July 2026

Institutional Review Report 2026

CCT College Dublin

CINNTE

Dearbhú Cáilíochta agus Cáilíochtaí Éireann
Quality and Qualifications Ireland


cct
Computing • IT • Business
30-34 Westmoreland Street, Dublin 2
cct.ie | info@cct.ie | + 353 1 6333444

Contents

Foreword

Quality and Qualifications Ireland (QQI) is responsible for the external quality assurance of further and higher education and training in Ireland. A core function of QQI is to ensure that the quality assurance (QA) procedures established by institutions are effective and fit for purpose. To support this, QQI conducts external reviews of higher education institutions on a cyclical basis. This cycle of reviews is known as the CINNTE review cycle.

CINNTE reviews form part of a broader quality framework for institutions, which also includes QQI's Quality Assurance Guidelines, each institution's quality assurance procedures, Annual Quality Reports (AQRs), and Dialogue Meetings.

The current CINNTE review cycle encompasses universities, technological universities, and institutes of technology, as well as the larger and more established independent and private higher education institutions operating within the Irish higher education sector. The inclusion of these independent and private HEIs reflects their scale, maturity, and significance within the sector. QQI organises and oversees independent reviews of these institutions as part of the CINNTE process.

Each CINNTE review evaluates the effectiveness of an institution's quality assurance procedures and processes. Reviews also assess institutional alignment with the Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG 2015), with reference to QQI's quality assurance guidelines and other relevant QQI policies and procedures.

For independent and private providers, CINNTE reviews additionally consider how institutions have developed and enhanced their teaching, learning, and assessment practices, the effectiveness of their quality assurance systems, and the extent to which these approaches are aligned with the institution's mission, quality indicators, and benchmarks.

The CINNTE review process is consistent with Parts 2 and 3 of the ESG (2015) and is based on internationally recognised review methodologies. These include:

- the publication of Terms of Reference;
- a process of self-evaluation and the preparation of an Institutional Self-Evaluation Report (ISER);
- an external assessment, including a site visit conducted by a review team;
- the publication of a Review Report containing findings and recommendations; and
- a follow-up process to review actions taken.

This institutional review of CCT College was conducted by an independent review team in accordance with the Terms of Reference set out in Appendix A. This report presents the findings of the review team.

The Review Team

Each CINNTE review is conducted by an international team of independent experts and peers. The institutional review of CCT College was carried out by a team of four reviewers appointed by QQI. The review team received training from QQI (3 February 2026) in advance of the review process.

The chair and coordinating reviewer attended an online planning meeting with CCT College Dublin (24 February 2026), and the main review visit was conducted by the full review team over a three-day period (10 – 12 March 2026).

CHAIR

Dr Barbara Howell

Dr Barbara Howell is an experienced higher education leader, consultant, and academic with over 25 years' experience across the UK and international tertiary education. At the time of the review, Dr Howell was serving as Interim Director of the INTO Study Centre at Lancaster University, to provide strategic and operational leadership and deliver exceptional academic quality, student experience, and partner value. In that role, Dr Howell was responsible for the oversight of academic standards, compliance, and financial performance, fostering a culture of collaboration, innovation, and student success in partnership with INTO University Partnerships and Lancaster University.

Alongside this, Dr Howell is the Director of Global UniStudy Consultancy Limited. This specialist advisory organisation supports higher education institutions, quality agencies, and national bodies in internationalisation, transnational education (TNE), and quality assurance. Their consultancy portfolio includes projects for the British Council, JISC, QAA, and numerous global universities, with expertise spanning TNE policy, partnership development, regulatory alignment, and institutional capacity building.

Dr Howell has previously held senior academic and executive roles, including Interim Director/ Principal at the University of Leicester Global Study Centre (Navitas), Associate Dean (Global Engagement) at Coventry University, and Executive Dean at Ravensbourne University. Earlier in their career, they held academic leadership and teaching posts at Leeds Beckett University, Sheffield Hallam University, and Doncaster College, contributing to programme development, international partnerships, and quality enhancement initiatives across multiple global contexts.

An active external quality assurance and accreditation reviewer, Dr Howell serves with the QAA (UK), NCAAA (Saudi Arabia), SKVC (Lithuania), AIKA (Latvia) and the Accreditation Agency Curaçao, in addition to previous governance roles including Governor of Hull College Group and Board Member of the European University Alliance.

Dr Howell holds a Doctor of Business Administration (DBA) focused on strategic Joint venture higher education partnerships, an MIT Sloan Executive Certificate in Management and Leadership, is a Chartered IT Professional (MBCS CITP) and Fellow of the Higher Education Academy.

COORDINATING REVIEWER

Kim O'Mahony

Kim O'Mahony was a Quality Officer in the Quality Support Unit, University of Limerick until January 2025, when she retired after

45+ years of service. Kim began working in the field of quality management in 2000. The remit of Kim's previous role as Quality Officer included operational management of the unit, coordinating assessment of institutional compliance with statutory quality assurance requirements and guidelines, managing the internal quality review process and supporting the development of quality management systems.

Kim was a member of the University of Limerick's Governing Authority (GA) from 2017 to 2023, where she sat on the Finance, Human Resources and Asset Management (FHRAMC) and Governance sub-committees.

Kim has previous experience of participating as a reviewer in quality review both nationally and internationally. In 2018, Kim acted as coordinating reviewer for a QQI (CINNTE) institutional review of an Institute of Technology. Kim is a member of the Pharmaceutical Society of Ireland's accreditation review panel.

Kim has a Diploma in Information Technology from Dublin City University and a Master of Science in Quality Management from the University of Limerick.

LEARNER REPRESENTATIVE

Dillon Reilly

Dillon Reilly is a graduate student on the Computing in Software Development programme in Dundalk Institute of Technology. His background is in computing, with a particular interest in the growing cybersecurity space.

INDUSTRY REPRESENTATIVE

Dr Austin Hanley

Dr Austin Hanley is a chartered engineer with more than 40 years' experience in R&D, Higher Education and management consulting. He held executive management positions in Ireland and Sweden over a 21-year career with Ericsson, and with AIT (now TUS) for more than 15 years as Dean of Engineering and Informatics.

He established his management consulting company more than 20 years ago. He has worked with public and private enterprises as a management consultant, supporting the development of strategies and conducting product market analysis for research groups.

In recent years, Austin has concentrated on the education sector, working with QQI and private colleges on programme validations and on strategic and quality related issues. He completed his undergraduate degree at University College Galway (now University of Galway). He holds post-graduate diplomas from the University of Limerick (UL) and Maynooth University, master's degrees from the Trinity College Dublin (TCD) and UL, and a doctorate from TCD.


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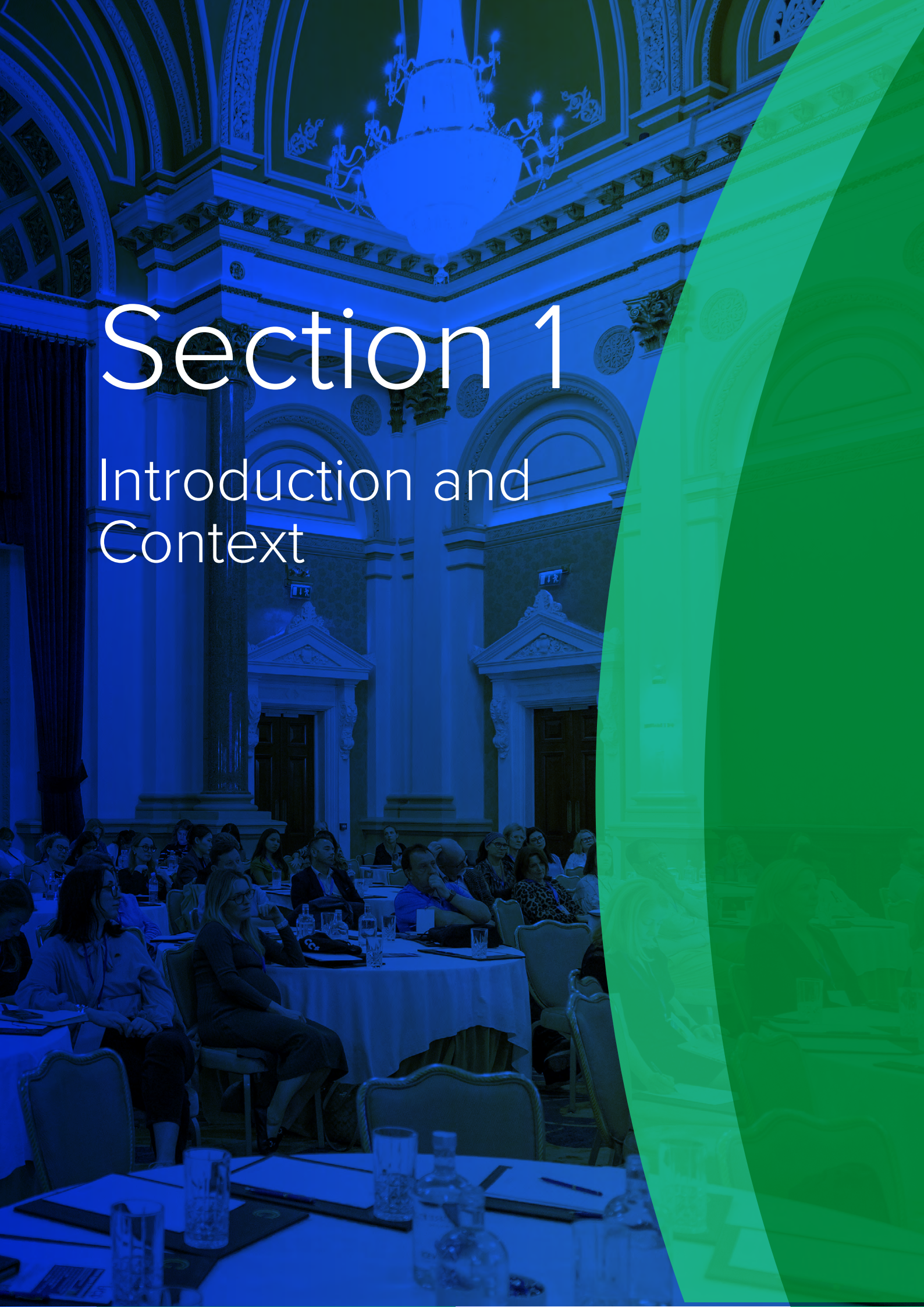
College Dublin
Graduation
Ceremony



Section 1

Introduction and Context

Section 1: Introduction and Context

CCT College Dublin (CCT) is a private higher education institution operating within the Irish higher education sector. It is a specialist institution providing QQI validated programmes within the broad disciplines of Computing, ICT and Business from levels 6 to 9, sitting on the Irish National Framework of Qualifications (NFQ). The main campus building of CCT is situated in the very heart of Dublin's city centre, at 30-34 Westmoreland Street, enjoying one of the most accessible college locations in the country with access to all public transport routes servicing all areas of the city and greater Dublin, including bus, train and LUAS.

The institution is recognised for its approach to teaching and learning, its quality standards, and its focus on student support and services, including investment in the student experience. CCT is also known for its standards and industry links, which support graduate career opportunities.

CCT is a member of the Higher Education Colleges Association (HECA) and is represented on the HECA Board, the HECA Quality Assurance and Enhancement Forum (HAQEF), the HECA Research Committee and the HECA Library Committee. The institution is a founding member of the HECA Protection of Enrolled Learners (PEL) Scheme, enabling compliance with legal obligations in respect of the protection of enrolled learners.

MISSION AND VISION

The Mission of CCT is to provide students with accessible and flexible higher education opportunities, and professional development programmes within the fields of computing, information technology and business that reflect current and emerging knowledge and practices relevant to the student and to employers. Through a student-centred culture of enquiry, innovation and excellence, CCT challenge students, staff, and other stakeholders to create, apply, and share knowledge and values in a supportive, responsive, caring, and vibrant learning environment. CCT is committed to developing graduates with personal and professional knowledge and skills that will enable them to undertake the roles, responsibilities and challenges posed by business, industry, the professions, public service and society.

CCT's main vision is to transform lives through excellence in teaching and learning and by inspiring teachers, students and graduates.

STRATEGIC PLANNING, GOVERNANCE AND MANAGEMENT

Since its inception, CCT's strategy and core values have enabled its growth, development and ability to support and guide students who entrust the institution with their educational journey. CCT's strategy is designed to ensure achievement of its mission and vision, and to serve the entire academic community within the institution. Underpinning the institution's strategy are its values and the following core aligned strategies through the period 2024-2027:

- CCT College Dublin: Institution Strategy – Connection, Collaboration, Community: 2024-2027
- CCT College Dublin: Teaching, learning and Assessment Strategy: 2024-2027
- CCT College Dublin: Research Strategy: 2024-2027

Strategic developments at CCT are undertaken following consideration of their potential benefits to the institution and the academic community. These developments are actioned following robust evaluation by the range of governance processes in place in the institution. Generally, strategy is considered by the Management Team, the Executive Leadership Team (ELT), the Academic Council (AC) and the College Board.

Each strategy document is regularly reviewed with an annual report produced in terms of performance against the identified strategic priorities. CCT has robust evaluation systems in place to consider academic performance, including both quantitative and qualitative feedback from students, graduates, external examiners, industry experts and ongoing review of programmes in terms of QQI's usual validation and revalidation procedures.

From an operational perspective, the various boards of the institution work together to ensure the strategy is developed and enacted; however, separation of academic and corporate matters is paramount. At an operational level, academic governance is overseen by the AC and corporate governance by the ELT. Both committees report to the College Board.

CCT also undergoes annual independent auditing of its financial performance.

CAMPUS INFRASTRUCTURE

CCT has approximately 32,000 square feet of campus space at its city centre site, 30-34 Westmoreland Street, Dublin 2. The building meets current Irish Fire Safety Certification and Disability Access Certification standards with induction hearing loops fitted throughout the building, and education planning in place with the Dublin City Council. CCT has invested considerably in the main campus building since its initial tenancy from August 2011 to enhance the learning experience and accessibility for all students. The most recent refurbishment project over 1.5 years during COVID was informed by best practice and international research on universal accessibility and neurodiversity. The campus building is now owned by CCT with a Starbucks Coffee House operating as a tenant within part of the ground and mezzanine floors of the premises.

The main campus teaching spaces consist of a combination of lecture rooms and interactive learning rooms, each with audio visual display resources, including state-of-the-art smart TVs and lectern pods, projection displays and touch screen devices for lecturing purposes. In addition, the institution has two fully soundproof state-of-the-art recording studios for live online lectures or recording of asynchronous content. There are eight group-study and research areas, 3,000 square feet of library space and a quiet study area. The library also includes an extensive online library catalogue of physical and online books and journals. Student printing facilities are available on campus, accessed through secure student login and a laptop loan scheme is also operated from the library. Dedicated, fully accessible, office accommodation and lecture preparation areas are located throughout the building to facilitate lecturers being on campus and available to students outside of class times.

CCT is currently finalising a refurbishment of a second campus space which will serve as an overflow campus to our main building. This second campus is 7,500 square feet in size and is based at Astor Hall, 4-8 Eden Quay, Dublin 1, a one-minute walk from the main campus building. Across both buildings, students have access to a range of communal spaces and facilities that support study breaks and daily campus use.

PROGRAMME PROFILE

Since its establishment in 2005, the institution has developed from offering further and higher education programmes, along with selected industrycertified training courses, to primarily delivering higher education programmes. The current scope of provision involves programmes of study from Level 6 to Level 9 on the NFQ. There are two main faculties: the Faculty of Computing and the Faculty of Business. The current programme offerings are as follows:

Programmes under Faculty of Business	NFQ Level	ECTS Credits
Diploma in Business Innovation	7	60
Bachelor of Arts (Hons) in Business	8	180
Bachelor of Business (Hons) [Add-on Year]	8	60
Master of Arts in International Business	9	90
Programmes under Faculty of Computing	**NFQ Level**	**ECTS Credits**
Diploma in Artificial Intelligence and Working into the Future	7	60
Diploma in Data Analytics for Business	7	60
Diploma in Networking and Systems Security	7	60
Diploma in Applied Software Development	7	60
BSc (Honours) in Computing and Information Technology	8	240
Higher Diploma in Science in Data Analytics for Business	8	60
Higher Diploma in Science in Artificial Intelligence Applications	8	60
Higher Diploma in Science in Computing	8	60
Higher Diploma in Cybersecurity	8	60
Certificate in Data Preparation and Visualisation	9	10
MSc In Data Analytics	9	90
MSc in Cybersecurity	9	90
MSc in Computing	9	90
Postgraduate Diploma in Science in Computing	9	60
Postgraduate Diploma in Science in Cybersecurity	9	60

STUDENT PROFILE

During the past five years, there have been 6,222 students enrolled on CCT programmes. The following graphs represent the learner numbers on QQI programmes only.

CCT had 1,419 QQI enrolled students in the 2024-2025 academic year. Student numbers dipped in the 2021-2022 academic year, which was related to the COVID-19 pandemic. Student numbers have now returned to pre-pandemic levels.

STAFF PROFILE

CCT programmes are supported by faculty employed in both fulltime and parttime roles. Faculty bring experience from professional, industry, and academic contexts relevant to the programmes offered by the institution. The faculty includes staff with experience in delivering programmes leading to awards at NFQ Level 9. In addition, administrative staff support the delivery and lifecycle of academic programmes.

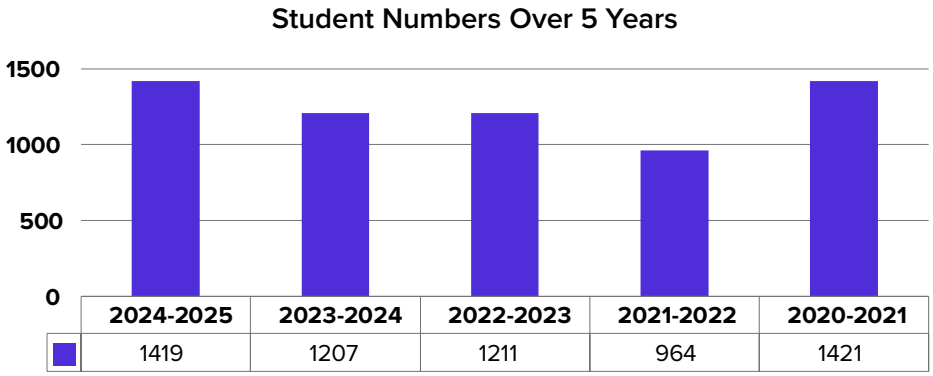
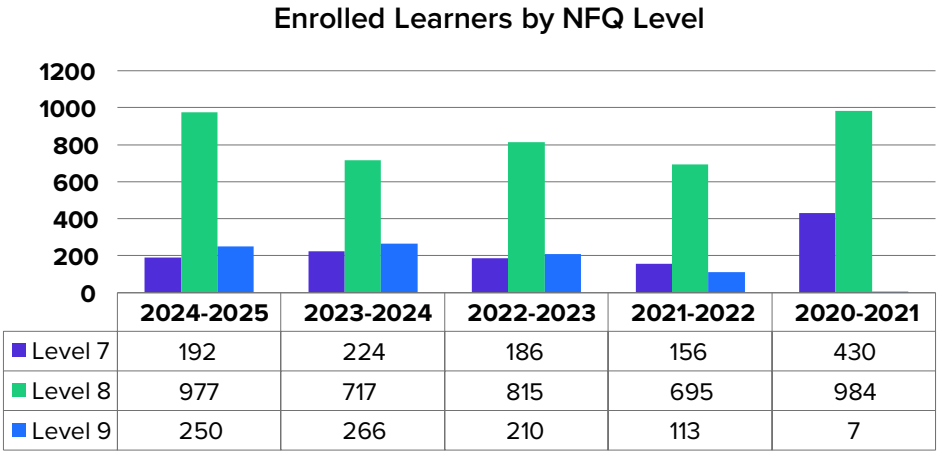


Figure 1: Number of students enrolled on all CCT Programmes for Academic Years 2020-2021 to 2024-2025



	2024-2025	2023-2024	2022-2023	2021-2022	2020-2021
Level 7	192	224	186	156	430
Level 8	977	717	815	695	984
Level 9	250	266	210	113	7

Figure 2. NFQ Level: Level 8 has been the level that most students have enrolled in each year over the past five years.

As of 3 September 2025, CCT employed a total of 66 staff members. Of these, 58% (n = 38) were employed as faculty. Within the faculty cohort, 38% of total staff (n = 25) were employed in the Faculty of ICT, while 20% (n = 13) were employed in the Faculty of Business.

The remaining 42% of staff (n = 28) were employed in management and administrative roles supporting the operation of the institution.

APPROACH TO QUALITY ASSURANCE / QUALITY ENHANCEMENT

CCT has an approved quality assurance (QA) framework that sets out the policies, procedures, and terms of reference in use across the institution. The first Quality Assurance Manual (QAM) was published in 2008 and has been revised and updated on several occasions since then.

Prior to 2013, responsibility for QA activities rested with the Dean of Academic Affairs, supported by contributions from other staff. In 2013, a dedicated QA Office was established, and the role of QA Lead was introduced.

The QA Office coordinates the daytoday implementation of quality assurance and enhancement activities, as well as the management of qualityrelated data. Programmes at CCT are validated by QQI and subject to ongoing monitoring and review. CCT has established processes for internal quality review and analysis, as well as ongoing external processes with QQI.

The institution aims to communicate clearly and frequently about policy and to involve the academic community in discourse around quality. QA policies are developed, reviewed and updated on an ongoing basis. QA policies are informed by QQI requirements. Each policy is assigned an owner, who is responsible for ensuring it is reviewed on schedule. The policy control sheet at the end of each policy details the owner and the review schedule.

Policies require approval from the appropriate institutional governance body (e.g. Academic Council, College Board). Prior to formal approval, policies undergo an iterative process of review and consultation.

CCT has a record of securing approval for its quality assurance documentation. The institution reengaged with QQI in 2018 and subsequently obtained approval for quality assurance arrangements relating to blended learning. CCT was also approved for the devolution of responsibility and has not had a programme validation or revalidation application refused.

A structured communications framework ensures that students are consistently directed towards the policies and resources most relevant to their journey. The QA Lead, Head of Student Services, Equality, Diversity and Inclusion (EDI) Officer and Librarian worked collaboratively to design and implement a schedule of targeted communications, aligned with the academic calendar. This ensures that policy information is not only accessible but also delivered when it is most useful, thereby supporting transparency, compliance, and student engagement.

Section 2

Institutional Self-Evaluation Report (ISER)

Section 2: Institutional Self-Evaluation Report (ISER)

ISER DEVELOPMENT PROCESS

CCT informally launched preparations for their CINNTE process in September 2023 through the initiation of a series of desk-based reviews, stakeholder engagements and governance committee priorities. The key steps involved in initial preparations included:

- Creating a shared collaborative working space
- Gathering formal information and supporting resources
- Initial information requirements scoping and gathering
- Identifying an appropriate core group to lead overall institution preparations.

The formal self-evaluation process, subsequent to engagement with QQI in early February 2025, commenced in March 2025.

The working group ensured that the self-evaluation was representative of the wider institution and reflected the input of all relevant stakeholders. The self-evaluation was populated with information and data obtained from a variety of key sources including:

- The institution's QA framework
- Internal and external activities and published information
- Once-off internal and external programme and QA evaluations
- Review of annual departmental monitoring reports
- Review of annual programme monitoring reports
- Review of module and programme feedback
- Interviews and focus groups with students
- Extensive feedback with internal and external stakeholders
- Quantitative and qualitative data

Upon completion of the Institutional Self-Evaluation Report (ISER), all documentation was first considered by the ELT to review and confirm the accuracy of the content and alignment with current strategic objectives. Upon approval from the ELT, documents were submitted to the AC for approval. Board members were kept informed for the duration of the process and received a copy of the final ISER before publication.

During the main review visit (MRV), the review team met with the ISER development group. The group formed a combination of the Quality and Enhancement Committee (QEC), the Management Team and the Executive Leadership Team (ELT). A whole-institution approach was adopted to the development process, with 'every corner of the building' involved.

EFFECTIVENESS OF THE ISER

The review team found the ISER to be a well written and structured document which was supported by links to policies and procedures and a multitude of additional supporting documentation. The effective use of case

studies throughout the ISER, demonstrated a clear alignment between strategy, policy and practice.

The ISER is a comprehensive report and employs a systematically structured approach to the review process (project management, working groups, document management, feedback mechanisms, evidence gathering, communication and engagement). The report points to potential areas for improvement which are grouped into actions with allocated responsible units/persons. The document layout leads the reader through changes and initiatives that have occurred in some cases over the last five years. Consequently, there is a strong sense of development continuum and a learning organisation in action.

COMMENDATION 1

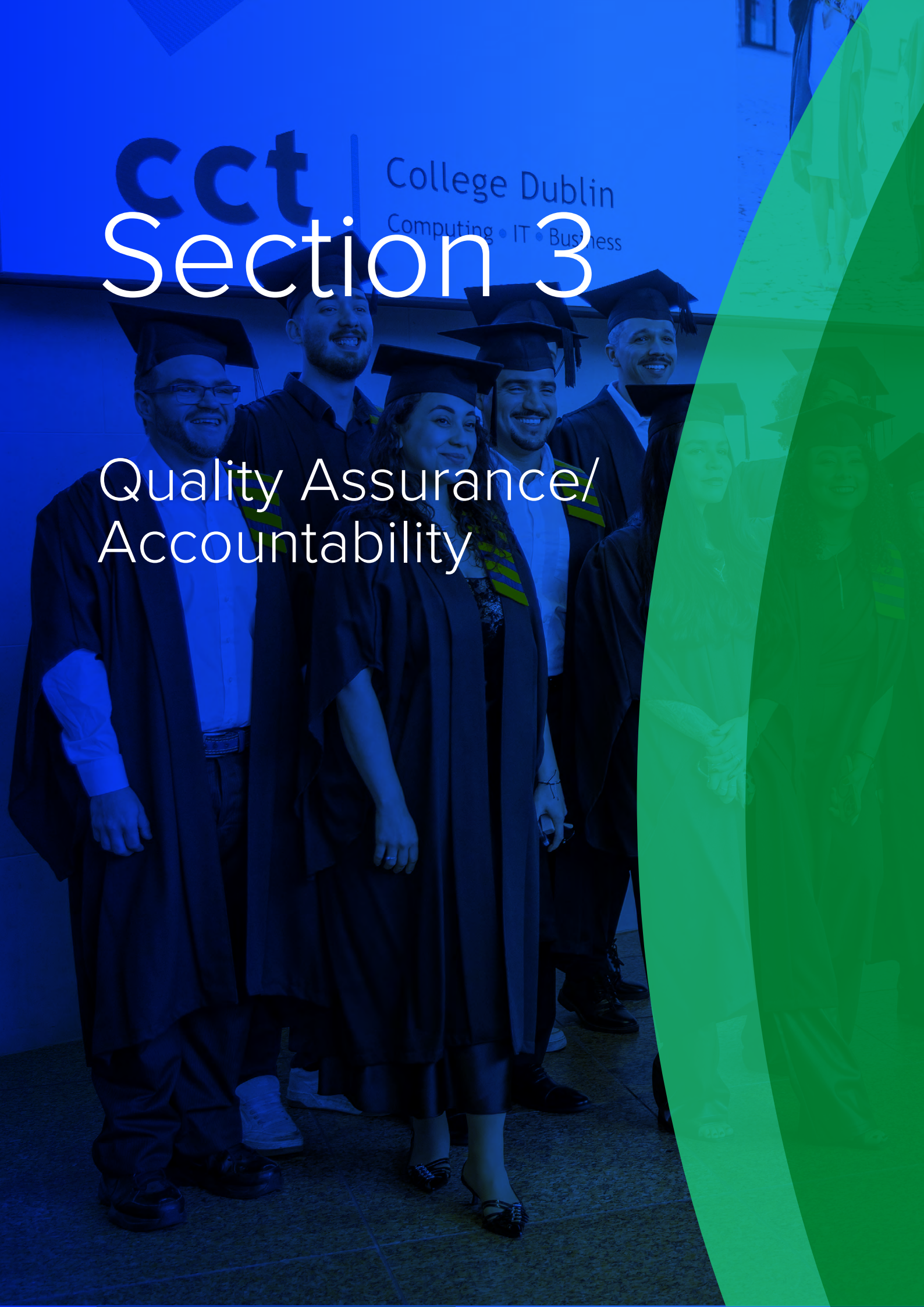
The review team commends CCT's collaborative approach to self-evaluation, including the engagement of multiple stakeholders in the ISER development process, and the effective thematic analysis summarising key strengths and areas for enhancement.

DESIGN AND ACCESSIBILITY OF THE REVIEW DOCUMENTS

Review documentation included the ISER, an Institutional Profile and two Annual Quality Reports (AQRs). The ISER was supported by a multitude of additional documentation. For each objective of the ISER, a folder of supporting documentation was provided. This was accompanied by a very helpful signposting overview of all supporting documentation. The AQRs and additional supporting materials such as the institutional profile document, presented the review team with a clear overview of QA and enhancement procedures at CCT. Prior to and during the MRV, the review team requested additional documentation which was provided promptly by the institution.

All review documentation was hosted on a SharePoint site created by QQI, to which all team members had secure access.

The review team did express concern about the length of, and accessibility issues with the QAM, which is used as a central repository of all quality related policies and procedures at CCT. Operational procedures associated with individual policies are very detailed, outlining areas of responsibility and evidence generated to ensure effectiveness. Lots of detailed procedural steps are included, which may be more effectively accessed and utilised as stand-alone documents. During the MRV, the review team was advised that the QAM has now been made more accessible, with the option to download individual policies and procedures when required. This is now hosted on a QA hub for both staff and students.



Section 3

Quality Assurance/ Accountability

Section 3: Quality Assurance/Accountability

OBJECTIVE 1 – GOVERNANCE AND MANAGEMENT

CCT governance structure comprises a College Board, Executive Leadership Team, Audit, Risk and Strategy Committee and Academic Council.

The College Board oversees CCT as a commercial, for-profit organisation. The Board comprises the College President (who also serves as Company Secretary), the Dean for Administration and Finance, and two independent non-executive members, one of whom acts as chair, ensuring both internal leadership and external expertise in governance. The Board is responsible for overall governance, including setting strategic direction, managing risk, ensuring financial sustainability, and upholding ethical standards, particularly in relation to learner protection.

The Executive Leadership Team (ELT), comprising the College President and Deans, is responsible for recommending strategic plans to the Board, ensuring adequate resources for quality provision and continuous improvement, monitoring progress against strategic goals, and overseeing the day-to-day management of the institution.

The Audit, Risk and Strategy Committee is a sub-committee of the College Board, appointed by and accountable to the Board. The Committee provides independent assurance to the Board that CCT's risk management, governance and internal control processes are operating effectively, through the maintenance of the CCT Risk Register.

The College Board has devolved responsibility for academic matters to the Academic Council (AC). The Board receives reports from AC, respecting the authority and academic freedom of its members.

The Academic Council (AC) is responsible for safeguarding, maintaining, and developing the academic standards of the institution's programmes and activities. It also holds responsibility for protecting the academic reputation of the institution, its programmes and the awards to which they lead.

The Management Team is responsible for the day-to-day running of CCT, implementation of the Strategic Plan and serves to complement the work of the AC and QEC.

The Management Team reports to the Executive Leadership Team (ELT), which in turn reports to the College Board. The Quality Enhancement Committee, Academic Integrity Committee, Student Services and Pastoral Care Committee, Research Committee, Board of Examiners, Programme Boards, and other ad hoc committees report to AC, which in turn reports to the Executive Leadership Team (ELT).

During the review visit, the team found these structures to be in place as intended; however, the Corporate Governance Chart contained within the ISER and other documentation did not fully reflect how the various committees communicated with each other and the Research Committee was missing from the diagram.

While the review team was satisfied that the committee structure operated effectively in practice and noted that the terms of reference of several key committees had been subject to internal review, some committees demonstrated less clarity regarding their individual roles and objectives.

It was further noted that, due to the size of the organisation, the same staff members participated in a number of both corporate and academic committees. During the MRV, the review team observed that the lines of responsibility between the Management Team and the ELT were unclear. As both groups shared similar membership, there was a lack of clarity regarding the respective levels of authority, particularly in relation to which decisions could be taken by the Management Team, and which should be formally referred to the ELT.

A review of the minutes from various committee meetings indicated that, in some cases, attendees were listed by name but not by role within the institution, while other minutes did not record attendee names at all. This made it difficult to determine whether meetings were quorate and whether attendance was appropriate to the committee's remit.

RECOMMENDATION 1

The review team recommends that organisational governance arrangements be reviewed and strengthened to ensure that reporting lines, committee structures and decisionmaking responsibilities are clearly defined, formally documented, and effectively communicated to relevant internal and external stakeholders, in order to support transparent, effective, and informed decisionmaking.

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he review team was informed that student views were regularly captured through informal meetings and formal mechanisms, including student questionnaires, module feedback and Programme Boards. However, the institution's Quality Assurance Manual (QAM) indicates that students are expected to participate in Academic Council, Programme Boards, the Student Services and Pastoral Care Committee, the Research Committee and the Academic Integrity Committee.

A review of the minutes of these boards and committees found limited evidence of student attendance at the Academic Integrity Committee, the Student Services and Pastoral Care Committee, and the Research Committee. The institution also acknowledged in its ISER the need to encourage improved student participation at key committees.

RECOMMENDATION 2

The review team recommends that governance structures be strengthened by continued student representation on committees, where appropriate, to ensure the student voice is consistently captured.

INSTITUTION MISSION AND STRATEGY

CCT's mission is to provide accessible and flexible higher education and professional development opportunities within the fields of Computing, IT, and Business, reflecting current and emerging knowledge and practices relevant to students and employers.

The institution is currently operating under its fifth strategic plan (2024–2027). The strategy identifies five priority areas: advancing student support, partnership, and inclusion; enhancing the quality of education; connection and collaboration; people and organisational culture; and professional development and evidencebased Scholarship of Teaching and Learning (SoTL).


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The ISER documents several initiatives that have taken place in the last five years. These include reviews of the terms of reference of several key committees, the regularisation of Quality Enhancement Committee and Academic Integrity Committee meetings, and an increased frequency of review and updating of the Risk Register and Risk Implementation Plan, alongside other enhancement and review activities.

It was evident throughout the MRV that there was a strong and shared commitment to the institutional mission and strategy, with staff demonstrating a clear sense of belonging and alignment with the organisation's purpose. This commitment was also reflected in the institution's engagement in developing and embedding more robust QA practices, as well as in the implementation of enhancements arising from internal reviews, as outlined in the ISER.

The review team also heard that, in order to keep students at the centre of institutional activities, CCT has chosen not to expand beyond its current capacity. Any future growth is intended to focus on increasing capacity for blended learning and fully online provision.

COMMENDATION 2

The review team commends the institution for articulating a very clear and well-communicated strategy, capping full-time student numbers to maintain its quality and culture with a plan to increase numbers in time in online delivery.

STRUCTURES FOR GOVERNANCE AND MANAGEMENT OF QUALITY ASSURANCE

The Annual Quality Report (AQR) is a core element of QQI's quality assurance monitoring framework, supporting institutional review within the CINNTE cycle and assessment of alignment with QQI guidelines and the ESG (2015). The publication of AQRs and QQI's annual synthesis report also supports transparency and sectorwide quality enhancement.

The latest edition of the QAM reflects the full scope of the institution's provision, covering programmes delivered up to NFQ Level 9, including blended learning. The manual was developed through consultation with key stakeholders, approved by Academic Council, and independently reviewed on behalf of QQI.

First introduced in 2008 and subsequently revised, including a significant update in 2018, the QAM has been regularly updated to reflect institutional and sectoral developments while maintaining alignment with national and European standards. It consolidates policies and procedures approved since 2018, with legacy elements updated as required, and supports CCT's quality assurance framework for the delivery of programmes in ICT, computing, and business. The current version (v5.3) was approved by Academic Council in November 2025.

DOCUMENTATION OF QA POLICIES AND PROCEDURES

The QAM is a comprehensive document and is designed to meet both institutional operational needs and the requirements of QQI's Statutory Quality Assurance Guidelines. It sets out the institution's academic policies and procedures, organised into sections covering programme approval, design, monitoring and review; studentcentred teaching, learning and assessment; admission, access, transfer and progression; quality assurance of teaching staff and human resources; learning resources and student support; information management; public information; and ongoing monitoring and review.

The Academic Council has overall responsibility for the approval and oversight of CCT's QA system and is supported in this role by the Quality Enhancement Committee. The Dean of Academic Affairs holds executive responsibility for the daytoday management and oversight of QA within the institution. Departmental Heads hold delegated responsibilities within their areas, while Programme Boards are responsible for matters relating to academic programmes. All staff are responsible for complying with the policies and procedures set out in the CCT QA system.

The QAM records the most recent review date for each policy. The review team confirmed that policies are subject to regular review and are updated to ensure continued relevance and effectiveness. Staff and students also demonstrated a clear understanding of where to access policies, including through handbooks, the institutional hub, and, for students, information provided during induction.

STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT

CCT recognises that the learner experience is influenced by staff both within and beyond the classroom and therefore prioritises the recruitment of staff with appropriate qualifications and attributes that support the institution's qualityfocused culture and learning environment. Section 8 of the QAM sets out the policies and procedures governing the QA of teaching staff and human resources. Staff recruitment is governed by policy CCTP801: Recruitment, Selection and Probation, with responsibility assigned to the College President and the Dean of Academic Affairs. (Please click here to access policy). This section of the QAM also outlines procedures relating to induction, codes of conduct, performance management and appraisal, professional development, conflicts of interest, and mutual respect.

The institution takes a proactive approach to professional development. During the MRV, the review team met with staff from across disciplines and grades and was provided with examples of training and development opportunities, including conference attendance, collaborative research initiatives, internal development activities, and external engagement.

During the MRV, staff described the institutional culture as open, welcoming, communityoriented, and supportive. Both staff and students referred to an 'opendoor policy' within the institution, which was described as facilitating collegiality, collaboration, and the sharing of good practice.

COMMENDATION 3

The review team commends the strong culture of professional development and collegiality across the institution, reflected in support for staff development and the sharing of experience and best practice demonstrating a high level of collegiality and organisational learning.

The development of staff is a consistent focus across CCT's current strategic documents. During the MRV, staff expressed appreciation for the fourday working week initiative, which was reported to support work–life balance and operational efficiency.

Students met during the MRV also identified the fixed timetable as a positive feature, noting that the limited variation between semesters was particularly beneficial for those engaged in parttime employment.

COMMENDATION 4

The review team commends the innovative approach to work life balance for both staff and students.

EQUALITY, DIVERSITY AND INCLUSION

CCT demonstrates a strong commitment to Equality, Diversity and Inclusion (EDI), which is embedded within its institutional values and reflected across its student supports and organisational culture. The institution actively promotes an inclusive and supportive learning environment, ensuring that students from diverse backgrounds are welcomed and supported throughout their academic journey.

During the MRV, it was evident that EDI is embedded through a range of studentfocused supports and inclusive practices. The institution has taken specific steps to support neurodiverse students, including achieving accreditation with AsIAm, Ireland's national autism charity, which recognises CCT as an autismfriendly higher education institution. This demonstrates a structured approach to inclusion and accessibility for students.

Both staff and students described the environment as welcoming, approachable, and responsive to individual needs. This culture is supported through initiatives such as mentoring systems, which provide additional guidance and support to students and contribute to an inclusive learning environment.

COMMENDATION 5

The review team commends CCT on achieving AsIAm accreditation, recognising the institution as an autismfriendly higher education provider.

PROGRAMME DEVELOPMENT, APPROVAL AND SUBMISSION FOR VALIDATION

CCT has a robust and effective system in place to identify new programmes and has demonstrated an ability to critically evaluate the effectiveness of its procedures and policies. The institution offers programmes in business, computing, and information technology, including major and nonmajor awards across NFQ Levels 6 to 9, up to taught master's level.

The institution is currently consolidating student numbers and has no plans to expand its fulltime learner cohort. New programme development is undertaken selectively and in line with validated industry demand.

CCT's quality assurance policies and procedures (QAPs) for programme development and approval were approved in 2018 as part of the QQI reengagement process. Following a review of these procedures in 2019, further amendments were made to support programme development. In 2021–2022, the institution extended its scope of provision to include blended learning, and in April 2023 its application to QQI for devolved responsibility was approved. Policies and procedures relating to programme development and approval are set out in the QAM.

During the MRV, CCT staff outlined their approach to identifying opportunities for new programme development. In line with the institution's mission, programmes are considered within the fields of computing, IT, and business and are aligned with current and emerging knowledge and practices relevant to students and employers. Such developments are typically in rapidly evolving areas and require a timely organisational response.

CCT academic staff described the proposal of new programme ideas as an established part of institutional culture. In line with QQI guidelines, major programme changes are implemented through the revalidation process. In response to the rapidly evolving nature of ICT disciplines, the review team noted that Programme Learning Outcomes (PLOs) are framed in a way that supports flexibility and adaptation to technological change.

COMMENDATION 6

The review team commends the flexibility of the wording of the Minimum Intended Programme Learning Outcomes (MIPLOs) that allows for dynamic changes to curriculum content to reflect current trends.

The review team observed a high level of engagement with employers in relation to programme development. The governing board comprises external stakeholders who provide advice on the development and revision of programmes, offering perspectives informed by industry practice and academic experience. In addition, an Industrial Engagement Forum (IEF), consisting of 12 external members, provides input on potential new programme developments.

While external members of the Executive Board are actively involved in advising on programme development, monitoring progression, reviewing student feedback, and overseeing staff performance, they indicated during the review that they place reliance on CCT's quality assurance system and defer to its established processes.

While formal work placements are not a feature of CCT programmes, feedback on employability from employers and graduates is positive. Student numbers are managed to maintain academic standards and to ensure that administrative systems remain effective. The institution's approach is characterised by steady and structured growth.

PROGRAMME APPROVAL PROCESS

Programme development and approval processes are governed by CCT's policies and procedures set out in the QAM. These policies cover programme development, approval and revalidation, including the development of blended learning programmes. The policy outlines a threestage process comprising self-evaluation, independent evaluation and revalidation. The process is detailed and comprehensive, ensuring that input from relevant internal and external stakeholders is obtained and that appropriate institutional committee approvals are in place.

Graduates are interviewed to gather data on how programmes have prepared them for employment, their feedback on teaching, learning and assessment, and the extent to which they felt supported during their studies. During the MRV, CCT management noted that new programme development proceeds at a measured pace to allow careful consideration of employer demand. As a result, external input that is drawn from the Executive Board, the IEF, graduates, and staff with strong industry experience plays a central role in programme decisionmaking.

ACCESS, TRANSFER AND PROGRESSION

CCT has established structured policies and procedures to support Access, Transfer, and Progression (ATP), aligned with its broader quality assurance framework. These processes are designed to ensure fair access to programmes, support learner mobility, and enable progression through clearly defined academic pathways.

The review team found that student progression is closely monitored and supported through a range of formal mechanisms. CCT places emphasis on progression data as an indicator of student success and programme effectiveness, supported by ongoing monitoring activities such as annual quality reporting, admissions audits, and analysis of retention, progression, and completion rates. These processes are embedded within the institution's governance structures and are subject to regular review.

In addition to formal monitoring processes, the institution has implemented proactive systems to identify and support students at risk of not

progressing. These include lecturer feedback, engagement tracking through the virtual learning environment, e.g. Moodle, and input from the Student Services and Pastoral Care Committee. This earlyintervention approach contributes positively to student retention and progression.

The Academic Council retains responsibility for ratifying progression decisions, ensuring academic oversight and safeguarding standards. External Examiners also play an important role by reviewing learner performance and confirming progression eligibility. Together, these structures provide a robust framework for managing progression in a transparent and consistent manner.

COMMENDATION 7

The review team commends the early identification and intervention of students at risk and the responsive nature of support structures in place, which contribute positively to student progression and retention.

MONITORING OF PROGRESSION

CCT notes in the QAM that student progression data is considered an important indicator of the effectiveness of learner supports and the suitability of teaching and learning within its programmes. Progression is addressed through CCT's ongoing monitoring and review processes and is guided by policies set out in Section 12 of the QAM.

Annual Quality Reports are completed by each department and reviewed at scheduled points throughout the year through the institution's governance structures. A range of self-evaluation, monitoring, and review activities are also undertaken annually and are documented within institutional policies. Student progression is monitored throughout programmes of study, with a particular emphasis on early detection of challenges. Mechanisms supporting this approach include lecturer feedback and monitoring of student engagement through the virtual learning environment, such as Moodle activity data.

Academic Council holds formal responsibility for ratifying student progression decisions, and there is evidence that the data collected and examined is monitored and acted upon. Arrangements relating to learner progression and retention are monitored through admissions audits and the analysis of retention, progression, and completion data.

The Student Services and Pastoral Care Committee (SSPCC) has an advisory role in relation to student orientation, progression, wellbeing, and development, and in the review of related policies, as set out in CCT's QA documentation.

External Examiners have formal responsibility to attend, monitor and consider student eligibility for progression.

INTEGRITY AND APPROVAL OF LEARNER RESULTS

CCT has established formal processes to ensure the integrity, accuracy, and approval of learner results, aligned with its overall quality assurance framework. These processes are designed to uphold academic standards, ensure fairness, and maintain confidence in the awards to be made by the institution.

The review team found that responsibility for the approval of learner results is clearly defined within the institution's governance structures. The Academic Council holds overall responsibility for academic standards, including the ratification of progression and award decisions. This is supported by the Boards of Examiners, which review and

confirm student results prior to formal approval, ensuring consistency, fairness, and alignment with institutional policies.

External Examiners play a key role in maintaining the integrity of assessment processes. Their responsibilities include reviewing assessment materials, monitoring grading standards, and confirming the appropriateness of learner outcomes. This independent oversight provides additional assurance regarding the reliability and comparability of results.

The institution has also implemented structured processes for monitoring and reviewing assessment outcomes, including the identification of anomalies in examination results. These processes are supported by data analysis and are considered through relevant committees to ensure that any irregularities are appropriately investigated and addressed.

The review team noted that the review processes in place identify anomalies as they arise. Appropriate internal and external moderation arrangements, including examination boards, are in place to support the integrity of examination results. It is also clear that targeted data analysis also provides the institution with relevant insights into the effectiveness of its assessment processes.

The review team noted that examination boards identify module result anomalies where these arise, particularly where one or more modules show results that differ significantly from expected norms. In such cases, potential remedial actions are considered at a later stage. During the MRV, CCT staff confirmed that this reflects current practice and noted that the institution does not normalise grades.

While acknowledging this position, the review team considers that CCT should review how lecturers and relevant committees respond to affected learner cohorts when anomalies are identified, in order to ensure fairness.

RECOMMENDATION 3

The review team recommends that the systems supporting the identification of examination result anomalies be reviewed to ensure their efficiency, transparency, and fairness.

INFORMATION AND DATA MANAGEMENT

CCT's mission clearly defines its programme focus within the fields of computing, IT, and business, aligned with current and emerging knowledge and practices relevant to learners and employers. The institution's approach to governance and management is articulated through its strategic enablers, in particular the objective to operate in a transparent manner, manage risk, ensure accountability, optimise performance, and align with its quality policy. Effective information and data management is central to supporting these strategic aims.

Section 10 of the QAM includes the policies and procedures in respect to information management and data protection. The policies include *inter alia* information management policy (informing decision making) and data protection policies.

CCT is continuing to develop its central IT and data repository systems. The institutional website serves as the primary location for official, curated policies and programme information. In addition, systems are being implemented to improve and streamline data management, including an ongoing initiative to centralise data within shared Google Drive repositories.

The institution is adopting Classter as its student applications management platform. To enhance user experience, dedicated digital

hubs have been developed to provide tailored interfaces for staff and students.

The Student Hub provides a single signon access to key learning and support systems, including student email, EBSCO, student mail, Google Drive, Moodle Library and ARC. The Staff Hub provides comparable access, tailored to staff requirements.

The Quality Office collects a wide range of data relating to both administrative and academic functions within the institution. The review team queried the extent to which this data is analysed and informs routine decision-making. Management, periodic reviews and relevant committees were able to demonstrate that operational anomalies identified through data are reviewed and addressed appropriately.

Staff described ongoing work to transform data practices, noting progress in centralising data collection and analysis that had previously been undertaken at individual level. The review team also noted the Quality Office's intention to expand data collection to further support operational improvement. Overall, the review found that the centralisation of data repositories, the provision of tailored user views, and improved access to operational documentation have contributed to more consistent and effective practices across CCT.

PUBLIC INFORMATION AND COMMUNICATION

CCT demonstrates a commitment to providing accessible, accurate, and timely public information to students and stakeholders. This information is primarily made available through the institutional website, which serves as the central repository for programme details, institutional policies, and QA documentation. This ensures that learners and external stakeholders have access to reliable and up-to-date information regarding the institution's offerings and procedures.

The review team found that CCT has made significant progress in enhancing communication through the development of centralised digital systems. Dedicated student and staff hubs provide streamlined access to key platforms, including email, Moodle, library resources, and internal documentation. These systems support clear and consistent communication across the institution and improve the user experience for both students and staff.

In addition, the institution has adopted a structured communication approach aligned with the academic calendar. This ensures that students receive relevant information at appropriate times throughout their learning journey, supporting engagement, awareness of policies, and overall transparency.

The collaboration between key roles, including the Quality Assurance team and Student Services, further strengthens the effectiveness of communication practices within the institution.

OTHER PARTIES INVOLVED IN EDUCATION AND TRAINING

As outlined in the Institutional Strategy 2024–2027, CCT's higher education and professional development programmes in Computing, IT, and Business are designed to reflect current and emerging knowledge and practices relevant to learners and employers.

A key strategic priority is the development of graduates with the skills, knowledge, and attributes sought by employers in their respective sectors. This, in turn, supports graduate progression into employment and helps to establish CCT as a reputable higher education institution both nationally and internationally.

To support this strategic priority, CCT established an Industrial Engagement Forum

(IEF) and an associated forum guide in 2019. The IEF is intended to strengthen relationships with employers, enhance alignment between academic and professional programmes and industry requirements, and support graduate employability.

The guide outlines the intended operation of the forum, including its purpose, membership, supporting roles, and responsibilities, and provides illustrative examples of effective employer engagement. It also suggests potential membership categories, including students or alumni, representatives from national or international higher education institutions, and contributors from relevant technical publications, as well as arrangements for biannual membership reviews and annual meetings. However, the review team was unable to substantiate that these elements were fully implemented in practice.

RECOMMENDATION 4

The review team recommends revising the Industry Engagement Forum guide to document more clearly the forum's current practice, membership, member responsibilities, and processes for monitoring and review.

Despite this, the review team found that the level of industry engagement aligns well with CCT's strategic ambitions. Documentation and discussions during the MRV indicated that programme design is strongly informed by established relationships with key employers. In particular, the partnership with Microsoft supports CCT in addressing national upskilling and reskilling priorities in areas such as artificial intelligence, data analytics, cybersecurity, networking, and software development. Overall, the review team considers these employer relationships to make a valuable contribution to the institution's mission.

Employer engagement also extends to support provided through the dedicated Careers Office, which works with industry to signpost employment opportunities, organise networking events, and facilitate guest lectures by external experts. Students met during the MRV confirmed this level of engagement with employers.

As detailed in the institutional profile, CCT has well established links with QQI and is engaged with NAIN (National Academic Integrity Network). During the MRV, the review team was provided with an example of sectoral collaboration, whereby CCT is working with 12 other institutions on a Higher Education Authority (HEA) funded open course focused on the redesign of assessment.

CCT's values include actively encouraging, celebrating, and promoting social inclusion and diversity, which are reflected in its recent social and community engagement activities. In 2025, CCT collaborated with Maynooth University to become the first private partner in the Science, Technology, Engineering, and Mathematics (STEM) Passport for Inclusion initiative, which aims to address unequal access to STEM education and careers for individuals from underserved communities.

In September 2025, CCT welcomed its first cohort of 29 transition year students from a Delivering Equality of Opportunity in Schools (DEIS) school in Co. Kildare to commence a Level 6 Certificate programme. During the MRV, the review team also learned of the institution's STEM-based *Sense of Belonging* programme, which introduces transition year students to thirdlevel study and provides DEIS participants with a threeday STEM programme leading to certification.

RESEARCH, ENTERPRISE AND INNOVATION

As outlined in CCT's Annual Quality Report for the 2023–2024 reporting period, the institution

recognises the importance of engagement with research as a higher education provider. While not designated as a researchintensive institution, CCT actively promotes and supports research activity. Discussions during the MRV, together with the documentation provided, evidenced a substantial body of research in teaching, learning, and assessment in higher education. Research outputs have been disseminated through conferences, journals, books, seminars, and workshops.

CCT has developed a research strategy that is aligned with the institution's mission. The strategy provides a framework for research activity and ambition and is supported by the policies in *Ethical Practice in Research and Scholarship, Professional Development, Innovation and Research,* as set out in the QAM.

The 2024–2027 strategy identifies four priority areas: research engagement, research collaboration, staff development, and the visibility and promotion of research. This second iteration of the strategy places increased emphasis on building research capacity at both staff and institutional levels.

Research activity is supported through structured systems for both students and staff. In 2024–2025, student research resulted in 12 publications or presentations, while faculty produced 18 publications across books, journals, and conference proceedings. During the MRV, staff confirmed that support is available for postgraduate study and conference participation.

In September 2024, CCT hosted its first conference, *Enhancing Academic Integrity: From Ideas to Action*, which featured external keynote speakers and international contributions. The associated conference proceedings were published in April 2025.

The Research Committee, a subcommittee of Academic Council, is the primary governance body overseeing research activity, including the development of research strategies, policies, supports, and ethical standards. Its responsibilities include promoting a research culture; overseeing the implementation and review of the Research Strategy; defining measurable research targets; ensuring alignment with institutional strategy; benchmarking research activity; establishing ethical approval processes; and supporting the dissemination of student research.

A review of committee minutes indicated that, while discussion had taken place in relation to the Research Strategy and research activity, there was less evidence of ongoing review of research priorities, the setting of measurable research targets, or the benchmarking of research activity against the private sector.

The Terms of Reference specify that the Committee meets three times per year and include ex officio membership of the Dean of Faculty, the Dean of Academic Affairs, the Dean of Teaching and Learning, and the College Librarian. Additional membership comprises researchactive faculty, parttime faculty, student representatives, and nonfaculty researchactive staff.

However, a review of committee minutes indicated limited evidence of student attendance, with discussion of the nomination process only recorded in July 2025. In addition, some meetings were held with only one of the four ex officio members in attendance.

The review team concluded that the Committee had not fully met its stated responsibilities in relation to attendance and role and recommends that this should be reviewed.

SEE RECOMMENDATION 1.

INTERNATIONALISATION

As outlined in the institutional strategy, CCT's growth plans include the development of an internationalisation plan. While internationalisation has not previously been a distinct strategic focus, the majority of CCT students are international, bringing a multidimensional and culturally diverse perspective to the learning environment. The staff cohort also includes international members who bring varied perspectives to curriculum delivery.

During the MRV, teaching staff described how they draw on the diverse national and professional contexts represented within the student body to contextualise learning. Examples included the integration of international business topics, such as the American election and tariff discussions, and the use of comparative case studies in IT modules, including cyberattacks in Ireland and in students' countries of origin.

In September 2024, CCT hosted its first conference, Enhancing Academic Integrity: From Ideas to Action, which featured external keynote speakers and international contributions. This provided teaching staff with further exposure to cross-cultural perspectives.

Finally, it is noted that CCT has recently been authorised with the TrustEd Ireland international education mark. While assessment for the TrustEd Ireland mark does not evaluate specific aspects of internationalisation or curriculum content, it recognises that CCT has an established and qualityassured track record as a provider of international education, supported by investment in staffing and learning resources.

OBJECTIVE 2 – TEACHING, LEARNING AND ASSESSMENT

THE LEARNING ENVIRONMENT

CCT provides a well-developed and supportive learning environment that is aligned with its student-centred approach to education. The physical campus infrastructure is modern, accessible, and designed to facilitate both independent and collaborative learning. Teaching spaces are equipped with appropriate audio-visual technologies, interactive learning tools, and recording facilities that support both in-person and blended delivery modes.

The institution has also invested in dedicated study areas, library facilities, and group workspaces to support a range of learning activities. The availability of online resources, including access to digital libraries and virtual learning platforms, further enhances the flexibility of the learning environment and supports diverse learning needs.

The review team noted that the learning environment is inclusive and responsive, with particular consideration given to accessibility and neurodiversity. Campus facilities meet disability access standards, and initiatives aimed at supporting inclusive learning contribute to a positive and engaging student experience.

ASSESSMENT OF LEARNERS

Assessment practices at CCT are structured and aligned with the institution's quality assurance framework, ensuring that learner performance is evaluated in a fair, transparent, and consistent manner. Assessment strategies are designed to measure the achievement of learning outcomes while supporting student development through constructive feedback and clear expectations.

The review team found that assessment design incorporates a range of methods appropriate to programme learning outcomes, supported by clearly defined marking criteria. The use of assignment templates and rubrics further enhances transparency in grading and provides students with a clear understanding of how their work is assessed.

Assessment processes are further supported by internal and external QA mechanisms, including moderation procedures and oversight by External Examiners. These systems ensure consistency in grading standards and maintain the integrity of assessment outcomes across programmes.

The institution has also implemented processes for reviewing assessment outcomes, including the identification of anomalies and the use of data to inform decision-making. These processes contribute to continuous improvement in assessment practices and help to ensure fairness for all learners.

COMMENDATION 8

The review team commends the inclusion of rubrics in assignment templates, which has provided students with clarity around the marking structure.

During meetings with the student cohort at the MRV, the review team noted that feedback from assessments at times arrived late, or at inconsistent times. This needs to be addressed to ensure that students have received the appropriate feedback required to complete further assessments.

The review team noted that assessment feedback was sometimes received late or at inconsistent times. This needs to be addressed to ensure that students receive the appropriate feedback to support subsequent assessments.

RECOMMENDATION 5

The review team recommends that the provision of assessment feedback to students should be reviewed and strengthened to ensure that it is provided consistently and in a timely manner.

SUPPORT FOR LEARNERS

CCT demonstrates a commitment to supporting learners throughout their academic journey, with a comprehensive range of services in place to address academic, personal, and professional development needs. These supports contribute to a positive and inclusive student experience.

The review team found that learner support is embedded within the institutional culture, with staff adopting an open and approachable manner that encourages student engagement. The institution's opendoor approach supports ongoing communication between students and staff, enabling issues to be identified and addressed in a timely and supportive manner.

Structured support systems, including mentoring programmes and pastoral care services, play a key role in enhancing student engagement and retention. These are complemented by proactive monitoring systems that identify students at risk, allowing for early intervention and targeted support.

In addition, the institution has demonstrated a strong commitment to inclusivity through targeted initiatives supporting diverse learner needs. This includes supports for neurodiverse students and measures to foster a welcoming and supportive learning environment.

COMMENDATION 9

The review team commends the institution's strong culture of student support, reflected in its opendoor approach to student feedback, the provision of a positive and inclusive learning environment, and an effective mentoring system that is valued by students.


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OBJECTIVE 3 – SELF-EVALUATION, MONITORING AND REVIEW

SELF-EVALUATION, MONITORING AND REVIEW

CCT's ISER makes clear that self-evaluation, monitoring, and review are central to institutional practice.

The institution adopts a methodical approach to self-evaluation, with clearly documented roles and responsibilities for review and monitoring across its governance structures. The governing board plays an active role in the monitoring and review of strategic and operational matters. CCT collects a wide range of data and draws on feedback from stakeholders, including students, graduates, employers, and academic and administrative staff, to support continuous improvement.

While the CINNTE review represents the most comprehensive self-evaluation undertaken by CCT to date, a range of additional review processes are embedded within the institution's ongoing selfassessment framework. These include reengagement with QQI, programme validation and revalidation, applications for devolved responsibilities, preparation of Annual Quality Reports (AQRs), a duediligence evaluation and the application for the TrustEd Ireland mark.

An annual monitoring report gathers and reviews data from across all departments. Unlike programmelevel reviews, these reports provide a highlevel assessment of institutional operations and quality. A standardised template is used across departments to support selfmonitoring, including review of progress against the previous year's action plans and the setting of evidencebased objectives for the year ahead.

As an example of the impact of this self-evaluation process, CCT described the identification of changes to graduate transversal skills in April 2025. Its research informed teaching and learning strategy identified 5 priorities, one of which was to design programmes with transversal skills and to update graduate attributes. The proposal progressed through the Executive Management Team and the Quality Enhancement Committee, followed by further development by a working group of the Teaching and Learning Committee, and was ultimately approved by Academic Council. The review team noted that committee interaction in this process was inclusive and effective.

Sub-committees contribute to self-evaluation, monitoring, and review. For example, the Student Services and Pastoral Care (SSPC) committee conducts virtual induction each semester, collects survey data, and presents feedback to the Dean of Academic Affairs. The Committee also reviews annual survey results and makes recommendations where appropriate.

The Quality Enhancement Committee (QEC) identified issues relating to the monitoring of late submissions and reviewed relevant policies. The review team found that the resulting assessment and supervision arrangements addressed the issue appropriately.

Representatives of the Research Committee highlighted the impact of GenAI on teaching and learning as a key institutional focus and noted that staff expertise in this area informs programme development and review. Student feedback—collected both formally through committees and support structures and informally through staff engagement—has led to actions such as more detailed marking explanations and the inclusion of rubrics in assignment briefs.

To further support student understanding of assessment processes, CCT introduced a trial of 'interactive oral' formative assessment, involving collective oral presentation assessments. This was followed by a formal evaluation, and the approach was positively received by students. It has since been embedded within programmes. Overall, the review team found that programme monitoring and review processes make effective use of informed feedback from staff, support services, students, and subcommittees, with appropriate adjustments made to programme delivery where possible.

QA PLANNING, MONITORING AND REPORTING

CCT's annual departmental reports are structured to support a consistent and standardised approach across departments. The review team noted that strategic objectives were appropriately aligned with departmental goals and that a wide range of quality enhancement initiatives had been undertaken. Progress against goals is documented in the AQR and in departmental annual monitoring reports.

The extent to which goals and targets could be expressed in a more specific way was discussed during the review. Members of the CCT Management Team noted that previous reviewers had advised maintaining a broad strategy to support flexibility.

While recognising the value of this approach at an organisational level, the review team considers that the progress being made across academic and administrative areas would be more effectively demonstrated, monitored, and reviewed through the use of more specific and, where feasible, quantitative targets. In the absence of such targets, opportunities to benchmark performance and assess progress are limited.

RECOMMENDATION 6

The review team recommends that objectives should be supported by clearly defined and measurable targets to enable effective monitoring, evaluation and benchmarking of progress.

PROGRAMME MONITORING AND REVIEW

Programme boards support the effective operation of programmes by addressing daytoday issues and identifying potential modifications. Student representation is an important element of programme board operations. However, while students are invited to participate, attendance is inconsistent. Notably, early term programme board meetings often proceed without elected student representatives. Staff are aware of this issue and are working to resolve it.

OVERSIGHT, MONITORING AND REVIEW OF RELATIONSHIPS WITH EXTERNAL / THIRD PARTY AND OTHER COLLABORATIVE PARTNERS

CCT does not currently offer linked provision programmes, and its programmes are not subject to professional body accreditation; all programmes lead to QQI awards. However, the institution maintains external assurance arrangements through its participation in the Higher Education Colleges Association (HECA) Protection for Enrolled Learners (PEL) scheme, a QQIapproved initiative involving eight HECA institutions. The PEL scheme provides assurance that, in the event of unexpected programme cessation, learners can transfer to a comparable programme at another provider or receive a refund of fees. In line with legislative requirements, CCT has arrangements in place with at least two alternative providers per programme and has ensured academic bonding of all QQI awards with two HECA member institutions since 2016. The scheme is overseen by the HECA PEL

Oversight Committee and incorporates both academic and financial safeguards.

In addition, CCT has engaged with the TrustEd Ireland initiative, a statutory quality mark developed by QQI to protect international learners. Following its application in 2025, the institution received a positive initial evaluation, with six conditions and one recommendation currently being addressed. While thirdparty arrangements are not a central feature of daytoday operations, CCT considers its participation in the HECA Protection for Enrolled Learners (PEL) Scheme to be compliant and effective. The institution also views its progress within the TrustEd Ireland process positively and is actively working to meet all outstanding requirements.

The institution's relationships with business partners reflect its focus on aligning programmes with industry needs, as outlined earlier in this report. Based on a review of documentation and discussions held during the review process, the review team found that programme design, review, and revalidation are informed by industry feedback, as well as by the systematic consideration of external examiner reports and reflections.

The assessment process includes external scrutiny prior to term commencement or publication of assessments. Assignments are submitted to external examiners for QA approval, and following internal moderation, samples of student work are provided for external moderation. Internal Examination Boards verify the accuracy and completeness of results prior to ratification by the external exam board. External examiner feedback plays a central role in assuring the integrity of assessment and results processing and is further reviewed through CINNTE processes, with faculty coordinators and the QA team evaluating selected examiner reports.

The Dean of Academic Affairs is responsible for the annual monitoring of the external examiner register, the QEC minutes, the external examiner reports, and the Exam Board minutes, as set out in the External Examiner Policy.

It is therefore evident that thirdparty and collaborative inputs, including those from industry and external examiners, are considered within programme approval, monitoring and review processes, as well as in the assessment process.

Section 4

Conclusions

Section 4: Conclusions

COMMENDATIONS

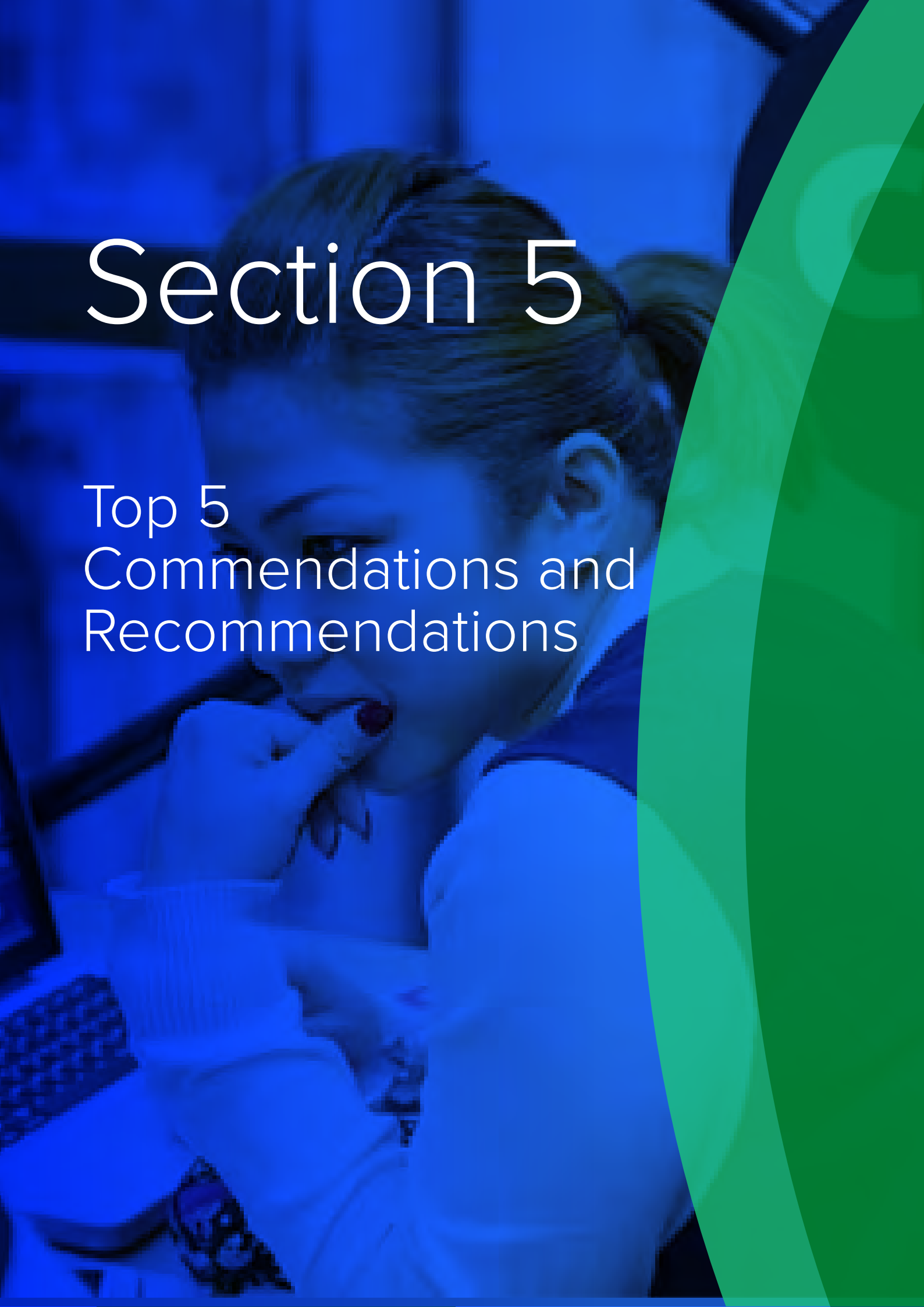
1. The review team commends CCT's collaborative approach to self-evaluation, including the engagement of multiple stakeholders in the ISER development process, and the effective thematic analysis summarising key strengths and areas for enhancement.
2. The review team commends the institution for articulating a very clear and well-communicated strategy, capping full-time student numbers to maintain its quality and culture with a plan to increase numbers in time in on-line delivery.
3. The review team commends the strong culture of professional development and collegiality across the institution, reflected in support for staff development and the sharing of experience and best practice demonstrating a high level of collegiality and organisational learning.
4. The review team commends the innovative approach to work life balance for both staff and students.
5. The review team commends CCT on achieving AsIAm accreditation, recognising the institution as an autismfriendly higher education provider.
6. The review team commends the flexibility of the wording of the Minimum Intended Programme Learning Outcomes (MIPLOs) that allows for dynamic changes to curriculum content to reflect current trends.
7. The review team commends the early identification and intervention of students at risk and the responsive nature of support structures in place, which contribute positively to student progression and retention.
8. The review team commends the inclusion of rubrics in assignment templates, which has provided students with clarity around the marking structure.
9. The review team commends the institution's strong culture of student support, reflected in its opendoor approach to student feedback, the provision of a positive and inclusive learning environment, and an effective mentoring system that is valued by students.

RECOMMENDATIONS

1. The review team recommends that organisational governance arrangements be reviewed and strengthened to ensure that reporting lines, committee structures and decisionmaking responsibilities are clearly defined, formally documented, and effectively communicated to relevant internal and external stakeholders, in order to support transparent, effective, and informed decision-making.
2. The review team recommends that governance structures be strengthened by continued student representation on committees, where appropriate, to ensure the student voice is consistently captured.
3. The review team recommends that the systems supporting the identification of examination result anomalies be reviewed to ensure their efficiency, transparency, and fairness.
4. The review team recommends revising the Industry Engagement Forum guide to document more clearly the forum's current practice, membership, member

responsibilities, and processes for monitoring and review.

5. The review team recommends that the provision of assessment feedback be reviewed and strengthened to ensure that it is provided consistently and in a timely manner.
6. The review team recommends that objectives should be supported by clearly defined and measurable targets to enable effective monitoring, evaluation and benchmarking of progress.



Section 5

Top 5 Commendations and Recommendations

Section 5: Top 5 Commendations and Recommendations

TOP 5 COMMENDATIONS

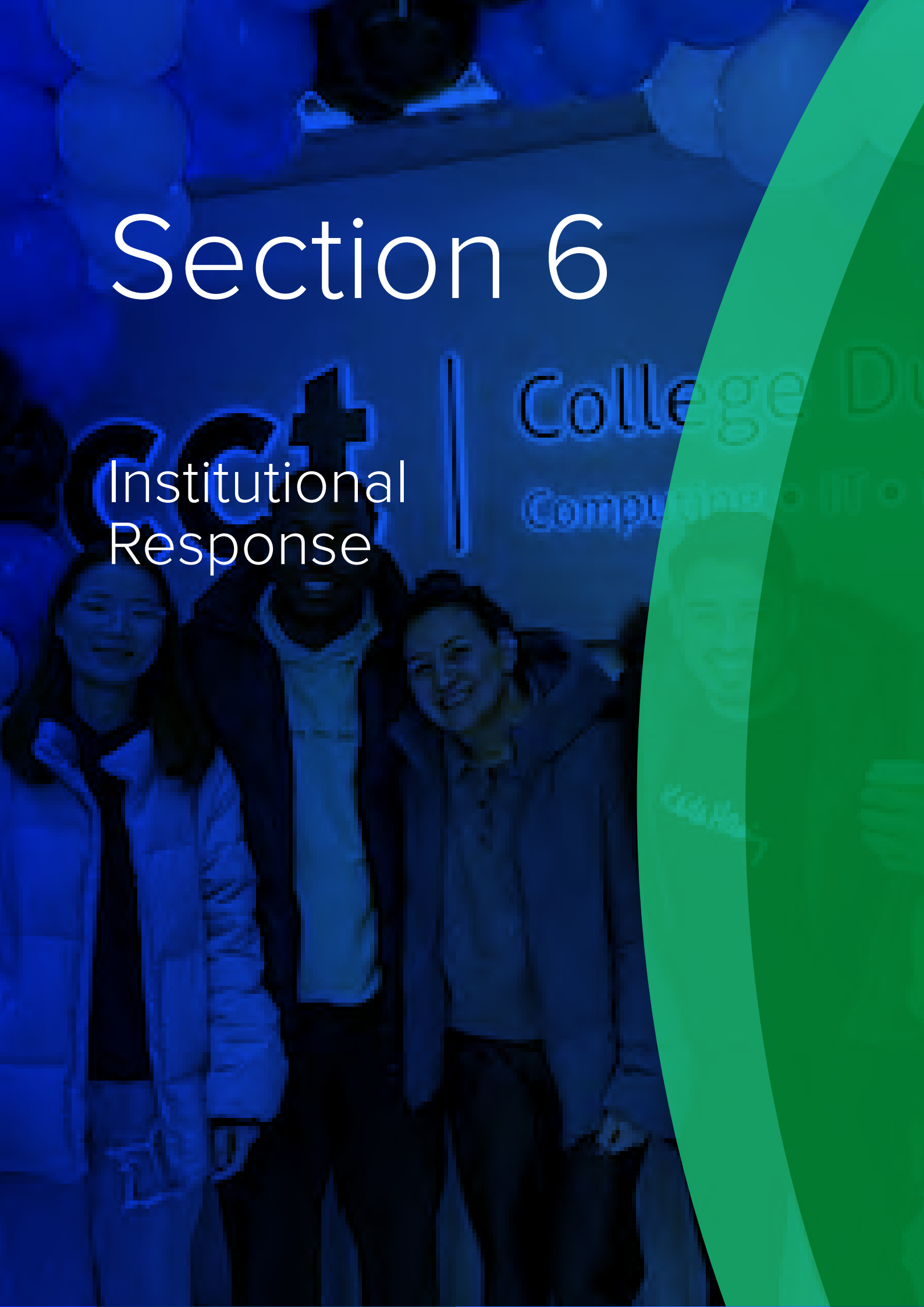
1. The review team commends the institution for articulating a very clear and well-communicated strategy, capping full-time student numbers to maintain its quality and culture with a plan to increase numbers in time in on-line delivery.
2. The review team commends the institution's strong culture of student support, reflected in its opendoor approach to student feedback, the provision of a positive and inclusive learning environment, and an effective mentoring system that is valued by students.
3. The review team commends the early identification and intervention of students at risk and the responsive nature of support structures in place, which contribute positively to student progression and retention.
4. The review team commends the strong culture of professional development and collegiality across the institution, reflected in support for staff development and the sharing of experience and best practice demonstrating a high level of collegiality and organisational learning.
5. The review team commends CCT's collaborative approach to self-evaluation, including the engagement of multiple stakeholders in the ISER development process, and the effective thematic analysis summarising key strengths and areas for enhancement.

TOP 5 RECOMMENDATIONS

1. The review team recommends that organisational governance arrangements be reviewed and strengthened to ensure that reporting lines, committee structures and decisionmaking responsibilities are clearly defined, formally documented, and effectively communicated to relevant internal and external stakeholders, in order to support transparent, effective, and informed decision-making.
2. The review team recommends that governance structures be strengthened by continued student representation on committees, where appropriate, to ensure the student voice is consistently captured.
3. The review team recommends revising the Industry Engagement Forum guide to document more clearly the forum's current practice, membership, member responsibilities, and processes for monitoring and review.
4. The review team recommends that objectives should be supported by clearly defined and measurable targets to enable effective monitoring, evaluation and benchmarking of progress.
5. The review team recommends that the systems supporting the identification of examination result anomalies be reviewed to ensure their efficiency, transparency, and fairness.

Section 6

Institutional Response



Section 6: Institutional Response

CCT College Dublin warmly welcomes the report of the CINNTE review team, and we are most grateful to the team for the commitment, rigour, and collegiality that characterised every stage of the review process. We are also remains. We will continue to enhance governance structures to encourage better student attendance for all relevant committees and particularly for the Academic Integrity Committee, the Student Services and Pastoral Care Committee, and the Research Committee.

While multiple safeguards are already in place, the College initiated a review of examination board supporting mechanisms in order to strengthen our policies and procedures for examinations and examination integrity — with ongoing enhancements to quality checks overseen by the Dean of Academic Affairs. The forthcoming introduction of a new student information system will further increase oversight and transparency across the examinations process.

Our Industry Engagement Forum (IEF) plays a valuable and active role in college life, with regular interaction between CCT and IEF members generating demonstrable real-world benefits. Further work is needed to update and strengthen the consistency of the forum, widen the pool of experts drawn from the business sector, and assure the quality of opportunities for IEF members to feed into programme design processes.

The importance of providing students with assessment feedback that is timely, consistent, and supports academic development, is fundamental to learning. As part of our continuing review the volume, type, scheduling, and effectiveness of assessments across programmes and modules is being evaluated, through student feedback, faculty input, and External Examiner reports.

CCT welcomes the opportunity to reflect on its approach to goal setting and progress measurement. The College acknowledges that quantitative targets serve a specific and valuable purpose in enabling benchmarking and evaluation, while maintaining a degree of strategic flexibility with clear strategic objectives to support CCT's agile approach to enhancement. CCT has to remain strategically agile, embedding flexibility and responsiveness into its planning processes to underpin resilience, relevance, and sustainable growth, while maintaining reporting structures are expressly linked to strategic goals.

We extend our sincere thanks to the review team for their engagement, their time, and the quality of their reflection on CCT's work. We are equally grateful to QQI for their support and leadership throughout, and to all members of the CCT community — staff, students, College Board, Academic Council, independent expert contributors, industry representatives, graduates and other stakeholders whose participation in this process and commitment to the CCT learning environment as a whole is the foundation of our vibrant learning community.

We are grateful that the review team recognised the “collaborative team approach” of our self-evaluation process and we wish to reiterate our heartfelt gratitude to our Management Team (ISER project team), who worked tirelessly throughout this CINNTE process to ensure that the preparation, documentation and panel engagements were comprehensive, meaningful, and truly representative of the entire College community.

Finally, we wish to thank our learners whose voices shaped our self-evaluation. The first strategic priority in our current Institution Strategy is ‘Advancing Student Support, Partnership and Inclusion’ because this ethos is a central tenet of everything we do. In facing the challenges of significant societal change and uncertainty, we will continue to lean on the strength of these partnerships and develop our practices to uphold and advance CCT’s position as one of Ireland’s most innovative, agile, responsive, accessible and student-centred higher education providers.

Yours in education,

Neil Gallagher
College President

Appendices

Appendices
Appendix A: Terms of Reference

These are the terms of reference for the review of independent and private providers, including those that intend to request the delegation of authority1 (DA) when it becomes available.

QQI's Core Quality Assurance Guidelines have been established for all providers and collectively address the quality assurance responsibilities of those providers. The scope of the guidelines incorporates all education and training leading to QQI awards, other awards recognised in the National Framework of Qualifications (NFQ), or awards of other awarding, regulatory or statutory bodies. The guidelines outline that quality, and its assurance, are the primary responsibility of the provider and review and self-evaluation of quality is a fundamental element of the provider's quality assurance system. Sector-specific QA guidelines have also been published and address the more specific requirements of independent and private providers. Reengagement2 by those providers confirmed that quality assurance procedures were approved by QQI in accordance with the Qualifications and Quality Assurance (Education and Training) Act 2012.

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

QQI established its Policy for Cyclical Review of Higher Education Institutions in 2016 which sets out the scope, purposes, criteria and model for cyclical review.

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

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

1 The delegation of authority (DA) to make awards is the legal mechanism to recognise a provider's growing autonomy and capacity to take on responsibility for academic quality. DA enables a provider to establish its own award brand and affords it autonomy to establish programmes, or classes of programmes of education and training, which lead to awards that are awards in the National Framework of Qualifications (NFQ). DA is a recognition by QQI that a provider has the rigour, independence and consistency in its programme approval processes and can be entrusted with the responsibility to make reliable decisions regarding the standards of programmes subject to validation and revalidation.

2 Re-engagement was a one-off process for legacy providers to establish: (i) Quality assurance procedures approved by QQI in accordance with either Section 29 or Section 30 of the 2012 Act as relevant; and (ii) The provider's scope of provision i.e. the range of programmes for which quality assurance procedures and organisational capacity are deemed appropriate and within which future programme applications for validation can be made.

PURPOSES

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

Purpose		Achieved and measured through
1.	To encourage a quality culture and the enhancement of the learning environment and experience within institutions.	• emphasising the student and the student learning experience in reviews; • providing a source of evidence of areas for improvement and areas for revision of policy and change and basing follow-up upon them; • exploring innovative and effective practices and procedures; • exploring quality as well as quality assurance within the institution; • piloting a new thematic review methodology.
2.	To provide feedback to institutions about institution-wide quality and the impact of mission, strategy, governance and management on quality and the overall effectiveness of their quality assurance.	• emphasising the ownership of quality and quality assurance at the level of the institution; • pitching the review at a comprehensive institution-wide level; • evaluating compliance with legislation, policy and standards; • evaluating relative equivalence with institution-identified benchmarks and metrics; • emphasising the improvement of quality assurance procedures.
3.	To improve public confidence in the quality of independent and private providers by promoting transparency and public awareness.	• adhering to purposes, criteria and outcomes that are clear and transparent; • publishing a periodic review cycle; • publishing terms of reference; • publishing the reports and outcomes of reviews in accessible locations and formats for different audiences; • publishing brief, easy to read institutional quality profiles; • evaluating, as part of the review, institutional reporting on quality and quality assurance, to ensure that it is transparent and accessible.

4.	To support systems-level improvement of the quality of higher education.	• publication of periodic synoptic reports; • ensuring that there is sufficient consistency in approach between similar institutions to allow for comparability and shared learning; • publishing institutional quality profiles.
5.	To encourage quality by using evidence-based, objective methods and advice.	• using the expertise of international, national and student peer reviewers who are independent of the institution; • ensuring that findings are based on stated evidence; • facilitating institutions to identify metrics and benchmarks for quality relevant to their own mission and context; • promoting the identification and dissemination of examples of good practice and innovation.

Review Objectives, Outputs and Criteria

SUMMARY OF OBJECTIVES

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

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

OBJECTIVES (INCLUDING INDICATIVE MATTERS[3] TO BE EXPLORED)

OBJECTIVE 1 – GOVERNANCE AND QUALITY MANAGEMENT

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

This will include a review of:

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

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

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

3 The indicative matters highlighted for each objective do not comprise the full range of areas that could be explored during the review. The review team has the capacity to expand this within the scope of QQI's Statutory Core QA Guidelines and sector specific guidelines as appropriate.

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

Indicative matters to be explored	
a) The provider's mission and strategy	• Do the provider's quality assurance arrangements contribute to the fulfilment of the mission and strategy? How? • Is the learner experience consistent with this mission?
b) Structures and terms of reference for the governance and management of quality assurance	• Are the arrangements sufficiently comprehensive and robust to ensure management and governance structures are proportionate and appropriate to support both the education and training activities and the general operations of the institution (e.g. separation of responsibilities, externality, stakeholder input)? • Is governance visible and transparent? • Has the provider ensured there are robust structures in place to identify, assess and manage risk? How effective are these arrangements? • How does the provider ensure the system of governance protects the integrity of academic processes and has institutional wide oversight of its QA standards? • Do the processes in place demonstrate the provider's confidence in its capacity for critical self-evaluation and remediation?
c) The documentation of quality assurance policy and procedures	• How effective are the arrangements for the development and approval of policies and procedures? • Are policies and procedures coherent and comprehensive (i.e. do they incorporate all service types and awarding bodies?), robust and fit for purpose? • Are policies and procedures systematically evaluated? • Are there effective innovations in quality enhancement and assurance?
d) Staff recruitment, management and development	• How effective are the QA procedures in maintaining and managing a resource base that sustainably supports (i) the quality assurance system and (ii) the programmes of education and training, research and related services offered by the provider? • How effective are the QA procedures for the recruitment, management and development of staff in the context of all education and training activities and related services[4] offered by the provider? • How does the provider assure itself as to the competence of its staff? • How are professional standards maintained and enhanced across the organisation? • How are staff informed of developments impacting the organisation and how can they input to decision-making?

4 This includes those education and training activities leading to awards of awarding bodies other than QQI, such as professional bodies and local provider provision, so that the overall commitments of staff are taken into account by the provider.

e) Programme development, approval and submission for validation	• What arrangements are in place to ensure alignment of programme development activity with the provider's mission and strategic goals, as well as learner needs? • Are the arrangements for the approval and management of programme development robust, objective and transparent? • What arrangements are in place to facilitate and oversee a comprehensive programme development process in advance of submission for validation (e.g. the conduct of research, inclusion of external expertise, writing learning outcomes, curricula etc., professional approval/accreditation)? • How does the QA system support the development of programmes requiring professional approval / accreditation? What additional measures are in place to support these programmes? • How effective are those arrangements in meeting and facilitating the standards required by professional, statutory or regulatory bodies (PSRBs), where relevant? • What impact has increased demand for (i) the use of online technology for programme delivery and assessment and (ii) the provision of short, standalone programmes had on the provider's resource base? How effective are the QA procedures in supporting these programmes' developments? • Are there effective structures in place to support and quality assure collaborative programme development with other providers, both national and transnational? • How does the institution assure itself that work-integrated learning[5] is fully embedded within the structure and provision of educational programmes so that the taught and work-integrated elements constitute a coherent whole? • How effectively has the provider managed its responsibility of arranging independent evaluation reports under devolved responsibility (where applicable)? • What has the provider learned from its experience of devolved responsibility?

5 Work-integrated learning (WIL) may take place in a variety of contexts, including but not limited to, practice placement, apprenticeship, applied learning and profession-oriented further and higher education where WIL elements are integral to an educational programme leading to a qualification in the NFQ.

f) Access, transfer and progression (ATP)	• How does the provider measure and monitor access, transfer and progression systematically across all programmes and services? • How effective are the processes and tools to collect, monitor and act on information on learner progression and completion rates? • Are there flexible learning pathways, respecting and attending to the diversity of learners? • Are admissions criteria and processes clear, transparent and fit for purpose? • Are progression and recognition policies and processes in line with (i) the national policies and criteria for ATP and (ii) the National Framework of Qualifications (NFQ) and (iii) any appropriate European recognition principles, conventions and guidelines including the European Qualifications Framework (EQF)? Are these implemented on a consistent basis?
g) Integrity and approval of learner results, including the operation and outcome of internal verification and external authentication processes	• What governance and oversight processes are in place to ensure the integrity of learner assessment and results data, which provide the basis for making and certifying QQI awards? • Have the provider's QA procedures evolved to combat emergent threats to academic integrity? How adaptable are they to continued threats and/or change? • How does the provider ensure that the processes in place provide for consistent decision-making and oversight across all services, centres, campuses?
h) Information and data management	• What arrangements are in place to ensure that data are reliable and secure? • How are data utilised as part of the quality assurance system? • What arrangements are in place to ensure the integrity of learner records? • How is compliance with data legislation ensured?
i) Public information and communications	• Is information on the quality assurance system, procedures and activities publicly available and regularly updated? • What arrangements are in place to ensure that published information in relation to all provision (including by centres) is clear, accurate, up to date and easily accessible?
j) Other Parties involved in Education and Training	• How effective is the provider's integrated system of quality assurance to support collaborative arrangements and partnerships with third parties? • What arrangements are in place to ensure that the provider's QA policies and procedures are consistent with European commitments as appropriate?

k) Research, Enterprise and Innovation	• What arrangements are in place to ensure that the provider has an integrated system of quality assurance in place to underpin and support its research and enterprise activities? • How effectively does research education and training engage with peer review mechanisms used for research funding and publication?

OBJECTIVE 2 – TEACHING, LEARNING AND ASSESSMENT

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

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

OBJECTIVE 3 – SELF-EVALUATION, MONITORING AND REVIEW

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

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

Review Outputs

In respect of each dimension above, the review will:

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

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

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

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

CRITERIA

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

- The provider's own mission and vision, including objectives and goals for quality assurance.
- QQI Core Quality Assurance Guidelines
- QQI Sector Specific Quality Assurance Guidelines for Independent and Private Providers
- Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) 2015
- Section 28, Qualifications and Quality Assurance (Education and Training) Act 2012
- QQI's Policy Restatement and Criteria for Access, Transfer and Progression in Relation to Learners for Providers of Further and Higher Education and Training

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

- QQI Topic Specific Quality Assurance Guidelines for Research Degree Programmes
- National Framework for Doctoral Education
- Ireland's Framework of Good Practice for Research Degree Programmes

The Review Process

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

REVIEW TEAM PROFILE

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

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

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

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

The team will include international representatives and QQI will seek to ensure diversity among the reviewers. The provider will have an opportunity to comment on the proposed composition of its review team to ensure there are no conflicts of interest. QQI has final approval over the composition of each review team. The roles and responsibilities[6] of the review team members are as follows:

CHAIR:

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

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

COORDINATING REVIEWER:

The coordinating reviewer is a full member of the team and secretary of the review team. Their role is to capture the team's deliberations and decisions during the proceedings and

6 Further detail on the conduct of reviewers is outlined in QQI's Roles, Responsibilities and Code of Conduct for Reviewers and Evaluators.

express them clearly and accurately in the team report. It is vital that the coordinating reviewer ensures that sufficient evidence is provided in the report to support the team's recommendations. The role of the coordinating reviewer includes:

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

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

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

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

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

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

ALL REVIEW TEAM MEMBERS:
The role of all review team members includes:

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

REVIEW PROCESS AND TIMELINES

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

Step	Action	Timeframe	Outcome
Preparation – Terms of Reference (ToR)	Consultation and confirmation of ToR with providers	9 months before the main review visit (MRV)	Publish ToR
Preparation – Institutional Profile (IP)	Preparation of an institutional profile by each provider (e.g. outlining mission; strategic objectives; local context; data on staff profiles; recent developments; key challenges).	6 months before the MRV	Publish IP
Preparation – Review Team (RT)	Appointment of an expert review team Consultation with the provider on any possible conflicts of interest	6-9 months before the MRV	Publish RT Profile
Self-evaluation – Institutional Self-Evaluation Report (ISER)	Forwarding to QQI of the Institutional Self-Evaluation Report (ISER) and a repository of additional information (optional).	min. 12 weeks before the MRV	Published ISER (optional)
Desk review	Desk review of the ISER by the team	At least 1 week before the Initial Meeting	ISER initial response provided
RT Briefing (via MS Teams) – 2 sessions (half days)	Session 1: An initial meeting of the review team, including introductions, reviewer training and briefing. Session 2: RT discussion of preliminary impressions and identification of any additional documentation required.	c. 5 weeks after the ISER, c. 7 weeks before the MRV	RT training and briefing is complete. RT identify key themes and any additional documents required.

Planning visit (via MS Teams)	A visit to the institution by the chair and coordinating reviewer to receive information about the ISER process, discuss the schedule for the main review visit and discuss additional documentation requests.	c. 5 weeks after the ISER, c. 7 weeks before the MRV	An agreed note of the planning visit.
Main Review Visit	To receive and consider evidence on the ways in which the institution has performed in respect of the objectives and criteria set out in the Terms of Reference	12 weeks after the receipt of ISER	A short preliminary oral report to the institution
Report – drafting stages	Preparation of a draft report by the team Draft report sent to the institution for a check of factual accuracy Institution responds with any factual accuracy corrections Preparation of a final report	6-8 weeks after the MRV 12 weeks after the MRV 2 weeks after receipt of draft report 2 weeks after factual accuracy response	QQI review report
Report – institutional response	Preparation of an institutional response	2 weeks after final report	Institutional response
Outcomes	QQI considers findings of review report and the institutional response through governance processes. Review report is published with institutional response.	Next available meeting of QQI Awards and Reviews Committee (ARC)	Formal decision about the effectiveness of QA procedures In some cases, directions to the institution and a schedule for their implementation
	Preparation of QQI quality profile	2 weeks after decision	Quality profile published

The form of the follow-up will be determined by whether 'directions' are issued to the institution. In general, where directions are issued the follow-up period will be sooner and more specific actions may be required as part of the direction.			
Follow-Up	Preparation of an institutional implementation plan by provider	3 months after publication of report	Publication of the implementation plan by the institution
	One-year follow-up report to QQI for noting. This and subsequent follow-up may be integrated into annual reports to QQI	1 year after the MRV	Publication of the follow-up report by QQI and the institution
	Continuous reporting and dialogue on follow-up through the annual institutional reporting and dialogue process	Continuous	Annual quality report Dialogue meeting notes

Appendix B: Main Review Visit Schedule

DAY 1: TUESDAY, 10 MARCH 2026

Time (GMT)	Group	Role	Purpose
08:30 - 08:45	Review Team Convenes. Tea/coffee on arrival		
08:45 - 09:00	Institutional Coordinator	Dean of Academic Affairs QA Lead	Welcome and introductions. Preparatory meeting for Day 1
09:00 - 09:30	Private Review Team Meeting		
09:30 - 9:45	President	College President Dean of Academic Affairs	*Meeting to discuss institutional mission, strategic plan, including roles and responsibilities for QA and enhancement and reporting to the College Board.*
9:45-10:15	Executive Leadership Team	College President Dean of Academic Affairs Dean for Finance and Administration Dean of Teaching and Learning Dean of Faculty	*Discuss institutional mission, strategic plan, including roles and responsibilities for QA and enhancement.*
10:15-10:45	Private Review Team Meeting		
10:45 - 11:25	College Board	External Chair of College Board College President [Company Secretary] Dean for Finance and Administration Admin & Operations Lead External Board Member x 2	*Discuss institutional mission, strategic plan, including roles and responsibilities for QA and enhancement.*

11:25 - 12:05	Academic Council	External Chair of Academic Council Dean of Academic Affairs Dean of Teaching & Learning QA Lead College Librarian Head of Student Services (Chair SSPCC Sub-Committee of AC) Faculty Member [IT Faculty] Faculty Member [Business Faculty]	*Discuss mechanisms employed by the Academic Council for monitoring QA & QE and how it ensures effectiveness.*
12:05 - 12:15	Private Review Team Meeting – break		
12:15 - 12:55	Board Committees Audit, Risk & Strategy Committee ELT Management Team	External Chair of College Board College President Dean for Finance and Administration External Chair of Academic Council Admin & Operations Lead Dean of Academic Affairs Dean of Faculty Head of Student Services	*Discuss strategic management and QA structures, including arrangements for QA across the institution and within schools/departments.*
12:55-13:55	Review Team Lunch		

14:00 - 14:50	Student & Graduate Representatives (Undergraduate) • Current Student: BSc Computing - Year 4 (FT) Class Representative • Current Student: BSc Computing - Year 1 Full Time Programme • Current Student: Bachelor of Business Honours (1 Year only) Full Time Programme • Current Student: Bachelor of Business Honours (1 Year Only) Full Time Programme • Current Student: BA (Hons) in Business (Y3) Full Time Programme • Current Student: BSc Computing - Year 3 Full Time Programme Class Representative • Graduate: BSc (Hons) Computing & IT (2020 Intake) Full Time Programme • Graduate: L7 Diploma in Data Analytics for Business - Sept 2024 (SB+) Part Time Programme Class Representative • Graduate: L7 Diploma in Data Analytics for Business • Current Student: H.Dip in Science in Data Analytics Part Time Programme RPL Case Study as Per ISER	*Discussion with students from across the institution, to include representation from different years, disciplines and service users.*
14:50 - 15:10	Private Review Team Meeting - break	

15:10 - 16:00	Student & Graduate Representatives (Postgraduate) • Current Student Higher Diploma in Science in Data Analytics for Business Part Time Programme Class Representative • Current Student: Higher Diploma in Cybersecurity Full Time Programme Class Representative • Current Student: MA International Business Full Time Programme • Current Student: MSc in Data Analytics Full Time Programme • Graduate: Higher Diploma in Science in Computing [2020 Graduate] Part Time Programme • Current Student: Postgraduate Diploma in Science in Cybersecurity Part Time Programme • Current Student: Higher Diploma in Science in Computing Full Time Programme • Current Student: Higher Diploma in Science in Data Analytics for Business Full Time Programme • Graduate: MSc in Data Analytics (2024 Intake) Part Time Programme • Graduate: MSc in Data Analytics (2023 Intake) Part Time Programme	*Discussion with students from across the institution, to include representation from different years, disciplines and service users.*
16:00 - 16:10	Private Review Team Meeting - break	

16:10 - 16:50	Members of the ISER development group	Dean of Faculty Dean of Academic Affairs Dean of Teaching & Learning Head of Student Services Head of Marketing QA Lead Senior Faculty Coordinator Equality, Diversity, Inclusions and Careers Officer	*Discussion on experience of implementing quality assurance throughout the institution.*
16:50 - 17:30	Private Review Team Meeting		

DAY 2, WEDNESDAY 11 MARCH 2026

Time (GMT)	Group	Role	Purpose
08:30 – 09:00	PRG Convenes. Tea/coffee on arrival		
9:00 - 9:40	9. Subcommittees of Academic Council (i) Quality Enhancement Committee [QEC] Academic Integrity Committee [AIC] Student Services & Pastoral Care Committee [SSPCC]	QA Lead [Chair of QEC and AIC) Dean of Teaching & Learning [QEC & AIC] Head of Student Services [QEC, SSPCC & AIC] Admin & Operations Lead Equality, Diversity, Inclusions and Careers Officer Senior Faculty Coordinator [QEC & SSPCC] Faculty Coordinator [QEC & SSPCC] Faculty Member [AIC]	*Discuss role of the relevant sub-committee in the governance of QA procedures.*

09:45 - 10:25	Subcommittees of Academic Council (ii) Research Committee CTL Working Group Programme Board	Dean of Faculty Dean of Academic Affairs Dean of Teaching and Learning Faculty Member x 3 College Librarian	*Discuss role of the relevant sub-committee in the governance of QA procedures.*
10:25 - 11:00	Private Review Team Meeting		
11:00 - 11:40	11. Programme Leaders	Programme Leads: • Level 7 Diplomas • BA (Hons) in Business • BB (Hons) in Business • MA in International Business • MSc in Cybersecurity • H.Dip DAB and H.Dip AI • MSc in Data Analytics • BSc (Hons) Computer Science	*Discuss how the institution monitors the effectiveness of its QA/QE processes and structures and how it ensures the outcomes are enacted in an appropriate, consistent and timely manner.*
11:45 - 12:25	12. Faculty Staff		*To discuss involvement in QA and enhancement.*
12:30 - 13:10	13. Managers and staff responsible for the full range of student support services (non-academic).	Head of Student Services EDI and Careers Office Admin & Operations Lead Senior Faculty Coordinator Faculty Coordinator x 2 Head of Admissions Front of House	*To discuss involvement in QA and enhancement.* *Could include:*
13:10 - 14:10	Review Team Lunch		

14:15 - 14:55	14. External stakeholders, third party partnerships and collaborations (i.e. academic national/ transnational), industry, community, third mission	Microsoft Ireland, Head of Future Skilling Programme Manager, STEM Passport for Inclusion, Maynooth University AON, Global Head of Product Architercture & Engineering Director, Irish Computer Society Education Consultant	*To discuss involvement in QA and enhancement.*
15:00 - 15:40	15. Managers and staff involved in HR, staff development, careers, IT, library services, finance and estates management and capital investment	HR, Staff Development, Finance & Estates, Capital HR, Staff Development Staff Development Finance & Estates Library Services Careers IT Support Dean for Finance and Admin	*To discuss relevant procedures that support QA & QE among all staff.*
15:40 - 16:00	Private Review Team Meeting		
16:00 - 16:40	16. Management Team	Education Technology Manager Head of Admissions Head of Student Services Head of Marketing Admin & Operations Lead QA Lead College Librarian	*Discuss how the management team input into and monitor the effectiveness of its QA/QE processes and structures and how it ensures the outcomes are enacted in an appropriate, consistent and timely manner.*

16:45 - 17:20	17. Internationalisation: management and staff	Head of Admissions International & Study Abroad Coordinator Head of Marketing EDI/Careers Office Dean of Academic Affairs Head of Student Services Admissions Officer Library Officer Admissions Officer	*To discuss involvement in QA and enhancement in International Education.*
17:20 - 18:15	Private Review Team Meeting		

DAY 3, THURSDAY 12 MARCH 2026

Time (GMT)	Group	Role	Purpose
09:00 - 11:00	Private Review Team Meeting		
10:30 - 11:00	QQI meeting with Institutional Coordinator	Dean of Academic Affairs QA Lead	*To gather feedback*
11:00 - 11:30	QQI meeting with Review Team		*To discuss review team's key findings*
11:30 - 12:00	Private Review Team Meeting		
12:00 - 12:30	Meeting with VC, CEO/Registrar	College President Dean of Academic Affairs	
12:35 - 13:05	Oral Report	College President CCT Representatives	*High-level emerging findings shared*

Glossary

Acronym/Term	Definition/meaning
AC	Academic Council
AIC	Academic Integrity Committee
AQR	Annual Quality Report
AsIAm Accreditation	Institutional recognition as an autismfriendly higher education provider
ATP	Access, Transfer and Progression
CCT	CCT College Dublin
CINNTE	Name/branding for QQI's first external QA review cycle for HEIs
DEIS	Delivering Equality of Opportunity in Schools to overcome educational disadvantage in primary schools
EBSCO	Research databases, e-journals, magazine subscriptions, ebooks and discovery service for academic libraries
ECTS	European Credit Transfer and Accumulation System
EDI	Equality, Diversity and Inclusion
ELT	Executive Leadership Team
EQF	European Qualifications Framework
ESG (2015)	Standards and Guidelines for Quality Assurance in the European Higher Education Area
GenAI	Generative AI capable of generating text, images, videos, or other data using generative models, in response to prompts
Google Drive	Cloud storage
HEA	Higher Education Authority
HECA	Higher Education Colleges Association
HEI	Higher Education Institution
ICT	Information and Communication Technology
IEF	Industrial Engagement Forum
Inter alia	Among other things

IP	Institutional Profile
ISER	Institutional Self-Evaluation Report
KPI	Key Performance Indicator
Microsoft Teams	Team collaboration platform
MIPLOs	Minimum Intended Programme Learning Outcomes
Moodle	Learning Platform or Learning Management System
MRV	Main Review Visit
NAIN	National Academic Integrity Network
NFQ	National Framework of Qualifications
PEL	Protection for Enrolled Learners
PLOs	Programme Learning Outcomes
PSRBs	Professional, Statutory and Regulatory and Bodies
QAM	Quality Assurance Manual
QAP	Quality Assurance Policies and Procedures
QEC	Quality Enhancement Committee
QQI	Quality and Qualifications Ireland
RT	Review Team
SoTL	Scholarship of Teaching and Learning
SSPCC	The Student Services and Pastoral Care Committee
STEM	Science, Technology, Engineering, and Mathematics
TrustEd Ireland	A statutory quality mark administered by QQI that concerns the protection of international learners
WIL	Work-Integrated Learning

Dearbhú Cáilíochta
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Quality and
Qualifications Ireland

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