporting period 1 **September 2020 - 31 August 2021**.

It is to be submitted by **Friday, 25 February 2022**.

The AQR has been approved by Academic Board and is submitted by Chris Melican, Registrar.

Overview of the International College for Personal and Professional Development (ICPPD)

The International College for Personal and Professional Development (ICPPD) is a third level Adult Education College providing training and education in the fields of Holistic Counselling and Psychotherapy, Personal and Professional Development, Expressive Arts and Spirituality.

ICPPD was founded in 2009 to develop training and education services, and has become a leader in the field of personal and professional development for members of the public and for professionals in the caring and helping arena. Programmes at ICPPD are integrative, experiential and include a body mind spirit philosophy. The programmes attract learners and participants who appreciate a holistic perspective to helping and healing.

ICPPD's mission is to achieve, and maintain, a standard for excellence in our programmes and learners, and in our staff as educators, through a combined commitment to a person-centred, holistic approach for the individual learner. The College seeks to achieve this mission by providing

- flexible, high-quality programmes of education and training
- tutors regarded as leading educators, clinicians and researchers in their chosen areas
- an integrated approach whereby the learner is understood to be an active participant in the relationship between the College, the tutor and the learner
- an engaging learning and teaching environment.

ICPPD's Professional Diploma in Holistic Counselling enrolled learners in 2011 to 2013 on a 3-year programme which was accredited by the National Association for Counsellors and Psychotherapists (NAPCP) and Irish Association for Counselling and Psychotherapy (IACP). ICPPD engaged with QQI in 2013 and commenced delivery of the QQI-validated Bachelor of Arts in Holistic Counselling & Psychotherapy (Level 7) from 2014. The Bachelor of Arts (Hons) in Holistic Counselling & Psychotherapy (1-year Add-on) was validated by QQI in 2018, followed in 2019 by validation of the 4 Year Bachelor of Arts (Hons) in Holistic Counselling and Psychotherapy. The last enrolment on the Level 7 BA was in 2018 and the programme is in teach-out mode.

ICPPD offers a foundation course in Counselling and Psychotherapy - the Introduction to Holistic Counselling and Psychotherapy which is aimed at learners wishing to take the initial steps towards a career in counselling/psychotherapy. To support ongoing professional body accreditation, ICPPD offers a series of CPD and supplementary workshops to support learners and accredited professionals. A Certificate in Personal Development is offered for applicants who wish to pursue personal growth by expanding their self-awareness and knowledge and improving personal skills. ICPPD programmes aimed at professionals include the Professional Diploma in Advanced Supervision across Professions, Professional Diploma in Expressive Arts and Professional Certificate in Psychosynthesis.

Process for development and approval of the AQR

ICPPD's QA procedures were approved by QQI in June 2020, following the Re-engagement application in November 2019 and panel visit in February 2020. This process presented ICPPD with an opportunity to thoroughly inspect, reflect upon and improve the existing Quality Assurance procedures. Following successful re-engagement and harnessing the learnings acquired from the process, ICPPD has striven to continuously evaluate and update QA procedures in order that they remain fit-for-purpose and to ensure that a consistent approach to QA is embedded at the college.

ICPPD aims to deliver high quality standards in all aspects of its functions and conducts effective quality process review as part of on-going organisational practice. Evaluation of QA procedures is carried out through the college organisational structures - the QA and Risk Management Committee, Executive Management Committee, Academic Board and Board of Directors. Mechanisms are employed to inform, modify, and improve the quality and standards of the ICPPD academic and training programme provision. These mechanisms include collation of feedback from learners and faculty and cyclical engagement with external stakeholders.

QQI briefing sessions for private independent providers in April 2021 and November 2021 provided valuable information and provided a focus on the information required in the AQR. The Registrar and Academic Director attended these sessions. The process and development of the Annual Quality Report was coordinated by the Registrar with collaboration and input from the Academic Director. Reporting on QA Procedures and Enhancement is an agenda item at QA and Enhancement, Academic Board and Executive Management Committee meetings. The development of the AQR was reported on by the Registrar at the related meetings. The final draft of the AQR was approved by Academic Board on 21st February 2022.

1.1 Governance and Management of Quality

Organisation and Governance at ICPPD

ICPPD has developed a Quality Assurance Manual, and associated documentation, to clearly articulate the College's approach to supporting quality assured academic practice. The QA Manual sets out the organisational structures and governance through which the agreed policy and procedures are approved and implemented within the College. As required by QQI following Re-Engagement the QA Manual is publicly available on the ICPPD website - <https://icppd.com/quality-assurance-at-icppd/> .

Overview of ICPPD Management Boards

ICPPD is managed financially, academically and professionally through a framework of boards and committees and a number of roles, which have been established within the College for that purpose (*reference QA Manual, Section A, Chapter 2*).

The Board of Directors is responsible for the overall management and strategic development of ICPPD. The Board of Directors is appointed to act on behalf of the shareholders to oversee the day-to-day financial affairs of the business and provides the company (ICPPD) with strategic direction. The Board of Directors is responsible for setting values and standards within ICPPD through its decisions regarding strategy, policy and internal control systems. It is the responsibility of the board to ensure that the College fulfils its mission, and in doing so, sets the overall policy objectives. The Board of Directors is charged with maintaining effective corporate governance. It has authority over the Academic Board and the Executive Management Committee.

The Academic Board is the most senior academic authority within ICPPD. The Academic Board is the most senior academic authority within ICPPD, with responsibility for the College's strategic academic direction, policy and standards. In particular, the Board considers and advises the Board of Directors on matters relating to ICPPD programmes - specifically, the educational character and objectives of the College, the academic elements of the Strategic Plan; academic regulations and policy; quality assurance and enhancement procedures; programmes development; assessment policy, practices and procedures; agreements with partners; communications with professional and awarding bodies; the establishment and closure of outreach centres; institution-wide self-reviews and evaluations.

The Executive Management Committee has responsibility for the day-to-day operational and financial concerns of the College. The role of the ICPPD Executive Management Committee is to ensure effective coordination and integration of all aspects of academic management and operations throughout ICPPD. The governance structures including sub-committees are diagrammatically represented in **Figure 2.1**. Terms of Reference for all boards and committees are available in the **QA Manual, Section A, Chapter 2, 2.2**.

Figure 1 - ICPPD Organisation Chart - Boards and Committees



The roles and responsibilities each of individuals in the overall management and strategic development of the College are represented in and **Figures 2.2**.

A Specific Advice of the Re-Engagement Panel relating to the roles of President and CEO has been taken on board. The CEO role was revised and re-defined as College Manager. As recommended the relevance of role of Housekeeper in the organisation chart was reflected on and deemed an unnecessary addition here. The GDPR officer role has been reviewed and is defined more appropriately as Data Protection Officer.

Figure 2 - ICPPD Organisation Chart - Personnel and Responsibilities



Policy for Quality Assurance

The Quality Assurance Manual outlines the College's quality policies and practices under the 10 areas identified in the [ESG](#) and is implemented in accordance with QQI's Quality Assurance (QA) Guidelines. The Policy for Quality Assurance is defined in **Section A, Chapter 1, 1.3** and sets out the means by which communication, implementation, management and measurement of QA is achieved.

The Quality Assurance Manual and associated documentation have been developed through the College's academic and management approval processes, with final approval through the Academic Board. All ICPPD activities are subject to the College's quality assurance policies and procedures including, but not limited to -

- the identification and development of new programmes/courses

- elements of ICPPD instructional models
- workshops, tutorials, seminars, lectures and retreats
- learner academic and pastoral support
- assessment procedures
- consultation with learners, stakeholders and representative bodies
- staff development and support
- stakeholder involvement
- management and administration
- equipment and facilities (and outreach)
- ancillary College activities.

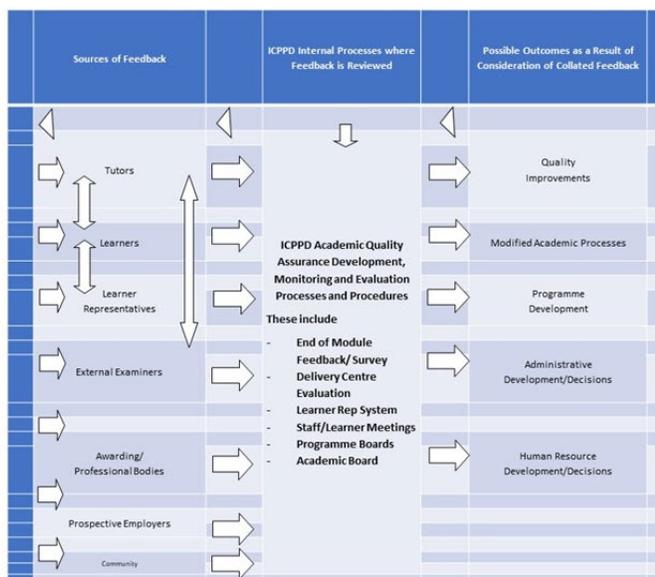
The QA Manual also describes how ongoing monitoring and review leading to continual enhancement is embedded and defines the key objectives and relevant performance indicators which will be used by the college to measure progress and success. These processes are outlined and described in the **QA Manual Section B, Chapter 2**.

Quality assurance processes are implemented by the College -

- through (routine) monitoring and evaluation of programmes, which is conducted on an on-going basis;
- by obtaining feedback from internal and external sources, for the purpose of further improving and maintaining the quality of education and training which it provides, organises and/or procures;
- more formally, though a cyclical (institutional) review processes.

The feedback loops which are being engaged to inform, modify, and improve the quality and standards of the ICPPD academic and training programme provision are also outlined and represented graphically in **Figure 1.3 - Feedback Loops for Quality Assurance**

Figure 1.3 - Feedback Loops for Quality Assurance



Representation of Learners

ICPPD encourages and supports an open and frank working relationship between learners and staff within the College. The relationship between the learner and the academic staff is considered critical to the process for collection of learners' feedback in relation to their programme, and the services related to that programme, in a timely and efficient manner.

A minimum of one Learner representative is elected for each cohort of learners. Learner representatives are nominated by their peers at the beginning of the academic year. Clear guidelines are issued on the role of the learner Representatives and formal plenary meetings between the Learner representatives and the Academic Director are held on a minimum of one-per-term basis. These meetings are formally scheduled, are minuted, and outstanding issues are communicated to the rest of the class group/academic staff/Programme Board for resolution, as appropriate.

Participation in Programme Boards and Academic Board

Learner feedback is an essential element of the quality assurance process as supported by the Programme Board. Learner representatives, from each programme location, are members of the Programme Board and are invited to attend and participate fully in discussions in relation to academic issues. In addition, learner participation and feedback are used to ensure that there is consistency in the application of standards in delivery and assessment of programmes irrespective of location.

A Learner Representative of the Award Year of the Programme sits on Academic Board to represent and make contributions on behalf of the of learners.

Surveys (including End-Of-Module Feedback)

Learner survey is considered one of the most efficient and immediate processes for the collection of feedback in relation to programme quality, and learners have an important role in shaping the development of the modules offered. Feedback surveys are utilised to assess syllabus quality, the quality of delivery of the content, tutor's ability to impart knowledge, and the learning achieved. The feedback aims to support learners, create an appropriate learning environment, and to model desired behaviour/learning.

Representation of External Stakeholders

Employer consultation and surveys are used to strengthen the relationships between the College, businesses, and the wider community being served. Community/employer relationships are further strengthened by the College's engagement with placement organisations to support the Clinical Practice module on the Bachelor of Arts programmes. Annual meetings are scheduled and minuted to capture the feedback from managers of placement organisations and external supervisors of ICPPD trainee counsellors.

1.2 Linked Providers, Collaborative and Transnational Provision

N/A

2.0 Programme Development and Delivery

2.1 Programme Development and Approval

Programme Development and Approval at ICPPD is articulated in the Quality Assurance Manual in *Section B, Chapter 1 - Design and Approval of Programmes*. The policy illustrates the internal and external processes for Programmes Design and Development which apply to academic programmes leading to awards on the NFQ or professional accreditation and ICPPD self-certified training programmes. The Re-engagement Process and Gap Analysis exercises brought focus on the internal process for design and approval of programmes in 2019 resulting in a strengthened process for proposing and designing programmes.

2.2 Admission, Progression, Recognition & Certification

ICPPD's policies relating to Admission, Progression, Recognition and Certification of learners are outlined in the QA Manual, *Section C, Chapter 1 - Learner Admission, Progression, Recognition and Certification*. The processes in this chapter relating to Admissions have been strengthened and supported by the formation on an Admissions Panel. The formation of the Admissions Panel with defined Terms of Reference was a mandatory change identified by the independent panel.

This chapter also outlines ICPPD's policy relating to admission of learners and widening access to education and training through Recognition of Prior Learning (RPL). The application of RPL within ICPPD allows potential learners to gain admission to a programme or to gain exemptions/credit from some parts of a programme, based on demonstrated learning achieved prior to entry.

Progression through programmes at ICPPD is also defined in the is chapter, in particular for learners on BA programmes who complete a Clinical Practice module as a core part of their training. The Fitness to Practice policy and procedure is outlined and was amended in 2020-2021 to remove the requirement for trainees to have Student IACP membership - this is not mandatory.

2.3 Procedures for Making Awards

Following ICPPD's Examination Board processes, learners in Award years of programmes on the NFQ are certified through QQI's certification portal - QBS.

2.4 Teaching, Learning and Assessment

ICPPD's *QA Manual, Section C, Chapter 4* outlines the college's policies relating to **Learner-centred Learning, Teaching and Assessment**. ICPPD promotes pedagogical, andragogical and peragogical approaches to adult learning. Traditional mechanisms of tutor input and lectures are utilised, and supplemented by demonstration of approach, discussion groups, and experiential exercises in pairs, and small and large groups.

This chapter outlines the framework for the assessment of learners at ICPPD including assessment strategies and attendance requirements. During the Re-Engagement Process the assessment policy was reviewed and roles of all parties involved in assessment were clearly defined - **Section C, Chapter 4, 4.1.5**.

Taking on board the Specific Advice of Re-Engagement Panel that the focus of assessment needs to be further amended to reflect Assessment *for* and *as* learning, the Assessment of Learners policy has been updated - **Section C, Chapter 4, 4.1**. ICPPD has become more aware of documenting the assessment approached that are in fact in operation. Faculty Days are in place for staff to review, monitor learners and provide them with feedback and support at Learner Support, Progression and Fitness to Practice Meetings. The Terms of Reference for Programme Boards, **Section A, Chapter 2, 2.2.5**, has been updated to document this structure.

The Re-Engagement process also highlighted the need to define a procedure to facilitate Learners' viewing of Written Examination Scripts - **Section C, Chapter 4, 4.3.6**. This Chapter also outlines the policy relating to Academic Impropriety in Assessments - **Section C, Chapter 4, 4.7**.

ICPPD's process and procedures in relation to External Examining are defined in the QA Manual, *Section C, Chapter 5*.

ICPPD continues to explore other possibilities for self-evaluation, peer evaluation and interaction between tutors and learners relating to the assessment and evaluation of learners personal and professional development and the integration of this with their academic work.

3.0 Learner Resources and Support

Section B, Chapter 2 of the ICPPD QA Manual illustrates the colleges Learning Environment, Resources and Supports Policy. This chapter includes information on ICPPD delivery sites, administrative support provided by ICPPD to learners, access to ICPPD's library and the Virtual Learning Environment.

Supports are available to learners via the Learner Representative System and Learner Support and Progressions Meetings with faculty are also defined.

The Learner Complaints Procedure is also outlined in **section 2.9** of this chapter. ICPPD has re-visited the Learner Complaints Procedure and intends to conduct a thorough review during the Academic Year 2021-2022.

The Learner Code of Conduct and Disciplinary Policy, **Section C, Chapter 7 of the QA Manual**, has been updated with a new section which sets out the Rights of Learners. The updated policy affirms ICPPD's aim to provide a safe and welcoming environment for learners, staff and all other stakeholders.

Quality Assurance of learner resources and supports is monitored through learner and tutor end of module surveys, the learner representative system and is monitored, tutor input at Programme Boards. Feedback from these forums is reported to the Academic Board and Executive Management Committee as appropriate.

4.0 QA of Research Activities and Programmes

While ICPPD does not currently offer research programmes, research activities in the BA programmes (Research Project Modules) are overseen by the Research Ethics Committee, which reports to the Academic Board. The Terms of Reference of the Research Ethics Committee is outlined in the QA Manual in Section A, Chapter 2, 2.2.11. The remit of this committee includes oversight of ICPPD learners' research plans and projects and approval of research topics subject to ethical consideration, sensitivity and support for all involved.

5.0 Staff Recruitment, Development and Support

ICPPD's policies relating to Recruitment, Selection, Development, Support and Management of Staff is outlined in the QA Manual, Section A, Chapter 3. The processes outlined include Recruitment, Induction, Probation and Review, Staff Training and CPD.

Following the Re-Engagement Specific Advice on staff training, the college continues to update the staff register with all training undertaken by staff. Staff are encouraged to engage in professional development and a bursary, while limited, is offered towards this by the college. In order to receive the bursary, the details of proposed training is approved by the academic director. When the training has been completed, the staff register is updated.

Additionally, ICPPD has a dedicated page for tutors on the LMS (Moodle) to facilitate the sharing of information in relation to any training they have undertaken or workshops attended which could be of interest to the wider faculty.

Policies relating to equality are detailed in Section A, Chapter 4 of the QA Manual, in particular 4.1 - Dignity and Equality Policy and 4.2 - ICPPD as an Equal Opportunities Employer. ICPPD has identified the need for training for all staff (administration and teaching staff) in areas relating to diversity and equality and intends to source and provide this training during the 2021-2022 academic year.

6.0 Information and Data Management

Communication, Information Management and Public Information at ICPPD is outlined in *Section C, Chapter 9* of the QA Manual. Due to the growth of the college, ICPPD is committed to upgrading Learner Information Systems to manage learner records from initial enquiry, admissions, progression through programmes, graduation and joining ICPPD alumni. A scoping exercise into the college's needs and the software options available is ongoing. It is envisaged that the system will be in place in mid-2022.

In 2019, at the start of the Covid 19 pandemic and with the move to virtual learning, ICPPD upgraded Moodle in order to maximise effectively the *discussion forum* functionality. The discussion forums have been used since then to engage learners and to encourage sharing of resources with their classmates.

Section C, Chapter 10 of the QA Manual articulates ICPPD's **Record Management and Retention Policy**. ICPPD has identified the area for ongoing review and development. The College Registrar assumes the role of Data Protection Officer. Training needs in this area were identified and the registrar attended training in December 2021. Following this training Data Protection processes are being updated including a more comprehensive records Retention Schedule, GDPR Risk Register, Data Breach Register and Data Protection Impact Assessment (DPIA), Freedom of information requests. The processes are being introduced and implemented during 2021-2022. Key Performance Indicators will be identified in tandem with these processes.

Retention data is recorded in the Annual Admissions Report and has been benchmarked progression and retention statistics as published by the Higher Education Authority (HEA). Awards data published by QQI allows ICPPD to make comparisons between ICPPDs award statistics against other QQI providers. Further benchmarking exercises and analysis of data will be addressed during 2021-2022.

7.0 Public Information and Communication

Communication, Information Management and Public Information at ICPPD is outlined in *Section C, Chapter 9* of the QA Manual. This chapter describes the various channels in which information is disseminated to the ICPPD community - staff, learners, external stakeholders and to external stakeholders, in particular future applicants.

ICPPD has contracted the services of an external marketing company (Studio 93) from October 2021. Plans are in place for 2022 to launch a new website, increase Social Media engagement and to commence interactive, live information events for members of the public. The objective is to clearly articulate ICPPD programme offerings and to make the Website user-friendly and present information clearly.

8.0 Monitoring and Periodic Review

On-Going Monitoring and Periodic Review of Programmes at ICPPD is outlined in the QA Manual, Section B, Chapter 2. This policy documents the quality assurance processes are implemented by the College

- through routine monitoring and self-evaluation of programmes conducted throughout the academic year.
- by obtaining feedback from internal and external sources, for the purpose of further improving and maintaining the quality of education and training which it provides.
- through a cyclical institutional review processes.

The output of these processes and activities are considered throughout the governance structures of the college and inform the ongoing enhancement and development of ICPPD programmes.

9.0 Details of Arrangements with Third Parties

9.1 Arrangements with PRSBs, Awarding Bodies, QA Bodies

Type of arrangement	Total Number
PRSBs	1
Awarding bodies	1
QA bodies	1

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1. Type of arrangement (PRSB/awarding body/QA body)	PRSB
Name of body:	Irish Association for Counselling and Psychotherapy (IACP)
Programme titles and links to publications	BA (Hons) in Holistic Counselling and Psychotherapy https://iacp.ie/register-of-accredited-courses
Date of accreditation or last review	31 st October 2020
Date of next review	2026

2. Type of arrangement (PRSB/awarding body/QA body)	PRSB
Name of body:	Irish Association for Counselling and Psychotherapy (IACP)
Programme titles and links to publications	Diploma in Advanced Supervision across Professions https://iacp.ie/register-of-accredited-supervision-courses
Date of accreditation or last review	May 2017
Date of next review	2023

3. Type of arrangement (PRSB/awarding body/QA body)	Awarding Body and QA Body
Name of body:	QQI
Programme titles and links to publications	BA (Hons) in Holistic Counselling and Psychotherapy (PG24126) BA (Hons) in Holistic Counselling and Psychotherapy (PG23766) Certificate in Holistic Counselling and psychotherapy (PG24129) (Exit Award)
Date of accreditation or last review	Re-Engagement 2020
Date of next review	Revalidation of BA (Hons) in Holistic Counselling and Psychotherapy (PG24126) - 2022

9.2 Collaborative Provision

Not applicable to ICPPD.

9.3 Articulation Agreements

Not Applicable to ICPPD.

[ICPPD]

2022

Annual Quality Report (ICPPD)
PART B: INTERNAL QUALITY ASSURANCE
ENHANCEMENT & IMPACT
Reporting Period 2020-2021

PART B: INTERNAL QA SYSTEM

Guidelines on Completing Part B

As outlined in the general guidelines for this template (p.5), **Part B** of the AQR documents and captures QA activities, developments and enhancements undertaken by institutions **during the reporting period** and their **impact**.

Insofar as is possible, institutions should demonstrate in Part B how plans set out in the previous AQR submission were progressed during the reporting period - these may be plans linked to strategic objectives, to reengagement advices, or to institutional review recommendations.

Part B of the AQR is an opportunity for self-reflection and critical evaluation of the effectiveness of QA activities over the reporting period. Institutions are encouraged to reflect both on what worked well and what did not work well, and to consider impact measures, using both quantitative and qualitative evidence (metrics, benchmarks and feedback/judgement) in how they led to specific QA improvements and enhancement.

Part B provides evidence of quality improvement and enhancement and impact² of QA activities within the totality of an institution's QA system.

Section 1 pertains to internal quality assurance implementation and developments since the previous reporting period.

Section 2 deals with institutional analysis of IQA enhancements and impacts including activities undertaken in respect of academic integrity, and the enhancements and impacts resulting from same.

Section 3 relates to IQA developments and plans for the next reporting period.

Section 4 provides an opportunity for institutions to illustrate IQA in action through case studies in relevant thematic areas.

Institutions are invited, if they wish to do so, to use case studies to demonstrate quality in action and to highlight areas of practice for dissemination at any point in this part of the report.

Case Studies

QQI recommends that written case studies should:

- Be between half a page and two pages in length;
- Relate to a specific time- and subject-bound issue;
- Include an introduction that sets out a brief overview of contextual matters;
- Include any relevant supporting data and data analysis;
- Include links to any sources cited;
- Include a clear concluding paragraph with overview of key outcomes/learning.

Although case studies will generally be in written form, institutions may also provide links to audio-visual/multimedia case studies. QQI does not prescribe a format for case studies.

² The National Forum for the Enhancement of Teaching and Learning in Higher Education have considered impact and measures leading to development and improvement specifically in terms of teaching and learning. See: <https://www.teachingandlearning.ie/wp-content/uploads/NF-2020-Insights-from-Practice-About-Impact-in-Teaching-and-Learning-web-ready.pdf>. This is a very useful reference, though impact in the context of this report should be considered

1.0 Quality Implementation and Developments

1.1 Strategic QA Updates

ICPPD's Vision and Strategic Plan

The 3-year strategic plan, 2018-2021, and development as a third level education provider includes a balance between commercial and academic/professional growth, which can be encapsulated as follows -

The condensed strategic aims for the period from 2018 to 2021 are as follows;

1. To consolidate the diversity of learners and growth in learner numbers within a learner population of between 200-300 learners.
2. To continue to develop a suite of relevant academic and professional programmes and career-focused life-long learning.
3. To continue to employ and expand innovative approaches to programme support and delivery.
4. Ensure that adequate resources are in place to enrich and support all staff and the delivery of high-quality programmes and positive learning experiences for enrolled learners
5. Ensure the increasing independence of decision making between the business and academic domains continues.
6. Provide suitable learning environments/venues for programme delivery that supports ICPPD's ethos and meets the standards of evaluative bodies.

Ensuring that the holistic ethos which underpins and distinguishes ICPPD from its competitors is recognised, appreciated and applied within ICPPD as an organisation, and by the staff and support staff involved in providing the service to all stakeholders.

- Continuing to provide current learners with good quality QQI-validated academic and IACP professionally accredited programmes while absorbing the unique learning experience provided to learners at ICPPD
- Ensuring ICPPD has current, up to date, Quality Assurance procedures and standards in operation that support the growth and development of the college
- Increasing the number of adult learner enrolments at the college to a level that supports and ensures ICPPD continues as a stable, viable business
- Further future strengthening of ICPPD's academic and professional credibility by gaining further accreditation and validation of programmes being offered, e.g., QQI and IACP approved Level 8 BA in Holistic Counselling and Psychotherapy, the development of a Master's Programme. This will have a direct bearing on the growth of the organisation.

ICPPD's Strategic plans are formulated and implemented by the Board of Directors. The Strategic Plan for the next 3-5 year period will be reflected in ICPPD's 2021-2022 AQR.

1.2 Update on Planned QA Objectives identified in Previous AQR

As this is ICPPD's first AQR report, this section will focus on the specific advices from the Re-Engagement Process. The Mandatory Changes were completed as part of the Re-Engagement Process.

No	Planned objectives (Previous AQR) Note: Include reference to the relevant section of the preceding AQR, where applicable	Update on Status Provide brief update on status, whether completed or in progress. If an action was planned in the previous AQR, but not completed, provide reasons/short reflections for the delay/non-completion.
1	Re-Engagement - Specific Advice 1 The Panel notes that the ICPPD has done significant work on the Risk Register. Specifically, the Panel advises the college to consider the Risk Register as an evolving document and a process to review the Risk Register on a half-yearly basis should be put in place	ICPPD's Risk Management Policy provides a framework and procedure for management to identify, assess and rate risks. While the Board of Directors has overall responsibility for the management of risk across the organisation, the approach has been embedded at ICPPD across the governance structures. Identified risks are reported to the Board of Directors where it is monitored and assessed on a monthly basis.
2	Re-Engagement - Specific Advice 2 The Panel recognises the work done by the college in clarifying the Organisational Chart and advises that it needs to be further refined specifically indicating the relationship between the President and CEO, and clear indications of shared roles within the organisation. (inclusion of a housekeeper is not suitable).	The CEO role has been revised and re-defined as College Manager. As recommended the relevance of role of Housekeeper in the organisation chart was reflected on and deemed an unnecessary addition here.
3	Re-Engagement - Specific Advice 2 The Panel acknowledges the work done on assessment of learning and advises that the focus needs to be further amended to reflect assessment for and as learning. The Panel recommends that feedback to learners and formative assessments should be formally	Taking on board the Specific Advice of Re-Engagement Panel that the focus of assessment needs to be further amended to reflect Assessment for and as learning, the Assessment of Learners policy has been updated - Section C, Chapter 4, 4.1. ICPPD has become more aware of documenting the assessment approaches that are in fact in operation. Faculty Days are in place for staff to review, monitor learners and provide them with

	reflected in the process and in the documentation.	feedback and support at Learner Support, Progression and Fitness to Practice Meetings. The Terms of Reference for Programme Boards, Section A, Chapter 2, 2.2.5, has been updated to document this structure.
4	The Panel notes that in relation to GDPR, the absence of a Data Protection Officer and a basic records retention schedule or log needs to be addressed and be more comprehensively documented in the QAH.	<p>The GDPR officer role has been reviewed and is defined more appropriately as Data Protection Officer. The Registrar assumes the role of Data Protection Officer. Training needs for this role have been identified and was undertaken in late 2021. Resulting from this training, the wider responsibilities in relation to GDPR/Data Protection for the college have been identified. Immediate priorities include:</p> <ul style="list-style-type: none"> – GDPR Risk Register – A more comprehensive Records Retention Schedule – Data Breach Register – Data Protection Impact Assessment <p>These will be actioned in 2021/2022.</p>
5	The Panel recognises the work done by the college on all procedures and processes in relation to complaints. Specifically, the Panel advises that the duration of each step needs to be addressed and the college should consider a more standardised approach. The Panel considers that the process is too drawn out at each stage, particularly in relation to non-academic complaints. The college should also address the Panel's concern on the wording for dealing with frivolous complaints. The External Examiner should not be on the Complaints Committee.	<p>Taking on board the specific advice and also following the recommendations of an Academic Board sub-committee dealing with a learner complaint which concluded in September 2021, the Learner Complaints Process will be reviewed in 2021/2022.</p> <p>The External Examiner is not on the Complaints Committee (this was a misinterpretation of the panel and was pointed out in ICPPD's responses to the panel reports).</p>
6	The Panel advises that the college updates the staff register to include all CPD training undertaken by individual staff members.	ICPPD updates the staff register on an ongoing basis with all training undertaken by staff. Staff are

		<p>encouraged to engage in professional development and a bursary, while limited, is offered towards this by the college. In order to receive the bursary, the details of proposed training is approved by the academic director. When the training has been completed, the staff register is updated.</p> <p>Additionally, ICPPD has a dedicated resource page for tutors on the LMS (Moodle) to facilitate the sharing of information in relation to any training they have undertaken or workshops attended which could be of interest to the wider faculty.</p>
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1.3 Governance and Management

1.3.1 QA Governance Meetings Schedule

Body	Meeting dates
Board of Directors	29 th July 2020 2 nd October 2020 6 th November 2020 11 th December 2020 27 th January 2021 26 th February 2021 26 th March 2021 7 th May 2021 4 th June 2021 23 rd June 2021 28 th July 2021
Academic Board	20 th October 2020 22 February 2021 17 May 2021
Executive Management Committee	16 th September 2020 6 th October 2020 3 rd November 2020

	1 st December 2020
	12 th January 2021
	2 nd February 2021
	2 nd March 2021
	31 st March 2021
	27 th April 2021
	25 th May 2021
	22 nd June 2021
	10 th August 2021

1.3.2 QA Leadership and Management Structural Developments

Guide:

In the reporting period 2020-2021, there were no new roles established nor any changes to units of governance.

As stated above in Section 1.2, the role of CEO was re-defined as College Manager.

A new Academic Director was appointed following the retirement of the existing person in the role.

1.4 Internal Monitoring and Review

1.4.1 Overview of Periodic Reviews

Unit of review for which report has been published during reporting period	Date of completion/reason for conducting review (if not planned) or non-completion (if planned but not conducted)	Links to relevant publications
Annual Academic Programme Report: BA in Holistic Counselling and Psychotherapy (Level 7) BA (Hons) in Holistic Counselling and Psychotherapy (Level 8) BA (Hons) in Holistic Counselling and Psychotherapy (Level 8) - 1 Year Add-on Diploma in Advanced Supervision across Professions Introduction to Holistic Counselling and Psychotherapy Certificate in Psychosynthesis	Completed 10th December 2021 for the Academic Year 2020/2021	Published Internally
Learner Code of Conduct and Disciplinary Policy	Completed September 2020	Published in QA Manual, Section C, Chapter 7

1.4.2 Expert Review Teams/Panels¹¹ involved in IQA

(i) Expert Review Team/Panel Size and Related Processes

ICPPD did not conduct Expert Review teams/panels for the reporting period 2020/21

	Total	Academic Schools/ Department	Professional Services/Support Unit	Approval/Review of Linked Provider	Programme Approval	Programme Review	Other
Number of review/ evaluation processes							
<i>of those:</i>							
On-site processes							
Desk reviews							
Virtual processes							
Average panel size for each process type*							

* excluding secretary if not a full panel member

(ii) Composition of Expert Review Teams/Panels involved in IQA

ICPPD did not conduct Expert Review teams/panels for the reporting period 2020/21

	Total	Gender	Internal	National	International	Institution Type

Type of Expert/ Role on Panel		Male	Female	, or Other unsp ecified			UK, incl . NI	Other European	Outside of Europe	Similar	Different
Chair											
Secretary											
Academic/Discipline Specific											
Student Representative											
QA											
Teaching & Learning											
External Industry /Third Mission											

^[1] QQI acknowledges that the terminology used to describe the groups of individuals that conduct peer review/evaluation varies from institution to institution.

2.0 IQA System – Enhancement and Impacts

Impacts and enhancements that have occurred as a result of the reengagement process.

ICPPD completed the re-engagement process with QQI during the 2019/2020 academic year. This was preceded by an extensive gap-analysis process and a thorough review of ICPPD's Quality Assurance bringing focus in particular to the following areas.

Governance and Management of Quality

A Mandatory Change required by the QQI Re-engagement panel was that ICPPD:

“Review, modify and simplify the organisational chart and separate the committees from the personnel within the organisation and clarify”

This change was made during the process. As a small, independent provider this has clarified reporting lines in the organisational structure. Creating Terms of Reference for each Board and Committee highlights the function and remit of each and these will be reviewed on an ongoing basis.

In the review of QA policies laid out in the QA Manual, an approach was taken to identify in each policy area which governance structure has responsibility for its ongoing review. This approach has had an immediate impact in the accountability of personnel and governance to ensure on-going monitoring is taking place.

Public Information and Communication

The requirement to have the QA Manual available publicly on the ICPPD website is a constant reminder and motivator to improve and document QA processes so that they are available in a current and user-friendly format to current and also prospective learners. The openness and transparency of publicly available policies aligns with ICPPD's principles and ethos. An external marketing company has been contracted to re-design the college website with the aim of making it easier to navigate.

Teaching, Learning and Assessment

The Re-Engagement Process for ICPPD was in its concluding stages as the impact of Covid-19. Since Re-Engagement, teaching and learning policies have been adapted to encompass procedures for the virtual environment. These are outlined in the **QA Manual, Section B, Chapter 4, 4.1.7** with additional resources and guidelines made available to learners in their learner handbook and to tutors via a resources page on Moodle.

Information and Data Management

The role of Data Protection Officer has been assigned to the College Registrar. The requirement for training in this role was recognised and resources. The training was completed in December 2021. The immediate priorities for Data Protection policy are to create a GDPR Risk Register, a more comprehensive Records Retention Schedule, a Data Breach Register, Data Protection Impact Assessment. Aligned with this is the need to communicate and embed an awareness of Data Protection principles to all staff.

2.1 Initiatives within the Institution related to **Academic Integrity**

ICPPD personnel (Academic Director and Registrar) have attended Academic Integrity webinars and events provided by QQI and NAIN and the information is disseminated to faculty through Programme Board meetings. Resources and links to material are made available in the Tutor Resources page on Moodle.

In September 2020, ICPPD commenced using Urkund, plagiarism detection software. There were considered discussions at Academic Board and Programme Boards around the suitability of certain functions of Urkund in relation to assignments of ICPPD learners on counselling and psychotherapy being made available for comparison with other institutions. Training was given to faculty in interpreting similarity reports.

Learners have been informed of the usefulness of the software as a check for appropriate referencing in their assignments.

Within the reporting period of 2020/2021, ICPPD continued to deliver at the commencement of the academic year, free Academic Writing Workshops to all ICPP learners, amongst many other areas incorporating information on Academic Integrity in their written assessments.

The policy on Academic Impropriety in Assessments, QA Manual, Section C, Chapter 4, 4.7 is replicated in Learner Handbooks.

3.0 QA Improvement and Enhancement Plans for Upcoming Reporting Period

3.1 QA and QE supporting the Achievement of Strategic Objectives

No.	Relevant objectives Note: Include reference to the relevant section of the preceding AQR, where applicable	Planned actions and indicators <i>Note: Include details of unit responsible, and how planned action will address the relevant strategic priority and/or reengagement advice/CINNTE recommendation.</i> <i>If the institution is preparing for cyclical review, include how the planned actions will address the relevant review objective(s).</i>
1.	Programmatic Review and Re-validation of BA (Hons) in Holistic Counselling and Psychotherapy (PG24126)	Registrar, Academic Director, Faculty collaboration. Process commencing January 2022 with a timeline of June 24 for Independent Panel and Submission of documentation to QQI by 25 August 2022.
2.	Learner Deferrals Policy	Review commenced May 2021 by Registrar. Date for completion and review by Academic Board - September 2021.
3.	Learner Complaints Policy	For review during 2021/2022 by Registrar, following Learner Complaints Process completed in September 2021 and subsequent recommendations of Academic Board Sub-committee
4.	Data Protection Policy Records Management and Retention Policy	For review during 2021/2022, following training provided to the Registrar (DPO).

3.2 Reviews planned for Upcoming Reporting Periods

3.2.1 Reviews planned for Next Reporting Period

Unit to be reviewed	Date of planned review	Date of last review
MA in Counselling and Psychotherapy - Programme Design and Development to commence / Extension of Scope to be sought for delivery of Level 9 programme.	April - June 2022	N/A
Diploma in Expressive Arts Therapy <ul style="list-style-type: none"> - Review to be conducted by Programme Development Team - Learning Outcomes - Syllabus - Identify target audience of learners - Accreditation/Recognition options 	May-June 2022	2018
Certificate in Psychosynthesis <ul style="list-style-type: none"> - Review with Programme development Team - Learning Outcomes - Syllabus - Target market - Identify target audience of learners - Accreditation/Recognition options 	June-July 2022	2020
Distance Learning Programmes - review to establish whether this suite of programmes should be developed further.	September-October 2022	

3.2.2 Reviews planned beyond Next Reporting Period

It is envisaged that the reviews for the Upcoming reporting Period may carry over into a further reporting period.

4.0 Additional Themes and Case Studies

ICPPD Response to and Experience of delivering programmes during the Covid-19 pandemic

The realisation in March 2020 that government restrictions would necessitate the delivery of programmes online was met at ICPPD initially with a feeling of incredulity and disbelief that highly

experiential training in Counselling and Psychotherapy could be delivered on a virtual platform. The college management, staff, faculty and learners showed incredible resilience in adapting to the reality of the situation as it became apparent that face-to-face delivery of classes would not resume before the end of the 2019-2020 academic year and the impact would be felt through 2020-2021.

Actions:

Board of Directors and Executive Management Team

I.T. and office resources were made available for faculty and staff who were teaching and working remotely. Communication with all stakeholders was identified as a priority in the period of uncertainty and fear for health and well-being of family and friends. Communication with accrediting and validating bodies to convey the strategies being put in place.

Faculty:

A Teaching and Learning Covid Response Sub-Committee of Academic Board was formed in June 2020 to evaluate the requirements and options for programme delivery and assessment in a virtual learning environment. The remit also included progression implications, particularly implications for Clinical Practice, and tutor training. The Sub-committee reporting to Academic Board formulated a strategic plan for Teaching and Learning for the 2020-2021 Academic Year. It was identified that there would need to be a creative exploration in how to support learners in their online experience and training. Tutor Support Sessions were scheduled on Zoom facilitated by the Academic Director to support tutors professionally and personally.

Learners:

Guidelines were drawn up for learners attending class virtually and teaching strategies utilizing Zoom were explored and documented. A CPD course - "Delivering counselling and psychotherapy to clients online" was developed and made available to all learners on Clinical Placement or preparing for it. Supports available to learners including in-house supervision were utilised to the maximum.

Administration Staff:

Staff Guidelines for working remotely were circulated. Daily Zoom Check-ins were initiated to support staff and maintain connectedness. IT supports were identified and resourced.

Outcome:

At the outset of 2020/2021, classes had been planned for online delivery until January 2021 with face-to-face classes then to resume for the rest of the academic year. As the months progressed and a second wave of Covid-19 took hold, all classes for the Academic Year were held online. This presented considerable challenges for conducting Skills Assessments in particular.

As planning commenced for 2021/2022, an exploration by faculty of the experience of delivering counselling and psychotherapy programmes found that there were some modules that were well-suited to virtual delivery. The rationale for delivering aspects of programmes online was established and timetabling for 2021/2022 provided for a certain amount of virtual delivery.

The response of learners and staff surveyed was that the in-person, experiential delivery of ICPPD programmes is best suited to the face-to-face classroom environment. The group dynamics and connection which is critical to learners' development as trainee counsellors is best established with as much face-to-face interaction as possible. A consistent message from learners in all programmes was the desire that they had to meet each other. This is balanced with the benefits that learners have experience of online classes, in particular travelling time and expense of overnight accommodation for some.

Upholding the ICPPD's learner-centred approach, the college will strive to find the balance of face-to-face and online delivery which best upholds ICPPD's ethos and is aware of not sacrificing the in-person experience for convenience of online. ICPPD is cognisant that the educational landscape has changed immeasurably since Spring 2020. The resilience and adaptability of all college stakeholders and the support of validating and accrediting bodies means that ICPPD is well placed to meet future challenges as they present themselves.