



# INITIAL APPLICATION FOR AUTHORISATION TO USE THE TRUSTED IRELAND INTERNATIONAL EDUCATION MARK: GUIDANCE HANDBOOK FOR PROVIDERS (ELE PATHWAY)



Version 5: February 2025

## **Version History**

Version 5 (February 2025):

- Addition of Appendix Ten: Lesson Plan template for Site Visit
- Addition of Appendix Eleven: Lesson segment observation sheet
- Learner number information clarification – 2023 numbers to be submitted by provider

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## Preface

This guidance handbook is intended to help providers of English language education (ELE) preparing to submit an application to QQI for authorisation to use the TrustEd Ireland mark. The document offers providers a comprehensive description of the application and assessment process. It should be read in conjunction with the following documents:

- [Code of Practice for Provision of Programmes of English Language Education to International Learners](#) (hereafter ELE Code)
- [Statutory Quality Assurance Guidelines for English Language Education Providers](#) (hereafter QA Guidelines for ELE)
- [Policy on Authorisation to Use the International Education Mark](#) (hereafter Policy on Authorisation)

References in this document to the ‘2012 Act as amended’ encompass the Qualifications and Quality Assurance (Education and Training) Act 2012 and the Qualifications and Quality Assurance (Education and Training) (Amendment) Act 2019.

Private/independent ELE providers applying for authorisation to use the TrustEd Ireland mark are required, as private/independent providers engaging with QQI for the first time, to demonstrate to QQI that they meet the due diligence criteria specified in regulations under section 29B(1) of the Qualifications and Quality Assurance (Education and Training) Act 2012 as amended.<sup>1</sup> Private/independent ELE providers applying for authorisation to use the TrustEd Ireland mark are therefore required to complete an application for due diligence assessment, and this will be completed in parallel with their application for authorisation to use the mark. The due diligence assessment process will be managed by the QQI Provider Risk and Governance Division. Information on the due diligence assessment process may be found here: [Due Diligence | Quality and Qualifications Ireland \(qqi.ie\)](#)

To successfully achieve authorisation to use the TrustEd Ireland mark, an ELE provider is required to:

- meet certain requirements established in the 2012 act as amended, which are summarised in section 4 of the ELE Code, General Statutory Requirements (please see [Section B1](#) below);
- demonstrate compliance with the principles and criteria set out in sections 5-10 of the ELE Code under section 61(1A) of the 2012 Act as amended (please see [Section B2.2](#) below);
- demonstrate the suitability of its quality assurance procedures, having regard to and meeting the QA Guidelines for ELE, under section 61(7) of the 2012 Act as amended (please see [Section B2.3](#) below).

This guidance document is intended to be used by ELE providers for the initial application, assessment and authorisation periods which comprise two application windows. The first application window opened on 14 October 2024 and closes on 28 March 2025. The second application window will open in late 2025. Each application window will remain open for 24 weeks, during which time providers will have the opportunity to prepare and submit their application.

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<sup>1</sup>

<https://www.irishstatutebook.ie/eli/2012/act/28/enacted/en/pdf>

Prior to the opening of the first application window, providers are invited to confirm their intention to apply for authorisation to use the TrustEd Ireland mark by completing a **Confirmation of Application** form (please see [Section A2, Step 1](#) below). The Confirmation of Application period for Application Window 1 is from 02-27 September 2024. The Confirmation of Application period does not form part of the 24-week Application Window 1 period. ELE providers who have previously confirmed their intention to apply for authorisation to use the TrustEd Ireland mark in Application Window 1 will be given access to the application portal on QHub on 14 October. (please see [Section A2, Step 2](#) below).

Window 1 application window will close on 28 March 2025, at which point, the QHub portal will close, and no further applications will be accepted. Once an application is submitted, it is envisaged that the assessment process will take 30+ weeks to complete. In general, the assessment process will commence following the closure of QHub to new applications. However, this may commence earlier for ELE providers who submit their application in advance of the closure of the 24-week application window. Regardless of when an application is submitted and the different stages of the assessment process take place, the outcomes of the authorisation process will not be finalised or communicated until all providers applying for authorisation in an application window have undergone full assessment. The announcement of authorisation to use the TrustEd Ireland mark will be made for all authorised ELE and HE providers at the same time. Please see [Section A2 Steps 1-6](#) below for details.

This handbook has two parts. **Part A, Overview of Application and Assessment Process: ELE Pathway**, describes the main elements of the application and assessment process, and **Part B, International Education Mark Application Statement: ELE Pathway**, offers guidance to ELE providers on preparing their application for authorisation to use the TrustEd Ireland mark.

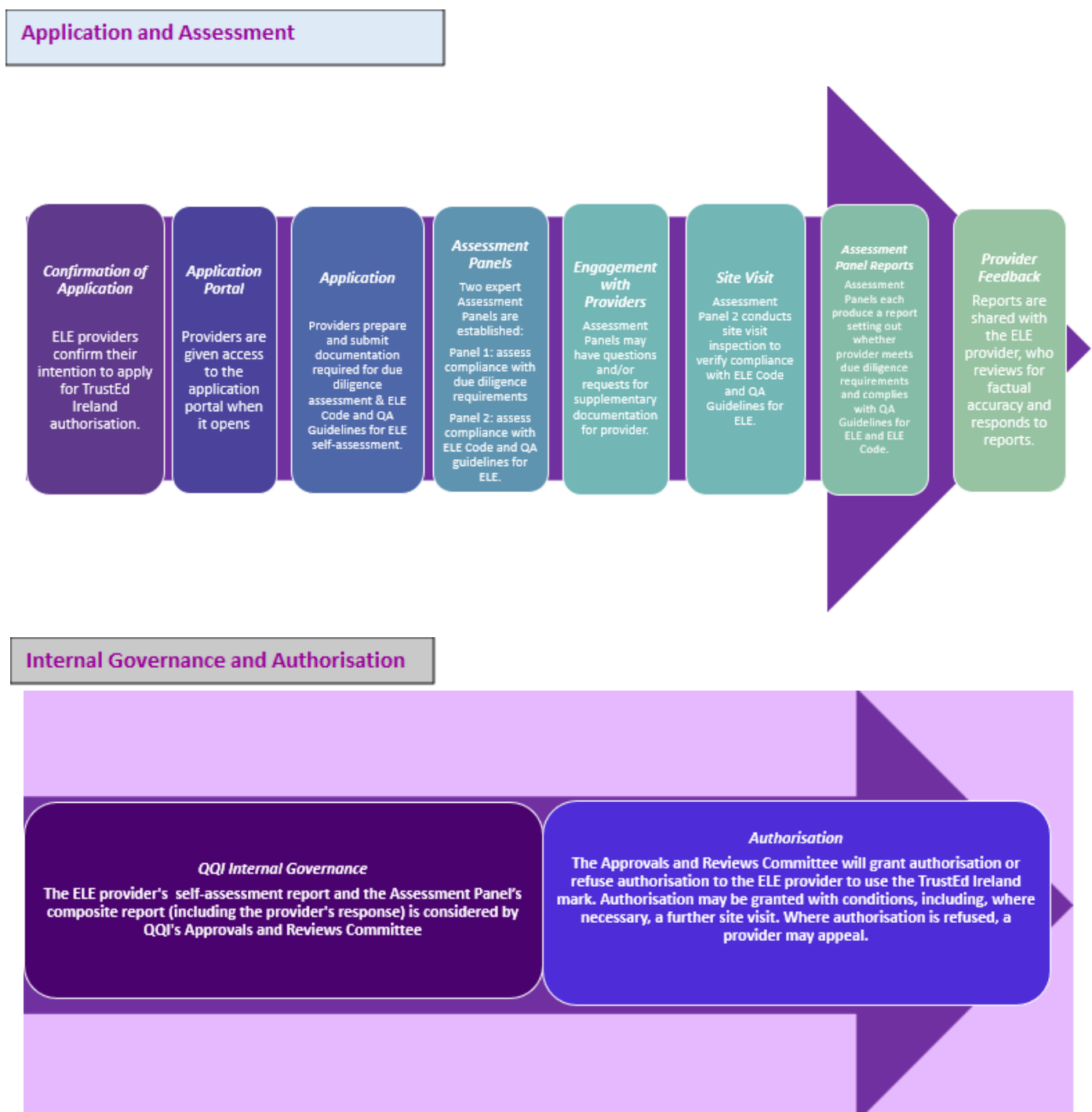
# **Part A**

## **Overview of Application and Assessment Process: ELE Pathway**

## A1. Overview of ELE provider application process

This section describes the process of applying for authorisation to use the TrustEd Ireland mark. There are several stages in the application process for ELE providers, beginning with provider submitting a confirmation of application and ending with the final decision of QQI's Approvals and Reviews Committee to authorise the use of the mark. A summary of these stages is set out in Figure 1 below. A detailed description of each stage of the process follows in [Section A2](#).

**Figure 1: Summary of the application and assessment process**





## A2. Step by step guide to the application process for ELE providers

### Step 1: Confirmation of Application Stage

- There will be two application windows for the purpose of applying for authorisation to use the TrustEd Ireland mark. The first window will open in 2024, and the second window will open in 2025.
- To apply during the first application window in 2024, a provider must confirm its intention to apply via the Confirmation of Application form. QQI will inform ELE providers when the Confirmation of Application form becomes available and confirm the closing date by which it must be submitted. The same confirmation of application process will be followed in the 2025 application window.
- ELE providers will complete the Confirmation of Application form. Please see the IT Guide for details of the online portal<sup>2</sup>.
- During their completion of the Confirmation of Application form, ELE providers will be asked to nominate the individual who will have responsibility for the provider's TrustEd Ireland application process and the individual who will have responsibility for the provider's Due Diligence application process. An ELE provider may also nominate another individual to deputise for a nominee to cover periods of annual leave and sick leave during the application process. The individual(s) will act as the point(s) of contact with QQI and will liaise with the QQI executive throughout the assessment process to facilitate the organisation and smooth running of the process.
- The QQI executive will review the Confirmation of Application form and determine which pathway (higher education or English language education pathway) the provider's application will proceed through.
- QQI will inform the provider's point(s) of contact of the selected pathway. For further information, please see [The Policy on Authorisation](#) section 5.5<sup>3</sup>.
- QQI will confirm with providers the opening and closing dates for the 2024 application window. The period for submitting a Confirmation of Application form will **not** form part of the 24 weeks allowed to providers to submit their applications for authorisation to use the IEM.
- A provider that confirms its intention to apply for TrustEd Ireland authorisation in 2024 will be admitted to the online application portal on QHub when it opens.
- A provider that chooses not to apply in the 2024 application window will have the opportunity to apply in the following application window in late 2025.

### Step 2: Application Stage

- The ELE provider will submit an application to QQI comprising the following:
  - The Due Diligence Application Form. Please see [The Policy on Authorisation](#), section 2.4.1<sup>4</sup>) and the guidance documentation on the due diligence application process: [Due Diligence | Quality and Qualifications Ireland \(qqi.ie\)](#)

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<sup>2</sup> [QHub TrustEd Ireland Application Guide for HE and ELE Providers \(qqi.ie\)](#)

<sup>3</sup> Section 5.5, QQI, *Policy on Authorisation to Use the International Education Mark* (2023): available at: [policy-on-authorisation-to-use-the-international-education-mark\\_0.pdf \(qqi.ie\)](#).

<sup>4</sup> Section 2.4.1, QQI, *Policy on Authorisation to Use the International Education Mark* (2023): available at: [policy-on-authorisation-to-use-the-international-education-mark\\_0.pdf \(qqi.ie\)](#).

- The IEM Application Statement (IEMAS), demonstrating provider compliance with the criteria set out in the ELE Code and the suitability of the provider's quality assurance procedures, having regard to and meeting the criteria set out in the QA Guidelines for ELE. (please see [Section B2](#) below). ELE providers will be asked to submit in the IEMAS dates that are **not** suitable for the site visit.
  - Evidence of payment of application fee, e.g., Electronic Funds Transfer (EFT) or bank receipt.
- The QQI executive will acknowledge receipt of the application. The QQI executive will be able to offer information to the provider about the assessment process but will not act as a consultant for the preparation of the IEMAS, nor will they comment on whether or not the provider is compliant with the principles and criteria set out in the ELE Code, or whether or not the provider is meeting the criteria set out in the QA Guidelines for ELE. Assessment of compliance will uniquely be the role of the Assessment Panel.
- A **specialist ELE consultancy** has been appointed by QQI, following a public procurement process on e-tenders, to conduct the desk-based assessment of an ELE provider's IEMAS and the site visit verification. Each provider will be assigned an Assessment Panel composed of a Lead Assessor and Co-Assessor. The Lead Assessor will be responsible for the desk-based assessment and the Lead and Co-Assessors will carry out the site visit.
- QQI has established an **Internal Review Group (IRG)**, comprising the Heads of the International Education and Provider Governance and Risk Divisions, and the Directors of Corporate Services and Development. The role of the IRG will be to coordinate the different elements of the assessment, i.e., Due Diligence assessment and IEMAS assessment. The IRG will ensure consistency and support ELE provider applications through to the decision stage of the assessment.

### Step 3: Screening Stage

- The IEMAS will be screened by the Assessment Panel for completeness. Should any gaps in the information be identified or further evidence required, QQI will be informed, and they will then make a request to the provider for the required information.
- The ELE provider will have **15 working days** to respond to any gaps identified. When the 15-day period has elapsed, the application will then proceed to the assessment stage. Where, following the request for further information, no response is received from the ELE provider within the **15 working days**, the provider will be deemed to have withdrawn from the process and the application will be withdrawn by QQI. Providers deemed by QQI to have withdrawn at the screening stage will receive a refund of 80% of its application fee.
- In circumstances where a response to the request for further information is received from an ELE provider but it is not complete, the application will then proceed to the assessment stage.
- For information on the circumstances in which an ELE provider may apply for an extension to the established deadlines, please see [Section A5.3](#) below.

- An ELE provider may withdraw from the process at the screening stage. If a provider withdraws during the screening stage, it will be entitled to an 80% refund of its application fee. The provider may then reapply in the next application window in 2025. For further information about the withdrawal process, please see [Section A5.4](#) below.

#### Step 4: Desk-Based Assessment Stage

- The Lead Assessor will conduct a detailed desk-based assessment of the ELE provider's IEMAS. Further information regarding the desk-based assessment can be found in [Section A5](#) below.
- The Lead Assessor may request additional information from the provider in an Outstanding Queries Report. The Co-Assessor will be confirmed for the site visit and the provider will be notified of site visit dates and accommodation needs of Assessment Panel. The provider will have **5 working days** to respond if the site visit dates are not suitable or if there is a perceived conflict with the Co-Assessor and **15 working days** to respond to the request for outstanding queries, confirm accommodation for the Assessors and emergency contact number for the point of contact and submit the draft site visit schedule and provisional lesson schedule for the week of the Site Visit. The assessment will then proceed to the Site Visit Verification Stage.
- Where, following a request for further information, no response is received from the ELE provider, the provider will be deemed to have withdrawn from the process and the application will be withdrawn by QQI. Providers deemed by QQI to have withdrawn during this stage will not receive any refund of their application fee. For information about the circumstances in which an ELE provider may apply for an extension to the established deadlines, please see [Section A5.3](#) below.
- In circumstances where a response is received from an ELE provider, but it is not complete, the application will then proceed to the Site Visit Verification Stage.
- The Lead and Co-Assessor will meet to discuss the desk-based report findings and to plan the site visit.

#### Step 5: Site Visit Verification Stage

- The Lead Assessor and Co-Assessor will carry out a site visit to the ELE provider to verify provider compliance with the ELE Code and to demonstrate the suitability of its quality assurance procedures, having regard to and meeting the QA Guidelines for ELE.
- The site visit will take place at the provider's main centre, including temporary classrooms,<sup>5</sup> and will be 1.5-3 days in duration, depending on the size of the ELE provider, which will be determined by the QQI executive.
- The provider will receive a minimum of **20 working days'** notice of the site visit.

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<sup>5</sup> Definition of 'centre' in the context of ELE: an ELE provider's main centre is defined as the premises where the main administrative and academic functions and teams are located. The main centre may operate out of one or more buildings within the same town or city but an ELE provider may only have one main centre within one town or city. Administrative and academic functions and teams must be replicated in each building as appropriate to learner and staff needs. A temporary centre is defined as a centre that is used at certain times of the year e.g., during the summer, whether within the same town or city or in another town or city in the state. Administrative and academic functions and teams must be located at temporary centres as appropriate to learner and staff needs. Temporary classrooms are defined as spaces that are suitable for temporary ELE provision as required. Administrative and academic functions and teams appropriate to learner and staff needs must either be located in the same building as the temporary classrooms, or at the main centre. Temporary classrooms must be located within a 1km distance from the main centre. Any centre that is located in another town or city to the main centre is defined as a separate centre.

- Notification of the site visit date(s) and a site visit schedule template will be sent to the provider along with the Outstanding Queries Report (please see [Step 4](#) above).
- The ELE provider will acknowledge receipt of notification of the site visit date(s), Co-Assessor and the site visit schedule template, The provider will have **5 working days** to respond if the site visit date is not suitable or if there is a perceived conflict with the Co-Assessor and **15 working days** to respond to the request for outstanding queries, confirm accommodation for the Assessors and emergency contact number for the point of contact and submit the draft site visit schedule and provisional lesson schedule for the week of the Site Visit.

*Please see the site visit schedule template in Appendix Seven, sample 1.5 and 2-day site visit schedules in Appendix Eight, details of meetings and activities the ELE provider should include in the site visit schedule in Appendix Nine, and a list of documents to be inspected during the site visit in Appendix Six.*

- The QQI executive will confirm the site visit schedule with the Lead Assessor, who may suggest changes to the schedule.
- Suggested changes will be sent by the QQI executive to the provider, who will confirm the amendments within **5 working days**.
- A meeting may be arranged with the ELE provider to confirm the site visit schedule.
- The Site Visit will include:
  - Tour of premises. An inspection of the premises will take place throughout the Site Visit.
  - Meetings with the Senior Management Team (SMT), key members of the administrative team(s), including administrative, accommodation, IT, sales and marketing and activity staff; and key members of the academic team.
  - Separate focus group meetings with representative teachers/teacher trainers (representing the range of qualifications and experience of the teaching/training team), administrative, marketing, accommodation and activities teams (depending on the size of the provider), and learners (representing the diversity of the learner body and range of programmes offered).
  - Phone calls with representative homestay accommodation providers, representing the range of accommodation provided (if applicable). A visit to a student residence may also be scheduled.
  - If a closed group is enrolled during the Site Visit, the provider and Assessment Panel may wish to include a focus group meeting with group leaders.
  - Quality monitoring observations: 20-minute observations of lesson segments, representing all types of lessons delivered at the ELE provider on the day(s) of the site visit. The Assessment Panel will aim to observe a minimum of 60% of all teachers and a complete range of the current teaching/training team in terms of qualifications and experience. If the centre is large or the site visit takes place during the peak summer period, it may not be possible to observe 60% of all teachers, but the Assessment Panel will aim to observe as many teachers as possible during the site visit. The Assessment Panel will select lessons to observe from the teaching schedule for the week of the site visit.
  - Review of documentation not submitted as part of the IEMAS, e.g., teaching schedules for each teacher for the week of the site visit, copies of academic and administrative staff qualifications, employment contracts and job

descriptions, learner attendance records, completed class work, assessment records and agent contracts. Please see Appendix Six for a list of documents to be inspected during the site visit.

Follow up meetings may be requested by the Assessment Panel during the site visit, as needed, and a meeting slot should be included on the schedule template, timetabled towards the end of the site visit, for this purpose. Members of the senior management team and key members of the administrative and academic teams should be available to meet with the Assessment Panel for the duration of the site visit.

- Any additional documentation that has been reviewed and requested during the site visit should be uploaded to QHub. The deadline for uploads will be confirmed by the Assessors during the site visit and this deadline will be up to a maximum of **5 working days** following the site visit.
- The site visit will conclude with a feedback meeting, where a summary of the site visit findings will be communicated to the provider. This meeting will be with the senior management team, as well as any other members of staff that the provider wishes to invite. The aim of this meeting is to discuss findings from meetings, observations and documentation inspected during the visit. It is not to discuss the outcome of the desk-based assessment, nor any final decisions regarding authorisation.

Following the desk-based assessment and site visit verification, an assessment report will be completed, comprising the findings and conclusions drawn from the desk-based assessment and the site visit verification. The Lead Assessor will be responsible for the completion of the report, with contributions from the Co-Assessor. The report will be moderated by the ELE consultancy Head of Quality Assurance.

#### Step 6: Decision Stage

- The assessment report will be uploaded to QHub.
- The QQI executive will ensure that the Assessment Panel findings are backed by adequate and identifiable evidence, and that the assessment report provides information in a succinct, consistent and readily accessible form.
- The assessment report will be finalised and signed off by the QQI Internal Review Group (IRG).
- The assessment report will be sent to the provider to conduct a factual accuracy check and to formally respond to the assessment report. The ELE provider's response must be submitted within **15 working days** of receipt of the report.
- The QQI executive will consider the provider response to the factual accuracy check and make minor amendments to the assessment report, if necessary.
- The QQI executive will prepare the assessment documentation, including the findings from the Due Diligence Assessment, for submission to QQI's Approvals and Reviews Committee.
- The final assessment report and the ELE provider's response will be submitted to the Approvals and Reviews Committee (ARC) for a final decision.

### A3. Approvals and Reviews Committee outcomes

There are three possible outcomes to an ELE Provider's application, and they will be expressed as one of the following: authorised to use the TrustEd Ireland mark, authorised to use the TrustEd Ireland mark with conditions, or not authorised to use the TrustEd Ireland mark.

#### A3.1 Outcome One: Authorised to use the international education mark

- The Approvals and Reviews Committee decides that the ELE provider is authorised to use the TrustEd Ireland mark.
- QQI will notify the ELE provider and the panel of the QQI Committee's decision.
- QQI will update the Irish Register of Qualifications (IRQ) to reflect the fact that the ELE provider is authorised to use the TrustEd Ireland mark.
- QQI will publish the Approvals and Reviews Committee's decision, the final report and the ELE provider's response.

#### A3.2 Outcome Two: Authorised to use the international education mark with conditions

- The Approvals and Reviews Committee decides that the ELE provider is authorised to use the TrustEd Ireland mark with conditions, including timelines for the fulfilment of these conditions.
- QQI will notify the ELE provider and the panel of the QQI Committee's decision.
- QQI will update the Irish Register of Qualifications (IRQ) to reflect the fact that the ELE provider is authorised to use the TrustEd Ireland mark.
- QQI will publish the Approvals and Reviews Committee's decision, the final report and the ELE provider's response.
- Where an ELE provider fails to comply with the conditions of authorisation by the specified deadlines or fails to engage with QQI, the provider's authorisation to use the TrustEd Ireland mark will be withdrawn.

#### A3.3 Outcome Three: Not authorised to use the international education mark

- The Approvals and Reviews Committee decides that the ELE provider is not authorised to use the TrustEd Ireland mark.
- QQI will notify the provider and the panel of the QQI Committee's decision.
- A provider may appeal a decision using the statutory appeal process. For further information, please see QQI's appeals process<sup>6</sup>. The appeals process must be fully completed before a provider may reapply for authorisation to use the TrustEd Ireland mark.
- ELE providers may reapply for authorisation to use the TrustEd Ireland mark in the next available application window

### A4. Assessors

QQI has appointed a specialist ELE consultancy, through a public procurement process on e-tenders, to carry out the desk-based assessments and site visit verifications of ELE

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<sup>6</sup> <https://www.qqi.ie/appealing-a-decision-made-by-qqi>



providers who apply for authorisation to use the TrustEd Ireland international education mark. An assessment panel of two Assessors from the consultancy assessment team will be established to assess each ELE provider's International Education Mark Application Statement (IEMAS) and to carry out the site visit verification. In each case, the ELE provider will have the opportunity to comment on the proposed composition of the Assessment Panel to ensure there are no potential conflicts of interest. QQI will have final approval over the composition of each Assessment Panel.

The two-member Assessment Panel will consist of a Lead Assessor and Co-Assessor, both of whom will be suitably qualified and experienced. All Assessors will be trained to carry out assessments of ELE providers who apply to QQI for authorisation to use the TrustEd Ireland mark.

#### A4.1 The Assessors' roles

The Assessors all have expertise in English language education, as well as experience in the assessment of quality assurance of language centres.

##### Lead Assessor

The Lead Assessor will be responsible for the overall management of the assessment, including the site visit, and will be responsible for conducting the desk-based assessment and writing the assessment report.

##### Co-Assessor

The Co-Assessor will coordinate with the Lead Assessor before and during the site visit and will contribute to the writing of the assessment report.

#### A4.2 Criteria for membership of the assessment panel

The principles of competence and independence will be exercised when confirming the assessment panel.

##### Competence

The provider and its stakeholders must have confidence that the assessment is being conducted by competent ELE experts who have appropriate levels of experience and knowledge, and who can offer an informed, expert opinion on the provider's demonstration of compliance with the ELE Code and the suitability of the provider's quality assurance procedures, having regard to and meeting the criteria set out in the QA Guidelines for ELE.

##### Independence

An Assessment Panel must arrive at its decision in an independent manner, free of influence from the provider and of other interests. Stakeholders must have confidence that the assessment has been conducted by independent ELE experts. It is important that the Assessment Panel engages in the assessment process without any conflict of interest, or the perception of any conflict of interest. It is in the provider's interest that its assessment be conducted in a transparent manner by independent ELE experts, and that it validates the ELE provider's compliance with the ELE Code and the suitability of the provider's quality assurance procedures, having regard to and meeting the criteria set out in the QA Guidelines for ELE. No communication should be made by an ELE provider with the Assessors at any stage during the process, apart from the meetings during the site visit. All communications will be managed by QQI.

### A4.3 Conflicts of Interest

The Assessment Panel selected for each assessment will be asked to declare any potential conflict of interest prior to confirmation. The ELE provider will also be asked to declare any potential conflicts of interest that members of the Assessment Panel may have with the provider.

Where a potential conflict arises during the process, an ELE provider must declare this to the QQI executive as soon as possible. QQI may make adjustments to the Assessment Panel membership in such cases. QQI will have final approval over the composition of each assessment panel.

Independence could be compromised, or be perceived to be compromised, if Assessors were to:

- hold a current or recent appointment with the ELE provider (e.g., existing or recent consultant);
- hold a membership, or recent membership, of the QQI Board or any of the sub-committees of QQI;
- be currently engaged in the ELE sector in Ireland, e.g., be language centre owners, directors, managers, directors of studies/academic managers, teachers/trainers, consultants of individual providers, or be otherwise currently engaged/employed by an ELE provider;
- have any other potential conflict of interest with the ELE provider.

## A5. Assessment of International Education Mark Application Statement (IEMAS)

### A5.1 Assessment Panel considerations and questions

In conducting the desk-based assessment, the Lead Assessor will consider the general approach taken by the provider to the self-assessment process. To assist the Lead Assessor in this task, the ELE provider should include a brief description of the IEMAS preparation process, confirming the author(s) of the report; whether external expertise was sought, and if so, in what capacity; what internal and external stakeholders were consulted with; the manner in which the IEMAS was approved by the ELE provider at an institutional level (specifying, in particular, whether this was at senior management level, through the provider's governance structures or both); and the extent to which the IEMAS has been disseminated within the ELE provider's community.

In considering the ELE provider's IEMAS, the Lead Assessor will ask the following questions:

- Does the IEMAS clearly establish which principles and criteria in the ELE Code and which criteria in the QA Guidelines for ELE apply to the ELE provider, and which do not (and why they do not, if relevant)?
- Does the IEMAS clearly establish which ELE Code criteria the ELE provider complies with fully and which QA Guidelines criteria the ELE provider fully meets?
- Does the evidence submitted adequately demonstrate full compliance with the ELE Code criteria and the suitability of the provider's quality assurance procedures by having regard to and meeting QA Guidelines for ELE criteria?



- Does the IEMAS clearly establish which ELE Code criteria the ELE provider complies with partially and which QA Guidelines for ELE criteria the provider partially meets?
- Does the evidence submitted adequately demonstrate partial compliance or partial suitability of quality assurance procedures?
- In cases where the ELE provider is partially compliant with certain ELE Code criteria or partially meets certain QA Guidelines for ELE criteria, has the ELE provider established realistic plans to achieve full compliance of ELE Code criteria and/or fully meet QA Guidelines for ELE criteria, and within the permitted QQI timeframes, where required? (please see Sections [B2.2.2](#) and [B2.3.2](#) below)
- Are the ELE provider's plans to achieve full compliance of ELE Code criteria and to fully meet QA Guidelines for ELE criteria sufficient to frame appropriate conditions of authorisation to use the international education mark?

This initial analysis sets the groundwork for the pre-site visit Assessment Panel meeting, allowing the panel to begin the process of identifying issues and areas that may require further investigation or clarification during the site visit.

### A5.2 Site Visit

The site visit will be conducted by the Lead Assessor and Co-Assessor and the number of days for the visit will be determined, depending on the size of the ELE provider. Once the dates and the visit schedule have been confirmed, arrangements will be made for the site visit. Accommodation for both Assessors will be reserved and all accommodation costs will be met by the provider<sup>7</sup>. Details of the reservation of accommodation should be submitted by the provider along with the site visit schedule. The Assessors should be provided with a lockable meeting room at the centre for the duration of the site visit. This room may also be used for meetings during the site visit, if suitable. Refreshments and lunch for Assessors (whether on-site or off-site) should be provided by the provider during the site visit. Off-site lunches should be booked within a 5-minute walking distance from the centre and should be paid for by the provider.

### A5.3 Extensions

ELE providers are expected to meet the deadlines as determined by QQI. However, individual ELE providers may experience certain difficulties, for example, bereavement, serious illness or a medical emergency, which may adversely affect their ability to meet particular deadlines. QQI is committed to making appropriate provisions for providers who may need special consideration in such circumstances, while at the same time maintaining the rigour and fairness of the overall TrustEd Ireland authorisation process.

An ELE provider that experiences difficulties in meeting the set deadlines is expected to advise QQI of any circumstances that affect its application for TrustEd Ireland authorisation. Requests for extensions due to extenuating circumstances are treated confidentially. All requests for extensions due to extenuating circumstances must be submitted as closely as

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<sup>7</sup> Providers must reserve accommodation for the Lead and Co-Assessors in a hotel that is, at a minimum, rated 3-star. Each Assessor should have their own ensuite room with a desk and reliable Wi-Fi, and the reservation must include breakfast. The accommodation should be within easy walking distance to the provider, unless this is not possible, e.g., if the provider is based outside an urban area. In the case that a provider is based outside an urban area, the provider will be responsible for providing a return transfer from the accommodation to the centre throughout the site visit. If there is no suitable hotel accommodation available, providers should reserve equivalent accommodation at a bed and breakfast, i.e., three-star equivalent at a minimum, with ensuite room for each Assessor with a desk and reliable Wi-Fi. Providers will not be required to pay for any additional expenses incurred by Assessors, e.g., room service or laundry services.

possible to the time the circumstances occurred. Providers are required to identify the outcome they are requesting in order to enable them to attend to the extenuating circumstances. There are two permitted outcomes:

- An extension of a deadline will be permitted for a period of **up to 72 hours** following the submission deadline. This can be granted by the QQI executive.
- An extension of a deadline for a period of **up to 10 working days**. This can be granted by the QQI Internal Review Group (IRG).

In the case that an extension is granted, the composition of the Assessment Panel may change; in this case, providers will be noted of this change and conflict of interest procedures will be followed, as outlined above in [Section A4.3](#).

#### A5.4 Withdrawing from the TrustEd Ireland application and assessment process

ELE providers may withdraw from the application process at any point from before the completion of screening stage up to the end of the assessment phase.

- The withdrawal will only be processed if it is submitted through the application portal by the ELE provider.
- Where an ELE provider withdraws the application following submission of the application, and prior to the screening stage, it will receive a refund of 80% of the application fee.
- Where an ELE provider withdraws the application before the end of the screening phase, it will receive a refund of 80% of the application fee.
- Where an ELE provider withdraws at any time following the screening phase, it will not receive a refund.
- If the ELE provider withdraws the application, it may reapply in the next application window and/or when there is capacity for applications to be processed.
- The ELE provider will be required to pay the full application fee for any subsequent application for authorisation to use the international education mark.

## A6. Assessment report

### A6.1 The purpose of the assessment report

Following the desk-based assessment process, and the site visit verification of the ELE provider's IEMAS, the Assessment Panel will produce a draft assessment report setting out the findings and recommendations of the panel. The Lead Assessor, with support from the Co-Assessor, will comment on the provider's self-assessment of compliance with the ELE Code and QA Guidelines for ELE in the IEMAS and will draw conclusions on the provider's compliance. The draft report will be prepared by the Lead Assessor, with contributions from the Co-Assessor, and agreed by both members of the Assessment Panel.

The draft report will be moderated through the ELE consultancy's internal QA procedures. Based on the findings in the draft report, the Assessment Panel will reach one of three recommendations:

1. The ELE provider complies with the ELE Code and demonstrates the suitability of its QA procedures with no conditions.
2. The ELE provider complies with the ELE Code and demonstrates the suitability of its QA procedures with conditions.

3. The ELE provider does not comply with the ELE Code or demonstrate the suitability of its QA procedures.

#### A6.2 Timing for the assessment report

The draft assessment report will be sent to the provider for a factual accuracy check (using a QQI template designed for this purpose). A formal response to the report, on the ELE provider's headed paper, will also be sought. The provider will be given **15 working days** to comment on the factual accuracy of the draft report and provide a formal response to the report.

#### A6.3 Factual accuracy check

The ELE provider will be given an opportunity to check the factual accuracy of the draft assessment report. It is important that the provider is aware that the accuracy checking process should be precisely that; it is not an opportunity to re-write the report. The ELE provider will be invited to identify possible inaccuracies and suggest amendments for consideration by the Assessment Panel. The ELE provider will be given **15 working days** to comment on the factual accuracy of the draft report.

#### A6.4 Provider response

The ELE provider will be invited to provide a formal response to the draft assessment report (ideally no longer than 2 pages in length) that will be published as an appendix to the assessment report. The provider's response should be submitted within **15 working days** and will be considered by QQI's Approvals and Reviews Committee alongside the final assessment report.

#### A6.5 The Irish Register of Qualifications (IRQ)

When an ELE provider is authorised to use the TrustEd Ireland mark, this will be referenced on the IRQ. The IRQ will also include a list of all the ELE provider's programmes that have been assessed as part of the authorisation assessment process (please see [B1.1.3](#)).

#### A6.6 Publication of the assessment report

QQI will publish the assessment report and the provider's response (optional). QQI will supply pdf versions of the assessment report, which may be published on the provider's website and shared with internal and external stakeholders.

**Part B**

**Preparation of International  
Education Mark Application  
Statement (IEMAS): ELE Pathway**

## B1. Statutory requirements (section 4 of the ELE Code)

To successfully achieve authorisation to use the international education mark, an ELE provider is expected to:

- meet certain requirements established in the 2012 Act as amended, which are summarised in section 4 of the ELE Code (please see [Section B1.1](#) below)
- demonstrate compliance with the principles and criteria set out in sections 5-10 of the ELE Code (please see [Section B2.2](#) below)

and

- demonstrate the suitability of its quality assurance procedures, having regard to and meeting the criteria set out in the QA Guidelines for ELE, under s61 (7) of the 2012 Act as amended, (please see [Part B section 2.3](#) below)

### B1.1 Statutory requirements: ELE Code, Section 4

Certain requirements relating to the TrustEd Ireland mark in the 2012 Act as amended are intended to establish the eligibility of an ELE provider to apply for authorisation to use the international education mark. In these instances, the ELE provider is required to demonstrate that it meets these requirements. There are three such eligibility requirements:

- 1.1.1 ELE providers must have established quality assurance (QA) procedures under section 28 of the 2012 Act as amended (ELE Code section 4.1).*

Provider quality assurance procedures will be verified as part of the assessment of the ELE provider's IEM Application Statement (IEMAS), which self-assesses quality assurance procedures to demonstrate compliance with the criteria in the ELE Code and the suitability of its quality assurances by having regard to and meeting the criteria in the QA Guidelines for ELE.

- 1.1.2 ELE providers must have established access, transfer and progression procedures under section 56 of the 2012 Act as amended. (ELE Code section 4.2)*

Access, transfer, and progression procedures will be verified as part of the assessment of the IEMAS, specifically the provider's self-assessment of compliance with the ELE Code section 4.2.

- 1.1.3 All ELE providers are in compliance with ELE Code requirements regarding the alignment of programmes with the Common European Framework of Reference for Languages (CEFR), and under section 79 of the 2012 Act as amended, information on programmes, including programmes leading to external proficiency examinations, offered by ELE providers authorised to use the international education mark is provided to QQI to populate the Irish Register of Qualifications (IRQ) database (ELE Code section 4.3)<sup>8</sup>*

Programme alignment with the CEFR will be verified as part of the Assessment Panel's assessment of the IEMAS, specifically the provider's self-assessment of compliance with the

ELE Code section 7, and of meeting the criteria set out in the QA Guidelines for ELE, section 2.4. This will be further verified during the Site Visit.

### B1.2 Specified requirements

The legislation also requires that a code of practice (in this instance the ELE Code) shall specify requirements relating to the arrangements for the protection of learners; the collection of fees from enrolled learners; requirements in relation to the tax compliance of a provider; and the establishment of policies and procedures in writing by a provider for the purposes of the management of human resources.<sup>9</sup> These requirements are referenced in the ELE Code in section 4.5 and will be addressed in the following manner:

- *Arrangements for the Protection of Learners* – general arrangements for the protection of the interests of learners are embedded throughout the Principles and Criteria set out in sections 5-10 of the ELE Code, and in the QA Guidelines for ELE. All ELE providers are required to meet this statutory requirement through demonstrating compliance with the ELE Code and demonstrating the suitability of its quality assurance procedures by having regard to and meeting the criteria set out in the QA Guidelines for ELE. In addition, ELE providers are also required to participate in the new statutory Protection of Enrolled Learners (PEL) scheme, which is underpinned by the Learner Protection Fund (please see section 4.5.2 and Appendix Two of the ELE Code). The latter requirement is also referenced in criteria 9.1 (b) (vii) and 10.2 (c) of the ELE Code. Please see details on the Protection of Enrolled Learners scheme here: [Protection of enrolled learners | Quality and Qualifications Ireland \(qqi.ie\)](#)
- *Collection of fees from enrolled learners* – this statutory requirement is addressed directly in criterion 4.5.1 and section 10 of the ELE Code. All ELE providers are required to meet this statutory requirement through demonstrating compliance with section 10 of the ELE Code.
- *Tax compliance of ELE providers/Establishment of policies and procedures in writing by a provider for the purposes of the management of human resources (HR)* – ELE providers will meet these requirements through demonstrating to QQI that they meet certain due diligence criteria concerning governance, finance, and compliance with the law under section 29(B) of the 2012 Act as amended. Please see section 4.4, and Appendix One of the ELE Code, and the information on due diligence assessment on the QQI website here: [Due Diligence | Quality and Qualifications Ireland](#).

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<sup>9</sup> Section 60(6) of the 2012 Act as amended.

### B1.3 Summary of statutory requirements and actions for ELE providers

Requirement	Action by ELE Provider	Stage in Process	Location of Actions
<b>Quality Assurance procedures</b>	Demonstrate compliance with ELE Code criteria and suitability of provider's quality assurance procedures by having regard to and meeting criteria set out in QA Guidelines for ELE.	Provider's self-assessment of ELE Code compliance and demonstration of suitability of quality assurance procedures.	IEMAS submitted through IEM Application Portal.
<b>Statutory ATP procedures</b>	Demonstrate compliance with ELE Code.	ELE provider's self-assessment of ELE Code compliance.	IEMAS submitted through IEM Application Portal.
<b>General arrangements for protecting learners</b>	Demonstrate compliance with arrangements for learner protection embedded in ELE Code principles and criteria and in QA Guidelines for ELE criteria.	ELE provider's self-assessment of ELE Code compliance and suitability of quality assurance procedures.	IEMAS submitted through IEM Application Portal.
<b>Participation in statutory PEL scheme and Learner Protection Fund</b>	Collaborate with QQI in implementation of PEL scheme and Learner Protection Fund at the appointed time (post-authorisation).	N/A	N/A
<b>Collection of fees from enrolled learners</b>	Demonstrate compliance with section 10 of ELE Code.	ELE provider's self-assessment of ELE Code compliance.	IEMAS submitted through IEM Application Portal.
<b>Tax compliance</b>	Demonstrate compliance in context of statutory due diligence scheme.	Assessment of ELE provider compliance with due diligence regulations, carried out in parallel with assessment of compliance with ELE Code criteria and suitability of quality assurance procedures.	Due diligence assessment carried out on IEM Portal on QHub.

## B2. International Education Mark Application Statement (IEMAS)

### B2.1 Purpose of the IEMAS

The demonstration by an ELE provider of its compliance with the criteria set out in sections 4-10 of the ELE Code, and the suitability of its quality assurance procedures, by having regard to and meeting the criteria set out in the QA Guidelines for ELE, is the most substantial part of the authorisation process, and is applicable to all categories of ELE providers. Compliance with statutory requirements, the ELE Code, and demonstrating the suitability of its quality assurance procedures by having regard to and meeting the criteria set out in the QA Guidelines for ELE, will assure stakeholders, including international learners, of the provider's commitment to ensuring that its international learners receive a quality learning experience.

An ELE provider who applies for authorisation to use the TrustEd Ireland mark must demonstrate compliance with the ELE Code criteria, and the suitability of its quality assurance procedures by having regard to and meeting the QA Guidelines for ELE criteria. This is done through the undertaking of a self-assessment, involving appropriate members of the ELE provider's community identified by the ELE provider itself. The main output of this self-assessment process is the IEM Application Statement (IEMAS), using a template provided by QQI. The self-assessment process enables the ELE provider's community to determine the degree to which it complies with the relevant criteria in the ELE Code and to what extent it meets the relevant criteria in the QA Guidelines for ELE. The IEMAS enables the ELE provider to communicate the conclusions it reaches. The conclusions may also lead to a series of planned actions by the provider, based on the findings, which may be presented in the IEMAS as evidence of the provider's intent to achieve full compliance with the criteria in the ELE Code and to fully meet the criteria in the QA Guidelines at a determined future date, as permitted by QQI.

The IEMAS is the core document used by the Assessment Panel in determining whether an ELE provider is compliant with the ELE Code and whether it demonstrates the suitability of its quality assurance procedures by having regard to and meeting the QA Guidelines for ELE criteria. It provides the Assessors with the documented evidence, or references to evidence, to support claims that the ELE provider complies with the criteria set out in the ELE Code and demonstrates the suitability of its quality assurance procedures by having regard to and meeting the criteria set out in the QA Guidelines for ELE. The IEMAS should therefore be clearly structured and directly focused on the criteria set out in both documents.

The subsequent site visit carried out by the Assessment Panel verifies the conclusions drawn by the provider in the IEMAS and drawn by the Lead Assessor in the assessment of the IEMAS, regarding the extent to which the provider complies with the principles and criteria in the ELE Code, and the suitability of its quality assurance procedures, demonstrated by having regard to and meeting the criteria in the QA Guidelines for ELE.

### B2.2 Self-assessment of compliance with ELE Code principles and criteria

The ELE Code comprises criteria to be met by ELE providers under the following categories:

- General Statutory Requirements
- Requirements for premises
- Operational, risk, and human resources management
- Programme design
- Supports and services for international learners
- Marketing and recruitment



- Enrolment, fees, refunds, and subsistence

All the categories above are addressed in sections 4-10 of the ELE Code. Section 4 sets out general statutory requirements. Each of the six categories in sections 5-10 is described by an overarching principle and supported by a series of criteria. The criteria set out in each of the sections 4-10 are summarised in the IEMAS template. The criteria in the IEMAS template are for illustrative purposes only. ELE providers should always refer to the criteria in sections 4-10 of the ELE Code when undertaking their self-assessment of compliance with the criteria. Each criterion in the ELE code will be assessed as 'Fully Compliant', 'Partially Compliant' or 'Not Compliant' by the Assessment Panel.

### **B2.2.1 Applicability of ELE Code principles and criteria to individual ELE providers**

The level of adherence to the ELE Code's principles, and the extent of compliance with the associated criteria, will vary from ELE provider to ELE provider, depending on their individual circumstances and context. Not all principles and criteria will be applicable to every ELE provider. The following are some examples taken from the ELE Code where the inapplicability of certain criteria to particular ELE providers may occur:

#### **8.3 Learners requiring entry visas and/or immigration permissions**

Criterion 8.3 (a) will not be applicable to providers who do not recruit learners who require entry visas and/or immigration permissions.

#### **8.4 Accommodation**

Criteria 8.4 (a)-(e) will not be applicable to providers who do not offer accommodation to learners.

#### **8.5 Safeguarding**

Criteria 8.5 (a)-(c) will not be applicable to providers who do not offer programmes to learners who are minors.

Where a particular criterion, or part of a criterion, does not apply to an ELE provider, the provider should state this clearly in its IEMAS by selecting the 'N/A' option in the relevant section, with supporting evidence, where appropriate.

### **B2.2.2 Demonstrating compliance with applicable principles and criteria in the ELE Code**

Demonstrating compliance with the ELE Code's applicable criteria should be addressed in the following manner. The ELE provider should:

- specify that it fully complies with a criterion, briefly describing how it does so, and providing links/references to supporting evidence in each case, such as provider policies, procedures, ELE programmes, organisational charts, published website information or other relevant documentation.

or

- specify that it partially complies with a criterion, where permitted, briefly describing how it does so (with supporting evidence, as described above) and setting out planned actions, with realistic deadlines, which fall within QQI requirements, to achieve full compliance with the criterion.

For the purpose of authorisation of an ELE provider to use the TrustEd Ireland mark, QQI expects full compliance with all applicable criteria on the part of the provider. Ideally, full compliance with all applicable criteria will be in place at the time of an ELE provider's application. However, there may be circumstances which prevent a provider from achieving full compliance at the time of its application, such as in the following examples taken from the ELE Code:

## **ELE Code, Section 6: Operational, Risk and Human Resources Management**

### **Criterion 6.6.1 Staff recruitment**

*b) The ELE provider ensures that academic and administrative staff have sufficient expertise and experience to fulfil their designated roles, thereby enhancing the teaching and learning environment for learners and staff.*

### **Criterion 6.6.3 Academic staff qualifications**

*a) All teachers are suitably qualified and experienced to fulfil their designated role.*

It may be the case that some teachers do not meet all the qualification requirements set out in Appendix Four of the ELE Code, e.g., in relation to the assessed teaching practice requirement, at the time of the provider's application. In this case, the IEMAS must include a timeline for all teachers to have met all the requirements set out in Appendix 4 of the ELE Code. Criterion 6.6.3 (a) must be fully met by the time the provider comes to submit their mid-cycle update report eighteen months following authorisation in order to continue to be authorised to use the TrustEd Ireland mark.

*b) All academic managers are suitably qualified and experienced to fulfil their designated role.*

It may be the case that an academic manager is in the process of completing an English language teaching programme to meet the requirements set out in Appendix Four of the ELE Code at the time of the application. In this case, the IEMAS must include a realistic timeline for the successful completion of the programme. When the provider comes to submit their mid-cycle update report eighteen months following authorisation, evidence of partial/full completion of Criterion 6.6.3 (b) must be given, and this criterion must be fully met by the time the provider comes to submit their next IEMAS three years following authorisation in order to continue to be authorised to use the TrustEd Ireland mark.

### **Criterion 6.7 Operational academic management**

*(e) Each teacher's schedule has a maximum of thirty sixty-minute contact teaching hours\* per week at all times of the year.*

*(f) Teaching schedules of a maximum of thirty sixty-minute contact teaching hours per week are fully supported by well-designed curricula, syllabuses and course programmes/schemes of work, which are clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR).*

This requirement will apply to all teaching staff who are recruited from the time of the ELE provider's submission of their Confirmation of Application form. This requirement will not

apply to teaching staff who were recruited prior to the provider's submission of their Confirmation of Application form and who have contracts with a teaching schedule that exceeds thirty sixty-minute contact teaching hours per week. A demonstration of fuller compliance with Criteria 6.7 (e) and (f) (in relation to the teaching schedule) will be required by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation, and full compliance with this criterion will be required by the time the provider comes to submit their IEMAS for the second three-year authorisation period in order to continue to be authorised to use the TrustEd Ireland mark. Please also see **Programme Design** below regarding alignment with the CEFR.

## **ELE Code, Section 7: Programme Design**

### **Criterion 7.1 Curriculum, syllabus, and course programme/scheme of work design**

*(a) There is a curriculum, syllabus and course programme/scheme of work framework in place that is developed and managed by suitably qualified and experienced senior academic staff.*

*(b) The curriculum, syllabus and course programme/scheme of work design is clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR), with clearly defined learning outcomes that are articulated in 'can do' descriptors.*

### **Criterion 7.2 Assessment systems**

*(a) There is an assessment framework in place that is developed and managed by suitably qualified and experienced senior academic staff.*

*(b) The assessment framework is clearly and closely aligned to the intended learning outcomes of each ELE syllabus/course programme, expressed in 'can do' descriptors from, or adapted from, the CEFR.*

It may be the case that the senior academic team has not completed full alignment with the CEFR of all the programmes and assessments offered by the ELE provider at the time of submission of the provider's IEMAS. In this case, the IEMAS should include a realistic timeline for the completion of the alignment of all ELE programmes and assessments to the CEFR. This criterion must be fully complied with for the programmes submitted in the initial IEMAS by the time the provider comes to submit their mid-cycle update report eighteen months following authorisation in order to continue to be authorised to use the TrustEd Ireland mark. Please also see **6.6.1** and **6.6.3** above.

***Please note that all ELE programmes and assessments developed by the ELE provider's academic management team following authorisation to use the TrustEd Ireland mark must be submitted to QQI for authorisation before they are included on the Irish Register of Qualifications (IRQ).***

## **ELE Code, Section 9: Marketing and Recruitment**

### **Criterion 9.2 Partnerships with education agents, recruitment partners and consultants**

*(c) ELE providers ensure that any contractual arrangements entered with education agents, recruitment partners and consultants incorporate the principles of the London Statement. Existing agreements or contracts with education agents, recruitment partners and consultants that do not incorporate these principles shall be amended appropriately within two years of the date on which the ELE provider is authorised to use the IEM.*

*(d) The contract between the ELE provider and education agent, recruitment partner or consultant includes a termination clause in instances where the partner does not comply with the principles of the London Statement or is found to have acted in an unethical fashion to the detriment of international learners.*

*(e) ELE providers have in place a process for reviewing, at least once every two years, the activities of education agents, recruitment partners and consultants to ensure that they are operating within the required parameters of the ELE Code and the London Statement.*

It may be the case that not all contracts with education agents, recruitment partners and consultants incorporate the principles of the London Statement by the time the provider submits their IEMAS. Providers will be required to demonstrate full compliance with this criterion within two years of the date the provider is authorised to use the TrustEd Ireland mark. Ideally, providers should demonstrate full compliance with this criterion by the time they come to submit their mid-cycle update report eighteen months following authorisation. However, demonstration of further development in the fulfilment of compliance will be acceptable. This criterion must be fully complied with at the end of the initial three-year authorisation cycle when the provider comes to submit their next IEMAS in order to continue to be authorised to use the TrustEd Ireland mark.

In circumstances such as the examples above, QQI can authorise use of the TrustEd Ireland mark with conditions, to be complied with within a realistic timeline, and as required by QQI, as outlined above. However, apart from the criteria outlined above, where partial compliance will be permitted for the first IEMAS submission, QQI considers that there must be a minimum level of full compliance with all applicable criteria from ELE providers to obtain authorisation to use the TrustEd Ireland mark. Please see [Part B sections 3.2-3.7](#) below and the IEMAS report template for details.

## B2.3 Self-assessment of the suitability of quality assurance procedures

Section 2 of the QA Guidelines for ELE sets out the criteria to be met by ELE providers to demonstrate the suitability of their quality assurance procedures by having regard to and meeting the criteria set out in the QA Guidelines for ELE. There are six sections in section 2 of the QA Guidelines as follows:

- Section 2.1: Organisational Structures
- Section 2.2: Management and Governance of Quality Assurance
- Section 2.3: Academic Management Structures
- Section 2.4: Programme Design
- Section 2.5: Supports and Services for International Learners
- Section 2.6: Staff Supports and Development

The criteria set out in each section are summarised in the IEMAS template. These criteria are for illustrative purposes only. ELE providers should always refer to the criteria in section 2 of the QA Guidelines for ELE when undertaking their self-assessment of the suitability of their quality assurance procedures by having regard to and meeting the criteria set out in the Guidelines. Each criterion in the QA Guidelines for ELE will be assessed as 'Fully met' 'Partially met' or 'Not met' by the Assessment Panel.

### B2.3.1 Applicability of the criteria to individual ELE providers

The level of demonstration of the suitability of the ELE provider's quality assurance procedures by having regard to and meeting the QA Guidelines for ELE criteria, and the extent to which each associated criterion is deemed as suitable, will vary from ELE provider to ELE provider, depending on their individual circumstances and context. Not all criteria will be applicable to every provider. The following are some examples taken from the QA Guidelines for ELE where the inapplicability of certain criteria to a particular ELE provider may occur:

#### **2.3.10 Online provision**

Criterion 2.3.10 (a)-(d) does not apply to an ELE provider that does not offer online programmes.

#### **2.4.3 Teacher training centres and programme design**

Criterion 2.4.3 (i)-(iii) does not apply to an ELE provider that does not offer teacher training programmes.

#### **2.5.2 Learners requiring entry visas and/or immigration permissions**

Criterion 2.5.2 (a)-(c) does not apply to providers who do not recruit learners requiring entry visas and/or immigration permissions.

Where a particular criterion, or part of a criterion, does not apply to an ELE provider, the provider should state this clearly in its IEMAS by selecting the 'N/A' option in the relevant section, with supporting evidence, where appropriate.

### B2.3.2 Demonstration of the suitability of an ELE provider's quality assurance procedures

The demonstration of the suitability of an ELE provider's quality assurance procedures by having regard to and meeting applicable criteria in the QA Guidelines for ELE should be addressed in the IEMAS in the following manner. The ELE provider should

- specify that a criterion is fully met, briefly describing how it is and providing links/references to supporting evidence, e.g., institutional policies, procedures, or published website information. Where documentation is not publicly available, relevant material, e.g., ELE programme syllabuses, should be included as links in the IEMAS;

or

- specify that a criterion is partially met, where permitted, briefly describing how it is, with supporting evidence, as described above, and setting out planned actions, with realistic timelines that meet QQI requirements, to fully meet the criterion.

For the purposes of authorisation of an ELE provider to use the TrustEd Ireland mark, QQI expects the ELE provider to meet all applicable criteria. Ideally, all applicable criteria will be fully met at the time of an ELE provider's application. However, there may be circumstances which prevent a provider from fully meeting criteria at the time of its application, such as in the following examples taken from the QA Guidelines for ELE:

## **QA Guidelines for ELE, Section 2.3: Academic Management Structures**

### **Academic staff qualifications**

#### **2.3.1 Qualifications and experience**

*The academic staff profile meets the needs of the organisation, and all members of the academic staff are suitably qualified, and experienced, where required, for their role.*

#### **Teachers' qualifications**

It may be the case that some teachers do not meet all the qualifications requirements set out in Appendix Four of the ELE Code, e.g., in relation to the assessed teaching practice requirement, at the time of the provider's IEMAS submission. In this case, the IEMAS must include a realistic timeline for all teachers to have met all the requirements set out in Appendix 4 of the ELE Code. Criterion 2.3.1 in relation to teacher qualifications must be fully met by the time the provider comes to submit their mid-cycle update report eighteen months following authorisation in order to fully demonstrate the suitability of the provider's quality assurance procedures, and therefore continue to be authorised to use the TrustEd Ireland mark.

#### **Academic managers' qualifications**

It may be the case that an academic manager is in the process of completing an English language teaching programme leading to an accepted award in order to meet the requirements set out in Appendix Four of the ELE Code at the time of the IEMAS submission. In this case, the IEMAS must include a realistic timeline for the successful completion of the programme. When the provider comes to submit their mid-cycle update report eighteen months following authorisation, evidence of partial/full completion of Criterion 2.3.1 in relation to academic manager qualifications must be given. This criterion must be fully met by the time the provider comes to submit their next IEMAS three years following authorisation in order to fully demonstrate the suitability of the provider's quality assurance procedures and therefore continue to be authorised to use the TrustEd Ireland mark.

### **CEFR Alignment**

#### **2.3.6 Operational academic management**

*(c) Teaching schedules of a maximum of thirty contact teaching hours per week are fully supported by well-designed curricula, syllabuses, and schemes of work, which are closely aligned to the Common European Framework of Reference for Languages (CEFR).*

#### **2.3.7 Teaching and Learning**

*(c) Lesson planning and teaching approaches reflect the ELE provider's commitment to the close alignment of the provider's curriculum, syllabus and course programme to the CEFR.*

#### **2.3.8 Lesson planning**

*(a) Teachers plan lessons with clear intended learning outcomes, with reference to the curriculum, syllabus, course programme/schemes of work, learner needs and course materials, and planning is clearly and closely aligned to the CEFR.*

#### **2.3.9 Lesson delivery**

*(a) Lessons are delivered with clear reference to the syllabus, learner needs and CEFR 'can do' descriptors, as well as course materials.*

## **QA Guidelines for ELE, Section 2.4: Programme Design**



#### **2.4.1 Curriculum and syllabus design**

(a) Curriculum and syllabus design is completed and managed by suitably qualified and experienced senior academic staff, with learner needs and interests in mind.

(b) *Curriculum and syllabus design is clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR), with clearly defined learning outcomes, which are articulated in 'can do' descriptors.*

##### **2.4.1.1 Curriculum design**

*Curriculum design considers: (ii) approach(es) to be taken, e.g., Communicative Approach, Task-Based Learning, aligned to the CEFR 'can do' descriptors.*

##### **2.4.1.2 Syllabus design**

*Syllabus design considers, as appropriate: (i) intended learning outcomes, clearly and closely aligned to the CEFR 'can do' descriptors.*

#### **2.4.2 Assessment systems**

(a) *The provider's assessment framework*

*(ii) is clearly and closely aligned to the intended learning outcomes of each programme, expressed in 'can do' descriptors from, or adapted from, the CEFR;*

It may be the case that the senior academic team has not completed full alignment with the CEFR of all the programmes and assessments offered by the ELE provider at the time of submission of the IEMAS. In this case, the IEMAS should include a realistic timeline for the completion of the alignment of all ELE programmes and assessments to the CEFR. The provider will be required to submit evidence of a clear and close alignment to the CEFR of all programmes and assessments that are submitted in the first IEMAS as part of their mid-cycle update report eighteen months following authorisation to use the TrustEd Ireland mark in order to fully demonstrate the suitability of a provider's quality assurance procedures, and therefore continue to be authorised to use the mark. Please also see **Academic staff qualifications** above.

***Please note that all ELE programmes and assessments developed by the ELE provider's academic team following authorisation to use the TrustEd Ireland mark must be submitted to QQI for authorisation before they are included on the Irish Register of Qualifications (IRQ).***

Please note that when demonstrating the suitability of a provider's quality assurance procedures by having regard to and meeting the criteria in the QA Guidelines for ELE, reference may be made in the IEMAS to criteria that have already been described and demonstrated as part of the ELE provider's demonstration of compliance with the ELE Code.

## B3. Determination by QQI of an application for authorisation by an ELE provider to use the IEM

QQI is required to determine an application from an ELE provider for authorisation to use the TrustEd Ireland international education mark under section 61(7)(a) of the 2012 Act as amended by

- (a) assessing the compliance of the provider with the ELE Code;
- (b) assessing the suitability of the provider's quality assurance procedures, having regard to the statutory QA Guidelines for ELE.

### B3.1 Compliance with the ELE Code

To determine whether it is satisfied that an ELE provider is in compliance with the ELE Code, QQI must establish a reasonable and transparent threshold standard for measuring compliance that is both achievable by, and challenging to, the provider. Therefore, for the purpose of satisfying QQI that an ELE provider is in compliance with the criteria set out in the ELE Code in order to be authorised to use the TrustEd Ireland mark, the ELE provider must:

**be fully compliant with all applicable criteria**

**or**

**be fully compliant with certain applicable criteria;**

**and**

**be partially compliant with certain applicable criteria, where permitted, with realistic timelines set, as required by QQI, in order for the provider to be fully compliant with the criteria.**

There are certain applicable criteria that an ELE provider must fully comply with at the time of the submission of their IEMAS in order to be authorised to use the TrustEd Ireland mark. Other applicable criteria may be partially complied with at the time of the submission of the IEMAS, such as in the examples outlined above in [B2.2.2, Demonstrating compliance with applicable principles and criteria in the ELE Code](#), where a provider is prevented from achieving full compliance at the time of their initial application. In these cases, full compliance with these criteria will be required by the time the provider submits their mid-cycle update report eighteen months following authorisation, by the time the provider submits their next IEMAS at the end of the first three-year authorisation cycle, as set out above in [B2.2.2](#), or within a period determined by QQI, in order for the provider to continue to be authorised to use the TrustEd Ireland mark. In order to ensure that the assessment process is implemented reasonably, should the Assessment Panel find that an ELE provider virtually complies with certain criteria where minor modifications are required, the Assessment Panel could conclude that a provider may be authorised to use the TrustEd Ireland mark, subject to specified conditions that must be met within a timeframe prescribed by QQI.

ELE providers who do not fully comply with the ELE Code principles and criteria, but who do meet requirements in relation to partial compliance, with the aim for full compliance, whether within a period determined by QQI, by the time of their submission of their mid-cycle update report eighteen months following authorisation, or by the time of their submission of the next



IEMAS, depending on QQI requirements, will be authorised to use the TrustEd Ireland mark with conditions.

Where they are reasonable, QQI will set conditions on the basis of the ELE provider's plans for compliance presented by the ELE provider in its IEMAS. There will be an upper time limit for achieving full compliance with the ELE Code, which will be set at three years from the date of the granting of authorisation to use the TrustEd Ireland mark. The three-year deadline will not necessarily be applied to all conditions of authorisation, and some criteria will be required to be met either by the time the provider submits their mid-cycle update report eighteen months following authorisation, or by within a shorter timeframe, as required by QQI. QQI will consider the ELE provider's own plans for achieving compliance, the nature of the criteria to which conditions have been applied, and the practicalities of monitoring, when setting timelines for the ELE provider to meet conditions of authorisation to use the TrustEd Ireland mark.

Please see Appendix One, Compliance with ELE Code criteria, which outlines where full compliance is required, where partial compliance will be permitted, with realistic timelines set out by the ELE provider for full compliance, meeting the required QQI deadlines, as outlined above in section B2.2.2, and where partial compliance is permitted in the case where minor modifications are needed to be made within prescribed QQI timeframes.

### B3.2 Assessment of the Suitability of an ELE Provider's Quality Assurance Procedures

To determine the suitability of an ELE provider's quality assurance procedures by the demonstration of the provider having regard to and meeting the applicable criteria set out in the QA Guidelines for ELE, QQI must establish a reasonable and transparent threshold standard that is both achievable by, and challenging to, the provider. Therefore, for the purpose of satisfying QQI that an ELE provider meets the criteria set out in the QA Guidelines for ELE in order to be authorised to use the TrustEd Ireland mark, the ELE provider must either:

**fully meet all applicable criteria**

or

**fully meet certain applicable criteria**

and

**partially meet certain applicable criteria, with realistic timelines set, as required by QQI, in order for the provider to fully meet the criteria.**

There are certain applicable criteria that an ELE provider must fully meet at the time of the submission of their IEMAS in order to demonstrate the suitability of its quality assurance procedures and therefore be authorised to use the TrustEd Ireland mark. Other applicable criteria may be partially met at the time of the submission of the IEMAS, such as in the examples outlined above in [B2.3.2, \*Demonstration of the suitability of an ELE provider's quality assurance procedures\*](#), where a provider is prevented from fully meeting these criteria at the time of the application. In these cases, the criteria must be fully met by the time the provider submits their mid-cycle update report eighteen months following authorisation, by the time the provider submits their next IEMAS at the end of the first three-year authorisation cycle, as set out above in [B2.3.2](#), or within a period determined by QQI, in order for the provider to continue to be authorised to use the TrustEd Ireland mark.

In order to ensure that the assessment process is implemented reasonably, should the Assessment Panel find that an ELE provider virtually meets certain criteria where minor modifications are required, the Assessment Panel could conclude that a provider may be authorised to use the TrustEd Ireland mark, subject to specified conditions that must be met within a timeframe prescribed by QQI.

ELE providers who do not fully meet the QA Guidelines for ELE criteria, but who do partially meet certain criteria, with the aim of fully meeting them, whether within a period determined by QQI, by the time of their submission of their mid-cycle update report eighteen months following authorisation, or by the time of their submission of the next IEMAS, depending on QQI requirements, will be authorised to use the TrustEd Ireland mark with conditions.

Where they are reasonable, QQI will set conditions on the basis of the ELE provider's plans to fully meet criteria as presented by the ELE provider in its IEMAS. There will be an upper time limit for fully meeting criteria, which will be set at three years from the date of the granting of authorisation. The three-year deadline will not necessarily be applied to all conditions of authorisation, and some criteria will have to be met by the time the provider submits their mid-cycle update report eighteen months following authorisation, or by within a shorter timeframe, as required by QQI. QQI will consider the ELE provider's own plans for meeting criteria, the nature of the criteria to which conditions have been applied, and the practicalities of monitoring, when setting timelines for the ELE provider to meet conditions of authorisation to use the TrustEd Ireland mark.

Please see Appendix Two, Meeting QA Guidelines for ELE criteria, for the criteria where full meeting will be required, where partial meeting will be permitted, with realistic timelines set out by the ELE provider for full compliance, meeting the required QQI deadlines, as outlined above in section B2.3.2, and where partial meeting is permitted in the case where minor modifications are needed to be made within a timeframe prescribed by QQI.

### [B3.3 Decision on authorisation](#)

While providers may conclude in their IEMAS that they have fully complied with certain ELE Code criteria and fully met certain QA Guidelines for ELE criteria, the Assessment Panel may find evidence, either during the desk-based assessment of the IEMAS and supporting documentation, and/or during the site visit, that this is not the case.

The final assessment will always lie with the Assessment Panel's decision. The final report is moderated and signed off by QQI senior management in the Internal Review Group (IRG). This report is then approved by QQI governance, the Approvals and Reviews Committee (ARC).

## B4. Writing the IEM Application Statement (IEMAS)

### B4.1 Format of the IEMAS

Providers should complete the IEMAS report template.

The IEMAS template consists of the following sections:

#### **1 Introduction**

#### **2. Methodology**

#### **3. Self-Assessment of Compliance with ELE Code Criteria**

- 3.1. General Statutory Requirements
- 3.2. Principle and Criteria: Requirements for Premises
- 3.3. Principle and Criteria: Operational, Risk and Human Resources Management
- 3.4. Principle and Criteria: Programme Design
- 3.5. Principle and Criteria: Supports and Services for International Learners
- 3.6. Principle and Criteria: Marketing and Recruitment
- 3.7. Principle and Criteria: Enrolment, Fees, Refunds and Subsistence

#### **4. Self-Assessment of the Suitability of Quality Assurance Procedures, Having Regard to and Meeting QA Guidelines for ELE Criteria**

- 4.1. Organisational Structures
- 4.2. Management and Governance of Quality Assurance
- 4.3. Academic Management Structures
- 4.4. Programme Design
- 4.5. Supports and Services for International Learners
- 4.6. Staff Supports and Development

The emphasis in the IEMAS is best placed on evaluating how effectively the ELE provider complies with the criteria in the ELE Code and demonstrates the suitability of its quality assurance procedures by having regard to and meeting the criteria in the QA Guidelines for ELE. It is advisable for the provider to set out their own view of their effectiveness under each criterion and make clear the basis for that view, including references/links to supporting documentation to demonstrate their effectiveness. Demonstration of compliance with criteria and the suitability of quality assurance procedures should be written in the form of statements that are expected to be an accurate and true reflection of a provider's processes and procedures.

All criteria that apply to the ELE provider must be addressed in the IEMAS and the provider should provide clear evidence of compliance with the ELE Code criteria (Section 3 of the IEMAS) and of the suitability of quality assurance procedures by having regard to and meeting the criteria in the QA Guidelines for ELE (Section 4 of the IEMAS). Failure to do so may result in refusal of authorisation to use the TrustEd Ireland mark. In the instance where a criterion is not applicable, this should be noted in the IEMAS, along with a clear explanation, including evidence, if applicable. Finally, in the instance where a criterion is in

development, the plans to implement the criterion should be clearly outlined by the provider, along with a realistic timeline plan for completion, as outlined above in [B3.1](#) and [B3.2](#).

In preparing its IEMAS, the ELE provider should

- address the requirements for authorisation to use the TrustEd Ireland mark clearly and succinctly, namely compliance with applicable criteria in the ELE Code, and demonstration of the suitability of quality assurance procedures by having regard to and meeting applicable criteria in the QA Guidelines for ELE;
- ensure that statements made in the IEMAS are supported with clearly presented evidence to demonstrate how what is stated is known and can be verified;
- ensure that the Assessment Panel can easily access documentation;
- meet the needs of its primary audience (ELE provider community, Assessment Panel, QQI senior management and QQI Approvals and Reviews Committee) in the demonstration of the provider's compliance with the ELE Code and of the suitability of its quality assurance procedures by having regard to and meeting criteria in the QA Guidelines for ELE.

While there is no minimum number of words suggested, QQI recommends that ELE providers should draft an IEMAS that does not exceed a total of 8,000 words and that the providers endeavour to meet the suggested word counts in each section of the IEMAS, exclusive of links, references, tables and appendices.

## B4.2 General guidance on preparing the International Education Mark Application Statement (IEMAS)

### Section 1: Introduction

The introduction to the IEMAS should briefly set out the institutional context of the ELE provider, with a brief summary of the provider's background, and information on the provider's centre(s) in the state, as well as centres operated by the ELE provider outside the state, as applicable. Reference should be made to all affiliations, e.g., if the provider is part of a franchise or larger company, as well as to accreditations, recognitions, centre authorisations (e.g., teacher training, examination) and memberships of associations or organisations, with links/references to supporting documentation. The ELE provider's educational philosophy and mission (and vision and core values, as appropriate) should be outlined. Strategic aims and objectives of the provider should also be set out in the introduction, with links/references to supporting documentation, as appropriate.

### Dates not suitable for site visit

Providers should put dates that are **not** suitable for the site visit during the assessment period, i.e., up to nine months following the submission of the IEMAS e.g., dates when there are no students or when key members of staff are not available, and the reason why in each case. Please note that site visits may take place during peak periods.

### ELE programmes and learner week numbers

Providers should complete the table in the IEMAS template, listing all ELE programmes offered, with programme length, in the case of programmes not operated on a rolling enrolment basis, awards, if applicable (e.g., proficiency examinations and teacher training), and the number of learner weeks for each programme for the previous calendar year (January-December) before the submission of the provider's Confirmation of Application

e.g., for a Confirmation of Application submitted in 2024, the aggregate learner week numbers for each centre should apply to the 2023 calendar year. Please see Appendix Three, Definition and calculation of learner weeks.

### **ELE programmes nationality and learner week numbers**

Providers should complete the table with learner nationality (in alphabetical order) and corresponding number of learner weeks for the calendar year prior to the submission of the Confirmation of Application, e.g., if the Confirmation of Application is submitted in 2024, learner week numbers should be for the 2023 calendar year. Providers should include all categories of international learners, both EU/EEA/Swiss and non-EU/EEA/Swiss. Providers should **not** include Irish/Great Britain/Northern Ireland nationals in this calculation.

### **Non-ELE programmes (further education and training; higher education)**

Providers should complete the table in the IEMAS, outlining any non-ELE programmes, such as FET or HE programmes, offered, and setting out the total number of learners, for the full academic year prior to the provider's Confirmation of Application submission, i.e., for a Confirmation of Application submitted in 2024, the programmes and student numbers/weeks should apply to the 2022-2023 academic year.

### **Non-ELE programmes nationality**

Providers should complete the table with learner nationality (in alphabetical order) and corresponding number of learners for the full academic year prior to the submission of the Confirmation of Application, e.g., for a Confirmation submitted in 2024, the programmes and learner numbers/weeks should apply to the 2022-2023 academic year.

### **Other services offered**

Providers should describe all other services offered to international learners, such as accommodation, airport transfers and activity programmes. Links/references to supporting documentation should be submitted, as appropriate.

### **Organisational structure**

Providers should include an organisational chart(s) in the IEMAS, as an appendix. This should include each specific role in the centre and reporting lines. A clear and concise description of the organisational structure should be given, with reporting lines. In the case of providers with multiple centres in the state, separate organisational charts for each centre should be included, along with the overall organisational chart, as appropriate, and a description of the organisational structure in each case, with reporting lines. In the case of ELE providers with centres outside the state, a separate organisational chart of the whole company should be included, with reporting lines. Links/appendices to job descriptions for each role should be submitted. Providers should complete the staff lists in Appendix One of the IEMAS template.

***Please note: if the staffing chart submitted in the IEMAS needs to be updated for the Site Visit inspection, the provider should have a copy ready for the Assessment Panel on their arrival at the centre and should submit an electronic copy to QQI following the Site Visit.***

## Section 2: Methodology

In this section of the IEMAS, ELE providers should give a brief overview of the self-assessment process that has been undertaken by the provider. This should identify which departments/functions within the ELE provider have been primarily involved in leading the self-assessment process and in drafting the IEMAS, and whether a dedicated team was established to oversee the process, with staff roles identified. It should also state whether external consultancy advice has been sought in the preparation of the IEMAS. If so, the type of consultancy arrangements should be described, including the extent of this consultancy's input into the self-assessment process. It should briefly describe the level of engagement with the self-assessment process across the ELE provider as a whole, including, as appropriate, any engagement with learners and other internal and external stakeholders. The overview of the methodology should set out how the ELE provider approved the IEMAS through its management and governance processes.

## Section 3: Self-Assessment of Compliance with ELE Code Criteria

In this section of the IEMAS, the ELE provider is required to demonstrate compliance with applicable criteria set out in the **ELE Code, sections 4-10**.

The provider should describe in sufficient detail how each applicable criterion is complied with and whether the ELE provider is fully or partially compliant with each of the applicable criteria. If a criterion is partially complied with, the provider should set out realistic plans for achieving full compliance, meeting QQI requirements, where applicable.

Providers should follow the headings in the IEMAS, using the headings below to describe compliance, with links/references to documentation or website pages, as required, to support statements and descriptions in each case. Descriptions should be clear, concise and succinct, and providers should aim to help the primary audience (ELE provider community, Assessment Panel, QQI senior management and QQI's Approvals and Reviews Committee) gain a clear understanding of how quality assurance and learner protection procedures are developed and managed at all levels across the organisation. ELE providers should state when a criterion is not applicable, stating why it is not applicable, with supporting evidence, as required. Providers should clearly describe operations at each centre in the state, as applicable. When completing each section of the IEMAS, providers should refer, as relevant, to related areas below in **Section 4: Self-Assessment of QA Guidelines for ELE Criteria**.

*Please see Appendix Four, ELE Code: suggested examples to demonstrate compliance with criteria.*

*This document compiles the suggestions made in the webinars for providers.*

### 3.1 General Statutory Requirements (ELE Code section 4)

#### Access, transfer, and progression (section 4.2)

Providers should describe procedures in place to help learners access, transfer, and progress to and from programmes, taking into account the needs and interests of international learners. In the context of ELE, examples of access, transfer and progression may include progression from one CEFR level to another, either with the same ELE provider or a different one, or progression from an ELE provider, following the successful completion of a programme, to a programme of further or higher education. For learners from EU states, an example of access, transfer and progression may include the use of the 'Europass'.



Providers should demonstrate compliance with reference/links to supporting documentation. Documentation may include, but is not limited to, the following: ATP policy; link/reference to ATP procedures and pathways on website (e.g., CEFR, exit tests from other ELE providers, proficiency exams); link/reference to ATP procedures and pathways in brochure; link/reference to ATP procedures and pathways in student and staff handbooks

### **3.2 Principle and Criteria: Requirements for Premises (ELE Code section 5)**

The ELE provider is required to demonstrate compliance with all criteria in the ELE Code section 5 relating to premises. Providers should demonstrate compliance with criteria in relation to all centres in the state, including temporary classroom spaces<sup>10</sup>, with links/references to supporting documentation.

Criteria (i) and (ii) are legal requirements, while criteria (iii)-(x) are requirements related to the protection and well-being of learners and staff at the centre. For each criterion, providers should describe how each one is complied with, with links/references to supporting documentation, such as planning permission, building plans, images, figures, ratios, and numbers, as appropriate.

### **3.3 Principle and Criteria: Operational, Risk and Human Resources Management (ELE Code section 6)**

The ELE provider is required to demonstrate compliance, or partial compliance, in the case of criteria 6.6.3 (a) and (b), and 6.7 (e) and (f), with all applicable criteria in the ELE Code section 6 relating to operational, risk and human resources, with supporting documentation to demonstrate compliance.

Providers should submit the data management policy and describe the systems in place for the management and monitoring of the security, back up and restricted access, as required, of data on the school management system. The GDPR policy should be submitted and procedures for compliance with GDPR legislation should be described. (6.1 (a)-(d)).

Providers should submit describe how clear distinctions are made between corporate and academic areas of governance. A clear description of the academic governance committee members and the committee's role, or the provider's alternative arrangement, such as the use of external ELE expertise, should be included. The structure, management and monitoring of learner representation should be described. Details of committee meetings, including aims, format, frequency, staff roles involved and record keeping procedures, should be described, and meeting records for the previous six months prior to the submission of the IEMAS should be submitted. (6.2 (a)-(d)).

The risk assessment policy should be submitted. Risk assessment plan(s) and procedures should be described. The risk register for the current calendar year should be submitted. A change and crisis management policy document should be submitted and change and crisis management systems should be described. The systems for monitoring and reviewing risk management, change management and crisis management policies and procedures should

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<sup>10</sup> Definition of 'centre' in the context of ELE: an ELE provider's main centre is defined as the premises where the main administrative and academic functions and teams are located. The main centre may operate out of one or more buildings within the same town or city, but an ELE provider may only have one main centre within one town or city. Administrative and academic functions and teams must be replicated in each building as appropriate to learner and staff needs. A temporary centre is defined as a centre that is used at certain times of the year e.g., during the summer, whether within the same town or city or in another town or city in the state. Administrative and academic functions and teams must be located at temporary centres as appropriate to learner and staff needs. Temporary classrooms are defined as spaces that are suitable for temporary ELE provision as required. Administrative and academic functions and teams appropriate to learner and staff needs must either be located in the same building as the temporary classrooms, or at the main centre. Temporary classrooms must be located within a 1km distance from the main centre. Any centre that is located in another town or city to the main centre is defined as a separate centre.

be described, with links/references to supporting documentation. Sample meeting records for six months prior to the submission of the IEMAS should be submitted (6.3 (a)-(b) and 6.4).

The provider should describe any partnerships and collaborations, e.g., with other ELE providers, HE providers, accommodation providers and activity providers. Procedures to carry out due diligence, approve, monitor, and review all partnerships and collaborations should be described. Links/references to agreements/contracts should be submitted. All potential conflicts with partners should be described, as well as procedures to declare these potential conflicts to stakeholders with links/references to supporting documentation. (6.5 (a)-(f)),

The provider should describe the staff recruitment policy and procedures, and terms and conditions, including current salary scales for all roles and any benefits offered. Links/references to related documentation, including template contracts and job descriptions for each role in the organisation should be submitted. (6.6.1 (a)-(b)-6.6.2 (a)-(e)).

***Please note: all current staff contracts, job descriptions, CVs and copies of qualifications will be inspected during the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Four, ELE Code: suggested examples to demonstrate compliance with criteria.***

Providers should refer to the organisational chart(s) and staffing list(s) when demonstrating full or partial compliance with criteria 6.6.3 (a)-(b), related to academic staff qualifications, as well as timelines in place to achieve full compliance with these criteria, if applicable.

Providers should describe the overall operational academic management, including numbers of academic staff members per centre, ratios of academic manager to academic staff members and learners, and academic manager<sup>11</sup> duties and schedules, including the typical number of hours per week in an academic manager's schedule dedicated to teaching, to demonstrate compliance with criteria. Sample teaching schedules for 6 months prior to the submission of the IEMAS should be submitted. 6.7 (a)-(e). For criterion 6.7 (e), providers must demonstrate during the Site Visit that all teachers who are recruited from the time of the provider's submission of their Confirmation of Application form have contracts that stipulate a maximum of thirty sixty-minute contact teaching hours per week. Providers should describe their plan to achieve fuller compliance of criterion 6.7 (e) by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation, and full compliance by the time the provider comes to submit their IEMAS for the second three-year authorisation period.

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<sup>11</sup> For the purpose of the ELE Code, an academic manager is defined as a member of staff who is responsible for academic management at an ELE provider. This may mean management of an academic department or management of a part, or parts, of an academic department, such as academic administration, teacher training, teacher development, young learners and teens, groups and examinations. Academic manager roles/titles may include, but are not limited to, the following: Principal, Head of School, Head of Education, Director of Education, Director of Studies, Academic Director/Manager, Assistant Director of Studies, Young Learner and Teens Coordinator/Manager, Group Coordinator/Manager, Examinations Coordinator/Manager, Head/Director of Teacher Training, Head/Director of Teacher Development. In each case, the academic manager is suitably qualified and experienced to fulfil their designated role. Depending on the size of the provider, there may be one or more than one academic manager, but there must always be a suitably qualified and experienced academic manager employed at the centre with responsibility for teacher development. (Please see requirements for academic managers in Appendix Four of the ELE Code)



***Providers must plan to demonstrate full compliance with criterion 6.6.3 a) and partial/full compliance with criterion 6.6.3 b) by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation. Providers must plan to demonstrate full compliance with criterion 6.6.3 b) by the time the provider comes to submit their IEMAS for the second three-year authorisation period in order to continue to be authorised to use the TrustEd Ireland mark.***

***Providers must plan to demonstrate partial/full compliance with criterion 6.7 (e) by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation. Full compliance with criterion 6.7 (e) will be required by the time the provider comes to submit their IEMAS for the second three-year authorisation period in order to continue to be authorised to use the TrustEd Ireland mark.***

***Criterion 6.7 (f), the requirement to have teaching schedules of thirty sixty-minute contact teaching hours per week fully supported by a clear and close alignment to the CEFR, may be partially complied with for the initial IEMAS submission as providers may not yet have achieved full alignment of all programmes with the CEFR by the time they come to submit their initial IEMAS. This criterion must be fully complied with by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation (please see section 3.4 below). This criterion may be cross referenced to section 4.3 (QA Guidelines for ELE section 2.3.6 (c)) below.***

Providers should submit the grievance policy and describe the internal grievance systems in place for staff: procedures, process, communication lines and accountability, with reference/links to supporting documentation, as required. A description of procedures in place to escalate the grievance to an external and independent body if internal processes do not achieve a mutually accepted resolution should be included, as well as a description of the external body make-up and grievance procedures. The procedures should include a description of how the state-appointed authority, i.e., the Workplace Relations Commission, is brought into the process if required. (6.8 (a)-(b)).

***Records of staff grievances and Workplace Relations Commission records will be inspected as part of the site visit.***

***Please see Appendix Six, Documents inspected during the site visit and Appendix Four, ELE Code: suggested examples to demonstrate compliance with criteria.***

### **3.4 Principle and Criteria: Programme Design (ELE Code section 7)**

Providers are required to demonstrate compliance, or partial compliance, as permitted, with all criteria in the ELE Code section 7 relating to programme design, with supporting documentation to demonstrate compliance/partial compliance.

Providers should describe the curriculum framework in place: the process for the development, management, monitoring, review and updating of the curriculum, syllabus, and course programme/scheme of work framework. The project management of the CEFR alignment project should be described. A description of role of the project team responsible for the CEFR alignment project and for the development, management, monitoring and updating of the programme framework should be given, and these duties should also be

included in each relevant member of staff's job description. A description of the process whereby the curriculum, syllabus and course programmes/schemes of work development and updates are approved by the academic governance committee, or external ELE expert(s), as appropriate, should be given, and details of committee meetings, including aims, format, frequency, staff roles involved and record keeping procedures, should be described. Sample records for six months prior to the submission of the IEMAS should be submitted (7.1 (a) - (e)).

Providers should describe the process for the development, management, monitoring and updating of the assessment framework in place, with details of CEFR alignment. A description of the role of the member(s) of staff responsible for the development, management, monitoring and updating of the framework should be given, and these duties should also be included in each relevant member of staff's job description. A description of the process whereby the development of and updates to the framework are approved by the academic governance committee, or external ELE expert(s), as appropriate, should be included, considering committee meeting aims, format, frequency, staff roles included, and record-keeping procedures. Sample records/minutes of meetings for the previous six months prior to submission of the IEMAS should be submitted. A description of procedures in place to manage the security and integrity of the assessment process should be included. (7.2 (a) - (g)).

Where applicable, ELE providers should describe their plan to fully comply with criteria 7.1 (a) - (e) and 7.2 (a) - (b) by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation.

***Criteria 7.1 (b) and 7.2 (b) may be partially complied with for the initial IEMAS submission. These criteria must be fully met by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation in order to continue to be authorised to use the TrustEd Ireland mark. This section may be cross-referenced to section 4.4 (QA Guidelines for ELE section 2.4) below.***

***Please see Appendix Four, ELE Code: suggested examples to demonstrate compliance with criteria.***

### **3.5 Principle and Criteria: Supports and Services for International Learners (ELE Code section 8)**

The provider is required to demonstrate compliance with **all applicable criteria** in the ELE Code section 8 relating to the provider's provision of supports and services to international learners, with supporting documentation to demonstrate compliance.

Providers should describe the role of the member(s) of staff responsible for learner support and welfare, and these duties should also be included in each relevant member of staff's job description. The welfare support policy should be submitted and the development of policy and procedures should be described, with links/references to supporting documentation. (8.1 (a)-(b)).

Procedures for learner orientation(s) and induction(s) should be described, including procedures to support information needs of learners requiring entry visas and/or immigration permissions. Links/references to supporting documentation should be submitted (8.2 (a)-(c), and 8.3 (a)).

Accommodation provision (if applicable): providers should describe how all accommodation offered by the provider and information on accommodation, meets the requirements set out in Appendix Five of the ELE Code, with links/references to supporting documentation. The role of the person(s) responsible for accommodation should be described, and these duties should also be included in each relevant member of staff's job description. Procedures for offering advice on accommodation not offered by the ELE provider should be described, along with links/references to supporting documentation. (8.4 (a)-(e)).

Providers should describe how requirements are met, with reference/links to supporting policy and procedural documentation, in relation to all essential areas of safeguarding, e.g., garda vetting, training for relevant members of staff working with minors, procedures in place for working with partners in terms of safeguarding, procedures in place in the case that minors and adults are mixed, and procedures for obtaining permissions from parents/guardians, where applicable. A description of the role of the member(s) of staff responsible for safeguarding should be given, and these duties should also be included in each relevant member of staff's job description. (8.5 (a)-(c)).

Providers should describe procedures for the internal management of complaints and grievances, as well as the external and independent procedures established by the provider to manage complaints and grievances at an external level once internal procedures have been exhausted. Links/references to supporting documentation should be submitted and complaints for 6 months prior to the submission of the IEMAS should be submitted. (8.6 (a) and (b)). Records of complaints and grievances will be inspected as part of the site visit.

***Safeguarding records and records of complaints and grievances will be inspected as part of the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Four, ELE Code: suggested examples to demonstrate compliance with criteria.***

### **3.6 Principle and Criteria: Marketing and Recruitment (ELE Code section 9)**

The provider is required to demonstrate compliance, or partial compliance, in the case of criteria 9.2 (c), (d) and (e), with all applicable criteria in the ELE Code section 9 relating to marketing and recruitment, with supporting documentation to demonstrate compliance.

Providers should describe how the information needs of learners and stakeholders are researched and met. A description should be given of how information is disseminated, including, but not limited to, the following: the centre(s), place of study (i.e., at the main centre or the possibility of studying at another centre/location), typical learner first language make-up, calendars and lesson schedules, approaches to teaching and learning, types of programmes, including overall programme objectives and learning outcomes, internal and external assessments, and national and international recognition of examinations offered, access, transfer and progression arrangements, accommodation (both accommodation offered by the provider and other types, as applicable), events programme(s), learner services, terms and conditions and complaints and grievance procedures. Links/references to all relevant documentation should be submitted.

If information is provided in any language other than English, providers should describe the process whereby this information is provided in other languages and how this information is monitored to ensure that it is clear, accurate, transparent, accessible, relevant and up to date in each language. Providers should also describe the process whereby information and

promotional materials are monitored to ensure consistency across different languages and media. Links/references to sample materials should be submitted.

Providers should describe policy and procedures in place to ensure that all information disseminated to learners and other stakeholders is clear, accurate, transparent, accessible, relevant and up to date. A description should be given of how information on associated requirements for learners requiring entry visas and/or immigration permissions is made available to stakeholders, including procedures in the case of visa refusals.

Providers should demonstrate how information on the corporate structure of the provider and on accreditations, recognitions, franchises, partnerships, memberships, affiliations, and examination centre or venue status, is made clear to stakeholders.

The provider should provide links/references to relevant information and promotional materials, information on websites and social media, publications, and any other relevant documentation. A description of the role of the member(s) of staff responsible for sales and marketing and enquiries/enrolments should be given, and these duties should also be included in each relevant member of staff's job description.

Criterion 9.1 (b) (vii) refers to the implementation of the statutory PEL arrangements under section 65 of the 2012 Act as amended. Providers should declare that, once authorised, they will provide details of PEL arrangements in place to learners and other stakeholders in line with the policies, processes and statutory regulations overseen by QQI. (9.1 (a)-(c)).

A detailed description should be given of policy and procedures in relation to provider partnerships with recruitment agents, if applicable, from the initial due diligence process carried out with prospective agent partners, to the completion of contracts/agreements, as well as procedures in place to terminate agreements, when required. Criterion 9.2 (c) stipulates that all contracts with education agents, recruitment partners and consultants must incorporate the principles of the London Statement and Criterion 9.2 (d) states that the contract includes a termination clause should the agent not comply with the principles of the London Statement.

***Providers should demonstrate progress towards full compliance with Criteria 9.2 (c) and (d) by the time they come to submit their mid-cycle update report eighteen months following authorisation. These criteria must be fully complied with at the end of the initial three-year authorisation cycle when the provider comes to submit their next IEMAS in order to continue to be authorised to use the TrustEd Ireland mark.***

Providers should describe procedures in place to update all existing agent agreements, if applicable, to incorporate the principles of The London Statement, and the timelines in place to achieve full compliance with this requirement, as required by QQI. Providers should describe the process whereby monitoring of promotional materials used by agents, recruitment partners and consultants is carried out, including materials in other languages, and links/references to supporting documentation should be submitted. Providers should describe the process employed to review activities of education agents, recruitment partners and consultants at least once every two years to ensure they are operating within the parameters of the ELE Code and the London Statement, and links/references to supporting documentation should be submitted. Links/references to sample templates of different types of agent contracts/agreements and other relevant documentation should be submitted, including samples in other languages, as relevant. Procedures for training recruitment

partners should be described, with links/references to supporting documentation submitted (9.2 (a)-(g)).

*All current agent contracts will be inspected as part of the site visit.*

*Please see Appendix Six, Documents inspected during the site visit, and Appendix Four, ELE Code: suggested examples to demonstrate compliance with criteria.*

### **3.7 Principle and Criteria: Enrolment, Fees, Refunds and Subsistence (ELE Code section 10)**

The provider is required to demonstrate compliance with **all applicable criteria** in the ELE Code section 10 relating to enrolments, fees, refunds, and subsistence, with supporting documentation to demonstrate compliance.

Providers should submit links to fees for all programmes offered to demonstrate how their fee structure is realistic and sustainable to support the provision of high-quality ELE programmes to all categories of international learners. Any disparities in fee structures for different markets should be declared and justified, with a clear description of how fees are realistic and sustainable in relation to programme and service delivery for each type of market. The provider should describe procedures for the management of fee payments, including methods of payments used, and the management and payment of associated costs. Providers should submit a link/reference to the terms and conditions policy regarding enrolments, fees, cancellations and refunds. Procedures to make refunds to students at different points in the recruitment and enrolment periods should be described, including in the case of refused study visa applications, where applicable. Providers should describe how information on other costs related to studying in Ireland are disseminated.

Providers should demonstrate, with links/references to supporting documentation, how all costs, including any additional costs for services offered, are made transparent to learners and other stakeholders. Providers should describe how information on fees is disseminated to learners and stakeholders, and how information is monitored to ensure that it is consistent across all marketing materials, social media and on the website. Sample anonymised invoices showing fee and cost breakdowns should be submitted and explained. (10.1 (a)-(i)-10.1.1 (a)-viii)). Enrolment procedures should be clearly and fully described, and links/references to supporting documentation submitted (10.2 (a)-(b)).

Criterion 10.2 (c) refers to the implementation of the statutory PEL arrangements under section 65 of the 2012 Act as amended. Providers are required to declare that they will comply with the requirement to participate in these PEL arrangements in line with the policies, processes and statutory regulations overseen by QQI as and when required, in order to be authorised to use the TrustEd Ireland mark.

*Please see Appendix Four, ELE Code: suggested examples to demonstrate compliance with criteria.*

*Where it has been ascertained that a provider who is authorised to use the TrustEd Ireland mark has failed to participate in PEL arrangements, QQI shall, by notice in writing, inform the provider that it proposes to withdraw the provider's authorisation to use the TrustEd Ireland mark, stating the reasons for the proposed withdrawal.*



## Section 4: Overview of Self-Assessment against QA Guidelines for ELE Criteria

The provider is required to demonstrate how it meets applicable criteria set out in the **QA Guidelines for ELE, sections 2.1 - 2.6**.

ELE providers must demonstrate the suitability of its quality assurance procedures by having regard to and meeting applicable criteria set out in the QA Guidelines for ELE. Providers should use the headings below and the criteria set out in the QA Guidelines for ELE to describe the development and management of quality assurance procedures across all areas of the organisation, providing links/references to documentation and website pages, as required, to support statements and descriptions in each case. Descriptions should be clear, concise and succinct, and providers should aim to help the audience (ELE provider community, Assessment Panel, QQI Senior Management, Approvals and Reviews Committee) gain a clear understanding of how quality assurance procedures are developed, managed and monitored at all levels of the organisation. Providers should state when a criterion is not applicable, stating why it is not applicable, with supporting evidence, as required. Providers should describe operations at all their ELE centres in the state. When completing each section below, providers should also refer to relevant sections in the ELE Code, as appropriate.

*Please see Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria.*

*This document compiles the suggestions made in the webinars for providers.*

### 4.1 Organisational Structures (QA Guidelines for ELE section 2.1)

The provider is required to demonstrate how it meets all applicable criteria in the QA Guidelines for ELE Section 2.1 relating to the ELE provider's organisational structures, with links/references to supporting documentation to demonstrate how criteria are met.

Providers should describe the development and management of their strategic organisational and operational planning. Organisational chart(s) should be referred to, as well as the organisational, administrative, and academic management structures, role responsibilities and line management structures.

A description of the school administrative management system(s) and data management system(s) should be given. Communication channels among all staff members, including the senior management team, should be described, and a description of meetings, including performance review meetings, should be given, considering aims, format, frequency, staff roles involved and record-keeping procedures. Sample records/minutes of meetings for the previous six months prior to submission of the IEMAS should be submitted (2.1.1 (a)-(e), 2.1.2 (a)-(b), 2.1.3 (a)-(b), 2.1.4 (a)-(c)).

*Records of meetings will be inspected as part of the site visit.*

*Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria*

### 4.2 Management and Governance of Quality Assurance (QA Guidelines for ELE section 2.2)

The provider is required to demonstrate how it meets all applicable criteria in the QA Guidelines for ELE section 2.2 relating to the ELE provider's management and governance of quality assurance, with links/references to supporting documentation to demonstrate how criteria are met.

Providers should submit quality assurance policy(ies). A description should be given of the quality assurance procedures and how quality assurance policies and procedures are developed, monitored, reviewed and evaluated by internal and external stakeholders. A description should be given of how the provider measures and monitors impact, as appropriate, in a sustainable way to support operations, provision and services. A description of how quality assurance policies and procedures are aligned with the mission and strategic objectives of the provider should be included, including the involvement of relevant internal and external stakeholders. Links/references to supporting documentation should be submitted.

Providers should describe the different ways in which reviews and evaluations of quality assurance and learner protection in all areas of the organisation are carried out, and with which internal and external stakeholders. Links/references to supporting documentation should be submitted. A description should be given of how issues identified as a result of reviews and evaluations are managed to reach resolution, with links/references to supporting documentation. A description should be given of how evaluation data are used to support strategic organisational planning, development and enhancement, and planning. A description of the role of the member(s) of staff responsible for quality assurance should be given, and these duties should also be included in the job description of each relevant member of staff. A description of meetings should be included, considering aims, format, frequency, staff roles, and record-keeping. Sample records/minutes of meetings for the previous six months prior to submission of the IEMAS should be submitted. (2.2.1 (a)-(d), 2.2.2 (a)-(d), 2.2.3 (a)-(e)).

***Records of meetings will be inspected as part of the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria***

#### **4.3 Academic Management Structures (QA Guidelines for ELE section 2.3)**

The provider is required to demonstrate how it meets all applicable criteria in the QA Guidelines for ELE section 2.3 relating to the ELE provider's academic management structures, with links/references to supporting documentation to demonstrate how criteria are met.

The organisational structure of the academic team(s) at each centre in the state should be described and a link/reference to an academic organisational chart, separate to the overall organisational chart previously included (see **Organisational structure**, page 35) if relevant. A description should be given of the organisational and administrative management structures within the academic team(s), as well as role responsibilities, percentage of staff time dedicated to different roles, if applicable, and line management structures. Academic management roles should be clearly described in job descriptions for each relevant role. Providers should refer to the staff list in **Appendix Two** below, as required.

***CVs, job descriptions and copies of qualifications of current academic staff will be inspected as part of the site visit. QQI reserves the right to request verification of qualifications.***

*Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria*

Criterion 2.3.1 relates to qualifications of academic staff and is linked to **section 6.6.3 (a)-(b) and Appendix Four of the ELE Code**. Partial compliance with Criterion 6.3.3 (a)-(b) of the ELE Code and partial meeting of criterion 2.3.1 of the QA Guidelines for ELE are permitted for the first IEMAS submission. In each case, providers are required to set out plans to achieve full compliance and full meeting of criteria, with realistic timelines that meet QQI requirements.

*Criterion 2.3.1: in relation to teachers' qualifications, this criterion must be fully met by the time the provider comes to submit their mid-cycle update report eighteen months following authorisation in order to fully demonstrate the suitability of the provider's quality assurance procedures and therefore continue to be authorised to use the TrustEd Ireland mark.*

*Criterion 2.3.1: in relation to academic manager qualifications, evidence of partial/full meeting of this criterion must be given when the provider comes to submit their mid-cycle update report eighteen months following authorisation, and this criterion must be fully met by the time the provider comes to submit their next IEMAS three years following authorisation in order to fully demonstrate the suitability of the provider's quality assurance procedures, and therefore continue to be authorised to use the TrustEd Ireland mark.*

Communication channels among all academic staff members, including the management team(s), should be described, including meeting aims, frequency, staff roles involved and record keeping procedures. Sample records/minutes of meetings for the six months prior to submission of the IEMAS should be submitted. A description of the CPD cycle for teachers and trainers should be included, and records of CPD offered to the academic team for the six months prior to submission of the IEMAS should be submitted. The system in place to mentor teachers and trainers should be described and links/references to supporting documentation should be submitted (2.3.2).

Criteria 2.3.3 (a)-(c) refer to programme development. A description should be given of the make-up, management and work of the academic governance committee, or external ELE expertise, as appropriate. All communications with the committee/external expert(s) should be described, including meeting aims, frequency, staff roles involved and record keeping procedures. Sample records/minutes of meetings for the six months prior to submission of the IEMAS should be submitted. Providers should describe the decision-making processes at academic governance committee level regarding the development of new programmes, communications and agreements with corporate management regarding decision making, the internal and external stakeholders consulted with, and the development of business plans by corporate management to support the development of new programmes. Links/references to supporting documentation should be submitted.

A description of the process of development and/or selection of materials and resources should be given, including the involvement of the academic governance committee/external expert(s). The staff role(s) responsible for the curation of materials and resources should be



identified, and these duties should also be described in job descriptions of each relevant member of staff (reference may be made to **Organisational structure**). (2.3.4)

Providers should include details of academic staff attendances at events such as QQI briefings, seminars, webinars and conferences in the previous six months prior to the submission of the IEMAS, as well as plans to attend future events. Details of budgets and sponsorships for staff to attend such events should be described, as relevant. A description should be given of how information is cascaded to academic team members.

Links/references to supporting documentation should be included (2.3.5 (a)-(c)).

Criteria 2.3.6 (a)-(g) focus on operational academic management. Providers should describe academic management operations at each centre in the state, including learner:

teacher/teacher trainer ratios for each type of programme during the year and in summer, and learner : academic manager ratios for each centre during the year and in summer.

Links/references to sample teaching schedules for each centre (year-round and in summer) for the six months prior to the submission of the IEMAS should be submitted.

The criterion in 2.3.6 (c) in relation to the maximum teaching schedule of thirty sixty-minute contact teaching hours per week requirement links to **criteria 6.7 (e)-(f) in the ELE Code**.

Criterion 2.3.6 (c) may be partially met for the initial application for TrustEd Ireland authorisation. Providers should submit a realistic timeline to fully meet this criterion by the time the provider comes to submit the second IEMAS at the end of the first three-year authorisation period.

***Evidence of partial/full meeting of Criterion 2.3.6 (c) must be given when the provider comes to submit their mid-cycle update report eighteen months following authorisation, and this criterion must be fully met by the time the provider comes to submit their next IEMAS three years following authorisation in order to fully demonstrate the suitability of the provider's quality assurance procedures, and therefore continue to be authorised to use the TrustEd Ireland mark.***

Providers should describe the systems in place to substitute teacher/trainers at each centre. Links/references to supporting documentation should be submitted. Administrative academic procedures at each centre should be described, including systems to record learner attendance, work completed in class, assessments (formative, summative and proficiency), initial, mid and end of course feedback, and complaints. Links/references to supporting documentation should be submitted. The staff role(s) responsible for academic administration at each centre should be identified, and a description of related duties should be given. If the centre is a teacher training centre, the staff role(s) responsible for the administration of teacher training programmes should be identified, and a description of related duties should be given. Providers should include a description of procedures to monitor compliance with copyright and intellectual property legislation, and the staff role(s) responsible for the management of this area should be described, with a description of related duties. Links/references to supporting documentation should be submitted.

***Records of learner attendance, work completed, assessments, feedback (initial, mid and end of programme) and complaints will be inspected during the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria***

Criteria 2.3.7-2.3.11 focus on teaching and learning. A description should be given of how planning, teaching, and learning reflects the educational philosophy, mission statement, approach, including CEFR alignment, and strategic objectives of the ELE provider to help learners meet language learning objectives. Links/references to supporting documentation should be submitted. Providers should describe policies and procedures in place to manage planning, teaching and learning at each centre, with links/references to supporting documentation. A description of how standards of planning, teaching and learning are managed and quality monitored at the centre(s) should be given, with links/references to supporting documentation. A description of mentoring systems for newly qualified and less experienced academic managers, teachers and trainers should be given, with links/references to supporting documentation.

Providers should describe how planning and teaching skills for teaching and training staff are developed and monitored to ensure that they reflect the educational philosophy, approach and mission statement of the ELE provider, and meet learner needs and interests, as relevant to the programme. Links/references to supporting documentation should be included.

A description should be given of the systems in place to manage the quality assurance monitoring of lesson plans/schemes of work to assess how closely they match the overall objectives of the curriculum, syllabus, and monthly/weekly plans etc, in alignment to the CEFR, and how closely they meet learner needs. Records, and sample anonymised feedback, of quality monitoring of lesson plans/schemes of work for the previous six months prior to submission of the IEMAS should be submitted.

Providers should describe the system of quality monitoring observations in each centre, considering the following: rationale, frequency, format, dissemination of feedback, records, and impact on academic staff development. Records, and sample anonymised feedback, of quality monitoring observations for the previous six months prior to submission of the IEMAS should be submitted.

Providers should describe their emergency remote plan, including training for teachers, as required, with links/references to supporting documentation

***A significant part of the site visit includes verification of standards of planning and teaching through observations of lesson segments. The Assessment Panel will aim to observe at least 60% of all teachers, and all types of lessons included on the teaching schedule during the site visit. Meeting of criteria 2.3.8, 2.3.9, and 2.3.10, if applicable, will be verified by the Assessment Panel during the site visit.***

***Records of quality monitoring of lesson plans/schemes of work, quality monitoring observations and observation feedback will be inspected during the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria***

#### **4.4 Programme Design (QA Guidelines for ELE section 2.4)**

The provider is required to demonstrate how it meets **all applicable criteria** in the QA Guidelines for ELE section 2.4 relating to programme design, with supporting documentation to demonstrate how criteria are met.

***This section may be cross-referenced to section 3.4 (ELE Code section 7) above.***

***Different criteria in section 2.4 of the QA Guidelines for ELE are linked to section 7 of the ELE Code, Programme Design. In sections 7.1 and 7.2 of the ELE Code, partial compliance with programme and assessment design in alignment with the CEFR is permitted for the initial IEMAS submission, and CEFR-related criteria in section 2.4 of the QA Guidelines for ELE may also be partially met for the initial submission.***

***All criteria related to CEFR alignment in section 2.4 of the QA Guidelines for ELE must be fully met by the time the provider comes to submit their mid-cycle update report eighteen months following initial authorisation in order to fully demonstrate the suitability of their quality assurance procedures and therefore continue to be authorised to use the TrustEd Ireland mark.***

For criteria 2.4.1.1 and 2.4.1.2., a description of the provider's curriculum should be given and how it reflects the educational philosophy of the provider, with links/references to supporting documentation. A description should be given of the approach(es) taken (e.g., Communicative, Task Based Learning etc), and rationale(s) for approach(es), should be included. Providers should describe the rationale for the design of syllabus(es) and course programme/scheme of work design, and how this has been designed in alignment with the CEFR, learner needs and interests. Providers should describe the involvement of the academic governance committee/external expert in decision-making in relation to the design of the overall curriculum, syllabus(es) and programme(s), with links/reference to supporting documentation. The member(s) of the academic team responsible for curriculum, syllabus, and course programme/schemes of work development should be identified, outlining their roles and responsibilities, and these duties should be included in the job descriptions of relevant member(s) of staff.

A detailed description of all syllabuses and course programmes/schemes of work should be given, considering each of the areas in criterion 2.4.1.2, as applicable. Links to all ELE and teacher training programmes offered should be submitted, including the ELE/EAP element of foundation year programmes, where applicable.

A description should be given of how the curriculum, syllabus and course programmes/schemes of work are monitored and reviewed and what factors are considered when modifications to the syllabus and course programmes are made. Links/references to supporting documentation should be submitted (2.4.1.3)

Criteria in 2.4.2 (a)-(j) focus on assessment systems. The assessment framework should be described in terms of the overall institutional approach to assessment. The academic team member(s) responsible for the management of assessment should be identified, and a description of duties should be included in the job description for each relevant member of staff. The practical management of testing procedures for all types of assessments should be given. Links/references to supporting documentation should be included.

The member(s) of the academic team responsible for assessment should be identified, outlining their roles and responsibilities, and these duties should be included in the job descriptions of relevant member(s) of staff. It is understood that the member(s) of the academic team may not yet be fully qualified if member(s) are undergoing an ELT programme leading to an award, as required in the ELE Code and QA Guidelines for ELE. This should be noted in the IEMAS, if applicable, and reference may be made to other sections of the IEMAS that focus on academic staff qualifications, as appropriate.

A description should be included of each internal assessment (placement, diagnostic, informal, formative, summative) that takes place. A clear description should be included of how each test is designed, adapted, or selected, including the quality assurance procedures employed to measure validity, reliability and impact, and alignment to learner needs, programme learning outcomes and the CEFR. A description of the frequency and format of internal assessments should be given, as well as the practical management, standardisation, and moderation procedures. Links/references to all internal assessments should be submitted.

Providers should outline external proficiency exams prepared for at the centre and describe selection processes by the academic governance committee/external expert in terms of validity, reliability and impact, and alignment to learner needs and the CEFR. Providers should describe exam preparation programmes, whether as a full programme or an additional programme, as well as practical matters, such as how often and where learners take the proficiency exam(s). A description of systems in place to manage the administration of proficiency exam(s), including the dissemination of information to learners, arrangements for exam days, dissemination of results and record keeping of results should be included, with links/references to supporting documentation. Providers should describe provisions made for learners with specific needs.

A description should be given, with links/references to supporting documentation, of supports offered to learners to help them prepare for internal and external assessments, as well as remedial supports. Providers should describe tutorials offered, when they take place during the programme, and how they are managed, including record-keeping. A description of reports given to learners should be given, and templates. Anonymised samples of completed reports should be submitted. The internal appeals process should be outlined. The provider should describe how security and integrity of assessment processes are managed. A description of how learners are informed of assessment procedures should be given and providers should include information on how learners are informed about academic integrity for internal and external assessments, and how this information is also disseminated at different times during the programme. Links/references to supporting documentation should be submitted.

If the provider is a teacher training centre, a description should be given of any input included on teacher training programmes on course design, principles of the CEFR and 'can-do' descriptors and the principles of assessment (criterion 2.4.3), with links/references to supporting documentation. Providers should note that this is not a requirement but is an example of best practice that the provider should consider.

Criteria 2.4.4 (a)-(b) look at academic staff development and programme design. Providers should describe types of CPD offered to academic staff based on teacher needs, and CPD offered to staff on the provider's educational philosophy and mission statement, curriculum and syllabus, principles of the CEFR and alignment of the syllabus and curriculum to the CEFR, the development of programmes and materials aligned to the CEFR, and the development of assessment aligned to the CEFR. Descriptions of CPD for academic staff should consider rationale, type, frequency, format, staff role(s) involved, and record-keeping. Links to all ELE and teacher training programmes offered should be submitted, including the ELE/EAP element of foundation year programmes.

Records of CPD offered to academic staff for the previous six months prior to the submission of the IEMAS should be submitted, as well as sample seminar materials. A description should be given on training for non-academic staff on the principles behind the CEFR, and

records of this training for the previous six months prior to the submission of the IEMAS should be submitted, as well as sample seminar materials.

***Records of CPD and copies of seminar/training materials will be inspected during the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria.***

#### **4.5 Supports and Services for International Learners (QA Guidelines section 2.5)**

The provider is required to demonstrate how it meets all applicable criteria in the QA Guidelines for ELE section 2.5 relating to programme design, with supporting documentation to demonstrate how criteria are met.

A description should be given of induction(s) and orientation(s) offered to new learners, including the applicable areas described in criterion 2.5.1 (i)-(xviii). Where applicable, the provider should describe inductions offered to non-EU/EEA/Swiss learners who require entry visas and/or immigration permissions, including the requirements learners must be made aware of in order to comply with immigration regulations (2.5.2 (a)-(c)). Providers should describe the management of inductions in terms of aims, types, format, frequency, duration, staff roles involved and record keeping. Records of inductions for the previous 6 months prior to submission of the IEMAS should be submitted.

Providers should describe the development of the student handbook and what is included, the staff role(s) responsible for the development of the handbook, the rationale, content, format, availability, and review procedures. Links/references to the student handbook(s) should be submitted (2.5.1 (a)).

A description/illustration should be included of the typical make up of learner L1s on all programmes offered (2.5.1 (b)). Providers should describe all academic supports offered to learners. The staff role(s) responsible for academic supports should be identified, and a description of their support's duties should be given. A description should be given of all study supports and advice for progress in English and information on further and higher education study opportunities, with links/reference to supporting documentation. A description should be given of materials and resources for self-study that are made available to learners. The staff role(s) responsible for self-study materials should be identified and a description of duties for this role should be given. A list of all academic supports and academic resources (both hard and digital copies) offered to learners should be submitted (2.5.3 (a)-(b)). The staff role(s) responsible for learner welfare should be identified and a description of duties in this role should be given, with links/references to supporting documentation.

A description should be given of the events programme, including rationale, frequency (year-round and summer) links to academic programme (where applicable), staff: learner ratios, risk assessments, attendance-keeping, and records, with links/references to supporting documentation. The staff role(s) responsible for the events programme should be identified and a description of duties for this role should be given. Records of the events programme for the previous 6 months prior to submission of the IEMAS, as well as sample notices/schedules, should be submitted (2.5.4 (a)-(d)).

Providers should describe exit certificates, attendance reports and academic reports, and sample anonymised completed certificates and attendance and academic reports should be

submitted. A description should be given of policy and procedures regarding data storage systems and how this information is disseminated to learners, with links/references to supporting documentation. A description should be given of procedures to support learners who require study visas and/or immigration permissions and who intend to enrol on a further ELE programme with the current provider, another ELE provider, with links/references to supporting documentation. A description of procedures to support learners who intend to enrol on a programme of higher education should be given, with links/references to supporting documentation (2.5.5 (a)-(c)).

***Records of inductions, orientations, tutorials and other meetings with learners and events programmes will be inspected during the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria***

#### **4.6. Staff Supports and Development (QA Guidelines section 2.6)**

The provider is required to demonstrate how it meets **all applicable criteria** in the QA Guidelines for ELE section 2.6 relating to staff supports and development, with supporting documentation to demonstrate how criteria are met.

Providers should describe induction procedures for all new staff members; aims, types, format, frequency, duration and record-keeping. The staff role(s) responsible for inductions should be identified and a description of duties for this role should be given. A description of types of support and offered to newly qualified and less experienced teachers and trainers should be given. Links/references to supporting documentation should be submitted. (2.6.1 (a)-(c)).

A description should be given of separate induction procedures for academic, administrative, and social events staff, as appropriate: aims, type, format, frequency, duration and record-keeping. Links/references to supporting documentation should be submitted.

Records of inductions for new staff for the previous 6 months prior to the submission of the IEMAS should be submitted.

Providers should describe the development of staff handbook(s) and what is included, the staff role(s) responsible for the development of the handbook(s) the rationale, content, format, availability, and review procedures. A copy of the staff handbook(s) should be submitted (2.6.1 (c); 2.6.2 (b)).

An overview should be included of CPD offered to all members of staff, considering rationale, aims, type, format, frequency, duration, record-keeping, and impact, including how this impact is measured, as applicable. Providers should describe how details of the educational philosophy and mission statement, curriculum, approach(es), syllabus and course programme(s)/schemes of work are disseminated to academic, administrative and marketing staff, as needed. A description of any cross-organisational staff training offered should be included. Links/references to supporting documentation should be submitted. The provider should include a description of any funding/scholarships offered to staff in the past 6 months prior to the time of the submission of the TrustEd Ireland application, along with a description of the rationale behind this funding. Any conditions included in the provision of funding, e.g., delayed reimbursement of programme fees following successful completion of a programme, should be described, with links/references to supporting documentation. (2.6.4 (a)-(c)).



Providers should describe internal and external CPD offered to administrative staff, considering the following rationale, aims, type, format, frequency, and record-keeping. The CPD plan for the previous 6 months prior to the submission of the IEMAS should be submitted, as well as links/references to sample seminars (2.6.5 (a)-(b)).

Providers should describe internal and external CPD offered to academic staff, considering the following: rationale, aims, type, format, frequency, and record-keeping. A link/reference to the CPD plan for the previous 6 months prior to the submission of the IEMAS should be submitted, as well as links/references to sample seminars, records of the developmental observation cycle, other types of observations and any external training/development offered, should be included. (2.6.6 (a)-(c)).

Providers should describe CPD offered to sales and marketing staff, considering the following: rationale, aims, type, format, frequency, record-keeping. The CPD plan for the previous 6 months prior to the submission of the IEMAS should be submitted, as well as links/references to sample seminars. (2.6.7 (a)-(c)).

The staff role(s) responsible for CPD should be identified and a description of duties for this role should be given.

Providers should describe policy(ies) and procedures in relation to performance reviews for all staff members, considering the following: rationale, aims, type, format, frequency, record-keeping, and impact, including measurement of impact, as appropriate. Sample anonymised completed performance reviews for the past 6 months prior to the submission of the IEM application should be submitted, as well as sample anonymised completed reviews. The staff role(s) responsible for performance reviews should be identified and a description of duties for this role should be given (2.6.8).

***CPD records and materials and records of performance reviews will be inspected during the site visit.***

***Please see Appendix Six, Documents inspected during the site visit, and Appendix Five, QA Guidelines for ELE: suggested examples to demonstrate meeting criteria.***

## APPENDIX ONE: Compliance with ELE Code criteria

There are ELE Code criteria where full compliance is required for the initial IEMAS submission. Other pre-established criteria may be partially complied with, with the condition that they are fully met within an agreed period, as described in the ELE Code and this Guidance Handbook. For the purposes of this document, these criteria are called 'partial compliance, pre-agreed'. Other criteria, where minor modifications are required, may also be partially complied with, and for these criteria, conditions for full compliance within a timeframe will be set by QQI. These are called 'partial compliance, minor modifications'. Please see below the ELE Code criteria and compliance criteria requirements for the initial IEMAS submission.

***All decisions regarding ELE Code compliance will be made by the Assessment Panel and authorised by QQI's Approvals and Reviews Committee.***

***Providers should always refer to the QA Guidelines for ELE, ELE Code and the Guidance Handbook for ELE Providers when preparing to submit their IEMAS.***

Criteria	Text	Compliance Requirement
<b>4.2 Access, transfer and progression</b>	<p>In invoking the ELE Code for the purpose of applying for authorisation to use the IEM, an ELE provider must:</p> <p>✓ have established procedures for access, transfer, and progression under section 56 of the 2012 Act as amended.</p> <p>These procedures should be cognisant of the interests and needs of international learners, and reference, in an appropriate manner, the location in which information is provided by the ELE provider on the pathways for international learners to further study, employment, and residency (where applicable).</p>	Full
<b>5 Requirements for premises</b>	<p>(i) has planning permission for educational use.</p> <p>(ii) has all necessary building requirements in place, e.g., fire safety and insurance</p> <p>(iii) has capacity that is adequate and suitable for all members of staff and all currently enrolled learners at the premises at any one time</p> <p>(iv) has suitable temperature, ventilation and light throughout the centre</p>	<p>(i) Full</p> <p>(ii) Full</p> <p>(iii) Full</p> <p>(iv) Partial, minor mods</p> <p>(v) Partial, minor mods</p>



	<p>(v) has classrooms that are suitable in size for the number of learners and teachers assigned to each classroom, have sufficient light and suitable acoustics, and are appropriately equipped for the purpose of provision of ELE to international learners.</p> <p>(vi) has suitable and adequate space reserved exclusively for the use of academic staff to plan lessons and consult with colleagues</p> <p>(vii) has suitable and adequate rest and study areas that are available to learners;</p> <p>(viii) has suitable and adequate rest areas that are available to staff;</p> <p>(ix) has adequate toilet facilities for all members of staff and all currently enrolled learners at the premises at any one time;</p> <p>(x) is well maintained and clean</p>	<p>(vi) Partial, minor mods</p> <p>(vii) Partial, minor mods</p> <p>(viii) Partial, minor mods</p> <p>(ix) Full</p> <p>(x) Full</p>
<b>6 Operational, Risk and Human Resources Management</b>  6.1 Data management	<p>(a) All records for administration, accounts, marketing, staff, learners, partners, clients, associates and other stakeholders are securely stored on the management system.</p> <p>(b) Access is restricted to those members of staff who need to have specific access to data as relevant to their role.</p> <p>(c) There is a supporting back-up document storage system in place in the event that the management system fails.</p> <p>(d) All data management systems comply with GDPR legislation.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p> <p>(d) Full</p>
6.2 Corporate and academic governance	<p>(a) ELE providers ensure that academic decision-making is independent of commercial considerations and influence of business directors, owners, shareholders, trustees or others, and business decisions do not unreasonably compromise the academic integrity and quality of ELE provision.</p> <p>(b) There is a clear distinction of roles between corporate and academic governance within the organisation and there is an academic governance committee in place to ensure this distinction is maintained.</p> <p>(c) Academic decision-making reflects the interests of learners and the maintenance and enhancement of academic quality within the organisation.</p> <p>(d) The academic governance committee may be made up of senior members of academic staff at the centre. However, where a provider's scale is such that it cannot support the separation of corporate and academic governance or an academic governance committee</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p> <p>(d) Full</p>

	internally, alternative arrangements are put in place to ensure objective oversight, such as the use of external ELE expertise.	
6.3 Risk management	<p>(a) There is a risk assessment policy and a risk assessment plan in place, and both are reviewed periodically to inform strategic risk planning.</p> <p>(b) Risk management includes procedures to ensure that the provider is not engaged in activities or partnerships which may undermine the quality or integrity of ELE provision, or associated services, offered.</p>	<p>(a) Full</p> <p>(b) Full</p>
6.4 Change and crisis management	Change and crisis management systems are in place that are fit for purpose and provide for the management of essential changes that must be made as needed.	Full
6.5 Partnerships and collaboration	<p>(a) Where an ELE provider organises or procures a programme which is provided in whole or in part with another ELE provider, or other type of provider, e.g., an activity centre or accommodation provider, the ELE provider establishes and confirms formal agreements with the other provider, which include parallel quality assurance procedures with that provider.</p> <p>(b) Where an ELE provider collaborates with other providers, the ELE provider has quality assurance procedures in place to approve collaboration arrangements with other providers and to monitor and review the effectiveness of these arrangements.</p> <p>(c) Providers apply due diligence and ensure they are aware of any reputational risk to themselves and to the ELE sector associated with prospective providers with which they are considering entering collaboration arrangements.</p> <p>(d) ELE providers do not enter any business partnership which may potentially cause a conflict, such as full or part ownership of an employment agency that employs international learners, or full or part ownership of an agency that recruits international learners, whether for the ELE provider concerned or for other ELE providers.</p> <p>(e) Any existing business interest of the ELE provider that may potentially cause a conflict, such as full or part ownership of an employment agency that employs international learners, or full or part ownership of an agency that recruits international learners, whether for the ELE provider concerned or for other ELE providers, is declared. In this case, ELE providers are required to demonstrate how due diligence is applied to avoid any potential risk to the ELE</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p> <p>(d) Full</p> <p>(e) Full</p> <p>(f) Full</p>

	<p>provider concerned, to other ELE providers, to learners of the ELE provider concerned or of other ELE providers, or to the ELE sector in Ireland.</p> <p>(f) ELE providers declare any ownership or part ownership of accommodation provision for learners and ensure that all key stakeholders, e.g., students, education agents and teachers, who wish to avail of accommodation services that are owned or part-owned by the provider, are made aware of this fact before contracting any accommodation service with the provider.</p>	
6.6 Human resources	(a) There is a systematic approach to the fair, inclusive and transparent recruitment of staff.	(a) Full
6.6.1 Staff recruitment	(b) The ELE provider ensures that academic and administrative staff have sufficient expertise and experience to fulfil their designated roles, thereby enhancing the teaching and learning environment for learners and staff.	(b) Academic staff: partial, pre-agreed (mid-cycle); administrative staff: full
6.6.2 Conditions of employment	<p>(a) Employment terms and conditions for staff members comply with national employment legislation.</p> <p>(b) Terms and conditions, e.g., remuneration and leave conditions, are commensurate with the qualifications and experience of staff members.</p> <p>(c) Conditions of employment reflect the mission statement and objectives of the provider and support commitment to staff, learners and the organisation.</p> <p>(d) Each member of staff has a written contract, which is updated to reflect changes, e.g., roles, responsibilities, conditions or place of work.</p> <p>(e) Each member of staff has a written job description, which accurately reflects the current roles and responsibilities of the staff member, and which is updated as evolving needs are identified.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p> <p>(d) Full</p> <p>(e) Full</p>
6.6.3 Academic staff qualifications	<p>a) All teachers are suitably qualified and experienced to fulfil their designated role.</p> <p>b) All academic managers are suitably qualified and experienced to fulfil their designated role.</p>	<p>(a) Partial, pre-agreed: mid-cycle</p> <p>(b) Partial, pre-agreed: IEMAS 2</p>

6.7 Operational academic management	<p>(a) There is an appropriate learner: teacher/teacher trainer ratio for all ELE programmes to ensure participation opportunities on the part of the learners and effective classroom management on the part of teachers and teacher trainers. A maximum ratio of 16 learners/teachers: 1 teacher/teacher trainer is required. For closed groups, a maximum ratio of 18 learners: 1 teacher/teacher trainer is required. For foundation year programmes, a maximum ratio of 24 learners: 1 teacher is required.</p> <p>(b) Each centre has a dedicated academic manager. This requirement will not apply in the case of additional spaces that are located within a distance of one kilometre from the main centre and that are used for temporary classrooms.</p> <p>(c) The number of academic managers per centre is proportional to the number of enrolled learners at the centre. A maximum ratio of 160 learners: 1 academic manager per centre is required.</p> <p>(d) Academic managers may be included on the teaching and training schedule to ensure currency of effective practice. However, once a centre has a minimum of five groups of ELE learners, the academic manager's teaching must be restricted to a maximum of five contact teaching hours per week. An academic manager's duties may include occasional substitution teaching hours, when required, up to a maximum of fifteen contact teaching hours in one week at any one time. Beyond this, another teacher must be recruited as needed, and the academic manager must return to delivering a maximum of five contact teaching hours per week.</p> <p>(e) Each teacher's schedule has a maximum of thirty sixty-minute contact teaching hours per week at all times of the year.</p> <p>(f) Teaching schedules of a maximum of thirty sixty-minute contact teaching hours per week are fully supported by well-designed curricula, syllabuses and course programmes/schemes of work, which are clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR).</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p> <p>(d) Full</p> <p>(e) Partial, pre-agreed: progression by mid-cycle, full by IEMAS 2</p> <p>(f) Partial, pre-agreed: CEFR alignment: full by mid-cycle; Teachers' schedules: progression by mid-cycle, full by IEMAS 2</p>
6.8 Grievances	(a) There is an internal grievance policy in place for staff members, with	<p>(a) Full</p> <p>(b) Full</p>

	<p>documented procedures and clear lines of communication and accountability. Access to an external and independent grievance procedure, which is external to QQI, forms part of this process if internal processes do not achieve a mutually accepted resolution.</p> <p>(b) Where employment practices form part of the complaint, the state-appointed authority is brought into the process.</p>	
<p><b>7 Programme Design</b></p> <p>7.1 Curriculum, syllabus and course programme/scheme of work design</p>	<p>(a) There is a curriculum, syllabus and course programme/scheme of work framework in place that is developed and managed by suitably qualified and experienced senior academic staff.</p> <p>(b) The curriculum, syllabus and course programme/scheme of work design is clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR), with clearly defined learning outcomes that are articulated in 'can do' descriptors.</p> <p>(c) The curriculum, syllabus and course programmes/schemes of work are developed with learner needs and interests in mind.</p> <p>(d) The curriculum, syllabus and course programmes/schemes of work are updated as appropriate, dependent on evolving methodologies and learner needs.</p> <p>(e) Curriculum, syllabus and course programme/scheme of work design and updates are approved by the academic governance committee, or the external ELE expert, as appropriate to the ELE provider context, and approvals are documented.</p>	<p>(a) Partial, pre-agreed: Teachers: mid-cycle; Academic managers: IEMAS 2</p> <p>(b) Partial, pre-agreed: mid-cycle</p> <p>(c) Partial, minor mods</p> <p>(d) Partial, minor mods</p> <p>(e) Partial, minor mods</p>
7.2 Assessment systems	<p>(a) There is an assessment framework in place that is developed and managed by suitably qualified and experienced senior academic staff.</p> <p>(b) The assessment framework is clearly and closely aligned to the intended learning outcomes of each ELE syllabus/course programme, expressed in 'can do' descriptors from, or adapted from, the CEFR.</p> <p>(c) The assessment framework includes testing mechanisms that are fair, clear and accessible, and the principles of validity, reliability and impact are well considered.</p>	<p>(a) Partial, pre-agreed: mid-cycle</p> <p>(b) Partial, pre-agreed: mid-cycle</p> <p>(c) Partial, minor mods</p> <p>(d) Partial, minor mods</p> <p>(e) Partial, minor mods</p>

	<p>(d) The assessment framework is tailored to learner needs, e.g., higher education or employment, as appropriate.</p> <p>(e) The assessment framework is updated as appropriate, dependent on evolving practices, approaches and learner needs.</p> <p>(f) The assessment framework is approved by the academic governance committee, or the external ELE expert(s), as appropriate to the ELE provider context, and approvals are documented.</p> <p>(g) There are procedures and systems in place to manage the security and integrity of the assessment process.</p>	<p>(f) Full</p> <p>(g) Full</p>
<b>8 Supports and Services for International Learners</b> 8.1 Learner support and welfare	<p>(a) There is/are a suitably trained member(s) of staff responsible for learner support and welfare.</p> <p>(b) Providers have a Welfare Support Policy in place that is designed to support international learners in instances of emergency or hardship.</p>	<p>(a) Full</p> <p>(b) Full</p>
8.2 Learner orientation and induction	<p>(a) Initial orientation information is sent to learners prior to their arrival, e.g., transport and accommodation services.</p> <p>(b) Providers ensure that inductions are offered to learners on arrival at the centre and that they are appropriate and accessible to all learners.</p> <p>(c) Learner groups are multi-lingual with a variety of different language speakers in order to optimise English language learning opportunities. Where this is not possible, ELE providers ensure that learners and other stakeholders are aware of this fact before enrolment.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>
8.3 Learners requiring entry visas and/or immigration permissions	<p>(a) Further induction and information dissemination is required for non-EU/EEA learners requiring entry visas and/or immigration permissions. This induction must be clear and accessible and contain coverage of areas including, but not limited to, the following:</p> <ul style="list-style-type: none"> <li>(i) entry visas and/or immigration permission conditions</li> <li>(ii) attendance and punctuality</li> <li>(iii) absenteeism and consequences, including expulsion</li> </ul>	<p>(a) Full</p>

	<p>(iv) sick and bereavement leave</p> <p>(v) holidays</p> <p>(vi) assessment</p>	
8.4 Accommodation	<p>(a) All accommodation offered by ELE providers meets ELE Code requirements.</p> <p>(b) ELE providers also offer advice in relation to obtaining accommodation not offered by providers.</p> <p>(c) ELE providers declare any possible conflict of interest: where accommodation is owned/managed by the ELE provider, or by a partner of the ELE provider, this must be declared to learners and other stakeholders before they book the accommodation.</p> <p>(d) ELE providers ensure that all accommodation offered by providers to learners is suitable and appropriate for learners to live and study in comfortably.</p> <p>(e) ELE providers ensure all information sent to learners, education agents, recruitment partners, consultants, parents and other stakeholders is clear, accurate, transparent, accessible, relevant and up to date. Where there is any potential issue in finding suitable accommodation for learners, providers ensure that this information is made available to learners, education agents, recruitment partners, consultants, parents and other stakeholders, prior to a learner's enrolment on the programme.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p> <p>(d) Full</p> <p>(e) Full</p>
8.5 Safeguarding	<p>(a) ELE providers who recruit learners who are minors are responsible for ensuring all legislative obligations are met in relation to the following areas:</p> <p>(i) safeguarding;</p> <p>(ii) Garda vetting for all relevant members of staff who work with learners who are minors;</p> <p>(iii) approved safeguarding training for all relevant members of staff.</p> <p>Where ELE providers have agreements with external accommodation providers, the ELE provider is responsible for ensuring that all relevant members of staff of the accommodation provider have completed Garda vetting.</p> <p>(b) There is a safeguarding policy, and procedures, in place, and a dedicated member(s) of staff to manage all areas of child welfare and protection, including required approved safeguarding training for all relevant members of staff.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>

	(c) Where minors are mixed with adults, whether in the same closed group, class or in the same building, providers have procedures in place, including obtaining permission from parents/guardians in the case where minors are placed in class with adults.	
8.6 Complaints and grievance procedures	<p>(a) There is a clear and accessible internal complaints and grievance policy in place for learners and other stakeholders to ensure that issues are dealt with efficiently.</p> <p>(b) Should the internal complaints and grievance procedures not reach a mutually accepted resolution, access to an independent procedure, established by the ELE provider, or by a representative group, and independent of QQI, forms part of this process</p>	<p>(a) Full</p> <p>(b) Full</p>
<b>9 Marketing and Recruitment</b>  9.1 Marketing information	<p>(a) ELE providers ensure that clear, accurate, transparent, accessible, relevant and up-to-date information is available to learners, education agents, recruitment partners, consultants and other stakeholders in all promotional materials and on the website.</p> <p>(b) ELE providers</p> <p>(i) endeavour proactively to understand the information needs of prospective international learners, education agents, recruitment partners, consultants and other stakeholders;</p> <p>(ii) ensure that information provided to potential international learners about the provider and their programmes and other services is clear, accurate, transparent, accessible, relevant and up to date. This includes information about the intended purpose of the ELE programme e.g., to prepare a learner for further study, a proficiency ELE examination or specific employment, with intended learning outcomes;</p> <p>(iii) ensure that all information is provided in a way that is accessible to international learners and assists them in making informed decisions. This information should support international learners in understanding all matters related to an ELE programme prior to enrolment. If provided in a language other than English, it is the responsibility of the ELE provider to ensure that the information is clear, accurate, transparent, accessible, relevant and up to date;</p> <p>(iv) where applicable, information should be provided on the recognition of ELE proficiency examinations, both in the state and internationally.</p>	<p>(a) Partial, minor mods</p> <p>(b) Partial, minor mods</p> <p>(c) Partial, minor mods</p>



	<p>(v) accurately represent their company and facilities in all marketing and promotional materials and ensure that no false or misleading information is given or implied. For example, if there is the possibility that a learner may have an afternoon schedule of ELE lessons instead of an expected morning schedule, this information is included.</p> <p>(vi) provide contact details for an appropriate person(s) to provide assistance with queries from international learners prior to enrolment, e.g., the enrolments officer or student welfare officer;</p> <p>(vii) provide details of the arrangements in place for the protection of enrolled learners under Section 65 of the 2012 Act as amended.</p> <p>(c) Information provided on marketing materials includes, but is not limited to, the following:</p> <p>(i) details of all services offered by the ELE provider;</p> <p>(ii) current dates for programmes, a current academic calendar and information on rolling enrolment procedures;</p> <p>(iii) information regarding the corporate structure of the organisation, i.e., if it is an independent organisation, a branch of an international or multinational company, a provider with a number of centres, whether nationally and/or internationally, or part of a franchise;</p> <p>(iv) accreditation bodies, associations, organisations or examining bodies that ELE providers are members of or are recognised by. These are clearly and accurately represented so that they are easily understood by learners and other stakeholders. Where appropriate, weblinks to accreditation bodies, associations, organisations or examining bodies are made available, as well as any centre numbers or affiliation status;</p> <p>(v) distinctions made between logos or marks which demonstrate whether the ELE provider offers a programme leading to a specific ELE award, is an authorised centre for an examining body, is a member of an association or organisation, or is accredited by an organisation or association, and therefore authorised to use a logo, mark, centre number or centre name to confirm this;</p> <p>(vi) information on associated requirements for learners requiring entry visas and/or immigration permissions, where relevant; comprehensive information, where appropriate, on foundation and pathway programmes for entry onto higher education programmes. The entry and progression information relating to such programmes should be clear, accurate, transparent, accessible, transparent, relevant and up to date;</p>	
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	<p>(viii) information on the typical makeup of first language speakers at the centre. Where there is a majority of one first language group of learners in the centre, this is made clear to learners, parents, education agents, recruitment partners and consultants, as well as other stakeholders, prior to enrolment;</p> <p>(ix) information on types of accommodation offered by the provider, which is clear, accurate, transparent, accessible, relevant and up to date. Information on the availability of accommodation, whether provided by the ELE provider or not, is made clear to international learners and other stakeholders prior to enrolment;</p> <p>(x) information on the complaints and grievances procedure.</p>	
9.2 Partnerships with education agents, recruitment partners and consultants	<p>(a) ELE providers have an up-to-date written agreement with each education agent, recruitment partner and consultant that formally represents the ELE provider.</p> <p>(b) ELE providers perform due diligence, e.g., three reference checks, to verify the track record of prospective education agents, recruitment partners and consultants in relation to learner protection issues, prior to entering into a contractual agreement.</p> <p>(c) ELE providers ensure that any contractual arrangements entered with education agents, recruitment partners and consultants incorporate the principles of the London Statement. Existing agreements or contracts with education agents, recruitment partners and consultants that do not incorporate these principles shall be amended appropriately within two years of the date on which the ELE provider is authorised to use the IEM.</p> <p>(d) The contract between the ELE provider and education agent, recruitment partner or consultant includes a termination clause in instances where the partner does not comply with the principles of the London Statement or is found to have acted in an unethical fashion to the detriment of international learners.</p> <p>(e) ELE providers have in place a process for reviewing, at least once every two years, the activities of education agents, recruitment partners and consultants.</p> <p>(f) ELE providers ensure that education agents, recruitment partners and consultants are in possession of clear, accurate, transparent, accessible, relevant and up-to-date information regarding the provider and its provision.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Partial, pre-agreed: progression by mid-cycle, full compliance by IEMAS 2</p> <p>(d) Partial, pre agreed: progression by mid-cycle, full compliance by IEMAS 2</p> <p>(e) Full</p> <p>(f) Full</p> <p>(g) Full</p>

	(g) ELE providers ensure that education agents, recruitment partners and consultants are appropriately trained by the provider on a regular basis, as needed.	
<b>10 Enrolment, fees, refunds and subsistence</b>  10.1 Fees and terms and conditions	<p>(a) ELE providers establish a realistic and sustainable fee structure that supports the mission of the organisation and reflects the real costs associated with high quality ELE provision.</p> <p>(b) Information regarding fees for all programmes included in promotional materials, such as brochures and on the company website, is clear, accurate, transparent, accessible, relevant and up to date.</p> <p>(c) ELE providers give clear, accurate, transparent, accessible, relevant and up-to-date information on enrolment and programme fees. Providers ensure that there are no unexpected charges or additional fees that have not been brought to the attention of international learners and other stakeholders prior to enrolment.</p> <p>(d) Where accommodation is offered by the ELE provider, clear, transparent, accurate, accessible, relevant and up-to-date information is made available about accommodation booking fees and accommodation fees.</p> <p>(e) Clear, accurate, transparent, accessible, relevant and up-to-date information is made available about the terms and conditions policy regarding enrolments, fees, cancellations and refunds. This policy outlines the procedures regarding refunds, e.g., in the case of a refused visa application for a non-EU/EEA learner, and timelines to follow.</p> <p>(f) Where the fees do not include the cost of programme materials, this is made clear.</p> <p>(g) Any additional costs, e.g., airport transfers, programme materials and social event costs, are clearly identified.</p> <p>(h) Any fees or charges incurred, e.g., for credit card payments or payment portals, are made transparent.</p> <p>(i) ELE providers issue a receipt to learners, or to the education agent, recruitment partner or consultant on behalf of the learner, upon receipt of payment of fees, which includes an itemised breakdown of fees paid.</p>	(a) Full (b) Full (c) Full (d) Full (e) Full (f) Full (g) Full (h) Full (i) Full

10.1.1 Additional costs	<p>(a)ELE providers give reliable, indicative and up-to-date information on the full cost of studying in Ireland, including, but not limited to:</p> <ul style="list-style-type: none"> <li>(i) accommodation (if not provided by the ELE provider)</li> <li>(ii) average food and subsistence costs</li> <li>(iii) public transport</li> <li>(iv) health care</li> <li>(v) medical insurance</li> <li>(vi) immigration-related fees e.g., visa charges</li> <li>(vii) event programme costs</li> <li>(viii) any other costs related to provision of student services as considered relevant by the ELE provider.</li> </ul>	(a) Full
10.2 Enrolment procedures	<p>(a)ELE providers clearly document and describe enrolment procedures for all stakeholders.</p> <p>(b) Enrolment procedures are clear, accurate, transparent, accessible, relevant and up to date.</p> <p>(c)</p> <p>(c) ELE providers who are authorised to use the IEM are required to put arrangements in place for the protection of enrolled learners under Section 65 of the 2012 Act as amended, prior to the recruitment of learners.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>

## APPENDIX TWO: Meeting QA Guidelines for ELE criteria

There are QA Guidelines for ELE criteria where full meeting of criteria is required for the initial IEMAS submission. Other pre-established criteria may be partially met, with the condition that they are fully met within an agreed period, as described in the QA Guidelines for ELE and this Guidance Handbook. For the purposes of this document, these criteria are called 'partial, pre-agreed'. Other criteria, where minor modifications are required, may also be partially met, and for these criteria, conditions for full meeting within a timeframe will be set by QQI. These are called 'partial meeting, minor modifications'. Please see below the QA Guidelines for ELE criteria and the meeting criteria requirements for the initial IEMAS submission.

***All decisions regarding partial compliance will be made by the Assessment Panel and authorised by QQI's Approvals and Reviews Committee.***

***Providers should always refer to the QA Guidelines for ELE, ELE Code and the Guidance Handbook for ELE Providers when preparing to submit their IEMAS.***

Criteria	Text	Meeting requirement
<b>2.1 Organisational Structures</b>	(a) There is a mission statement, which may also describe the core values and objectives of the ELE provider.	(a) Full
	(b) The organisational chart supports the efficient operational management of the ELE provider in all areas of organisational, administrative, and academic management.	(b) Partial, minor mods
2.1.1 Organisational and administrative structures	(c) Organisational, administrative, and academic management structures are clear, transparent, appropriate to the size of the ELE provider, adaptable as required and are understandable by staff, learners, education agents, recruitment partners, consultants and other key stakeholders.	(c) Full
	(d) Responsibilities and line management structures among members of administrative and academic management, and administrative and academic staff, are clear, transparent, efficient, and understandable by all staff.	(d) Partial, minor mods (e) Full

	(e) Strategic organisational and operational planning is carried out periodically and supports the ELE provider's developmental and enhancement objectives.	
2.1.2 Administrative staffing	<p>(a) The administrative staff profile meets the needs of the ELE provider and all administrative staff are suitably qualified/trained and/or experienced for their role.</p> <p>(b) Each centre has an administrative team in place which is proportional to the size and functions of the centre and to the current number of enrolled learners present at the centre during operational hours.</p>	<p>(a) Partial, minor mods</p> <p>(b) Partial, minor mods</p>
2.1.3 Administrative systems	<p>(a) There is a management system in place to support effective administrative, enrolment and academic management operations, as well as management of internal monitoring and provision of required information and data, as needed. All members of staff are trained in the use of this system as relevant to their role.</p> <p>(b) Data management systems, including data on the school management system, are efficient and meet the needs of the ELE provider</p>	<p>(a) Full</p> <p>(b) Full</p>
2.1.4 Communications	<p>(a) Communication channels among members of administrative and academic management, and administrative and academic staff, are clear, transparent, efficient, and understandable by all staff.</p> <p>(b) There is regular, documented communication among the management team(s) and between management, administrative and academic teams. Administrative and academic teams coordinate and communicate effectively.</p> <p>(c) Members of staff meet with their line manager periodically to discuss their role, performance and training and development needs, and to receive guidance and support, as needed, and these meetings are documented.</p>	<p>(a) Partial, minor mods</p> <p>(b) Partial, minor mods</p> <p>(c) Full</p>
<b>2.2 Management and Governance of</b>	(a) ELE providers have quality assurance policies in place which inform the management and development of quality assurance procedures in all areas of the organisation.	<p>(a) Full</p> <p>(b) Full</p>

<p><b>Quality Assurance</b></p> <p>2.2.1 Quality assurance systems</p>	<p>(b) There is a dedicated and suitably trained Quality Assurance Officer who is responsible for the development, embedding and management of provider quality assurance policies and procedures throughout the organisation, as well as the enhancement of ELE provision and associated services, as required and appropriate. The role of the Quality Assurance Officer may be part of another role of a member of staff. However, it is important to note that quality assurance development and management is a part of the functions of all staff members, relevant to their specific role, as well as of the whole organisation.</p> <p>(c) Quality assurance policies and procedures of the ELE provider are aligned with the mission and strategic objectives of the provider and are developed, embedded and managed on a cross-organisational basis, with the involvement of relevant internal and external stakeholders.</p> <p>(d) Quality assurance policies and procedures are suitably and sustainably resourced to support operations, ELE provision and all services offered by the ELE provider.</p>	<p>(c) Partial, minor mods</p> <p>(d) Full</p>
<p>2.2.2 Quality assurance policies and procedures</p>	<p>(a) ELE providers have quality assurance policies and procedures in place to ensure protection of key internal and external stakeholders and to support efficient operations and development.</p> <p>(b) Quality assurance policies and procedures may include, but are not limited to, the following areas: (i) Corporate and academic governance; (ii) Management and operations; (iii) Environmental sustainability; (iv) Health and safety; (v) Enrolment, fees, refunds and subsistence; (vi) Learner welfare and supports; (vii) Learner and other stakeholder complaints and grievances; (viii) Accommodation services, where offered; (ix) Safeguarding; (x) Human resources; (xi) Staff welfare and supports; (xii) Staff training and development; (xiii) Staff complaints and grievances; (xiv) Equality, diversity and inclusion; (xv) Curriculum, syllabus, programme and assessment design, management and quality reviews; (xvi) Award and certification services, where offered; (xvii) Academic integrity; (xviii) Artificial intelligence; (xix) Ethical marketing and recruitment (xx) Evaluation of ELE provision and services</p> <p>(c) Quality assurance policies and procedures inform the need to make changes in the organisation in order to continue to develop and enhance ELE provision, services and operations.</p>	<p>(a) Full</p> <p>(b) Partial, minor mods</p> <p>(c) Full</p> <p>(d) Full</p>



	(d) Quality assurance policies and procedures are designed in consultation with all members of staff involved in their implementation and management and are updated and enhanced periodically, and as needed.	
2.2.3 Quality assurance reviews	<p>(a) Periodic self-assessments take place during which all areas of the organisation are reviewed and evaluated and following which appropriate action is taken where needed to ensure the development and enhancement of quality.</p> <p>(b) ELE providers produce a self-monitoring report every 18 months, i.e., at the mid-cycle point in the three-year IEM authorisation period. This report describes provider activities, developments and enhancements during this 18-month period and plans for the coming 18-month period. This report is submitted to QQL.</p> <p>(c) There are procedures in place which enable learners, staff and other stakeholders to evaluate the ELE provider. Evaluation is varied in type and is gathered on areas such as, but not limited to:</p> <ul style="list-style-type: none"> <li>(i) premises and facilities;</li> <li>(ii) organisational management</li> <li>(iii) ELE provision;</li> <li>(iv) accommodation and catering, where offered;</li> <li>(v) events programme;</li> <li>(vi) other services offered;</li> <li>(vii) developments and enhancements;</li> <li>(viii) staff development and conditions.</li> </ul> <p>(d) Data gathered from different types of evaluation and feedback are used to support decision-making regarding strategic organisational planning, development and enhancement, and to inform the planning of future programmes.</p> <p>(e) Identified issues are dealt with immediately. For this reason, it is recommended that initial feedback be gathered from learners during the first week of the programme in order to resolve potential issues as soon as possible.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Partial, minor mods</p> <p>(d) Partial, minor mods</p> <p>(e) Full</p>

<b>2.3 Academic Management Structures</b>  2.3.1 Qualifications and experience	The academic staff profile meets the needs of the organisation, and all members of academic staff are suitably qualified, and experienced, where required, for their role.	Partial, pre-agreed:  Teaching staff: mid-cycle  Academic managers with TD role: IEMAS 2
2.3.2 Communications	<p>(a) There is regular, documented communication among the academic management team and among academic management, trainers and teachers. Meetings may include, but are not limited to, the following: (i) regular academic administration meetings to confirm schedules and monitor learner attendance and participation; (ii) materials and resources selection, implementation and management; (iii) curriculum, syllabus and schemes of work review and development; (iv) formative and summative assessment framework review and development, as well as regular CPD sessions for teachers and trainers. As a guideline, it is recommended that CPD sessions be offered to teachers and trainers once a month.</p> <p>(b) There are systems in place to offer academic and mentoring support to teachers and trainers.</p>	(a) Partial, minor mods  (b) Full
2.3.3 Programme development	<p>(a) Considerations on new programme developments are discussed at corporate management and academic management level, with inputs from sales and marketing management as required, as well as inputs from external stakeholders, such as HE providers in Ireland.</p> <p>(b) All decisions regarding potential new programme developments are agreed with the academic governance committee or external ELE expertise, in the case where a provider's scale is such that it cannot support an academic governance committee internally.</p> <p>(c) All decisions regarding new programme developments are made with regard to the capacity and capability of the ELE provider and business plans are agreed between corporate management and academic management to support decision making in each case.</p>	(a) Partial, minor mods  (b) Full  (c) Partial, minor mods
2.3.4 Academic materials	(a) Academic materials and resources for each existing or new programme are selected and updated to support teaching and learning needs, as well as new developments and practices.	(a) Full  (b) Full

	<p>(b) A member(s) of staff is/are responsible for the management and curation of all academic materials and resources, and a budget is agreed.</p> <p>(c) All new academic materials and resources are approved by the Academic Governance Committee or the external expert.</p>	(c) Full
2.3.5 Attendance at briefings and conferences	<p>(a) A member of the academic management staff attends scheduled QQI briefings, which may be held online or in person.</p> <p>(b) A member(s) of the academic staff attend(s) relevant training and development sessions and conferences in Ireland, and learnings are cascaded to colleagues in CPD sessions.</p> <p>(c) ELE providers sponsor academic staff members to attend events and conferences, and learnings are cascaded to colleagues in CPD sessions.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>
2.3.6 Operational academic management	<p>(a) There is an appropriate learner: teacher/teacher trainer ratio for all programmes to ensure participation opportunities on the part of the learners and effective classroom management on the part of teachers and teacher trainers.</p> <p>(b) The number of dedicated full-time academic managers per centre is proportional to the number of enrolled learners at the centre at any one time during operational hours.</p> <p>(c) Teaching schedules of a maximum of thirty contact teaching hours per week are fully supported by well-designed curricula, syllabuses, and schemes of work, which are closely aligned to the Common European Framework of Reference for Languages (CEFR).</p> <p>(d) There is an effective system in place to substitute teachers and teacher trainers as required.</p> <p>(e) Academic managers are responsible for the monitoring of all academic administrative documentation, which is stored on the school management system.</p> <p>(f) Records of work completed in class are recorded in sufficient detail (i.e., to enable another teacher to understand what has been completed) on the management system and this is monitored by academic management staff. Follow-up work with teachers is completed when records are insufficient.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Partial, pre-agreed: progression by mid-cycle; full by IEMAS 2</p> <p>(d) Partial, minor mods</p> <p>(e) Full</p> <p>(f) Partial, minor mods</p> <p>(g) Full</p>

	(g) Compliance with copyright and other intellectual property rights legislation is monitored by academic managers.	
2.3.7 Teaching and learning	<p>(a) Teachers plan and deliver ELE programmes in a learning environment that is appropriate and of a sufficient standard to facilitate learners' achievement of the intended learning outcomes.</p> <p>(b) Lesson planning, teaching approaches, methods and skills reflect the ELE provider's philosophy, mission statement and strategic objectives for the organisation and help learners meet their language learning objectives.</p> <p>(c) Lesson planning and teaching approaches reflect the ELE provider's commitment to the close alignment of the provider's curriculum, syllabus and course programme to the CEFR.</p> <p>(d) Lesson planning and teaching skills are core competences that are developed on initial teacher training courses and further developed and fine-tuned as a teacher develops their skills in the organisation.</p> <p>(e) Design and delivery of lessons is monitored by academic managers.</p> <p>(f) Academic managers, senior teachers and teacher trainers help newly qualified and less experienced teachers to continue to develop lesson planning and teaching skills and support newly qualified and less experienced teachers when planning and teaching.</p> <p>(g) There are developmental observation systems, e.g., self- and peer observations, in place to help all teachers and teacher trainers learn from each other in relation to approaches, skills, techniques, and to help less experienced teachers learn from more experienced colleagues</p>	<p>(a) Partial, minor mods</p> <p>(b) Partial, minor mods</p> <p>(c) Partial, minor mods</p> <p>(d) Partial, minor mods</p> <p>(e) Full</p> <p>(f) Full</p> <p>(g) Full</p>
2.3.8 Lesson planning	<p>(a) Teachers plan lessons with clear intended learning outcomes, with reference to the curriculum, syllabus, course programme/schemes of work, learner needs and course materials, and planning is clearly and closely aligned to the CEFR.</p> <p>(b) When lesson planning, teachers demonstrate an ability to: (i) take learner needs, interests and cultural background into account; (ii) incorporate a variety of teaching approaches as appropriate; (iii) formulate clear and achievable intended learning</p>	<p>(a) Partial, pre-agreed: mid-cycle</p> <p>(b) Partial, minor mods</p>

	<p>outcomes; (iv) formulate coherent and achievable stages and stage aims; (v) consider learner-centredness; (vi) for language skills: formulate detailed language analysis of meaning, form, pronunciation (and appropriacy, as necessary), considering learner participation, and detailed anticipated problems; (vii) for skills: focus on achievable intended learning outcomes in terms of learner development of sub-skills; (viii) include a variety of interaction patterns to support learner participation and effective classroom interaction; (ix) incorporate authentic use of language; (x) incorporate self- and peer evaluation by learners; (xi) include content and language feedback following speaking/writing stages; (xii) adapt course book materials and design materials, including authentic materials, depending on learner needs and interests and intended learning outcomes; (xiii) include some reflection on the lesson and learning.</p>	
2.3.9 Lesson delivery	<p>(a) Lessons are delivered with clear reference to the syllabus, learner needs and CEFR 'can do' descriptors, as well as course materials.</p> <p>(b) Teaching skills demonstrate teachers have developed and continue to develop core competencies, including, but not limited to, the following: (i) an understanding of the need to empathise and personalise with learners and to generate rapport; (ii) an understanding of the need to promote effective learner training and study skills; (iii) an understanding of effective classroom management skills, including, but not limited to, the following areas: elicitation, task setting and instructions, suitable classroom layout, management of materials and resources, and management of learners and the lesson; (iv) an ability to monitor, correct and manage feedback, including management of emergent language; (v) an ability to evaluate learning and assess achievement of intended learning outcomes or progress towards these; (vi) an ability to adapt approaches and techniques in accordance with learner needs and learning preferences; (vii) an awareness of inter-cultural diversity and needs; (viii) an awareness of the language needs of learners, depending on their first language influences and interferences; (ix) an awareness of differentiation.</p>	<p>(a) Partial, pre-agreed: mid-cycle</p> <p>(b) Partial, minor mods</p>
2.3.10 Online provision	<p>(a) Where online provision is offered, ELE providers can demonstrate that teachers have been suitably trained in effective lesson planning and teaching skills for synchronous and asynchronous contexts, as relevant, including specific training on materials design, effective use of the online platform(s) and tools, effective classroom management and interaction, monitoring, and feedback in the online classroom.</p>	<p>(a) Partial, minor mods</p> <p>(b) Partial, minor mods</p> <p>(c) Full</p> <p>(d) Full</p>

	<p>(b) Where online provision is offered, providers can demonstrate that learners have been suitably trained in effective use of the online platform(s), tools, materials and types of interaction in the online classroom.</p> <p>(c) Where online provision is offered, ELE should have regard to the QQI Statutory Quality Assurance Guidelines for Providers of Blended and Fully Online Programmes.</p> <p>(d) ELE providers have a written remote plan in place, together with a training plan for teachers and learners, to upskill teachers efficiently and to enable the academic team and learners to move to synchronous online provision with limited disturbance to staff and learners.</p>	
2.3.11 Monitoring of lesson planning and delivery	<p>(a) The quality of the learning experience is monitored on an on-going basis with regular quality assurance observations.</p> <p>(b) Quality assurance observation feedback is disseminated to teachers and this feedback is recorded.</p> <p>(c) Quality assurance observation feedback informs teacher/teacher trainer development needs and helps academic managers to plan development programmes to meet these needs.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>
<b>2.4 Programme Design</b> 2.4.1 Curriculum and syllabus design	<p>(a) Curriculum and syllabus design is completed and managed by suitably qualified and experienced senior academic staff, with learner needs and interests in mind.</p> <p>(b) Curriculum and syllabus design is clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR), with clearly defined learning outcomes, which are articulated in 'can do' descriptors.</p> <p>(c) Curriculum and syllabus design and updates are approved by the academic governance committee, or external ELE expertise, as appropriate, and approvals are documented.</p>	<p>(a) Partial, pre-agreed: Teachers: mid-cycle Academic managers: IEMAS 2</p> <p>(b) Partial, pre-agreed: mid-cycle</p> <p>(c) Full</p>
2.4.1.1 Curriculum design	<p>Curriculum design considers:</p> <p>(i) the provider's educational philosophy and mission statement.</p>	Partial, pre-agreed: mid-cycle

	(ii) approach(es) to be taken, e.g., Communicative Approach, Task-Based Learning, aligned to the CEFR 'can do' descriptors.	
2.4.1.2 Syllabus design	Syllabus design considers, as appropriate: (i) intended learning outcomes, clearly and closely aligned to the CEFR 'can do' descriptors; (ii) assessment framework; (iii) formative and summative assessment; (iv) learner age, where relevant e.g., teens, young adults, over 30s; (v) learner interests and needs; (vi) prior learning of learners; (vii) contact and guided learning hours to complete a given programme; (viii) materials, including essential and suggested supplementary resources; (ix) self-study and guided learning opportunities; (x) opportunities for learner decisions on input, depending on interests and needs; (xi) adjustment and modification options at different stages, based on learner and teacher feedback and evolving needs; (xii) learner training; (xii) opportunities for learners to develop cultural awareness and to learn about life in Ireland – ideally, the programme includes lessons that are connected to the events programme; (xii) pathways to higher education; (xv) employment opportunities; (xvi) learner development of an understanding of study and academic integrity conventions; (xvii) learner development of learner independence and learner training strategies; (xviii) opportunities for learners to practise English outside the classroom; (xix) remedial action opportunities for programme completion; (xx) reflection and evaluation.	Partial, pre-agreed: mid-cycle
2.4.1.3 Curriculum, syllabus and course programme/schemes of work reviews	Curriculum, syllabus and course programme/schemes of work reviews are periodically carried out by the academic management and teaching team(s) as needed in order to: (i) meet evolving needs of the ELE provider, e.g., new programme and learner types; (ii) meet evolving needs and interests of learners; (iii) incorporate evolving practice and approaches; (iv) incorporate changes made as a result of feedback from teachers, teacher trainers, learners, and other stakeholders; (v) include new materials, which are approved by the academic governance committee.	Full
2.4.2 Assessment systems	<p>(a) The provider's assessment framework (i) establishes the provider's approach to assessment of learners in both external proficiency examinations, and in-house formative and summative assessments; (ii) is clearly and closely aligned to the intended learning outcomes of each programme, expressed in 'can do' descriptors from, or adapted from, the CEFR; (iii) meets learner needs; (iv) addresses assessment administrative arrangements; (v) includes provisions for the reasonable accommodation of learners with specific needs, e.g., dyslexia, visual or auditory impairments.</p> <p>(b) A suitably qualified/trained member(s) of the senior academic staff is/are responsible for assessment within the organisation.</p>	<p>(a) (i), (iii), (iv), (v): Partial, minor mods (ii) Partial, pre-agreed: mid-cycle</p> <p>(b) Full</p> <p>(c) Partial, minor mod</p>



	<p>(c) Providers have quality assurance procedures, structures and resources in place to ensure that all assessment types are clear and accessible and that the principles of validity, reliability and impact are well considered.</p> <p>(d) Providers ensure that formative and summative assessments of programmes are designed for the learner group and the skills practised.</p> <p>(e) Providers ensure that learners enrolled on ELE programmes leading to external proficiency examinations are sufficiently prepared for these examinations.</p> <p>(f) Learners are informed about when, how, and why they are assessed, and are provided with feedback on their progress and expected outcomes in internal and external summative examinations.</p> <p>(g) Regular tutorials are offered to learners during their course, e.g., following mock, mid-level and end-of-level exams, to help them focus on their learning needs and objectives.</p> <p>(h) Remedial support is offered to learners where needed.</p> <p>(i) Learners periodically receive reports from teachers following an assessment, with guidance for further study. Reports are monitored by academic managers.</p> <p>(j) There is an internal appeal process in place for learners who consider an internal assessment result to be unfair or incorrect.</p>	<p>(d) Partial, minor mod</p> <p>(e) Partial, minor mod</p> <p>(f) Full</p> <p>(g) Full</p> <p>(h) Full</p> <p>(i) Full</p> <p>(j) Full</p>
2.4.2.1 Types of assessment	<p>(a) A clear and accessible placement testing system is in place, which considers the principles of validity, reliability and impact, to ensure that learners are placed in the correct level at the beginning of their course. This test may be taken either before the learner arrives at the centre or on their first day. The placement test includes an assessment of grammar, lexis and speaking, and, if possible, writing, reading and listening. If it is not possible to include writing, reading and listening in the placement test, the academic manager ensures that these skills are assessed as soon as possible following the start of the learner's programme in order to enable the learner and their teacher assess learning needs. Effective corrective systems are in place to ensure that learners who have been</p>	<p>(a) Partial, minor mods</p> <p>(b) Partial, minor mods</p> <p>(c) Partial, minor mods</p> <p>(d) Full</p>

	<p>incorrectly placed are moved to a more suitable level. This correction is completed as soon as possible, ideally by Day Two.</p> <p>(b) Clear and accessible formative and summative assessment systems are in place which consider the principles of validity, reliability and impact. These systems meet learner needs and are tailored to suit the language skills and systems practised on the programme.</p> <p>(c) Assessment may take different forms, including, for example, recycling, quizzes, tasks, projects and presentations, as well as more traditional test types</p> <p>(d) Mock examinations are provided to learners preparing for external proficiency examinations and the principles of validity, reliability and impact are well considered.</p>	
2.4.2.2 Academic integrity and security	(a) Procedures and systems are in place to manage the security and integrity of assessment processes, including: (i) dissemination of information to learners, as appropriate, about academic integrity; (ii) assessment procedures for academic and administrative staff, as required; (iii) standardisation of productive skills assessment; (iv) storing of assessment materials; (v) records of learner assessment.	Full
2.4.2.3 Information on assessment procedures	Information relating to assessment procedures is made available to learners, including, but not limited to, the following: (i) course programme and assessment calendar; (ii) formative and summative assessment types; (iii) learner responsibilities in relation to assessment; (iv) academic integrity; (v) end of level/exit certificates and reports; (vi) guidance for learners on the selection of a proficiency exam appropriate to their level and needs, e.g., progression to higher education; (vii) information on grading systems for external proficiency examinations and its relationship to the CEFR scale; (viii) tutorials; (ix) remedial support.	Full
2.4.3 Teacher training centres and programme design	Where the ELE provider is also a teacher training centre, input on teacher training courses may include: (i) an introduction to the principles of course design in order to help trainee teachers understand the basic concepts; (ii) an introduction to the principles of the CEFR and its 'can do' descriptors; (iii) an introduction to the principles of assessment; in addition to the other input sessions typically included on initial teacher training courses.	Full
2.4.4 Academic staff development	(a) ELE providers ensure that all academic staff develop an essential awareness of: (i) the provider's educational philosophy and mission statement; (ii) the curriculum and syllabus rationale; (iii) the principles of the CEFR ; (iv) alignment of the curriculum and syllabus to	(a) Partial, pre-agreed: mid-cycle

and programme design	<p>the CEFR; (v) development of course programmes/schemes of work and lesson materials aligned to the CEFR descriptors and levels; (vi) development of forms of assessment aligned to the CEFR</p> <p>(b) All staff members, particularly those who are in contact with learners and education agents, recruitment partners and consultants, also receive training on the principles behind the CEFR.</p>	(b) Full
<b>2.5 Supports and Services for International Learners</b>  2.5.1 Learner orientation and induction	<p>Inductions include, but are not limited to, information on areas such as the following: (i) information about the centre; (ii) provider approach to teaching and learning; (iii) description of academic programme; (iv) assessment; (v) lesson schedules and breaks; (vi) events programme; (vii) practical skills workshops; (viii) practical advice, e.g., opening a bank account and who in the organisation to seek advice or help from; (ix) what to do and who to contact in an emergency; (x) learner responsibilities, e.g., in relation to non-EU/EEA students requiring entry visa and/or immigration permission; (xi) provider responsibilities; (xii) health and well-being; (xiii) management of emergencies; (xiv) local events and organisations of interest; (xv) cultural and inter-cultural awareness; (xvi) code of conduct; (xvii) complaints and grievances procedures; (xviii) academic integrity</p> <p>a) Learners are provided with a student handbook, which includes the information above, as well as other relevant information, such as a map of the area and public transport options.</p> <p>(b) Learner groups consist of a variety of language speakers, in order to optimise English language learning opportunities. Where this is not the case, ELE providers ensure that learners are made aware of this before enrolling in a programme of study.</p>	Full  (a) Full  (b) Full
2.5.2 Learners requiring entry visas and/or immigration permissions	<p>(a) Further induction and information dissemination is offered to non-EU/EEA learners who require entry visas and/or immigration permission on requirements learners must be aware of.</p> <p>(b) ELE providers offer advice to learners on areas including, but not limited to, the following: (i) pathway options to further and higher education study; (ii) finding part-time employment; (iii) applying for a PPSN number; (iv) opening a bank account; (v) finding accommodation, if not provided by the provider. (c) Providers ensure the information provided to learners at induction is clear, accurate, transparent, accessible, relevant and up-to-date, and that it is available throughout their programme, as needed. Providers offer</p>	(a) Full  (b) Full

	learners reminders of this information at key points during the programme e.g., in the lead-up to examinations.	
2.5.3 Academic supports	<p>(a) Academic managers and the student welfare officer are available to offer study advice to learners on an on-going basis. Information on further and higher education study opportunities is made available to learners as needed.</p> <p>(b) Academic materials and resources are made available for learners to use outside of class time. These may be made available on-site as hard copies and/or online as soft copies.</p>	<p>(a) Full</p> <p>(b) Full</p>
2.5.4 Events programme	<p>(a) Providers offer information on integration opportunities available to international learners, such as membership of book or film clubs, and encourage learners to avail of those opportunities.</p> <p>(b) The events programme is linked to learner needs and interests and may be linked to the academic programme, if appropriate. Events coordinators liaise with academic managers to manage events selection and planning, including any tasks linked to the ELE programme, as required by the provider.</p> <p>(c) The number of events staff members is proportional to the number of learners at the centre and there is a system in place to substitute members of staff as needed.</p> <p>(d) Events administrative procedures include, but are not limited to, the following: (i) the formulation of risk assessments for each event, with appropriate staff : learner ratios; (ii) management of any activities and tasks linked to the academic programme, in collaboration with academic management; (iii) management of attendance at events and completion of attendance reports; (iv) recording of events and tasks completed on events, as required by the provider.</p>	<p>(a) Partial, minor mods</p> <p>(b) Partial, minor mods</p> <p>(c) Full</p> <p>(d) Partial, minor mods</p>
2.5.5 Exit procedures for enrolled learners	<p>(a) Providers issue learners with certificates and reports acknowledging attendance and final level achieved at the end of the learner's enrolment duration. Certificates refer to the CEFR scale and 'can do' descriptors.</p> <p>(b) Learners are informed of document storage systems, including storage of learner attendance and assessment records.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>

	(c) Learners requiring entry visas and/or immigration permission, and who intend to enrol on a further ELE programme with another ELE provider, or on a higher education programme, as permitted, are provided with all required documentation, for example attendance and assessment records, by the provider where learners are currently enrolled on a programme of study, by the learners' final day of study with the ELE provider	
<b>2.6 Staff Supports and Development</b>  2.6.1 Induction procedures	<p>(a) ELE providers foster an environment which supports the well-being and integration of new staff into the organisation.</p> <p>(b) Induction procedures are in place for all new staff and include, but are not limited to, information on the following, as required for their role by the new member(s) of staff: (i) history and ownership of the organisation; (ii) organisational mission statement; (iii) organisational chart; (iv) student body; (v) client journey; (vi) authorisations, memberships and accreditations, including any obligations in place related to these; (vii) organisational and administrative systems, including communication channels; (viii) educational philosophy, curriculum, and syllabus; (ix) approach to teaching, learning and assessment; (x) academic integrity; (xi) HR systems, including details on contractual conditions e.g., leave, payroll; (xii) information and employee rights and benefits; (xiii) intercultural awareness training; (xiv) health and safety; (xv) safeguarding, where appropriate; (xvi) requirements regarding learners requiring entry visas and/or immigration permission; (xvii) training for specific roles, as required; (xviii) possible professional development opportunities and paths within the organisation and relevant educational/training opportunities, including funding opportunities available; (xix) quality assurance policies and procedures; (xx) academic administrative procedures, including completion of attendance, logging of work completed in class and certificate and learner reports, as required; (xxi) events administrative procedures, including the formulation of risk assessments for each event, management of activities and tasks linked to the academic programme, management of attendance records at events and completion of reports as required.</p> <p>(c) Staff handbooks are made available to new staff with all the information supplied at induction, as well as other relevant information.</p>	(a) Partial, minor mods  (b) Full  (c) Full
2.6.2 Academic staff induction	(a) Academic staff receive an induction on academic management in the organisation, including information on the following: (i) curriculum, syllabus, course programmes/schemes of work; (ii) CEFR: principles, rationale, descriptors, course design; (iii) academic approach(es), methodologies and skills, lesson planning, selection and	(a) Full  (b) Full

	<p>design of materials, academic approach(es), methodologies and skills, materials and resources, lesson planning and use of technology; (iv) assessment framework and procedures; (v) learner support and welfare systems; (vi) exit procedures, including certificates and reports.</p> <p>(b) Academic staff handbooks are made available to new staff with all the information supplied at the inductions, as well as other relevant information.</p>	
2.6.3 Student social events staff induction	(a) Student social events staff receive an induction on areas including, but not limited to, the following: (i) effective planning and management of events and activities, including events with minors, if relevant; (ii) completing risk assessments; (iii) completing attendance records; (iv) essential first aid procedures, as permitted; (v) safeguarding, as relevant.	(a) Full
2.6.4 Staff training and development	<p>(a) Continuous professional development is available to all staff, aligned to the organisation's mission statement, needs and strategic objectives.</p> <p>(b) Cross-organisational training is planned to help different members of staff understand structures and roles within the organisation, as well as specific areas, e.g., training in programme and proficiency examination types for administrative and sales and marketing staff, and training in student recruitment for academic staff.</p> <p>(c) All staff training is documented.</p>	<p>(a) Full</p> <p>(b) Partial, minor mods</p> <p>(c) Full</p>
2.6.5 Administrative staff training and development	<p>(a) Administrative staff receive regular professional development, and training, as appropriate, to ensure that they continue to learn and that their processes and procedures are current.</p> <p>(b) A documented CPD plan is in place for all administrative staff and training in areas of administrative systems, such as customer service, as and other areas, such as health and safety, is offered to administrative staff, as required.</p>	<p>(a) Full</p> <p>(b) Full</p>
2.6.6 Academic staff training and development	(a) A documented CPD plan is in place for all academic staff, including academic managers, teacher trainers and teachers, in order to: (i) meet the training and developmental needs of all academic staff; (ii) ensure that knowledge of the curriculum and syllabus, aligned to the CEFR, is known by all academic staff; (iii) ensure that practice is current.	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>

	<p>(b) CPD includes a developmental observation cycle for all-academic team members, including self- peer, short and full lesson observations, and, in the case of full lesson observations, pre-lesson meetings, submission of lesson plans and post observation feedback meetings.</p> <p>(c) Developmental needs are identified through the observation cycle, and this informs the CPD plan for academic staff</p>	
2.6.7 Sales and marketing staff training and development	<p>(a) Sales and marketing staff receive regular professional development and training, as appropriate, to ensure that processes and procedures, as well as organisational information, are current.</p> <p>(b) Training is given in areas such as ethical practices and the London Statement.</p> <p>(c) A documented CPD plan is in place for all sales and marketing staff, including managers, to support clear, transparent, knowledgeable, ethical and effective sales and marketing practices.</p>	<p>(a) Full</p> <p>(b) Full</p> <p>(c) Full</p>
2.6.8 Performance review	Documented performance reviews for all staff members take place at least on an annual basis, during which training and development needs and career plans are identified and agreed	Full



## APPENDIX THREE: Definition and calculation of learner weeks

### Definition of learner week

One learner week is defined as one learner enrolled on an ELE programme with an ELE provider of a minimum of 15 60-minute taught hours for one week.

### Calculation of learner weeks

To calculate learner weeks, multiply the number of learners by the number of weeks of their programme of study. Please see examples of enrolment types below:

#### 1 Learners enrolled on one ELE programme

Learner weeks for learners enrolled on **one ELE programme** are calculated by multiplying the number of learners by the number of weeks of their programme. Please see examples below:

##### 1.1 Example learner A

General English Programme (15 hours per week) x 8 weeks x 1 learner = 8 learner weeks

##### 1.2 Example learner group A

Cambridge First Exam Preparation Programme (20 hours per week) x 8 weeks x 10 learners = 80 learner weeks

##### 1.3 Example learner group B

Study/Work Programme (20 hours per week) x 25 weeks x 10 learners = 250 learner weeks

#### 2 Learners enrolled on consecutive programmes (re-enrolment)

Learner weeks for learners enrolled on two or more **consecutive programmes** are calculated separately for each programme. Please see examples below:

##### 2.1 Example learner

Programme 1: General English Programme (15 hours per week) x 4 weeks = 4 learner weeks

Programme 2: General English Programme (15 hours per week) x 2 weeks = 2 learner weeks

**Total no of learner weeks for this learner = 6 learner weeks**

##### 2.2 Example learner group

Programme 1: General English Programme (20 hours per week) x 25 weeks x 10 learners = 250 learner weeks

Programme 2: General English Programme (20 hours per week) x 25 weeks x 10 learners = 250 learner weeks

### **Total no of learner weeks for this learner group = 500 learner weeks**

In the cases above, it does not matter if any time elapses between Programme 1 and Programme 2 or if Programme 2 immediately follows Programme 1. They are still calculated as separate learner weeks.

### **3 Learners on concurrent programmes**

Learners on two or more **concurrent programmes** are calculated just once. Please see examples below:

#### **Example learner A**

General English Programme (15 hours per week) plus One to One Programme (5 hours per week) x 8 weeks = 8 learner weeks

#### **Example learner group A**

General English Programme (15 hours per week) plus One to One Programme (5 hours per week) x 8 weeks x 10 learners = 80 learner weeks

#### **Example learner group B**

General English Programme (20 hours per week) plus Business English Programme (5 hours per week) x 1 week x 10 learners = 10 learner weeks

## APPENDIX FOUR: ELE Code: suggested examples to demonstrate compliance with criteria

The following are illustrative examples only and are not exhaustive. Providers may use other documentation, descriptions, meetings etc., to demonstrate compliance with ELE Code criteria, where appropriate.

***Providers should always refer to the ELE Code, QA Guidelines for ELE and the Guidance Handbook for ELE Providers when preparing to submit their IEMAS.***

Criteria	Text	Examples of demonstration (not exhaustive)
<b>4.2 Access, transfer and progression</b>	<p>In invoking the ELE Code for the purpose of applying for authorisation to use the IEM, an ELE provider must:</p> <p>✓ have established procedures for access, transfer, and progression under section 56 of the 2012 Act as amended. These procedures should be cognisant of the interests and needs of international learners, and reference, in an appropriate manner, the location in which information is provided by the ELE provider on the pathways for international learners to further study, employment, and residency (where applicable).</p>	<p><b>Documentation</b>  ATP policy  Publicity materials e.g., brochure; link to website  Staff handbook  Student handbook</p> <p><b>Description</b>  ATP procedures: systems for development and approval, management, review and update of procedures  ATP pathways, use of 'Europass'</p> <p><b>Site visit</b>  Meetings with SMT, administrative, sales and marketing and academic teams; student and teacher focus groups.</p>
<b>5 Requirements for premises</b>	<p>(i) has planning permission for educational use.  (ii) has all necessary building requirements in place, e.g., fire safety and insurance  (iii) has capacity that is adequate and suitable for all members of staff and all currently enrolled learners at the premises at any one time  (iv) has suitable temperature, ventilation and light throughout the centre  (v) has classrooms that are suitable in size for the number of learners and teachers assigned to each classroom, have sufficient light and suitable acoustics, and are appropriately equipped for the purpose of provision of ELE to international learners.</p>	<p><b>Documentation</b>  Planning permission  Building policy  Fire safety policy  Health and safety policy  Building plans with areas marked to indicate classrooms (and capacity of each classroom), areas for students and staff for work/study and rest bathrooms  Images  Sample am and pm class schedules for 12 months prior to submission of IEMAS  Sample cleaning schedules  Organisational chart</p>

	<p>(vi) has suitable and adequate space reserved exclusively for the use of academic staff to plan lessons and consult with colleagues</p> <p>(vii) has suitable and adequate rest and study areas that are available to learners;</p> <p>(viii) has suitable and adequate rest areas that are available to staff;</p> <p>(ix) has adequate toilet facilities for all members of staff and all currently enrolled learners at the premises at any one time;</p> <p>(x) is well maintained and clean</p>	<p>Fire certificate</p> <p>Fire safety register</p> <p>Fire safety programme</p> <p>Insurance documentation</p> <p>JD of person responsible for health and safety</p> <p>JD of person responsible for building</p> <p>JD of cleaning staff</p> <p><b>Description</b></p> <p>Confirmation of capacity in relation to typical staff and learner numbers present at any time</p> <p>Facilities, equipment and fittings in centre</p> <p>Procedures to monitor, review and update facilities, equipment and fittings</p> <p><b>Site visit</b></p> <p>Inspection of premises</p> <p>Meetings with SMT, administrative, sales and marketing, academic, cleaning, activity teams; student and teacher focus groups.</p> <p>CV and JD of person(s) responsible for building</p> <p>CV and JD of person(s) responsible for health and safety</p> <p>CV and JD of person(s) responsible for cleaning</p> <p>Planning permission</p> <p>Fire certificate</p> <p>Fire safety register</p> <p>Fire safety programme</p> <p>Insurance documentation</p> <p>Observations</p>
<b>6 Operational, Risk and Human Resources Management</b>	<p>(a) All records for administration, accounts, marketing, staff, learners, partners, clients, associates and other stakeholders are securely stored on the management system.</p> <p>(b) Access is restricted to those members of staff who need to have specific access to data as relevant to their role.</p>	<p><b>Documentation</b></p> <p>Data management policy</p> <p>GDPR policy</p> <p><b>Description</b></p> <p>School management system(s)</p>

6.1 Data management	<p>(c) There is a supporting back-up document storage system in place in the event that the management system fails.</p> <p>(d) All data management systems comply with GDPR legislation</p>	<p>Systems for management, monitoring and review of procedures for security, back up and restricted access of data</p> <p>Procedures for compliance with GDPR legislation</p> <p>Procedures for monitoring and review of GDPR policy and procedures</p> <p><b>Site visit</b></p> <p>Inspection of school management system</p> <p>Meetings with SMT, admin, marketing, academic, accommodation, activity, IT teams; person(s) responsible for data management; person(s) responsible for GDPR</p>
6.2 Corporate and academic governance	<p>(a) ELE providers ensure that academic decision-making is independent of commercial considerations and influence of business directors, owners, shareholders, trustees or others, and business decisions do not unreasonably compromise the academic integrity and quality of ELE provision.</p> <p>(b) There is a clear distinction of roles between corporate and academic governance within the organisation and there is an academic governance committee in place to ensure this distinction is maintained.</p> <p>(d) Academic decision-making reflects the interests of learners and the maintenance and enhancement of academic quality within the organisation.</p> <p>(e) The academic governance committee may be made up of senior members of academic staff at the centre. However, where a provider's scale is such that it cannot support the separation of corporate and academic governance or an academic governance committee internally, alternative arrangements are put in place to ensure objective oversight, such as the use of external ELE expertise.</p>	<p><b>Documentation</b></p> <p>Corporate and academic governance policy</p> <p><b>Description</b></p> <p>Systems to establish, manage, monitor and review corporate and academic governance independence</p> <p>Structure of academic governance committee/external ELE expertise</p> <p>Committee meetings: aims, format, frequency, staff roles involved</p> <p>Sample meeting records for 6 months prior to submission of IEMAS</p> <p>Structure, management and monitoring of learner representation</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic team, academic governance committee/external ELE expertise, teacher focus group, learner focus group</p> <p>Meeting records</p>

6.3 Risk management	<p>(a) There is a risk assessment policy and a risk assessment plan in place, and both are reviewed periodically to inform strategic risk planning.</p> <p>(b) Risk management includes procedures to ensure that the provider is not engaged in activities or partnerships which may undermine the quality or integrity of ELE provision, or associated services, offered.</p>	<p><b>Documentation</b>  Risk assessment policy  Risk register for the current calendar year  Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b>  Risk assessment procedures  Systems for monitoring and reviewing policy, plan and register</p> <p><b>Site visit</b>  Meetings with SMT, admin, marketing, academic, activity, accommodation teams, teacher and student focus groups  Meetings with accommodation providers  Meeting records</p>
6.4 Change and crisis management	<p>Change and crisis management systems are in place that are fit for purpose and provide for the management of essential changes that must be made as needed.</p>	<p><b>Documentation</b>  Change and crisis management policy</p> <p><b>Description</b>  change and crisis management systems systems for monitoring and reviewing policy and procedures</p> <p><b>Site visit</b>  Meetings with SMT, admin, marketing, academic, accommodation, activity teams; teacher and student focus groups; meetings with accommodation providers  Meeting records</p>
6.5 Partnerships and collaboration	<p>(a) Where an ELE provider organises or procures a programme which is provided in whole or in part with another ELE provider, or other type of provider, e.g., an activity centre or accommodation provider, the ELE provider establishes and confirms formal agreements with the other provider, which include parallel quality assurance procedures with that provider.</p>	<p><b>Documentation</b>  Agreements/contracts with partners  Sample records of declarations, and due diligence and QA procedures for 6 months prior to submission of IEMAS  Declaration of compliance with requirement (d)  Declaration of business partnerships  Declaration of ownership of accommodation provision</p>

	<p>(b) Where an ELE provider collaborates with other providers, the ELE provider has quality assurance procedures in place to approve collaboration arrangements with other providers and to monitor and review the effectiveness of these arrangements.</p> <p>(c) Providers apply due diligence and ensure they are aware of any reputational risk to themselves and to the ELE sector associated with prospective providers with which they are considering entering collaboration arrangements.</p> <p>(d) ELE providers do not enter any business partnership which may potentially cause a conflict, such as full or part ownership of an employment agency that employs international learners, or full or part ownership of an agency that recruits international learners, whether for the ELE provider concerned or for other ELE providers.</p> <p>(e) Any existing business interest of the ELE provider that may potentially cause a conflict, such as full or part ownership of an employment agency that employs international learners, or full or part ownership of an agency that recruits international learners, whether for the ELE provider concerned or for other ELE providers, is declared. In this case, ELE providers are required to demonstrate how due diligence is applied to avoid any potential risk to the ELE provider concerned, to other ELE providers, to learners of the ELE provider concerned or of other ELE providers, or to the ELE sector in Ireland.</p> <p>(f) ELE providers declare any ownership or part ownership of accommodation provision for learners and ensure that all key stakeholders, e.g., students, education agents and teachers, who wish to avail of accommodation services that are owned or part-owned by the provider, are made aware of this fact before contracting any accommodation service with the provider.</p>	<p><b>Description</b>  Partnerships and collaborations  Procedures to approve, monitor, review and update due diligence, QA procedures;  Procedures to declare potential conflicts to stakeholders</p> <p><b>Site visit</b>  Meetings with SMT, person(s) responsible for partnerships and collaborations, admin, activity, academic, sales and marketing, accommodation teams; meetings with residence providers; teacher and focus groups  Agreements/contracts  Records of declarations  Records of approval, monitoring, review and updates of due diligence and QA procedures</p>
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6.6 Human resources	(a) There is a systematic approach to the fair, inclusive and transparent recruitment of staff.	<b>Documentation</b> Recruitment policy Organisational chart(s) Staff lists Template contracts and job descriptions for each role, salary scales, terms and conditions benefits
6.6.1 Staff recruitment	(b) The ELE provider ensures that academic and administrative staff have sufficient expertise and experience to fulfil their designated roles, thereby enhancing the teaching and learning environment for learners and staff.	<b>Description</b> Recruitment procedures  <b>Site visit</b> Meetings with SMT, HR, academic, admin, sales and marketing, activity, accommodation teams; teacher focus groups Inspection of all current staff CVs, qualifications, contracts and job descriptions Observations
6.6.2 Conditions of employment	(a) Employment terms and conditions for staff members comply with national employment legislation.  (b) Terms and conditions, e.g., remuneration and leave conditions, are commensurate with the qualifications and experience of staff members.  (c) Conditions of employment reflect the mission statement and objectives of the provider and support commitment to staff, learners and the organisation.  (d) Each member of staff has a written contract, which is updated to reflect changes, e.g., roles, responsibilities, conditions or place of work.  (e) Each member of staff has a written job description, which accurately reflects the current roles and responsibilities of the	<b>Documentation</b> Mission statement Core values Organisational chart(s) Staff lists Template contracts and job descriptions for each role Salary scales, terms and conditions, benefits Staff handbook(s)  <b>Description</b> Procedures to approve, monitor, review and update terms and conditions, salaries, job descriptions  <b>Site visit</b> Meetings with SMT, HR, admin, academic, accommodation, sales and marketing, activity teams; teacher focus groups



	staff member, and which is updated as evolving needs are identified.	Inspection of all current staff CVs, qualifications, contracts and job descriptions
6.6.3 Academic staff qualifications	<p>a) All teachers are suitably qualified and experienced to fulfil their designated role.</p> <p>b) All academic managers are suitably qualified and experienced to fulfil their designated role.</p>	<p><b>Documentation</b>  Organisational chart  Staff lists  Template contracts and job descriptions for each teaching and academic manager role</p> <p><b>Description</b>  Training plan for teachers and academic manager(s) to comply with QQI requirements, with timelines (if relevant)</p> <p><b>Site visit</b>  Meetings with SMT, HR and academic team; teacher focus group meeting  Inspection of CVs, job descriptions, copies of qualifications of academic staff.</p>
6.7 Operational academic management	<p>(a) There is an appropriate learner: teacher/teacher trainer ratio for all ELE programmes to ensure participation opportunities on the part of the learners and effective classroom management on the part of teachers and teacher trainers. A maximum ratio of 16 learners/teachers: 1 teacher/teacher trainer is required. For closed groups, a maximum ratio of 18 learners: 1 teacher/teacher trainer is required. For foundation year programmes, a maximum ratio of 24 learners: 1 teacher is required.</p> <p>(b) Each centre has a dedicated academic manager. This requirement will not apply in the case of additional spaces that are located within a distance of one kilometre from the main centre and that are used for temporary classrooms.</p> <p>(c) The number of academic managers per centre is proportional to the number of enrolled learners at the centre. A maximum ratio of 160 learners: 1 academic manager per centre is required.</p>	<p><b>Documentation</b>  Organisational chart(s)  Staff lists  Job descriptions  Academic management policy  Sample teaching schedules for 6 months prior to submission of IEMAS  Student numbers and ratios  Staff handbook(s)  Student handbook(s)</p> <p><b>Description</b>  Academic management procedures  Plan to reduce all teaching schedules to 30 60-minute hours per week, with timelines meeting QQI requirements</p> <p><b>Site visit</b>  Meetings with SMT, academic teams, teacher focus group, student focus group; Lesson observations</p>

	<p>(d) Academic managers may be included on the teaching and training schedule to ensure currency of effective practice. However, once a centre has a minimum of five groups of ELE learners, the academic manager's teaching must be restricted to a maximum of five contact teaching hours per week. An academic manager's duties may include occasional substitution teaching hours, when required, up to a maximum of fifteen contact teaching hours in one week at any one time. Beyond this, another teacher must be recruited as needed, and the academic manager must return to delivering a maximum of five contact teaching hours per week.</p> <p>(e) Each teacher's schedule has a maximum of thirty sixty-minute contact teaching hours per week at all times of the year.</p> <p>(f) Teaching schedules of a maximum of thirty sixty-minute contact teaching hours per week are fully supported by well-designed curricula, syllabuses and course programmes/schemes of work, which are clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR).</p>	Student numbers; teaching schedules
6.8 Grievances	<p>(a) There is an internal grievance policy in place for staff members, with documented procedures and clear lines of communication and accountability. Access to an external and independent grievance procedure, which is external to QQI, forms part of this process if internal processes do not achieve a mutually accepted resolution.</p> <p>(b) Where employment practices form part of the complaint, the state-appointed authority is brought into the process.</p>	<p><b>Documentation</b> Grievance policy</p> <p><b>Description</b> Internal grievance procedures External grievance procedures: external body and Workplace Relations Commission (WRC); Records of grievances and dealings with WRC</p> <p><b>Site visit</b> meeting with SMT, admin, marketing, accommodation, activity and academic teams; teacher focus groups Records of grievances and dealings with external body and WRC</p>

<p><b>7 Programme Design</b></p> <p>7.1 Curriculum, syllabus and course programme/scheme of work design</p>	<p>(a) There is a curriculum, syllabus and course programme/scheme of work framework in place that is developed and managed by suitably qualified and experienced senior academic staff.</p> <p>(b) The curriculum, syllabus and course programme/scheme of work design is clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR), with clearly defined learning outcomes that are articulated in 'can do' descriptors.</p> <p>(c) The curriculum, syllabus and course programmes/schemes of work are developed with learner needs and interests in mind.</p> <p>(d) The curriculum, syllabus and course programmes/schemes of work are updated as appropriate, dependent on evolving methodologies and learner needs.</p> <p>(e) Curriculum, syllabus and course programme/scheme of work design and updates are approved by the academic governance committee, or the external ELE expert, as appropriate to the ELE provider context, and approvals are documented.</p>	<p><b>Documentation</b></p> <p>Curriculum/syllabus/programme development policy CEFR alignment policy Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work Job descriptions of CEFR alignment project management team and programme development team Sample consultation records with internal and external stakeholders Sample meeting records of academic governance committee/external ELE expert(s) for 6 months prior to submission of IEMAS</p> <p><b>Description</b></p> <p>Process to develop, manage, monitor, review and update curriculum, syllabus(es) and course programmes/schemes of work, including internal and external stakeholder consultation Description of CEFR alignment project: project management team, role of person(s) responsible, development and implementation of CEFR alignment project, compliance with ELE Code Plan to complete CEFR alignment project, with timelines meeting QQI requirements Management of academic governance committee/external ELE expert(s) and process to approve programme development</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic team, project management team, academic governance committee/external ELE expert(s); teacher and student focus groups CVs and JDs of project management team CEFR alignment project documentation and plan for completion</p>
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7.2 Assessment systems	<p>(a) There is an assessment framework in place that is developed and managed by suitably qualified and experienced senior academic staff.</p> <p>(b) The assessment framework is clearly and closely aligned to the intended learning outcomes of each ELE syllabus/course programme, expressed in 'can do' descriptors from, or adapted from, the CEFR.</p> <p>(c) The assessment framework includes testing mechanisms that are fair, clear and accessible, and the principles of validity, reliability and impact are well considered.</p> <p>(d) The assessment framework is tailored to learner needs, e.g., higher education or employment, as appropriate.</p> <p>(e) The assessment framework is updated as appropriate, dependent on evolving practices, approaches and learner needs.</p> <p>(f) The assessment framework is approved by the academic governance committee, or the external ELE expert, as appropriate to the ELE provider context, and approvals are documented.</p> <p>(g) There are procedures and systems in place to manage the security and integrity of the assessment process.</p>	<p><b>Documentation</b></p> <p>Assessment policy</p> <p>Assessment framework</p> <p>Assessment documentation (internal and external assessments)</p> <p>Sample consultation records with internal and external stakeholders</p> <p><b>Description</b></p> <p>Procedures to select/develop, manage, monitor, review and update assessments, including consultation with internal and external stakeholders</p> <p>Description of validity, reliability and impact of assessments, including external assessments; description of how assessments are fair, clear and accessible.</p> <p>Description of the CEFR alignment project, including the project management team and the role of the person(s) responsible for the project</p> <p>Plan to complete CEFR alignment project, with timelines meeting QQI requirements</p> <p>Process to approve assessment selection/ development by the academic governance committee/external ELE expert(s)</p> <p>Procedures to manage the security and integrity of assessment process</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic team, project management team; person(s) responsible for assessment; academic</p>

		<p>governance committee/external ELE expert(s); teacher and learner focus groups</p> <p>Lesson observations</p> <p>Assessment documentation</p> <p>Records of assessment selection/development, approval, management, monitoring, review and updates</p>
<p><b>8 Supports and Services for International Learners</b></p> <p>8.1 Learner support and welfare</p>	<p>(a) There is/are a suitably trained member(s) of staff responsible for learner support and welfare.</p> <p>(b) Providers have a Welfare Support Policy in place that is designed to support international learners in instances of emergency or hardship.</p>	<p><b>Documentation</b></p> <p>Welfare Support Policy</p> <p>Job description of student welfare officer, health and safety officer, child protection officer (if relevant)</p> <p>Sample meeting records for 12 months prior to submission of IEMAS</p> <p>Student handbook(s)</p> <p><b>Description</b></p> <p>Welfare support procedures</p> <p>Process to approve, monitor, review and update welfare support procedures</p> <p><b>Site visit</b></p> <p>Meetings with SMT, admin, academic, marketing, activity, accommodation teams; meeting with person(s) responsible for learner support and welfare, health and safety, child protection; teacher and student focus groups</p> <p>Records related to learner support and welfare procedures</p> <p>Meeting records</p>
8.2 Learner orientation and induction	<p>(a) Initial orientation information is sent to learners prior to their arrival, e.g., transport and accommodation services.</p> <p>(b) Providers ensure that inductions are offered to learners on arrival at the centre and that they are appropriate and accessible to all learners.</p> <p>(c) Learner groups are multi-lingual with a variety of different language speakers in order to optimise English language</p>	<p><b>Documentation</b></p> <p>Information sent to learners' pre-arrival</p> <p>Learner induction policy</p> <p>Welfare support policy</p> <p>Language mix policy (if in place)</p> <p>Documentation on language mix: link to website, brochure</p> <p>Sample induction schedules for 12 months prior to submission of IEMAS</p>

	<p>learning opportunities. Where this is not possible, ELE providers ensure that learners and other stakeholders are aware of this fact before enrolment.</p>	<p>Induction materials  Sample induction records for 12 months prior to submission of IEMAS  Student handbook(s)  Job description of student welfare officer(s), child protection officer(s) (if relevant), academic manager(s) responsible for assessment</p> <p><b>Description</b>  Induction systems and procedures: aims, frequency, format; System to approve, monitor, review and update induction procedures  Language mix procedures (if in place)</p> <p><b>Site visit</b>  Meetings with SMT, student welfare officer, child protection officer, academic, including academic manager(s) responsible for assessment, administrative, accommodation, events teams; student and teacher focus groups  Induction materials  Induction records  Meeting records  CV and Job description of student welfare officer(s), child protection officer(s) (if relevant), academic manager(s) responsible for assessment  Observations</p>
8.3 Learners requiring entry visas and/or immigration permissions	<p>(a) Further induction and information dissemination is required for non-EU/EEA learners requiring entry visas and/or immigration permissions. This induction must be clear and accessible and contain coverage of areas including, but not limited to, the following:</p> <p>(i) entry visas and/or immigration permission conditions  (ii) attendance and punctuality</p>	<p><b>Documentation</b>  Documentation sent to learners' pre-arrival; links to website/brochure/promotional materials  Induction policy  Induction materials  Sample induction schedules for 6 months prior to submission of IEMAS</p>

	<ul style="list-style-type: none"> <li>(iii) absenteeism and consequences, including expulsion</li> <li>(iv) sick and bereavement leave</li> <li>(v) holidays</li> <li>(vi) assessment</li> </ul>	<p>Sample meeting records for 6 months prior to submission of IEMAS</p> <p>Policy on requirements for students enrolled on study visa/immigration permissions</p> <p>Job description of student welfare officer, academic manager responsible for assessment</p> <p>Student handbook</p> <p><b>Description</b></p> <p>Induction systems and procedures, including procedures regarding responsibilities for non-EU/EEA/Swiss learners: aims, frequency (including reminders/updates) format; System to approve, monitor, review and update induction procedures</p> <p>Language mix procedures (if in place)</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic, admin, sales and marketing, activity, accommodation teams; teacher and student focus groups</p> <p>Induction materials</p> <p>Induction records</p> <p>Meeting</p> <p>Attendance records</p> <p>Assessment records</p> <p>Observations</p>
8.4 Accommodation	<ul style="list-style-type: none"> <li>(a) All accommodation offered by ELE providers meets ELE Code requirements.</li> <li>(b) ELE providers also offer advice in relation to obtaining accommodation not offered by providers.</li> <li>(c) ELE providers declare any possible conflict of interest: where accommodation is owned/managed by the ELE provider, or by a</li> </ul>	<p><b>Documentation</b></p> <p>Policy on accommodation</p> <p>Information on accommodation offered by provider, other providers, availability of accommodation: link to website, brochures, publicity materials</p> <p>Terms and conditions for students</p> <p>Terms and conditions for accommodation providers</p> <p>Job description of person(s) responsible for accommodation</p>

	<p>partner of the ELE provider, this must be declared to learners and other stakeholders before they book the accommodation.</p> <p>(d) ELE providers ensure that all accommodation offered by providers to learners is suitable and appropriate for learners to live and study in comfortably.</p> <p>(e) ELE providers ensure all information sent to learners, education agents, recruitment partners, consultants, parents and other stakeholders is clear, accurate, transparent, accessible, relevant and up to date. Where there is any potential issue in finding suitable accommodation for learners, providers ensure that this information is made available to learners, education agents, recruitment partners, consultants, parents and other stakeholders, prior to a learner's enrolment on the programme.</p>	<p>Sample agreements/contracts for accommodation: homestay, residential, apartment for 12 months prior to submission of IEMAS</p> <p>Sample records of inspections of new accommodation for 12 months prior to submission of IEMAS</p> <p>Sample records of inspections of existing accommodation providers for 12 months prior to submission of IEMAS</p> <p>Sample meeting records for 12 months prior to submission of IEMAS</p> <p>Sample written permissions from parents for 12 months prior to submission of IEMAS (re mixing of minors with adult learners)</p> <p>Declarations of ownership and conflicts of interest for 12 months prior to submission of IEMAS</p> <p>Handbook(s) for accommodation providers</p> <p>Student handbook</p> <p>Sample feedback from students on accommodation provision for 12 months prior to submission of IEMAS (initial, mid-programme, final)</p> <p><b>Description</b></p> <p>Accommodation procedures: sourcing, inspections (new and existing), booking, conflicts, agreements, meetings with providers</p> <p>Process to approve, monitor, review and update accommodation procedures</p> <p><b>Site visit</b></p> <p>Meetings with SMT, admin, accommodation, sales and marketing teams; student focus group; accommodation provider meetings</p> <p>Contracts/agreements with providers</p> <p>Records of inspections (new and existing providers)</p> <p>Records of meetings</p> <p>Feedback records (initial, mid-programme, final)</p>
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<p>8.5 Safeguarding</p>	<p>(a)ELE providers who recruit learners who are minors are responsible for ensuring all legislative obligations are met in relation to the following areas:</p> <p>(i) safeguarding; (ii) Garda vetting for all relevant members of staff who work with learners who are minors; (iii) approved safeguarding training for all relevant members of staff.</p> <p>Where ELE providers have agreements with external accommodation providers, the ELE provider is responsible for ensuring that all relevant members of staff of the accommodation provider have completed Garda vetting.</p> <p>(b) There is a safeguarding policy, and procedures, in place, and a dedicated member(s) of staff to manage all areas of child welfare and protection, including required approved safeguarding training for all relevant members of staff.</p> <p>(c) Where minors are mixed with adults, whether in the same closed group, class or in the same building, providers have procedures in place, including obtaining permission from parents/guardians in the case where minors are placed in class with adults.</p>	<p><b>Documentation</b> Safeguarding policy Sample anonymised Garda vetting records for 12 months prior to submission of IEMAS (staff, accommodation providers) Safeguarding training documentation Safeguarding training records for 12 months prior to submission of IEMAS Sample meeting records for 12 months prior to submission of IEMAS Sample anonymised permission from parents/guardians for 12 months prior to submission of IEMAS Job description of person(s) responsible for safeguarding</p> <p><b>Description</b> Safeguarding procedures in place: centre, accommodation providers, activities Process to approve, monitor, review and update accommodation procedures</p> <p><b>Site visit</b> Meetings with SMT, admin, academic, activity, sales and marketing, accommodation teams; teacher and student focus groups; accommodation provider meetings Garda vetting records for staff and accommodation providers who work with minors Safeguarding training records Meeting records</p>
<p>8.6 Complaints and grievance procedures</p>	<p>(a) There is a clear and accessible internal complaints and grievance policy in place for learners and other stakeholders to ensure that issues are dealt with efficiently.</p> <p>(b) Should the internal complaints and grievance procedures not reach a mutually accepted resolution, access to an independent procedure, established by the ELE provider, or by a</p>	<p><b>Documentation</b> Complaints and grievance policy Sample anonymised complaints and grievance records for 12 months prior to submission of IEMAS Agreement with independent ombudsperson or organisation</p>

	representative group, and independent of QQI, forms part of this process	<p>Sample meeting records with internal/external complaints and grievance colleagues for 12 months prior to submission of IEMAS</p> <p><b>Description</b> Complaints and grievance procedures Process to approve, monitor, review and update internal and external complaints and grievance procedures</p> <p><b>Site visit</b> Meetings with SMT, admin, academic, activity, sales and marketing, accommodation teams; teacher and student focus groups; homestay provider meetings Records of internal and external complaints/grievances</p>
<p><b>9 Marketing and Recruitment</b></p> <p>9.1 Marketing information</p>	<p>(a) ELE providers ensure that clear, accurate, transparent, accessible, relevant and up-to- date information is available to learners, education agents, recruitment partners, consultants and other stakeholders in all promotional materials and on the website.</p> <p>(b) ELE providers</p> <p>(i) endeavour proactively to understand the information needs of prospective international learners, education agents, recruitment partners, consultants and other stakeholders;</p> <p>(ii) ensure that information provided to potential international learners about the provider and their programmes and other services is clear, accurate, transparent, accessible, relevant and up-to-date. This includes information about the intended purpose of the ELE programme e.g., to prepare a learner for further study, a proficiency ELE examination or specific employment, with intended learning outcomes;</p> <p>(iii) ensure that all information is provided in a way that is accessible to international learners and assists them in making informed decisions. This information should support international learners in understanding all matters related to an ELE</p>	<p><b>Documentation</b> Sales and marketing policy JD of sales and marketing person(s) and person(s) responsible for pre-enrolment communications with learners Marketing materials; links to website/brochure; link to agents' area on website; links to social media; Sample materials from webinars/presentations Link to website/brochure/information on national and international recognition of ELE proficiency exams Declaration that all information is clear, accurate, transparent, accessible, relevant and up to date Records of agent webinars/presentations Declaration that the provider will provide details of PEL scheme to learners and stakeholders once authorised. Copies of authorisation/recognised centre status; links to websites of accreditation bodies, associations, organisations, examining bodies where provider is listed as a member/approved provider/centre etc Links to website/brochures with information on requirements for study visas/immigration permissions</p>

	<p>programme prior to enrolment. If provided in a language other than English, it is the responsibility of the ELE provider to ensure that the information is clear, accurate, transparent, accessible, relevant and up to date;</p> <p>(iv) where applicable, information should be provided on the recognition of ELE proficiency examinations, both in the state and internationally.</p> <p>(v) accurately represent their company and facilities in all marketing and promotional materials and ensure that no false or misleading information is given or implied. For example, if there is the possibility that a learner may have an afternoon schedule of ELE lessons instead of an expected morning schedule, this information is included.</p> <p>(vi) provide contact details for an appropriate person(s) to provide assistance with queries from international learners prior to enrolment, e.g., the enrolments officer or student welfare officer;</p> <p>(vii) provide details of the arrangements in place for the protection of enrolled learners under Section 65 of the 2012 Act as amended.</p> <p>(c) Information provided on marketing materials includes, but is not limited to, the following:</p> <p>(i) details of all services offered by the ELE provider;</p> <p>(ii) current dates for programmes, a current academic calendar and information on rolling enrolment procedures;</p> <p>(iii) information regarding the corporate structure of the organisation, i.e., if it is an independent organisation, a branch of an international or multinational company, a provider with a number of centres, whether nationally and/or internationally, or part of a franchise;</p> <p>(iv) accreditation bodies, associations, organisations or examining bodies that ELE providers are members of, or are recognised by. These are clearly and accurately represented so</p>	<p>Link to information on progression/pathway programmes</p> <p>Link to information on L1 mix</p> <p>Link to accommodation services</p> <p>Link to complaints procedures</p> <p><b>Description</b></p> <p>Procedures to understand stakeholder needs Procedures to ensure information is clear, accurate, transparent, accessible, relevant and up to date, including information about the intended purpose of the ELE programme</p> <p>Procedures to ensure information is accessible, and information in other languages is clear, accurate, transparent, accessible, relevant and up to date</p> <p><b>Site visit</b></p> <p>Meeting with SMT, admin, sales and marketing, academic, activity, accommodation teams; teacher and student focus groups; accommodation provider</p> <p>CVs and JDs of person(s) responsible for sales and marketing and pre-enrolment communication with learners</p> <p>Marketing materials</p> <p>Records of agent webinars/seminars</p> <p>Original provider declarations</p> <p>Original certificates of authorisation/recognised centre status</p>
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	<p>that they are easily understood by learners and other stakeholders. Where appropriate, weblinks to accreditation bodies, associations, organisations or examining bodies are made available, as well as any centre numbers or affiliation status;</p> <p>(v) distinctions made between logos or marks which demonstrate whether the ELE provider offers a programme leading to a specific ELE award, is an authorised centre for an examining body, is a member of an association or organisation, or is accredited by an organisation or association, and therefore authorised to use a logo, mark, centre number or centre name to confirm this;</p> <p>(vi) information on associated requirements for learners requiring entry visas and/or immigration permissions, where relevant; comprehensive information, where appropriate, on foundation and pathway programmes for entry onto higher education programmes. The entry and progression information relating to such programmes should be clear, accurate, transparent, accessible, transparent, relevant and up to date;</p> <p>(viii) information on the typical makeup of first language speakers at the centre. Where there is a majority of one first language group of learners in the centre, this is made clear to learners, parents, education agents, recruitment partners and consultants, as well as other stakeholders, prior to enrolment;</p> <p>(ix) information on types of accommodation offered by the provider, which is clear, accurate, transparent, accessible, relevant and up to date. Information on the availability of accommodation, whether provided by the ELE provider or not, is made clear to international learners and other stakeholders prior to enrolment;</p> <p>(x) information on the complaints and grievances procedure.</p>	
9.2 Partnerships with education	(a)ELE providers have an up-to-date written agreement with each education agent, recruitment partner and consultant that formally represents the ELE provider.	<b>Documentation</b> Agent agreement/contract policy

<p>agents, recruitment partners and consultants</p>	<p>(b) ELE providers perform due diligence, e.g., three reference checks, to verify the track record of prospective education agents, recruitment partners and consultants in relation to learner protection issues, prior to entering into a contractual agreement.</p> <p>(c) ELE providers ensure that any contractual arrangements entered with education agents, recruitment partners and consultants incorporate the principles of the London Statement. Existing agreements or contracts with education agents, recruitment partners and consultants that do not incorporate these principles shall be amended appropriately within two years of the date on which the ELE provider is authorised to use the IEM.</p> <p>(d) The contract between the ELE provider and education agent, recruitment partner or consultant includes a termination clause in instances where the partner does not comply with the principles of the London Statement or is found to have acted in an unethical fashion to the detriment of international learners.</p> <p>(e) ELE providers have in place a process for reviewing, at least once every two years, the activities of education agents, recruitment partners and consultants.</p> <p>(f) ELE providers ensure that education agents, recruitment partners and consultants are in possession of clear, accurate, transparent, accessible, relevant and up-to-date information regarding the provider and its provision.</p> <p>(g) ELE providers ensure that education agents, recruitment partners and consultants are appropriately trained by the provider on a regular basis, as needed.</p>	<p>Sample anonymised agreements with agents, recruitment partners and consultants incorporating the principles of the London Statement.</p> <p>Sample training materials</p> <p>Sample training records for 12 months prior to IEMAS submission</p> <p><b>Description</b></p> <p>Procedures to carry out due diligence verification of prospective agents and to monitor, review and update procedures</p> <p>Process for reviewing activities of agents.</p> <p>Process to ensure information on provider and provision is clear, accurate, transparent, accessible, relevant and up to date</p> <p>Training procedures: development, monitor, review, update procedures</p> <p><b>Site visit</b></p> <p>Meetings with SMT, sales and marketing, admin teams; student and teacher focus groups</p> <p>Training materials</p> <p>Training records</p> <p>All agent contracts; all agent contracts incorporating the principles of the London Statement</p>
<p><b>10 Enrolment, fees, refunds and subsistence</b></p>	<p>(a) ELE providers establish a realistic and sustainable fee structure that supports the mission of the organisation and reflects the real costs associated with high quality ELE provision.</p> <p>(b) Information regarding fees for all programmes included in promotional materials, such as brochures and on the company</p>	<p><b>Documentation</b></p> <p>Fee policy; terms and conditions policy; refunds policy</p> <p>Current fees (gross and net) for all programmes, services, materials and exam fees offered, including fee structures for different programmes and markets; fee and commission structures for agents; payment method fees</p>

10.1 Fees and terms and conditions	<p>website, is clear, accurate, transparent, accessible, relevant and up to date.</p> <p>(c) ELE providers give clear, accurate, transparent, accessible, relevant and up-to-date information on enrolment and programme fees. Providers ensure that there are no unexpected charges or additional fees that have not been brought to the attention of international learners and other stakeholders prior to enrolment.</p> <p>(d) Where accommodation is offered by the ELE provider, clear, transparent, accurate, accessible, relevant and up-to-date information is made available about accommodation booking fees and accommodation fees.</p> <p>(e) Clear, accurate, transparent, accessible, relevant and up-to-date information is made available about the terms and conditions policy regarding enrolments, fees, cancellations and refunds. This policy outlines the procedures regarding refunds, e.g., in the case of a refused visa application for a non-EU/EEA learner, and timelines to follow.</p> <p>(f) Where the fees do not include the cost of programme materials, this is made clear</p> <p>(g) Any additional costs, e.g., airport transfers, programme materials and social event costs, are clearly identified.</p> <p>(h) Any fees or charges incurred, e.g., for credit card payments or payment portals, are made transparent.</p> <p>(i) ELE providers issue a receipt to learners, or to the education agent, recruitment partner or consultant on behalf of the learner, upon receipt of payment of fees, which includes an itemised breakdown of fees paid.</p>	<p>Link/pdf of accommodation fees; Link/pdf to terms and conditions policy and procedures Links/pdfs of sample anonymised receipts with itemised breakdown of fees for 12 months prior to submission of IEMAS</p> <p><b>Description</b> Fee structure development, approval, monitoring, review and update; stakeholder engagement Terms and conditions: development, approval, monitoring, review and update; stakeholder engagement</p> <p><b>Site visit</b> Meetings with SMT, sales and marketing, admin teams; student focus groups Receipts for last 12 months with itemised breakdown of fees</p>
10.1.1 Additional costs	<p>(a) ELE providers give reliable, indicative and up-to-date information on the full cost of studying in Ireland, including, but not limited to:</p> <p>(i) accommodation (if not provided by the ELE provider)</p> <p>(ii) average food and subsistence costs</p> <p>(iii) public transport</p> <p>(iv) health care</p>	<p><b>Documentation</b> Link to website/document/brochure with information on costs related to accommodation, subsistence costs, transport, healthcare, medical insurance, immigration related fees, event programme costs and other costs</p> <p><b>Description</b></p>

	(v) medical insurance (vi) immigration-related fees e.g., visa charges (vii) event programme costs (viii) any other costs related to provision of student services as considered relevant by the ELE provider.	Process to approve, develop, monitor, review and update information on full cost; procedures to engage with stakeholders  <b>Site visit</b> Meeting with SMT, sales and marketing and accommodation teams; student and teacher focus groups
10.2 Enrolment procedures	(a) ELE providers clearly document and describe enrolment procedures for all stakeholders. (b) Enrolment procedures are clear, accurate, transparent, accessible, relevant and up to date. (c) ELE providers who are authorised to use the IEM are required to put arrangements in place for the protection of enrolled learners under Section 65 of the 2012 Act as amended, prior to the recruitment of learners.	<b>Documentation</b> Enrolment policy Link/pdf to enrolment procedures Sample approvals records Sample meeting records for 12 months prior to submission of IEMAS Declaration of provider commitment to put PEL arrangements in place prior to the recruitment of learners once authorised JD of person(s) responsible for enrolments  <b>Description</b> Procedures to approve, develop, monitor, review and update enrolment procedures  <b>Site visit</b> Meeting with SMT, enrolments, sales and marketing and accommodation teams; student focus groups CV and JD of person(s) responsible for enrolments Approvals records Meeting records

## APPENDIX FIVE: QA Guidelines for ELE: suggested examples to demonstrate compliance with criteria

The following are illustrative examples only and are not exhaustive. Providers may use other documentation, descriptions, meetings etc., to demonstrate meeting QA Guidelines for ELE criteria, where appropriate.

***Providers should always refer to the QA Guidelines for ELE, ELE Code and the Guidance Handbook for ELE Providers when preparing to submit their IEMAS.***

Criteria	Text	Examples of demonstration (not exhaustive)
<b>2.1 Organisational Structures</b>  2.1.1 Organisational and administrative structures	(a) There is a mission statement, which may also describe the core values and objectives of the ELE provider.  (b) The organisational chart supports the efficient operational management of the ELE provider in all areas of organisational, administrative, and academic management.  (c) Organisational, administrative, and academic management structures are clear, transparent, appropriate to the size of the ELE provider, adaptable as required and are understandable by staff, learners, education agents, recruitment partners, consultants and other key stakeholders.  (d) Responsibilities and line management structures among members of administrative and academic management, and administrative and academic staff, are clear, transparent, efficient, and understandable by all staff.  (e) Strategic organisational and operational planning is carried out periodically and supports the ELE provider's developmental and enhancement objectives.	<b>Documentation</b> Mission statement Vision statement Core values Strategic objectives Organisational chart  <b>Description</b> Organisational, administrative and academic Management structures: roles, responsibilities, line management School management and data management systems Organisational and operational planning procedures: frequency, management, monitoring, review, evaluation Sample records/minutes of meetings for 6 months prior to submission of IEMAS  <b>Site visit</b> Meetings with SMT, QA Officer, HR, administrative, sales and marketing, academic, accommodation and activity teams; homestay provider; teacher and student focus groups Records/minutes of meetings
2.1.2 Administrative staffing	(a) The administrative staff profile meets the needs of the ELE provider, and all administrative staff are suitably qualified/trained and/or experienced for their role.	<b>Documentation</b> Organisational chart Staff lists Job descriptions



	<p>(b) Each centre has an administrative team in place which is proportional to the size and functions of the centre and to the current number of enrolled learners present at the centre during operational hours.</p>	<p>Staff handbook(s)  Sample lesson schedules for 6 months prior to submission of IEMAS  Sample events programme schedules for 6 months prior to submission of IEMAS  Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b>  Procedures for management of administrative team; reporting structures and line management  Administrative staff schedule(s)  Administrative staff induction and training  Learner: admin staff ratios for each teaching block (morning and afternoon)</p> <p><b>Site visit</b>  Meetings with SMT, HR, administrative, sales and marketing, accommodation, academic, activity teams; teacher and student focus groups  Current staff lists  CVs, job descriptions and qualifications of current administrative staff  Learner attendance records  Lesson schedules  Events programme schedules  Meeting records</p>
2.1.3 Administrative systems	<p>(a) There is a management system in place to support effective administrative, enrolment and academic management operations, as well as management of internal monitoring and provision of required information and data, as needed. All members of staff are trained in the use of this system as relevant to their role.</p>	<p><b>Documentation</b>  Data management policy  Sample staff training records for 6 months prior to submission of IEMAS</p> <p><b>Description</b>  School management system(s) and procedures</p>

	(b) Data management systems, including data on the school management system, are efficient and meet the needs of the ELE provider	<p>Systems for management, monitoring and review of procedures for security, back up and restricted access of data Staff training on school management system(s)</p> <p><b>Site visit</b> Meetings with SMT, HR, administrative, sales and marketing, academic, accommodation, activity, IT teams; person(s) responsible for administration; data management; person(s) responsible for GDPR Staff training records Inspection of school management system(s)</p>
2.1.4 Communications	<p>(a) Communication channels among members of administrative and academic management, and administrative and academic staff, are clear, transparent, efficient, and understandable by all staff.</p> <p>(b) There is regular, documented communication among the management team(s) and between management, administrative and academic teams. Administrative and academic teams coordinate and communicate effectively.</p> <p>(c) Members of staff meet with their line manager periodically to discuss their role, performance and training and development needs, and to receive guidance and support, as needed, and these meetings are documented.</p>	<p><b>Documents</b> Organisational chart(s) Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Reporting lines Communication channels among and between SMT, administrative, academic, IT, activity and accommodation teams, and between line managers and staff members Meetings: aims, format, frequency, staff roles involved, record keeping procedures</p> <p><b>Site visit</b> Meetings with SMT, HR, administrative, sales and marketing, accommodation, academic, activity teams; homestay providers; student and teacher focus groups Records of staff meetings</p>
<b>2.2 Management and Governance of</b>	(a) ELE providers have quality assurance policies in place which inform the management and development of quality assurance procedures in all areas of the organisation.	<p><b>Documentation</b> Mission statement QA policy(ies) Staff handbook(s) Student handbook</p>

<p><b>Quality Assurance</b></p> <p>2.2.1 Quality assurance systems</p>	<p>(b) There is a dedicated and suitably trained Quality Assurance Officer who is responsible for the development, embedding and management of provider quality assurance policies and procedures throughout the organisation, as well as the enhancement of ELE provision and associated services, as required and appropriate. The role of the Quality Assurance Officer may be part of another role of a member of staff. However, it is important to note that quality assurance development and management is a part of the functions of all staff members, relevant to their specific role, as well as of the whole organisation.</p> <p>(c) Quality assurance policies and procedures of the ELE provider are aligned with the mission and strategic objectives of the provider and are developed, embedded and managed on a cross-organisational basis, with the involvement of relevant internal and external stakeholders.</p> <p>(d) Quality assurance policies and procedures are suitably and sustainably resourced to support operations, ELE provision and all services offered by the ELE provider.</p>	<p>Staff list Contract, job description, CV of Quality Assurance Officer(s) Strategic objectives Sample minutes/records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> QA policy &amp; procedures: alignment to mission statement &amp; strategic objectives; resourcing; development, management, monitoring, review &amp; evaluation; involvement of internal &amp; external stakeholders Role(s) of member(s) of staff responsible for QA &amp; duties Meetings</p> <p><b>Site visit</b> Meetings with QA Officer SMT, administrative, accommodation, sales and marketing, academic, activity teams; homestay providers; student and teacher focus groups Contract, job description, CV, copy of qualifications of QA Officer Meeting records</p>
<p>2.2.2 Quality assurance policies and procedures</p>	<p>(a) ELE providers have quality assurance policies and procedures in place to ensure protection of key internal and external stakeholders and to support efficient operations and development.</p> <p>(b) Quality assurance policies and procedures may include, but are not limited to, the following areas: (i) Corporate and academic governance; (ii) Management and operations; (iii) Environmental sustainability; (iv) Health and safety; (v) Enrolment, fees, refunds and subsistence; (vi) Learner welfare and supports; (vii) Learner and other stakeholder complaints and grievances; (viii) Accommodation services, where offered;</p>	<p><b>Documentation</b> QA policies and procedures Contract, job description, CV of Quality Assurance Officer(s) Sample minutes/records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> QA procedures: development, including consultation with staff members, management, monitoring, review, evaluation, updated, including involvement of internal and external stakeholders.</p>

	<p>(ix) Safeguarding; (x) Human resources; (xi) Staff welfare and supports; (xii) Staff training and development; (xiii) Staff complaints and grievances; (xiv) Equality, diversity and inclusion; (xv) Curriculum, syllabus, programme and assessment design, management and quality reviews; (xvi) Award and certification services, where offered; (xvii) Academic integrity; (xviii) Artificial intelligence; (xix) Ethical marketing and recruitment (xx) Evaluation of ELE provision and services</p> <p>c) Quality assurance policies and procedures inform the need to make changes in the organisation in order to continue to develop and enhance ELE provision, services and operations.</p> <p>(d) Quality assurance policies and procedures are designed in consultation with all members of staff involved in their implementation and management and are updated and enhanced periodically, and as needed.</p>	<p>Systems to manage identified issues from reviews and evaluations, and make changes, with timelines Role(s) of member(s) of staff responsible for QA Meetings</p> <p><b>Site visit</b> Meetings with QA Officer, Safeguarding Officer, Health and Safety Officer, SMT, administrative, sales and marketing, academic, activity, accommodation teams; homestay providers; student and teacher focus groups Meeting records</p>
2.2.3 Quality assurance reviews	<p>(a) Periodic self-assessments take place during which all areas of the organisation are reviewed and evaluated and following which appropriate action is taken where needed to ensure the development and enhancement of quality.</p> <p>(b) ELE providers produce a self-monitoring report every 18 months, i.e., at the mid-cycle point in the three-year IEM authorisation period. This report describes provider activities, developments and enhancements during this 18-month period and plans for the coming 18-month period. This report is submitted to QQI.</p> <p>(c) There are procedures in place which enable learners, staff and other stakeholders to evaluate the ELE provider. Evaluation is varied in type and is gathered on areas such as, but not limited to: (i) premises and facilities; (ii) organisational management</p>	<p><b>Documentation</b> Review and evaluation policy(ies) and procedures Sample evaluation/feedback from internal and external stakeholders for 6 months prior to IEMAS submission</p> <p><b>Description</b> Evaluation systems: aims, sequencing, frequency, type, stakeholders involved; data gathering; decision making; development and enhancement actions; protocols and timelines for immediate actions</p> <p><b>Site visit</b> Meetings with QA Officer, SMT, administrative, sales and marketing, academic, activity, accommodation teams, homestay providers; student and teacher focus groups Records of evaluations/feedback Records of self-assessments Records of data collection</p>

	<p>(iii) ELE provision;  (iv) accommodation and catering, where offered;  (v) events programme;  (vi) other services offered;  (vii) developments and enhancements;  (viii) staff development and conditions.</p> <p>(d) Data gathered from different types of evaluation and feedback are used to support decision-making regarding strategic organisational planning, development and enhancement, and to inform the planning of future programmes.</p> <p>(e) Identified issues are dealt with immediately. For this reason, it is recommended that initial feedback be gathered from learners during the first week of the programme in order to resolve potential issues as soon as possible.</p>	Records of actions
<b>2.3 Academic Management Structures</b>  2.3.1 Qualifications and experience	<p>The academic staff profile meets the needs of the organisation, and all members of academic staff are suitably qualified, and experienced, where required, for their role.</p>	<p><b>Documentation</b>  Staff recruitment policy  Organisational chart  Staff lists  Academic staff handbook  Template contracts and job descriptions for each teaching and academic manager role</p> <p><b>Description</b>  Training plan for teachers and academic manager(s) to comply with QQI requirements, with timelines</p> <p><b>Site visit</b>  Meetings with SMT, HR and academic team; teacher and student focus groups  CVs, job descriptions, contracts, copies of qualifications of academic staff.</p>

<p>2.3.2 Communication s</p>	<p>(a) There is regular, documented communication among the academic management team and among academic management, trainers and teachers. Meetings may include, but are not limited to, the following: (i) regular academic administration meetings to confirm schedules and monitor learner attendance and participation; (ii) materials and resources selection, implementation and management; (iii) curriculum, syllabus and schemes of work review and development; (iv) formative and summative assessment framework review and development, as well as regular CPD sessions for teachers and trainers. As a guideline, it is recommended that CPD sessions be offered to teachers and trainers once a month.</p> <p>(b) There are systems in place to offer academic and mentoring support to teachers and trainers.</p>	<p><b>Documentation</b> Academic management policy Teacher handbook Academic manager handbook Sample meeting/mentoring records for 6 months prior to submission of IEMAS CPD records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Communication channels between and among academic management team(s) Academic and mentoring supports for teachers and trainers</p> <p><b>Site visit</b> Meetings with SMT, academic team, teacher and student focus groups Meeting records Mentoring records CPD records</p>
<p>2.3.3 Programme development</p>	<p>(a) Considerations on new programme developments are discussed at corporate management and academic management level, with inputs from sales and marketing management as required, as well as inputs from external stakeholders, such as HE providers in Ireland.</p> <p>(b) All decisions regarding potential new programme developments are agreed with the academic governance committee or external ELE expertise, in the case where a provider's scale is such that it cannot support an academic governance committee internally.</p> <p>(c) All decisions regarding new programme developments are made with regard to the capacity and capability of the ELE provider and business plans are agreed between corporate</p>	<p><b>Documentation</b> Corporate and academic governance policy Sample business plans Agreement with external ELE expert(s), if applicable Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Systems to establish, manage, monitor and review programme developments, including internal and external stakeholder involvement Structure of academic governance committee/external ELE expert(s) Committee meetings: aims, format, frequency, staff roles involved</p>

	management and academic management to support decision making in each case	<b>Site visit</b> Meetings with SMT, academic, sales and marketing teams, academic governance committee/external ELE expertise, teacher and student focus groups. Meeting records Business plans Agreement with external ELE expert(s), if applicable
2.3.4 Academic materials	<p>(a) Academic materials and resources for each existing or new programme are selected and updated to support teaching and learning needs, as well as new developments and practices.</p> <p>(b) A member(s) of staff is/are responsible for the management and curation of all academic materials and resources, and a budget is agreed.</p> <p>(c) All new academic materials and resources are approved by the Academic Governance Committee or the external expert.</p>	<b>Documentation</b> Materials and resources policy List of materials and resources Contract and job description of role(s) responsible for materials and resources Sample records of selection and updating of materials and resources Sample budgets Sample meeting records  <b>Description</b> Systems and processes to approve, develop/select and update materials and resources, including involvement of academic governance committee/external ELE expert(s) and corporate management.  <b>Site visit</b> Meetings with SMT, person(s) responsible for materials and resources, Academic Governance Committee/external expert(s), academic team, teacher and student focus groups. Meeting records Budgets CV, contract, job description and qualifications of person(s) responsible for materials and resources.

<p>2.3.5 Attendance at briefings and conferences</p>	<p>(a) A member of the academic management staff attends scheduled QQI briefings, which may be held online or in person.</p> <p>(b) A member(s) of the academic staff attend(s) relevant training and development sessions and conferences in Ireland, and learnings are cascaded to colleagues in CPD sessions.</p> <p>(c) ELE providers sponsor academic staff members to attend events and conferences, and learnings are cascaded to colleagues in CPD sessions.</p>	<p><b>Documentation</b> Records of attendance at briefings, events and conferences for 6 months prior to submission of IEMAS Records of CPD for 6 months prior to submission of IEMAS Records of sponsorship for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Attendances at national and international conferences</p> <p><b>Site visit</b> Meetings with SMT, HR, academic management, teacher focus group Records of attendance at briefings, events and conferences Records of CPD Records of sponsorships</p>
<p>2.3.6 Operational academic management</p>	<p>(a) There is an appropriate learner: teacher/teacher trainer ratio for all programmes to ensure participation opportunities on the part of the learners and effective classroom management on the part of teachers and teacher trainers.</p> <p>(b) The number of dedicated full-time academic managers per centre is proportional to the number of enrolled learners at the centre at any one time during operational hours.</p> <p>(c) Teaching schedules of a maximum of thirty contact teaching hours per week are fully supported by well-designed curricula, syllabuses, and schemes of work, which are closely aligned to the Common European Framework of Reference for Languages (CEFR).</p> <p>(d) There is an effective system in place to substitute teachers and teacher trainers as required.</p>	<p><b>Documentation</b> Organisational chart Staff lists Academic management policy Teacher/trainer substitution policy Staff handbook Academic Manager handbook Student handbook Sample records of class work completed for 6 months prior to submission of IEMAS Sample teaching schedules for 6 months prior to submission of IEMAS Copyright compliance</p> <p><b>Description</b></p>



	<p>(e) Academic managers are responsible for the monitoring of all academic administrative documentation, which is stored on the school management system.</p> <p>(f) Records of work completed in class are recorded in sufficient detail (i.e., to enable another teacher to understand what has been completed) on the management system and this is monitored by academic management staff. Follow-up work with teachers is completed when records are insufficient.</p> <p>(g) Compliance with copyright and other intellectual property rights legislation is monitored by academic managers.</p>	<p>Academic management procedures and monitoring systems, including systems to substitute teachers, record work completed in class and monitor copyright compliance</p> <p>Student numbers and ratios</p> <p>Plan to reduce all teaching schedules to 30 hours per week, with timelines to meet QQI requirements</p> <p>Staff training on copyright compliance</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic teams, teacher focus group, student focus group</p> <p>Lesson observations</p> <p>Teaching schedules</p> <p>Records of work completed</p> <p>Staff training re copyright compliance</p>
2.3.7 Teaching and learning	<p>(a) Teachers plan and deliver ELE programmes in a learning environment that is appropriate and of a sufficient standard to facilitate learners' achievement of the intended learning outcomes.</p> <p>(b) Lesson planning, teaching approaches, methods and skills reflect the ELE provider's philosophy, mission statement and strategic objectives for the organisation and help learners meet their language learning objectives.</p> <p>(c) Lesson planning and teaching approaches reflect the ELE provider's commitment to the close alignment of the provider's curriculum, syllabus and course programme to the CEFR.</p> <p>(d) Lesson planning and teaching skills are core competences that are developed on initial teacher training courses and further developed and fine-tuned as a teacher develops their skills in the organisation.</p>	<p><b>Documentation</b></p> <p>Mission statement</p> <p>Strategic objectives</p> <p>Curriculum/syllabus/programme development policy</p> <p>CEFR alignment policy</p> <p>Academic management policy</p> <p>Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work</p> <p>Teacher handbook</p> <p>Academic Manager handbook</p> <p>Student handbook</p> <p>Sample records of lesson observations for 6 months prior to submission of IEMAS.</p> <p><b>Description</b></p> <p>How lesson planning, approaches, methods and skills reflect the ELE provider's philosophy</p> <p>Systems to monitor design and delivery of lessons, support teachers and manage observation cycle.</p>

	<p>(e) Design and delivery of lessons is monitored by academic managers.</p> <p>(f) Academic managers, senior teachers and teacher trainers help newly qualified and less experienced teachers to continue to develop lesson planning and teaching skills and support newly qualified and less experienced teachers when planning and teaching.</p> <p>(g) There are developmental observation systems, e.g., self- and peer observations, in place to help all teachers and teacher trainers learn from each other in relation to approaches, skills, techniques, and to help less experienced teachers learn from more experienced colleagues</p>	<p><b>Site visit</b>  Meetings with SMT, academic teams, teacher and student focus groups  Records of lesson observations  Lesson observations</p>
2.3.8 Lesson planning	<p>(a) Teachers plan lessons with clear intended learning outcomes, with reference to the curriculum, syllabus, course programme/schemes of work, learner needs and course materials, and planning is clearly and closely aligned to the CEFR.</p> <p>(b) When lesson planning, teachers demonstrate an ability to:  (i) take learner needs, interests and cultural background into account; (ii) incorporate a variety of teaching approaches as appropriate; (iii) formulate clear and achievable intended learning outcomes; (iv) formulate coherent and achievable stages and stage aims; (v) consider learner-centredness; (vi) for language skills: formulate detailed language analysis of meaning, form, pronunciation (and appropriacy, as necessary), considering learner participation, and detailed anticipated problems; (vii) for skills: focus on achievable intended learning outcomes in terms of learner development of sub-skills; (viii) include a variety of interaction patterns to support learner participation and effective classroom interaction; (ix) incorporate authentic use of language; (x) incorporate self- and peer evaluation by learners; (xi) include content and language</p>	<p><b>Documentation</b>  Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work  Lesson planning documentation  Sample records of developmental lesson observations for 6 months prior to IEMAS submission  Records of CPD on lesson planning</p> <p><b>Site visit</b>  Meetings with SMT, academic teams, teacher and student focus groups  Records of lesson observations  Records of CPD on lesson planning  Lesson observations</p>

	feedback following speaking/writing stages; (xii) adapt course book materials and design materials, including authentic materials, depending on learner needs and interests and intended learning outcomes; (xiii) include some reflection on the lesson and learning.	
2.3.9 Lesson delivery	<p>(a) Lessons are delivered with clear reference to the syllabus, learner needs and CEFR ‘can do’ descriptors, as well as course materials.</p> <p>(b) Teaching skills demonstrate teachers have developed and continue to develop core competencies, including, but not limited to, the following: (i) an understanding of the need to empathise and personalise with learners and to generate rapport; (ii) an understanding of the need to promote effective learner training and study skills; (iii) an understanding of effective classroom management skills, including, but not limited to, the following areas: elicitation, task setting and instructions, suitable classroom layout, management of materials and resources, and management of learners and the lesson; (iv) an ability to monitor, correct and manage feedback, including management of emergent language; (v) an ability to evaluate learning and assess achievement of intended learning outcomes or progress towards these; (vi) an ability to adapt approaches and techniques in accordance with learner needs and learning preferences; (vii) an awareness of inter-cultural diversity and needs; (viii) an awareness of the language needs of learners, depending on their first language influences and interferences; (ix) an awareness of differentiation.</p>	<p><b>Documentation</b>  Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work  Lesson planning documentation  Sample records of developmental lesson observations for 6 months prior to IEMAS submission  Records of peer observations  Sample records of work completed in class for 6 months prior to submission of IEMAS  Sample records of CPD on lesson delivery</p> <p><b>Site visit</b>  Meetings with SMT, academic teams, teacher and student focus groups  Records of lesson observations  Records of CPD on lesson delivery  Lesson observations</p>
2.3.10 Online provision	(a) Where online provision is offered, ELE providers can demonstrate that teachers have been suitably trained in effective lesson planning and teaching skills for synchronous and asynchronous contexts, as relevant, including specific training on materials design, effective use of the online	<p><b>Documentation</b>  Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work  Lesson planning documentation  Sample records of developmental lesson observations for 6 months prior to IEMAS submission</p>

	<p>platform(s) and tools, effective classroom management and interaction, monitoring, and feedback in the online classroom.</p> <p>(b) Where online provision is offered, providers can demonstrate that learners have been suitably trained in effective use of the online platform(s), tools, materials and types of interaction in the online classroom.</p> <p>(c) Where online provision is offered, ELE should have regard to the QQI Statutory Quality Assurance Guidelines for Providers of Blended and Fully Online Programmes.</p> <p>(d) ELE providers have a written remote plan in place, together with a training plan for teachers and learners, to upskill teachers efficiently and to enable the academic team and learners to move to synchronous online provision with limited disturbance to staff and learners.</p>	<p>Records of peer observations Sample records of work completed in class for 6 months prior to submission of IEMAS Sample records of CPD on lesson planning and delivery</p> <p><b>Site visit</b> Meetings with SMT, academic teams, teacher and student focus groups Records of lesson observations Records of CPD on lesson planning and delivery Lesson observations</p>
2.3.11 Monitoring of lesson planning and delivery	<p>(a) The quality of the learning experience is monitored on an on-going basis with regular quality assurance observations. (b) Quality assurance observation feedback is disseminated to teachers and this feedback is recorded.</p> <p>(c) Quality assurance observation feedback informs teacher/teacher trainer development needs and helps academic managers to plan development programmes to meet these needs.</p>	<p><b>Documentation</b> Quality monitoring observation sheet Quality monitoring observation feedback</p> <p><b>Description</b> Systems to manage quality observation cycle: observations, feedback, identification of needs and planning of developmental CPD</p> <p><b>Site visit</b> Meetings with SMT, academic teams, teacher and student focus groups Records of quality monitoring lesson observations Records of quality monitoring lesson feedback Records of CPD Lesson observations</p>

<p><b>2.4 Programme Design</b> 2.4.1 Curriculum and syllabus design</p>	<p>(a) Curriculum and syllabus design is completed and managed by suitably qualified and experienced senior academic staff, with learner needs and interests in mind.</p> <p>(b) Curriculum and syllabus design is clearly and closely aligned to the Common European Framework of Reference for Languages (CEFR), with clearly defined learning outcomes, which are articulated in 'can do' descriptors.</p> <p>(c) Curriculum and syllabus design and updates are approved by the academic governance committee, or external ELE expertise, as appropriate, and approvals are documented.</p>	<p><b>Documentation</b> Curriculum/syllabus/programme development policy CEFR alignment policy Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work Job descriptions of CEFR alignment project management team/programme development team Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Process to develop, manage, monitor, review and update the curriculum, syllabus(es) and course programmes/schemes of work, including internal and external stakeholder consultation Description of CEFR alignment project: project management team, role of the person(s) responsible, development and implementation of CEFR alignment project, compliance with ELE Code and plan to complete CEFR alignment, if applicable, with timelines meeting QQI requirements Management of academic governance committee/external ELE expert(s) and process to approve programme development</p> <p><b>Site visit</b> Meetings with SMT, academic team, project management team, academic governance committee/external ELE expert(s); teacher and student focus groups CVs and job descriptions of CEFR alignment project management team/programme development team CEFR alignment project documentation</p>
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2.4.1.1 Curriculum design	<p>Curriculum design considers:</p> <p>(i) the provider's educational philosophy and mission statement.</p> <p>(ii) approach(es) to be taken, e.g., Communicative Approach, Task-Based Learning, aligned to the CEFR 'can do' descriptors.</p>	<p><b>Documents</b></p> <p>Mission statement; educational philosophy</p> <p>Curriculum/syllabus/programme development policy</p> <p>CEFR alignment policy</p> <p>Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work</p> <p>Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b></p> <p>Decision on approach(es) taken to curriculum design in alignment with the CEFR 'can do' descriptors; description of approach(es).</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic team, project management team, academic governance committee/external ELE expert(s); teacher and student focus groups</p> <p>CEFR alignment project documentation</p> <p>Records of approvals of programmes by academic governance committee/external ELE expert(s); monitoring, review and updates of course programmes</p> <p>Meeting records</p> <p>Programme materials</p> <p>Lesson observations</p>
2.4.1.2 Syllabus design	<p>Syllabus design considers, as appropriate: (i) intended learning outcomes, clearly and closely aligned to the CEFR 'can do' descriptors; (ii) assessment framework; (iii) formative and summative assessment; (iv) learner age, where relevant e.g.,</p>	<p><b>Documents</b></p> <p>Mission statement; educational philosophy</p> <p>Curriculum/syllabus/programme development policy</p> <p>CEFR alignment policy</p>

	<p>teens, young adults, over 30s; (v) learner interests and needs; (vi) prior learning of learners; (vii) contact and guided learning hours to complete a given programme; (viii) materials, including essential and suggested supplementary resources; (ix) self-study and guided learning opportunities; (x) opportunities for learner decisions on input, depending on interests and needs; (xi) adjustment and modification options at different stages, based on learner and teacher feedback and evolving needs; (xii) learner training; (xiii) opportunities for learners to develop cultural awareness and to learn about life in Ireland – ideally, the programme includes lessons that are connected to the events programme; (xiv) pathways to higher education; (xv) employment opportunities; (xvi) learner development of an understanding of study and academic integrity conventions; (xvii) learner development of learner independence and learner training strategies; (xviii) opportunities for learners to practise English outside the classroom; (xix) remedial action opportunities for programme completion; (xx) reflection and evaluation.</p>	<p>Programme documentation: curriculum, syllabus(es), course programme(s)/schemes of work Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Decision on approach(es) taken to syllabus design in alignment with the CEFR ‘can do’ descriptors; description of approach(es).</p> <p><b>Site visit</b> Meetings with SMT, academic team, project management team, academic governance committee/external ELE expert(s); teacher and student focus groups CEFR alignment project documentation Records of approvals of programmes by academic governance committee/external ELE expert(s); monitoring, review and updates of course programmes Meeting records Programme materials Lesson observations</p>
2.4.1.3 Curriculum, syllabus and course programme/schemes of work reviews	<p>Curriculum, syllabus and course programme/schemes of work reviews are periodically carried out by the academic management and teaching team(s) as needed in order to: (i) meet evolving needs of the ELE provider, e.g., new programme and learner types; (ii) meet evolving needs and interests of learners; (iii) incorporate evolving practice and approaches; (iv) incorporate changes made as a result of feedback from teachers, teacher trainers, learners, and other stakeholders; (v) include new materials, which are approved by the academic governance committee.</p>	<p><b>Documentation</b> Curriculum, syllabus and course programme/scheme of work review policy Job description of person(s) responsible for curation of materials and reviews Sample review records Sample meeting records</p> <p><b>Description</b> Review procedures: when/why reviews take place; stakeholders involved; outcomes; curation of materials</p> <p><b>Site visit</b></p>

		<p>Meetings with SMT, academic team, programme management team, academic governance committee/external ELE expert(s); teacher and student focus groups</p> <p>Review records</p> <p>Meeting records</p> <p>Lesson observations</p>
2.4.2 Assessment systems	<p>(a) The provider's assessment framework (i) establishes the provider's approach to assessment of learners in both external proficiency examinations, and in-house formative and summative assessments; (ii) is clearly and closely aligned to the intended learning outcomes of each programme, expressed in 'can do' descriptors from, or adapted from, the CEFR; (iii) meets learner needs; (iv) addresses assessment administrative arrangements; (v) includes provisions for the reasonable accommodation of learners with specific needs, e.g., dyslexia, visual or auditory impairments.</p> <p>(b) A suitably qualified/trained member(s) of the senior academic staff is/are responsible for assessment within the organisation.</p> <p>(c) Providers have quality assurance procedures, structures and resources in place to ensure that all assessment types are clear and accessible and that the principles of validity, reliability and impact are well considered.</p> <p>(d) Providers ensure that formative and summative assessments of programmes are designed for the learner group and the skills practised.</p> <p>(e) Providers ensure that learners enrolled on ELE programmes leading to external proficiency examinations are sufficiently prepared for these examinations.</p> <p>(f) Learners are informed about when, how, and why they are assessed, and are provided with feedback on their progress and expected outcomes in internal and external summative examinations.</p>	<p><b>Documentation</b></p> <p>Assessment policy</p> <p>Assessment framework</p> <p>Internal appeals process</p> <p>Sample assessments</p> <p>Sample anonymised tutorial and report records for 6 months prior to submission of IEMAS</p> <p>Job description of person(s) responsible for assessment</p> <p><b>Description</b></p> <p>QA procedures in place to ensure assessments are clear and accessible and that principles of validity, reliability and impact are considered; reasonable accommodation of learners with specific needs</p> <p>Procedures to monitor, review and update tests</p> <p>Procedures for tutorials and remedial supports</p> <p>Procedures for reports</p> <p><b>Site visit</b></p> <p>Meetings with SMT, HR, academic team, programme management team, academic governance committee/external ELE expert(s); teacher and student focus groups</p> <p>CV and job description of person(s) responsible for assessment</p> <p>Records of reviews</p> <p>Meeting records</p> <p>Tutorials records</p>



	<p>(g) Regular tutorials are offered to learners during their course, e.g., following mock, mid-level and end-of-level exams, to help them focus on their learning needs and objectives.</p> <p>(h) Remedial support is offered to learners where needed.</p> <p>(i) Learners periodically receive reports from teachers following an assessment, with guidance for further study. Reports are monitored by academic managers.</p> <p>(j) There is an internal appeal process in place for learners who consider an internal assessment result to be unfair or incorrect</p>	<p>Reports records</p> <p>Lesson observations</p>
2.4.2.1 Types of assessment	<p>(a) A clear and accessible placement testing system is in place, which considers the principles of validity, reliability and impact, to ensure that learners are placed in the correct level at the beginning of their course. This test may be taken either before the learner arrives at the centre or on their first day. The placement test includes an assessment of grammar, lexis and speaking, and, if possible, writing, reading and listening. If it is not possible to include writing, reading and listening in the placement test, the academic manager ensures that these skills are assessed as soon as possible following the start of the learner's programme in order to enable the learner and their teacher assess learning needs. Effective corrective systems are in place to ensure that learners who have been incorrectly placed are moved to a more suitable level. This correction is completed as soon as possible, ideally by Day Two.</p> <p>(b) Clear and accessible formative and summative assessment systems are in place which consider the principles of validity, reliability and impact. These systems meet learner needs and are tailored to suit the language skills and systems practised on the programme.</p> <p>(c) Assessment may take different forms, including, for example, recycling, quizzes, tasks, projects and presentations, as well as more traditional test types</p>	<p><b>Documentation</b></p> <p>Sample placement, formative and summative tests</p> <p>Sample placement, formative and summative test records for 6 months prior to IEMAS submission</p> <p><b>Description</b></p> <p>Procedures to manage placement testing, including consideration of principles of validity, reliability and impact in place to ensure assessments are clear and accessible and that principles of validity, reliability and impact are considered; reasonable accommodation of learners with specific needs</p> <p>Systems for tutorials and remedial supports</p> <p>Procedures for reports</p> <p><b>Site visit</b></p> <p>Meetings with SMT, HR, academic team, programme management team, academic governance committee/external ELE expert(s); teacher and student focus groups</p> <p>Records of reviews</p> <p>Meeting records</p> <p>Test records</p> <p>Tutorials records</p> <p>Copies of reports</p> <p>Lesson observations</p>

	(d) Mock examinations are provided to learners preparing for external proficiency examinations and the principles of validity, reliability and impact are well considered.	
2.4.2.2 Academic integrity and security	(a) Procedures and systems are in place to manage the security and integrity of assessment processes, including: (i) dissemination of information to learners, as appropriate, about academic integrity; (ii) assessment procedures for academic and administrative staff, as required; (iii) standardisation of productive skills assessment; (iv) storing of assessment materials; (v) records of learner assessment.	<p><b>Documentation</b>  Academic integrity policy  AI policy  Sample materials on academic integrity for learners and staff members  Sample standardisation materials</p> <p><b>Description</b>  Procedures to manage security and integrity of assessment processes, including storing of materials and records  Procedures to disseminate information on academic integrity to learners, academic and administrative staff members  Procedures to manage standardisation of productive skills</p> <p><b>Site visit</b>  Meetings with SMT, academic team, person responsible for assessment, academic governance committee/external ELE expert(s); teacher and student focus groups  Academic integrity materials  CPD records  Meeting records</p>
2.4.2.3 Information on assessment procedures	Information relating to assessment procedures is made available to learners, including, but not limited to, the following: (i) course programme and assessment calendar; (ii) formative and summative assessment types; (iii) learner responsibilities in relation to assessment; (iv) academic integrity; (v) end of level/exit certificates and reports; (vi) guidance for learners on the selection of a proficiency exam appropriate to their level and needs, e.g., progression to higher education; (vii)	<p><b>Documentation</b>  Information for learners on assessments offered, assessment procedures, grading, CEFR scales, tutorials and supports</p> <p><b>Description</b>  Procedures to disseminate information on assessment procedures to learners</p>

	information on grading systems for external proficiency examinations and its relationship to the CEFR scale; (viii) tutorials; (ix) remedial support.	<b>Site visit</b> Meetings with SMT, person responsible for assessment, academic team, academic governance committee/external ELE expert(s), teacher and student focus groups Materials used with learners Records of information meetings
2.4.3 Teacher training centres and programme design	Where the ELE provider is also a teacher training centre, input on teacher training courses may include: (i) an introduction to the principles of course design in order to help trainee teachers understand the basic concepts; (ii) an introduction to the principles of the CEFR and its 'can do' descriptors; (iii) an introduction to the principles of assessment; in addition to the other input sessions typically included on initial teacher training courses.	<b>Documentation</b> Sample input schedule Sample input on principles of course design, CEFR, assessment  <b>Description</b> Rationale of input schedule Rationale of input on principles of course design, CEFR and assessment  <b>Site visit</b> Meetings with SMT, teacher training team, programme management team, trainer and candidate focus groups Input schedules and materials
2.4.4 Academic staff development and programme design	<p>(a) ELE providers ensure that all academic staff develop an essential awareness of: (i) the provider's educational philosophy and mission statement; (ii) the curriculum and syllabus rationale; (iii) the principles of the CEFR; (iv) alignment of the curriculum and syllabus to the CEFR; (v) development of course programmes/schemes of work and lesson materials aligned to the CEFR descriptors and levels; (vi) development of forms of assessment aligned to the CEFR</p> <p>(b) All staff members, particularly those who are in contact with learners and education agents, recruitment partners and consultants, also receive training on the principles behind the CEFR.</p>	<b>Documentation</b> Mission statement Educational philosophy CPD policy Sample CPD records for 6 months prior to submission of IEMAS Sample CPD materials Job description of person(s) responsible for CPD  <b>Description</b> Management of CPD programme for all staff; training in CEFR for all staff  <b>Site visit</b>

		<p>Meetings with SMT, HR, person(s) responsible for CPD academic team, administrative, sales and marketing, accommodation, activity teams; teacher focus group</p> <p>CPD records</p> <p>CPD materials</p> <p>Lesson observations</p>
<p><b>2.5 Supports and Services for International Learners</b></p> <p>2.5.1 Learner orientation and induction</p>	<p>Inductions include, but are not limited to, information on areas such as the following: (i) information about the centre; (ii) provider approach to teaching and learning; (iii) description of academic programme; (iv) assessment; (v) lesson schedules and breaks; (vi) events programme; (vii) practical skills workshops; (viii) practical advice, e.g., opening a bank account and who in the organisation to seek advice or help from; (ix) what to do and who to contact in an emergency; (x) learner responsibilities, e.g., in relation to non-EU/EEA students requiring entry visa and/or immigration permission; (xi) provider responsibilities; (xii) health and well-being; (xiii) management of emergencies; (xiv) local events and organisations of interest; (xv) cultural and inter-cultural awareness; (xvi) code of conduct; (xvii) complaints and grievances procedures; (xviii) academic integrity</p> <p>a) Learners are provided with a student handbook, which includes the information above, as well as other relevant information, such as a map of the area and public transport options.</p> <p>(b) Learner groups consist of a variety of language speakers, in order to optimise English language learning opportunities. Where this is not the case, ELE providers ensure that learners are made aware of this before enrolling in a programme of study.</p>	<p><b>Documentation</b></p> <p>Information sent to learners' pre-arrival</p> <p>Learner induction policy</p> <p>Welfare support policy</p> <p>Language mix policy (if in place)</p> <p>Documentation on language mix: link to website, brochure</p> <p>Sample induction schedules for 6 months prior to submission of IEMAS</p> <p>Induction materials</p> <p>Sample induction records for 6 months prior to submission of IEMAS</p> <p>Student handbook(s)</p> <p>Job description of student welfare officer(s), child protection officer (if relevant), academic manager(s) responsible for assessment</p> <p><b>Description</b></p> <p>Induction systems and procedures: aims, frequency, format; System to approve, monitor, review and update induction procedures</p> <p>Language mix procedures (if in place)</p> <p><b>Site visit</b></p> <p>Meetings with SMT, student welfare officer, child protection officer, academic, including academic manager(s) responsible for assessment, administrative, accommodation, events teams; student and teacher focus groups</p>

		<p>Induction materials</p> <p>Induction records</p> <p>Meeting records</p> <p>Observations</p>
2.5.2 Learners requiring entry visas and/or immigration permissions	<p>(a) Further induction and information dissemination is offered to non-EU/EEA learners who require entry visas and/or immigration permission on requirements learners must be aware of.</p> <p>(b) ELE providers offer advice to learners on areas including, but not limited to, the following: (i) pathway options to further and higher education study; (ii) finding part-time employment; (iii) applying for a PPSN number; (iv) opening a bank account; (v) finding accommodation, if not provided by the provider. (c) Providers ensure the information provided to learners at induction is clear, accurate, transparent, accessible, relevant and up-to-date, and that it is available throughout their programme, as needed. Providers offer learners reminders of this information at key points during the programme e.g., in the lead-up to examinations.</p>	<p><b>Documentation</b></p> <p>Documentation sent to learners' pre-arrival; links to website/brochure/promotional materials</p> <p>Induction policy</p> <p>Induction materials</p> <p>Sample induction schedules for 6 months prior to submission of IEMAS</p> <p>Sample meeting records for 6 months prior to submission of IEMAS</p> <p>Policy on requirements for students enrolled on study visa/immigration permissions</p> <p>Job description of student welfare officer, academic manager responsible for assessment</p> <p>Student handbook</p> <p><b>Description</b></p> <p>Induction systems and procedures, including procedures regarding responsibilities for non-EU/EEA/Swiss learners: aims, frequency (including reminders/updates) format; System to approve, monitor, review and update induction procedures</p> <p>Language mix procedures (if in place)</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic, admin, sales and marketing, activity, accommodation teams; teacher and student focus groups</p> <p>Induction materials</p> <p>Induction records</p> <p>Meeting</p> <p>Attendance records</p>

		<p>Assessment records</p> <p>Job description of student welfare officer, academic manager responsible for assessment</p> <p>Observations</p>
2.5.3 Academic supports	<p>(a) Academic managers and the student welfare officer are available to offer study advice to learners on an on-going basis. Information on further and higher education study opportunities is made available to learners as needed.</p> <p>(b) Academic materials and resources are made available for learners to use outside of class time. These may be made available on-site as hard copies and/or online as soft copies.</p>	<p><b>Documentation</b></p> <p>Welfare support policy</p> <p>Student handbook</p> <p>Information on study opportunities</p> <p>Sample student meeting schedules for 6 months prior to submission of IEMAS</p> <p>Job description of student welfare officer</p> <p>Job description of academic manager(s) responsible for study advice</p> <p>Job description of person responsible for materials and resources</p> <p>Self-study materials and resources list/link</p> <p>Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b></p> <p>Procedures to offer and manage self-study and further study advice to learners</p> <p>System to approve, monitor, review and update procedures</p> <p><b>Site visit</b></p> <p>Meetings with SMT, student welfare officer, academic, administrative, accommodation, events teams; student and teacher focus groups</p> <p>Meeting records</p> <p>CV and job description of student welfare officer</p> <p>CV and job description of academic manager(s) responsible for study advice</p> <p>CV and job description of person responsible for materials and resources</p>

2.5.4 Events programme	<p>(a) Providers offer information on integration opportunities available to international learners, such as membership of book or film clubs, and encourage learners to avail of those opportunities.</p> <p>(b) The events programme is linked to learner needs and interests and may be linked to the academic programme, if appropriate. Events coordinators liaise with academic managers to manage events selection and planning, including any tasks linked to the ELE programme, as required by the provider.</p> <p>(c) The number of events staff members is proportional to the number of learners at the centre and there is a system in place to substitute members of staff as needed.</p> <p>(d) Events administrative procedures include, but are not limited to, the following: (i) the formulation of risk assessments for each event, with appropriate staff : learner ratios; (ii) management of any activities and tasks linked to the academic programme, in collaboration with academic management; (iii) management of attendance at events and completion of attendance reports; (iv) recording of events and tasks completed on events, as required by the provider.</p>	<p><b>Documentation</b></p> <p>Events policy  Student handbook(s)  Integration opportunities information  Links to academic programme (if applicable)  Sample events schedules for 6 months prior to submission of IEMAS  Sample risk assessments for 6 months prior to submission of IEMAS  Sample records of events for 6 months prior to submission of IEMAS, including staff: learner ratios for each event  Sample meeting records for 6 months prior to submission of IEMAS  Job description of person(s) responsible for events programme</p> <p><b>Description</b></p> <p>Events programme: rationale, format, frequency systems and procedures  System to approve, monitor, review and update events programme, systems and procedures</p> <p><b>Site visit</b></p> <p>Meetings with SMT, academic, administrative, events teams; teacher and student focus groups  Links to academic programmes (if applicable)  Meeting records  Events schedules  Records of events  Risk assessments  Attendance records, including staff: learner ratios</p>
2.5.5 Exit procedures for enrolled learners	<p>(a) Providers issue learners with certificates and reports acknowledging attendance and final level achieved at the end of the learner's enrolment duration. Certificates refer to the CEFR scale and 'can do' descriptors.</p>	<p><b>Documentation</b></p> <p>Data retention policy  Exit procedures policy, including for learners requiring study visas/immigration permissions</p>

	<p>(b) Learners are informed of document storage systems, including storage of learner attendance and assessment records.</p> <p>(c) Learners requiring entry visas and/or immigration permission, and who intend to enrol on a further ELE programme with another ELE provider, or on a higher education programme, as permitted, are provided with all required documentation, for example attendance and assessment records, by the provider where learners are currently enrolled on a programme of study, by the learners' final day of study with the ELE provider</p>	<p>Certificate and report templates Sample anonymised certificates and reports for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Data storage systems and procedures Exit procedures, including for learners requiring study visas/immigration permissions System to approve, monitor, review and update exit procedures</p> <p><b>Site visit</b> Meetings with SMT, student welfare officer, administrative, academic teams, including person(s) responsible for assessment and study advice; student and teacher focus groups Copies of completed certificates and reports Attendance records Assessment records</p>
<p><b>2.6 Staff Supports and Development</b></p> <p>2.6.1 Induction procedures</p>	<p>(a) ELE providers foster an environment which supports the well-being and integration of new staff into the organisation.</p> <p>(b) Induction procedures are in place for all new staff and include, but are not limited to, information on the following, as required for their role by the new member(s) of staff: (i) history and ownership of the organisation; (ii) organisational mission statement; (iii) organisational chart; (iv) student body; (v) client journey; (vi) authorisations, memberships and accreditations, including any obligations in place related to these; (vii) organisational and administrative systems, including communication channels; (viii) educational philosophy, curriculum, and syllabus; (ix) approach to teaching, learning and assessment; (x) academic integrity; (xi) HR systems, including details on contractual conditions e.g., leave, payroll; (xii) information and employee rights and benefits; (xiii)</p>	<p><b>Documentation</b> Induction policy Professional development and funding opportunities Staff handbook(s) All documentation relevant to inductions Job description of person(s) responsible for inductions Sample induction materials Sample induction records for 6 months prior to submission of IEMAS Sample meeting records for 6 months prior to submission of IEMAS</p> <p><b>Description</b> Induction procedures: systems for development, management, monitoring, review, updating of procedures</p>



	<p>intercultural awareness training; (xiv) health and safety; (xv) safeguarding, where appropriate; (xvi) requirements regarding learners requiring entry visas and/or immigration permission; (xvii) training for specific roles, as required; (xviii) possible professional development opportunities and paths within the organisation and relevant educational/training opportunities, including funding opportunities available; (xix) quality assurance policies and procedures; (xx) academic administrative procedures, including completion of attendance, logging of work completed in class and certificate and learner reports, as required; (xxi) events administrative procedures, including the formulation of risk assessments for each event, management of activities and tasks linked to the academic programme, management of attendance records at events and completion of reports as required.</p> <p>(c) Staff handbooks are made available to new staff with all the information supplied at induction, as well as other relevant information.</p>	<p><b>Site visit</b>  Meetings with SMT, HR, administrative, child protection, health and safety, academic, sales and marketing, activity, accommodation teams; teacher focus groups; meetings with accommodation providers  Induction materials  Induction records  Meeting records</p>
2.6.2 Academic staff induction	<p>(a) Academic staff receive an induction on academic management in the organisation, including information on the following: (i) curriculum, syllabus, course programmes/schemes of work; (ii) CEFR: principles, rationale, descriptors, course design; (iii) academic approach(es), methodologies and skills, lesson planning, selection and design of materials, academic approach(es), methodologies and skills, materials and resources, lesson planning and use of technology; (iv) assessment framework and procedures; (v) learner support and welfare systems; (vi) exit procedures, including certificates and reports.</p> <p>(b) Academic staff handbooks are made available to new staff with all the information supplied at the inductions, as well as other relevant information.</p>	<p><b>Documentation</b>  Induction policy  All documentation related to induction for academic staff  Sample induction records for 6 months prior to submission of IEMAS  Academic staff handbook  Job description of person(s) responsible for inductions</p> <p><b>Description</b>  Induction procedures: systems for development, management, monitoring, review, updating of procedures</p> <p><b>Site visit</b>  Meetings with SMT, HR, administrative, child protection, health and safety, academic, sales and marketing, activity,</p>

		<p>accommodation teams; teacher focus groups; meetings with accommodation providers</p> <p>Induction materials</p> <p>Induction records</p> <p>Planning meeting records</p>
2.6.3 Student social events staff induction	<p>(a) Student social events staff receive an induction on areas including, but not limited to, the following: (i) effective planning and management of events and activities, including events with minors, if relevant; (ii) completing risk assessments; (iii) completing attendance records; (iv) essential first aid procedures, as permitted; (v) safeguarding, as relevant.</p>	<p><b>Documentation</b></p> <p>Induction policy</p> <p>Sample induction records for 6 months prior to submission of IEMAS</p> <p>All documentation related to induction for academic staff</p> <p>Academic staff handbook</p> <p>CV and job description of person(s) responsible for inductions</p> <p><b>Description</b></p> <p>Induction procedures: systems for development, management, monitoring, review, updating of procedures</p> <p><b>Site visit</b></p> <p>Meetings with SMT, HR, administrative, child protection, health and safety, academic, sales and marketing, activity, accommodation teams; teacher focus groups; meetings with accommodation providers</p> <p>Induction materials</p> <p>Induction records</p> <p>Planning meeting records</p>
2.6.4 Staff training and development	<p>(a) Continuous professional development is available to all staff, aligned to the organisation's mission statement, needs and strategic objectives.</p> <p>(b) Cross-organisational training is planned to help different members of staff understand structures and roles within the organisation, as well as specific areas, e.g., training in programme and proficiency examination types for</p>	<p><b>Documentation</b></p> <p>CPD policy</p> <p>Mission statement</p> <p>Strategic objectives</p> <p>Staff handbook</p> <p>Sample records of cross-organisational CPD for 6 months prior to submission of IEMAS</p> <p>Sample materials</p>

	<p>administrative and sales and marketing staff, and training in student recruitment for academic staff.</p> <p>(c) All staff training is documented</p>	<p>CV and job description of staff member(s) responsible for staff training and development</p> <p><b>Description</b> CPD procedures: systems for development, management, monitoring, review, updating of procedures</p> <p><b>Site visit</b> Meetings with SMT, HR, administrative, child protection, health and safety, academic, sales and marketing, activity, accommodation teams; teacher focus groups; meetings with accommodation providers CPD materials CPD records Planning meeting records</p>
2.6.5 Administrative staff training and development	<p>(a) Administrative staff receive regular professional development, and training, as appropriate, to ensure that they continue to learn and that their processes and procedures are current.</p> <p>(b) A documented CPD plan is in place for all administrative staff and training in areas of administrative systems, such as customer service, as and other areas, such as health and safety, is offered to administrative staff, as required.</p>	<p><b>Documentation</b> CPD policy Mission statement Strategic objectives Staff handbook Sample records of administrative staff CPD for 6 months prior to submission of IEMAS CV and job description of staff member(s) responsible for staff training and development</p> <p><b>Description</b> CPD procedures: systems for development, management, monitoring, review, updating of procedures</p> <p><b>Site visit</b> Meetings with SMT, HR, administrative, child protection, health and safety, academic, sales and marketing, activity, accommodation teams; teacher focus groups; meetings with accommodation providers CPD materials</p>

		CPD records Planning meeting records
2.6.6 Academic staff training and development	<p>(a) A documented CPD plan is in place for all academic staff, including academic managers, teacher trainers and teachers, in order to: (i) meet the training and developmental needs of all academic staff; (ii) ensure that knowledge of the curriculum and syllabus, aligned to the CEFR, is known by all academic staff; (iii) ensure that practice is current.</p> <p>(b) CPD includes a developmental observation cycle for all academic team members, including self- peer, short and full lesson observations, and, in the case of full lesson observations, pre-lesson meetings, submission of lesson plans and post observation feedback meetings.</p> <p>(c) Developmental needs are identified through the observation cycle and this informs the CPD plan for academic staff</p>	<p><b>Documentation</b>  CPD policy  Mission statement  Strategic objectives  Staff handbook  Sample records of academic staff CPD for 6 months prior to submission of IEMAS  Sample materials  CV and job description of academic manager(s) responsible for academic staff training and development</p> <p><b>Description</b>  CPD procedures: systems for development, management, monitoring, review, updating of procedures; teacher development and lesson observation cycle</p> <p><b>Site visit</b>  Meetings with SMT, HR, administrative, academic teams; teacher and student focus groups  CPD materials  CPD records  Planning meeting records  Lesson observations</p>
2.6.7 Sales and marketing staff training and development	<p>(a) Sales and marketing staff receive regular professional development and training, as appropriate, to ensure that processes and procedures, as well as organisational information, are current.</p> <p>(b) Training is given in areas such as ethical practices and the London Statement.</p> <p>(c) A documented CPD plan is in place for all sales and marketing staff, including managers, to support clear,</p>	<p><b>Documentation</b>  CPD policy  Mission statement  Strategic objectives  Staff handbook  Sample records of sales and marketing CPD for 6 months prior to submission of IEMAS  Sample materials  CV and job description of staff member(s) responsible for sales and marketing staff training and development</p>

	transparent, knowledgeable, ethical and effective sales and marketing practices.	<p><b>Description</b> CPD procedures: systems for development, management, monitoring, review, updating of procedures</p> <p><b>Site visit</b> Meetings with SMT, HR, administrative, academic, sales and marketing, activity, accommodation teams; teacher and student focus groups; meetings with accommodation providers CPD materials CPD records Planning meeting records</p>
2.6.8 Performance review	Documented performance reviews for all staff members take place at least on an annual basis, during which training and development needs and career plans are identified and agreed	<p><b>Documentation</b> Performance review policy Performance review templates Sample records CV and job description of person(s) responsible for performance reviews</p> <p><b>Description</b> Performance review procedures: systems for development, management, monitoring, review, updating of procedures</p> <p><b>Site Visit</b> Meetings with SMT, HR, academic, administrative, sales and marketing, activity, accommodation teams; teacher focus groups Performance review materials Performance review records</p>

## APPENDIX SIX: Documents inspected during the Site Visit

The following is a suggested (non-exhaustive) list of core documents to give providers an idea of what documents should be made available during the Site Visit for the Assessment Panel to inspect. The Assessors may also request other documents. All records inspected on-site should include documentation for the previous 12 months prior to the Site Visit. If documentation is not available for the previous 12 months, e.g., if a policy or procedure has been recently implemented, providers should state this in the IEMAS.

1. Current staff:
  - CVs
  - job descriptions
  - copies of qualifications
  - employment contracts
  - records of induction
  - records of CPD and seminar materials
  - records of performance reviews
  - records of lesson observations (teachers and trainers)
  - records of staff feedback (e.g., questionnaires, focus group meetings, staff rep meetings) and follow up actions taken
  - records of grievances and measures taken
  - records of disciplinary actions and measures taken
2. Learners:
  - records of inductions, orientations, tutorials, and other meetings
  - records of attendance
  - records of assessments: placement testing, formative assessments (assignments, progress tests), summative assessments, including external proficiency examinations, where applicable
  - records of feedback (e.g., questionnaires, focus group meetings, class rep meetings) and follow-up actions taken
  - records of complaints/grievances and measures taken
  - records of certificates and academic reports issued in the last 12 months
3. Other:
  - records of work completed by teachers: syllabus coverage, pacing, weekly plans/schemes of work or similar
  - records of events programme notices
  - records of risk assessments for events/visits
  - contracts/agreements with education agents, recruitment partners and consultants – evidence of incorporation of principles of London Statement
  - any other documents not submitted with the IEMAS and not requested by the Lead Assessor during the desk-based assessment stage

## APPENDIX SEVEN: Site Visit schedule template

Providers should complete a provisional site visit schedule using this template and return to QQI within 5 working days of receipt of the Outstanding Queries Report and Site Visit Notification. The Lead Assessor will review and make suggested amendments, as appropriate. Any changes to the schedule should be communicated to QQI prior to the site visit. Last-minute changes will be discussed and agreed with Assessors on their arrival at the centre.

Sample 1.5 and 2-day site visit schedules can be found in Appendix Eight and a list of essential meetings/activities to be included in the schedule in Appendix Nine.

Site Visit information	
Provider name	
Address, including Eircode	
Dates of Site Visit	
Person(s) responsible for Site Visit	
Email of person(s) responsible for Site Visit	
Mobile number of person(s) responsible for Site Visit	

Assessor accommodation information	
Accommodation name	
Address, including Eircode	
Arrival Date	
Departure Date	
Accommodation website	
Provider emergency contact name and mobile number	
Transfer details (where required)	

Schedule – Day 1			
Time	Activity	Attendees/organisers	Assessor initials

Schedule – Day 2			
Time	Activity	Attendees/organisers	Assessor initials





## APPENDIX EIGHT: SAMPLE 1.5 and 2-day Site Visit schedules

### Sample 1.5-day site visit schedule

#### Day 1

Time	Activity	Attendees: job titles	Location	Assessor initials
0830-0845	Arrival, brief introduction to staff, tour of premises	Director, Director of Studies and staff present*	Main building	
0845-0900	Final amendments to schedule	Director, Director of Studies	DoS office	
0900-1030	Lesson observation	Teachers	Main building	
1030-1100	Student focus group meeting	Students	Room 1	
1030-1100	Teacher focus group meeting	Teachers	Room 2	
1100-1120	Meeting with reception staff	Admin assistant, student services support	Reception desk	
1120-1230	Lesson observation	Teachers	Main building	
1230-1315	Lunch			
1315-1415	Meeting with SMT	Director/CEO/Owner, Director of Studies, Marketing Director, Head of Admin, HR*	Board room	
1430-1530	Meeting with academic management team	Director of Studies, Assistant Director of Studies, Head of Exams, Head of CPD/ Teacher Training*	Board room	
1530-1600	Inspection of premises and resources		Main building	
1600-1630	Meeting with accommodation staff	Accommodation Coordinator	Room 1	
1630-1700	Interviews with host families Visit to student residence	On the phone Accommodation Coordinator	Room 1	
1600-1730	Documentation review		Assessor room	
1800-1900	Review of Day 1			

## Day 2

Time	Activity	Attendees: job titles	Location	Assessor initials
0900-0945	Meeting with administrative management team	Head of Admin, HR Manager, Head of Enrolment*	Board room	
0945-1015	Meeting with social programme/ activities team	Coordinator and leaders	Assessor room	
1015-1100	Meeting with sales and marketing team	Marketing Director, Sales Director, sales executives *	Board room	
1100-1200	Follow up meetings Feedback preparation	As required	Assessor Room	
1200-1300	Feedback meeting	SMT and other members of staff, as appropriate	Board room	

\* In the case of smaller ELE providers, this may be a small team, and people may have dual roles, e.g., the Academic Manager may also be the Director, or the Director may perform the role of Head of Admin or HR Manager, and the Director of Studies may be the only academic manager supported – as required – by senior teachers.

## Sample 2-day site visit schedule

### Day 1

Time	Activity	Attendees: job titles	Location	Assessor initials
0830-0845	Arrival, brief introduction to staff, tour of premises	Director, Director of Studies and staff present	Main building	
0845-0900	Final amendments to schedule	Director, Director of Studies	DoS office	
0900-1030	Lesson observation	Teachers	Main building	
1030-1100	Student focus group meeting	Students based in main building	Room 5	
1030-1100	Teacher focus group meeting	Teachers based in main building	Room 6	
1100-1120	Meeting with reception staff	Admin assistant, student services support	Reception desk Main building	
1120-1230	Lesson observation	Teachers	Main building	
1230-1315	Lunch			
1315-1415	Meeting with SMT	Director/CEO/Owner, Director of Studies, Marketing Director, Head of Admin, HR	Board room	
1430-1530	Meeting with academic management team	Director of Studies, Assistant Director of Studies, Head of Exams, Head of CPD/ Teacher Training	Board room	
1530-1630	Class observations	Teachers		
1630-1700	Meeting with accommodation staff	Accommodation Coordinator	Room 6	
1700-1800	Interviews with host families Visit to student residence	On the phone Accommodation Coordinator		
1630-1800	Documentation review		Assessor room	
1830-1930	Review of Day 1			

## Day 2

Time	Activity	Attendees: job titles	Location	Assessor initials
0830-0900	Arrival at centre, brief introduction to teachers and staff in Building 2, tour of premises, final amendments to schedule	Director, Director of Studies and staff present	Building 2	
0900-1030	Lesson observation	Teachers	Building 2	
1030-1100	Student focus group meeting	Students based in Building 2	Room B	
1030-1100	Teacher focus group meeting	Teachers based in Building 2	Room C	
1100-1120	Meeting with reception staff	Admin assistant, student services support	Reception desk Building 2	
1120-1230	Lesson observation	Teachers	Building 2	
1230-1315	Lunch			
1315-1345	Inspection of premises and resources		Building 2	
1400-1445	Meeting with sales and marketing team	Marketing Director, Sales Director, sales executives	Board room Main building	
1445-1530	Meeting with administrative management team	Head of Admin, HR Manager, Head of Enrolment	Board room	
1530-1600	Meeting with social programme/ activities team	Coordinator and leaders	Assessor room	
1530-1600	Inspection of premises and resources		Main building	
1600-1700	Follow up meetings Feedback preparation	As required	Assessor Room	
1700-1800	Feedback meeting	SMT and other members of staff, as appropriate	Board room	

## APPENDIX NINE: List of essential meetings/activities to include in the Site Visit schedule and suggested duration

Schedule	Suggested duration	Activity
Arrival on Day 1	20 mins	Tour of premises, Assessors are given key to their room, brief introduction to teachers, review of schedule with site visit organiser.
Lessons AM/PM	as per lesson schedules	Quality monitoring observations: 20-minute observations of lesson segments, with the assessors aiming to observe a minimum of 60% of teachers and all types of lessons delivered at the ELE provider's main centre (including temporary classrooms) on the day(s) of the site visit, and to observe a complete range of the teaching/training team in terms of qualifications and experience present on the day(s) of the site visit. Providers should schedule the necessary time to allow the Assessors meet the aims above, including multiple observation slots in the morning and afternoon schedules, as required. (At larger centres or during busy periods, it may not be possible to observe 60% of teachers and lessons and in this case, the organiser should schedule times to enable as many 20-minute observations as possible within the site visit schedule.)
Day 1 - early	60 mins	Senior Management Team meeting*. This should be arranged as early as possible on Day 1 of a 2/3-day site visit, and as early as possible on a 1-day site visit.
Day 1	60 mins	Academic management team meeting*. This should be arranged on Day 1 of a 2/3-day site visit, and as early as possible on a 1-day visit.
When suits	60 mins	Administrative team meeting, including IT and accounts*
Before calls?	30 mins	Accommodation team meeting*
When suits	60 mins	Sales and marketing team meeting*
When suits	60 mins	Documentation review. Assessors will review documentation not submitted for the desk-based assessment. This includes staff CVs, qualifications, contracts, job descriptions, and student attendance, classwork completed and all assessment records for the current calendar year. Please see Appendix 7 for list of documents to be inspected during site visit.
When suits	30-60 mins (1 or 2 AP members)	Accommodation provider calls (homestay and residential, as appropriate). Providers will supply AP with current provider list(s) and AP will select providers to call.
When suits	20 mins	Activities team meeting
Morning, lunch, afternoon break, or other time	20 mins	Teacher focus group meeting. Separate meetings should be scheduled if teachers are based in different buildings and cannot get to the main building during break time.

that suits teachers		
Morning, lunch, afternoon break, or other time that suits students	20 mins	Student focus group meeting. Separate meetings should be scheduled if students are based in different buildings and cannot get to the main building during break time.
Lunch	60 mins	Provider to arrange lunch for assessors onsite or at a nearby restaurant (AP can decide; restaurant should be within a 5-minute walk from centre – all lunch expenses are to be met by the provider)
Assessor meeting	30 mins	This should be arranged at the end of Day 1 on a 1.5/2-day site visit and at the end of Days 1 and 2 on a 3-day site visit. Assessors should have access to a lockable room for these, and other, meetings, for the duration of the site visit, and water should be made available to the Assessors as needed.
Coffee	20 mins	This should be included in the morning and afternoon. If it is not possible to include a break in the afternoon, coffee should be taken to the room where the Assessors have meetings at a suitable time.
Towards end of site visit.	60 mins	Follow up meetings to be arranged by Assessors with relevant staff members as needed.
Prior to feedback meeting	60 mins	Preparation of feedback. The Assessors will complete this in the Assessor room.
End of final day	60 mins	This meeting will be with the SMT, as well as other staff members the SMT would like to invite.

\* In the case of smaller ELE providers, this may be a small team, and people may have dual roles, e.g., the Academic Manager may also be the Director, but separate meetings should be scheduled for each specific purpose.

## APPENDIX TEN: Lesson Plan template for Site Visit

*Please refer to the QA Guidelines for ELE section 2.3.8 for criteria related to lesson planning.*

Teacher's name	CEFR level	Lesson focus (there may be more than one)	Lesson date and time	Room no

**Learner profile** - *please give a brief description of the learners: age(s) (if known), length of time enrolled, first language(s), reason(s) for learning English, needs, interests.*

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**Programme overview** - *please give a brief description of the ELE programme learners are enrolled on: aim, length, hours per week, materials, schedule, teachers. Please include a copy of the course programme/scheme of work for the week of the Site Visit.*

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**Learning Outcomes** – *if multiple outcomes, please put in priority order, with the most important first.*

**Learning Outcome:**

By the end of the lesson, learners will...

**Learning Outcome:**

By the end of the lesson, learners will...

*Please add further learning outcomes as needed*



**Materials** - please list the materials you will use in the lesson and reference materials as follows: name, authors, date and publishers of any books used; please name any website used, with date accessed. Please include all lesson materials, including course book materials

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**Anticipated problems and solutions: class management, texts, tasks** – please list any expected non-language related issues e.g., classroom management, texts, tasks, and planned solutions.

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Time	Stage name & stage aim	Procedure	Interaction

Time	Stage name & stage aim	Procedure	Interaction

*Please add more rows as needed*

**Language Analysis** – *please complete separate analysis for each planned grammar/vocabulary focus*

**Target language** - *please write the target language in the context that you will use in the lesson*

**Analysis of meaning/use** – *please describe how you will clarify the language*

Analysis of the meaning/use of the target language	Anticipated problems	Solutions

**Analysis of form** – *please describe how you will analyse form*

Analysis of the form of the target language	Anticipated problems	Solutions

**Analysis of pronunciation – *please describe how you will analyse pronunciation in your lesson***

Analysis of the pronunciation of the target language	Anticipated problems	Solutions

## APPENDIX ELEVEN: Lesson segment observation sheet

### Lesson segment observation sheet

Teacher	CEFR level	Lesson focus	Date and time	Room no

#### Number of learners and L1 mix

#### Overall

#### Planning: strengths

#### Planning: areas for development

#### Link to syllabus/scheme of work/course programme

#### Teaching: strengths

#### Teaching: areas for development

#### Administration

#### Assessment

This lesson <b>meets</b> the required standard
This lesson <b>does not meet</b> the required standard

**Room:** consider the following: size in relation to no of learners, heat, light (natural or electric), sound quality, equipment, layout, furniture, floor, walls, notice boards, peripheral learning opportunities, cleanliness, escape route

## Assessment criteria

<b>Planning</b>	<b>The learner</b>
Link to syllabus and weekly scheme of work/programme Approach Main and subsidiary aims Language analysis Anticipated problems and solutions: language Anticipated problems and solutions: classroom management Materials: design, adaptation, use of course book Staging and stage aims Procedures Tasks Interaction Timing	Rapport Awareness of learner needs and interests Awareness of learner preferences Cultural awareness Personalisation Learner independence Content feedback Classroom interaction: scaffolding, modelling, maximising learner participation Language grading
<b>Teaching: language focus</b>	<b>Teaching: skills focus</b>
Contextualisation Personalisation Lesson framework Clarification (MFP) Practice tasks (controlled and freer) Error Correction	Contextualisation Personalisation Management of listening and speaking skills Management of speaking and writing skills Learner reaction to text
<b>Teaching: classroom management</b>	<b>Teaching: management of learning</b>
Rapport Setting up tasks Instruction setting and checking Management of materials and resources Management of lesson Management of learners Pace Timing Classroom layout	Link to syllabus and weekly scheme of work/programme Elicitation Conveying and checking meaning Monitoring Feedback on tasks Content feedback Language feedback Achievement of aim(s)