



Professional
Learning &
Development

Quality Management System Manual

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Glossary of Terms

- **Access:** Refers to a learner's ability to avail of appropriate opportunities to enter and succeed in courses leading to awards, with recognition of learning already achieved
- **Blended Learning:** refers to a type of course where teaching, learning and assessment occur using a mix of on-site and online learning, with the online components taking place synchronously, asynchronously, or in combination
- **Completion rate:** The number of learners who achieve an NFQ/IOSH PHECC/IHF award on a course of education and training expressed as a percentage of the number of learners who commenced the course concerned.
- **Credit:** A measure by which diverse learning achievements can be recognised; credit systems complement the Framework and the achievement of awards. Opportunities for credit accumulation enhance recognition of learning.
- **eLearning:** Short for electronic learning. This is where the learner has access to material from their course though the internet with the support of digital tools. This generally occurs outside of the traditional face-to-face centre
- **Evidence:** Material generated by the application of a procedure which demonstrates its effectiveness
- **Faculty:** refers to members of the PHECC faculty as described in the PHECC Teaching faculty framework, 2015.
- **First Provider:** A person or body which organises or procures all or part of a Course, part or all of which is provided by another provider.
- **Further Education:** Education and training other than primary or post primary or higher and Training: education and training.
- **Fully Online:** Learning refers to a type of course where all teaching occurs entirely online, either synchronously or asynchronously, or in combination. Importantly, learners can complete their course of study from a distance with no in-person or on-site requirements.
- **Irish Heart Foundation (IHF),** The Irish Heart Foundation has been affiliated to the American Heart Association (AHA) Emergency Cardiovascular Care (ECC) Training Programme, the Foundation received also recognition as a Training Institution from the Pre-Hospital Emergency Care Council (PHECC) to provide Cardiac First Response (CFR) Courses.
- **Learner:** A person who is acquiring or who has acquired knowledge, skill or competence
- **Major award:** This award type is the principal class of awards made at each level of the National Framework of Qualifications. At most levels, such award types capture a typical range of achievements at the level.
- **Minor Award:** This award type provides recognition for learners who achieve a range of learning outcomes, but not the specific combination of learning outcomes required for a major award. This recognition will have relevance.
- **Monitor:** A person who verifies that quality assurance procedures are being implemented as agreed. The monitor may be working on behalf of the provider (local monitoring) or QQI (national monitoring).

- **National Framework:** The single nationally and internationally accepted entity through which all learning Of Qualifications: Achievements may be measured and related to each other in a coherent way, and which defines the relationship between all education and training awards. The Framework has 10 levels, reflecting all learning from introductory to doctorate levels.
- **National Monitoring:** The process which QQI will operate to ensure that providers' quality assurance systems are effective in maintaining and improving the quality of validated Courses.
- **Peer review:** The involvement in self-evaluation of a Course of a person from another provider, in further or higher education and training, capable of giving an informed view on the success of the Course and able to contribute to its improvement.
- **Course:** A learning experience designed and offered by a provider, within the state, based on predetermined national standards and leading to a QQI award
- **Course Review:** The process whereby the provider reflects on its Course(s) to ensure its continued relevance. A review will be conducted more frequently but less formally and on a smaller in scale than a Course self-evaluation. The findings of reviews will contribute to a self-evaluation.
- **Progression:** Refers to a learner's ability to move to another course leading to an award at a higher level of the Framework/PHECC approved courses, having received recognition for knowledge, skill or competence acquired
- **Protection for Arrangements** put in place by providers, offering Courses of Learners three months duration or more and on a commercial basis, to protect the interests of learners in the situation where a course ceases.
- **Provider:** A person who provides, organises, or procures a Course of education and training
- **Quality Assurance:** The system(s) put in place by a provider to maintain and improve the quality of its course(s)
- **QQI Award:** That which is conferred, granted or given by an awarding body and which records that a learner has acquired a standard of knowledge, skill or competence.
- **QQI Award Type:** Refers to a class of named awards sharing common features and level. These include Major, Minor, Supplemental and Special Purpose award types. Different award types reflect different purposes of award and allow for the recognition of all learning achievement.
- **RPL Recognition of Prior Learning** i.e., recognition of learning that has taken place but not necessarily been assessed or measured prior to entering a Course. Such prior learning may have been acquired through formal, non-formal or informal routes.
- **Second Provider:** A person or body which provides all or part of a course part or all of which is organised or procured by another provider.
- **Self-Evaluation:** The process whereby a provider, with the involvement of learners and an external evaluator, evaluates the quality of its course(s) and services. The findings of self-evaluation will be published in a standard format.

- **Special purpose:** This award type is made for specific, relatively narrow; purposes award often for certification of competence in specific occupational areas.
- **Supplemental Award:** This award type is for learning which is additional to a previous award. They could, for example, relate to updating and refreshing knowledge or skills, or to continuing professional development.
- **Transfer:** Refers to a learner's ability to move from one course leading to an award to another, including at the same level of the Framework, having received recognition for knowledge, skill or competence acquired
- **Validation:** The process through which QQI evaluates a course of education and training, to ensure that the proposed course provides the learner with the opportunity to reach the standards of the award to which the course is intended to lead.

Section 1 - Introduction and Company Context

1.0 Introduction

ISO 9001:2015 - 1.0 Scope

The CPL Institute has developed and implemented a quality management system (QMS), which uses ISO 9001:2015 as a framework that allows our organization to document and improve our practices to better satisfy the needs and expectations of our customers, stakeholders and interested parties. The CPL Institute is fully accredited to ISO 9001. This manual describes the quality management system, delineates authorities, inter relationships and responsibilities of personnel operating within the management system. The manual also provides references to procedures and activities that also comprise our quality management system.

The manual framework also seeks evidence to compliance with the following accreditation body requirements:

- Qualifications and Quality assurance (Educations and Training) Act 2012 Revised Updated to 18 November 2014.
- QQI Core Statutory Quality Assurance Guideline April 2016/V2
- QQI Quality Guidelines for Blended and fully Online courses 2024
- QQI Quality Assuring Assessment 2024
- PHECC Quality Review Framework, STN020 2024
- PHECC Online learning as an approach to delivering PHECC Courses, Aug 2020.
- ISO 9011- 2015, Quality Management Systems
- IHF requirements including Reference Guide for Training Site Coordinators and The American Heart Association Programme Administration Manual (PAM).

The following table identifies any ISO 9001:2015 requirements, from Section 8.0, that are not applicable to our organization as well as providing a brief narrative to justify their omission from the scope of our QMS:

Exclusion 8.3	7.1.5.2 Measurement traceability
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The manual is used to familiarise customers and other external organizations or individuals with the controls that have been implemented and to assure them that the integrity of our quality management system is maintained and is focused on customer satisfaction and continual improvement. Our quality management system meets the requirements of ISO 9001:2015 and uses the Plan, Do, Check and Act approach to process planning.

1.1 Organisational Context - Company Profile and Purpose

ISO 9001:2015 - 4.1 Understanding the organisation and its context.

The CPL Institute is engaged in the provision of training and consultancy services in the areas of Professional Development, eLearning, Fleet Safety Services, Healthcare, Health and Safety, DSE. Professional and Soft Skills.

Our Courses are designed to ensure that learners have the option to achieve QQI, PHECC, IOSH and Irish Heart Foundation accreditation or complete internal organizational certification for upskilling and continuous professional development.

Our materials are designed in line with all awarding body validation requirements and ensure the effective delivery of all courses to the certification level required.

Through our consultancy-based offering, we provide a tailored approach to training activities offering bespoke training events and a comprehensive suite of professional development courses. These courses are certified by the CPL institute and quality assured under the requirements of this quality management system manual.

1.2 Relevant and Interested Parties

ISO 9001:2015 - 4.2 Understanding the needs and expectations of interested parties.

The CPL Institute recognises that we have a unique set of interested parties whose needs and expectations change and develop over time. Such needs and expectations broadly include those shown in the table below. See Appendix 1, for table of interested parties.

To ensure that our training and consultancy products and processes continue to meet all relevant requirements, we assess the potential impact of any relevant needs and expectations that may be elicited from the interested parties. Client requirements are gathered at the sales stage.

The CPL Institute reviews and monitors information about these interested parties and their relevant requirements by ensuring we have up to date key contacts information registered with the accreditation bodies and industry bodies to receive all relevant information. Our instructors are encouraged to inform us of any relevant changes in their area of specialism and often request changes to the course material based on their subject matter expertise. In addition, we monitor the compliance of teaching by conducting course monitoring our course delivery.

Where appropriate, to ensure that our processes are aligned to deliver the requirements of our interested parties; we ensure that needs of our stakeholders are integrated as inputs to our QMS and to our training product and service processes.

1.3 Other Parties and Collaborative Provision Relationship

ISO 9001:2015 - 4.2 Understanding the needs and expectations of interested parties.

We are committed to ensuring that any accreditations, collaborations arrangements and partnerships we engage with are organised with reputable bodies and are subject to appropriate internal and external quality assurance procedures. We understand it is our responsibility to ensure the quality of all Courses and services we deliver.

Currently The CPL Institute engages in collaborative provision relationships with external Instructors for the delivery of training services. This is governed by a contract and a service level agreement.

Other parties and/or stakeholders involved in education and training are recognised as potential stakeholders within the broader education and training community.

The following is a non-exhaustive list of stakeholders and potential stakeholders currently.

- Potential course applicants and former learners
- Employers and clients
- Non-contract instructors/consultants engaged directly.
- Accreditation/Regulatory Bodies - QQI, PHECC, IHF/IOSH and more.

- Funding and Referral Agencies including government tendering process, including Skillnets and Education and Training Boards (ETB's)
- Sectoral and affinity Bodies
- External experts

1.4 The CPL Institute Mission Statement and Values

ISO 9001:2015 - 5.1 Leadership and commitment

The CPL Institute provides training and consultancy services in the areas of Health and Safety, Professional Development, eLearning, Fleet Safety Services and Healthcare. Our aim is to increase our learner's knowledge and workplace productivity through relevant education and training and set the standard in the delivery of accredited Courses nationwide.

The CPL Institute acknowledges that it is ultimately responsible for the academic standards of awards made in its name and for its learners' quality of learning experiences.

The CPL Institute's Core Values are:

- **Respect:** This encompasses integrity, fairness, listening, co-operation, responsiveness and perceptiveness.
- **Accountability:** It is not just about your part of the job or task; it is about seeing the whole job through to the end – it is not done until it is all done.
- **Customer Focus:** Excellence in everything we do for our clients and internal customers, including a commitment to innovation.
- **Effective Communication:** Clarity in communication, openness and willingness to listen ensures a clear understanding of any request.
- **Empowerment:** An entrepreneurial spirit and passion for the work we do which in turn supports and enables people to maximise their own individual potential.

1.5 Typical Learner Profile

ISO 9001:2015 - 4.1 Understanding the organisation and its context.

Our learners are primarily employed persons working in roles from craft worker to labourer; from manufacturing worker to maintenance worker; from designers to constructors; from health and safety workers to recruitment personnel and many other disciplines. Our learners are employed in a variety of industrial sectors including healthcare, construction, pharmaceutical, chemical, insurance, utilities, office-based, site-based and many more.

Learners can come to us to enhance their own CVs or are assigned to courses by employers based on a training needs analysis carried out within a client organisation.

In relation to Blended and Fully online learning learners must be competent in the use of technology and remote learning.

Section 2 - Quality - Management System Description

2.0 Management System Scope

ISO 9001:2015- 4.3 Determining the scope of the quality management system.

The CPL Institute is a learner centred organisation which recognises the importance of quality and continuous quality improvement through all our areas of practice. The quality management system complies with all applicable requirements contained in ISO 9001:2015, covers the design and provision of all training courses/or services, delivered either in-person classroom, through blended learning including eLearning and fully online synchronous, customer and regulatory process and encompasses all operations at our facility located at Swords Co. Dublin. The QMS principles are to be applied to first client interactions through booking/contract/tender process, training content development, covering in person, blended and fully online learning, training event planning/training delivery, approval and verifications practices and certification.

Our delivery of high-quality learning is achieved through participation from all stakeholders in quality monitoring and improvement process.

We have developed policies and procedures for each area identified by awarding bodies, such as:

- Quality and Qualifications Ireland (QQI)
- Pre-Hospital Emergency Care Council (PHECC)
- City and Guilds (CandG)
- Institution of Occupational Safety and Health (IOSH)
- Irish Heart Foundation

By defining four key process-groups and by managing their inputs, activities, controls, outputs and interfaces; we ensure that system effectiveness is established and maintained. These key process groups include.

1. Leadership and planning processes.
2. Customer and stakeholder processes.
3. Product/service development processes.
4. Evaluation and improvement processes.

Inputs:

1. **Curriculum:** Well-defined educational standards and learning objectives.
2. **Resources:** Access to qualified Instructors, educational materials, technology including that required to deliver training in blended and fully online mode, and facilities.
3. **Training:** Professional development for educators to enhance teaching practices.
4. **Funding:** Adequate financial support for programs, materials, and infrastructure.
5. **Stakeholder Engagement:** Involvement from learners, Instructors, and policymakers such as the HSA and accreditation bodies e.g. QQI, PHECC, IHF

6. **Assessment Tools:** Methods for evaluating student progress and program effectiveness.

Outputs:

1. **Student Learning:** Improved academic performance and skill acquisition.
2. **Completion Rates:** Increased rates of student completion and progression.
3. **Engagement:** Higher levels of student engagement in the educational process.
4. **Instructor Performance:** Enhanced teaching effectiveness and job satisfaction.
5. **Equity:** Reduction in achievement gaps among diverse student populations.
6. **Feedback Mechanisms:** Continuous improvement through assessments and stakeholder input.

These process groups are described using tools such as documented procedures, process maps, flow diagrams, matrices, schedules, and charts, etc.

The effectiveness of each process and its subsequent output is measured and evaluated through regular internal audits, quality focused reviews of process and data analysis. We use key performance indicators (KPIs) that are linked to our objectives to control and monitor our processes, as well as assessments to determine the risks and opportunities inherent to each process.

We use trends and indicators relating to nonconformities, objectives and corrective action, as well as, monitoring and measurement results, audit results and customer satisfaction data, process performance and the conformity of our products and service.

Overall, the focus is on creating an environment that fosters effective teaching and learning, ultimately leading to better educational outcomes.

2.1 Quality Management Systems Purposes

ISO 9001:2015 - 4.4 Quality management system and its processes

Our quality management system has the following goals:

- Alignment to all our awarding accreditation bodies and all educational standards as laid down by validation requirements.
- Development of a quality assurance culture that is evident in all parts of the company for the benefit of the learners, staff and all other stakeholders .
- Ensuring The CPL Institute’s course design and development, quality assurance and evaluation support a holistic and quality experience for each learner.
- To make sure that appropriate and transparent governance and management structures are in place to guarantee continuous progress in imposing and assisting first-class quality assurance and development measures.
- To put into effect and maintain procedures referring to the approval, tracking and evaluation of all our educational courses.
- To take into consideration recommendations of unbiased, independent external peers and organisations, in particular external examiners, professional, statutory and

regulatory bodies and external assessors in internal and external reviews of academic, administrative and support units, and in subject matter-primarily based high-quality reviews.

- To accumulate quantitative and qualitative information and to conduct surveys to gain evaluation from our key stakeholder groups including learners, employers and other stakeholders, for quality improvement and policymaking.
- To maintain courses in good standing in relation to legislative obligations and to make the organisation a center of excellence for learners.

2.2 Quality Culture

ISO 9001:2015 - 5.2.2 Communicating the quality policy

The CPL Institute is committed to the continuous improvement of all its courses and all services. We recognise our responsibilities to provide a quality service to meet the needs of all our stakeholders. The following is implemented as key enablers for embedding a culture of quality in our operation and the delivery of training and consultancy service:

- A clear and transparent commitment to quality at all levels.
- The allocation of adequate time and resources to quality planning and implementation.
- Maintaining staff engagement to communicate the importance of quality throughout the organisation and provide guidance and supports where required
- An appropriate infrastructure in place to support staff in identifying and implementing quality improvements
- Comply with all legal and statutory requirements and awarding body guidelines.
- Establish and follow a comprehensive Quality Assurance System
- Monitor and review Quality to ensure its relevance and effectiveness
- Identifying areas for improvement and enact change
- Provide training to ensure we can operate our quality policies and procedures for best practice.
- Recruit and develop staff so as they have the skills required to provide the highest quality service.

2.3 Leadership and Management Commitment

ISO 9001:2015 - 5.1.1 Leadership and Commitment for The Quality Management System

The senior management are responsible for leadership for implementing our QMS, including the development and deployment of our quality policies, subsequent objectives and targets, and product or training specific plans which are customer focused.

Senior management provides accountability and governance to all activities related to the lifecycle processes including defining the strategic direction, responsibility, authority, and communication to assure the safe and effective performance. Senior management ensures that all necessary resources, responsibilities and accountabilities are allocated for the continual improvement of the QMS. Refer to Figure 3 for a copy of our Organization Chart.

Group senior management have appointed and delegated the responsibility and authority for managing our quality processes to the Quality and Compliance Manager to implement, monitor and maintain the QMS as required. Our organization's governance structure provides necessary support for creating and establishing processes that are important for achieving our quality objectives, targets and policies by using the Plan, Do, Check, Act (PDCA) approach.

Governance activities include the systematic verification of QMS effectiveness by undertaking internal audits and analysing performance data, reviewing trends and KPIs. Regular reviews and data reporting ensure that our QMS is effective and can react to emerging issues.

Senior management is committed to implementing and developing the QMS and this commitment is defined by our Quality Policies and objectives.

2.3 Documented Approach to Quality

ISO 9001:2015 - 5.1.1 Leadership and Commitment for The Quality Management System

Our delivery of high-quality learning courses is achieved through the development of policies and procedures and is detailed in this Quality System Management Manual. These procedures are informed by the requirements of the awarding bodies:

- ISO Quality Management system, 9001-20155
- Quality and Qualifications Ireland (QQI)
- Pre-Hospital emergency Council (PHECC)
- City and Guilds (CandG)
- Institution of Occupational Safety and Health (IOSH)
- Irish Heart Foundation

The Senior management of the organisation have defined, documented and approved a quality management system that:

- Is appropriate and fit for purpose for our organisation and learners.
- Demonstrates accountably as given and includes a commitment to the continual quality improvement and maintaining high standards.
- Provides a detailed description of all processes and procedures associated with educational activities and has formal standing in the organisation.
- Are reviewed to ensure they remain effective and fit for purpose. Quality manual and SOPs at a minimum annually and as required.
- Is adequately monitored for compliance and continuous improvement.
- Promote a culture of quality, facilitate diversity and support and are publicly published on our website.
- Include outsources activities, such as contracting of Instructors.
- Ensure our process take into considerations all interested parties include a role for learners in course evaluation and other stakeholders.

2.4 Quality Policy

ISO 9001:2015 - 5.2.1 Establishing the quality policy.

The CPL Institute hereinafter termed the company is engaged in the provision of training and consultancy services in the areas of Professional Development, Health and Safety, eLearning, Fleet Safety Services and Healthcare.

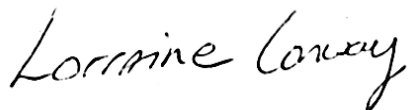
Our quality policy is built on the following commitments:

- **Customer Focus:** We prioritize understanding and fulfilling our clients' training needs, ensuring satisfaction through effective communication and continuous engagement.
- **Continuous Improvement:** We are dedicated to continually enhancing our training programs, processes, and systems. We encourage feedback from clients and employees to identify areas for improvement.
- **Employee Development:** We recognize that our success relies on the skills and motivation of our employees. We invest in their professional development and provide a supportive work environment.
- **Compliance and Standards:** We adhere to all relevant legal, regulatory and accreditation body requirements and strive to exceed industry standards to ensure the highest quality of our training services.
- **Process Approach:** We implement a systematic approach to managing our processes, ensuring that our training programs are effective, efficient, and aligned with our quality objectives.
- **Data-Driven Decision Making:** We utilise data and analysis to guide our decision-making, monitor performance, and drive improvement across our training services.

To achieve these Quality Principles, the Company has established a Quality Assurance Course which is intended to satisfy the requirements of ISO 9001:2015, QCI Quality Assurance standards and others, where applicable.

Specific and measurable quality objectives are established and reviewed during the management review process.

It is the Quality Policy of the Company to ensure that all requirements for quality are recognised by all personnel and that effective, consistent control of these requirements is achieved to enable client satisfaction.



Lorraine Conway
Training Quality and Compliance Manager
09-10-2024



Derek Donohoe
Associate Director
09-10-2024

2.5 Quality Principles PDCA

ISO 9001:2015 - 6.3 Planning of changes.

Plan-Do-Check-Act (PDCA) is a four-step model that is used throughout quality management systems for implementing changes and continuous improvement **activities**.

It can be applied to people, products, services, processes and procedures. The principle of the PDCA cycle could be implemented in all our business aspects. We use it both formally and informally. Its objective is to introduce processes to continual improvement.

- **Plan** – The planning is combined of questions: What is required to be done? How much is required to be done? Where is it required to be done? Who should do it? When is it required to be done?
- **Do** – After planning you must realize your plan – put words into actions
- **Check** – Monitor and measure the processes and the products according to the plan, policies, objectives and requirements
- **Act** – take measures and activities to improve the performance.

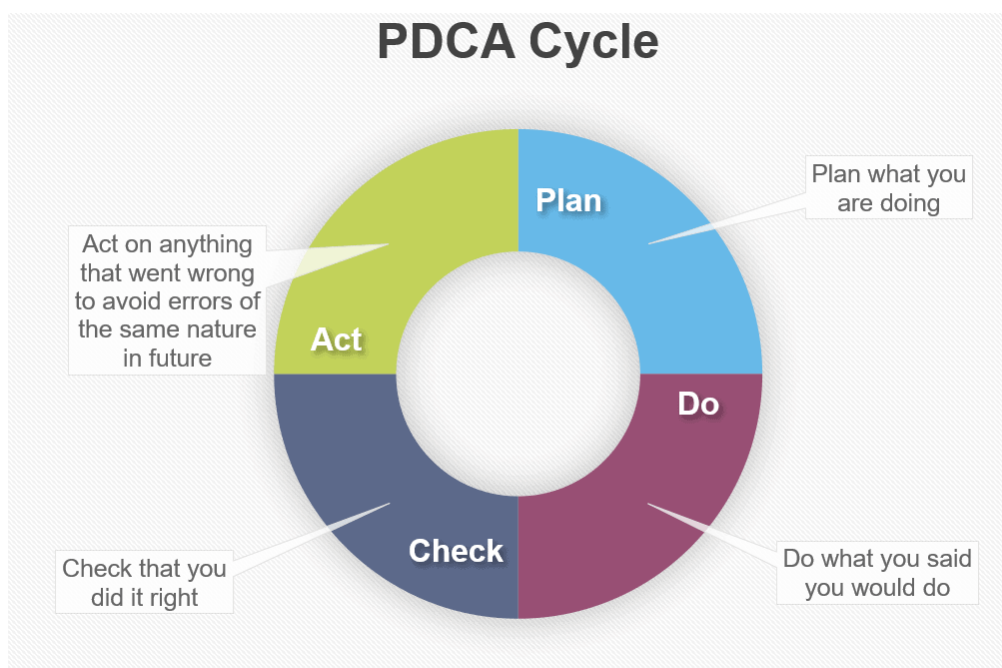


Figure 1, PDCA

As each step within the cycle supports the one following it, the cycle perfectly facilitates continual improvement in whatever it is applied to. When applied to a problem, the PDCA cycle aims to help you get to a solution through constant repetition of the cycle until that solution is achieved. When applied to a process or something without a definite solution such as the improvement of a business, the cycle would repeat indefinitely, incrementally improving that system every time.



Figure 2. Continuous PDCA cycle

2.1 Outsourced Processes

ISO 9001:2015 - 4.4 Quality management system and its processes

The CPL Institute outsource the teaching delivery and training materials reviews of all our training Courses. To control how this may affect conformity with the stated requirements; The CPL Institute identifies criteria such as the competence of personnel, inspection regimes, the provision of training qualifications and competencies, adherence to service level agreements/contract term, training event evaluations and associated KPI etc.

The controls identified do not absolve us of the responsibility to conform to client, statutory and regulatory requirements but instead they enhance our capacity to effectively manage outsourcing and consultancy services.

The controls adopted are influenced by the potential impact of outsourcing on meeting customer or stakeholder requirements and the degree to which control of the process is shared.

Outsourced processes and resources such as technology and support are controlled via purchasing and contractual service level agreements. They may also be assessed by second party audits and performance data reviews where appropriate.

Section 3 - Governance

3.0 Introduction

ISO 9001:2015- 4.3 Determining the scope of the quality management system.

Governance and Quality assurance within The CPL Institute is essential to the successful design, delivery and evaluation of all our courses and measured consistently through our quality assurance system.

The CPL Institute ensures that we comply with all relevant regulations, accreditation body requirements and Statutory Instruments e.g., GDPR, HIQA, Safety Health and Welfare, Employment, Safeguarding and Equality and Diversity legislation.

3.1 Management Accountability

ISO 9001:2015 - 5.1.1 Leadership and Commitment for The Quality Management System

The CPL Institute's governance structure has been established to ensure that it is governed and managed effectively, with clear and appropriate lines of accountability for each area of responsibility.

Governance in the CPL Institute comprises two separate but mutually dependent elements, corporate and academic governance. Overall responsibility for each element is as follows:

- Corporate Governance – The Servisource CEO, supported by the SMT Team (SMT) has overall responsibility for corporate governance.
- Academic Governance – The Academic Council has delegated responsibility from the Servisource CEO for all academic matters. The academic council is supported by several sub-committees to ensure a separation of powers in day-to-day operations.

Through the application of its governance structure, The CPL Institute ensures that quality assurance and standards of academic oversight are in place and that decisions regarding course development, admission, assessment and progression of any individual learner are maintained separate from those regarding financial and other commercial considerations.

The CPL Institute reports directly to the CEO of Servisource. Servisource is company in the portfolio of group CPL, the parent company. The CPL Institute Associate Director holds direct responsibility for ensuring that The CPL Institute is stable and in good financial standing, with a reasonable business case for sustainable provision.

The Associate Director has a direct reporting line to the Servisource CEO.

Governance activities include the systematic verification of QMS effectiveness by undertaking internal audits and analysing performance data, reviewing trends and KPIs. Regular reviews and data reporting ensure that our QMS is effective and can react to emerging issues. Escalation of issues arising through QMS monitoring activities are reported directly to the Servisource CEO by the Associate Director at a weekly meeting.

The decision-making team are comprised of the management team that reports directly to the Associate Director. This team are responsible for the implementation of the quality management system.

The team is supported by group services functions that comprise of CPL Shared Services, Financial Management, Human Resources, Information Technology, Data Protection and Support. Policies for these functions is set at group level.

Figure 3. Organization Chart.

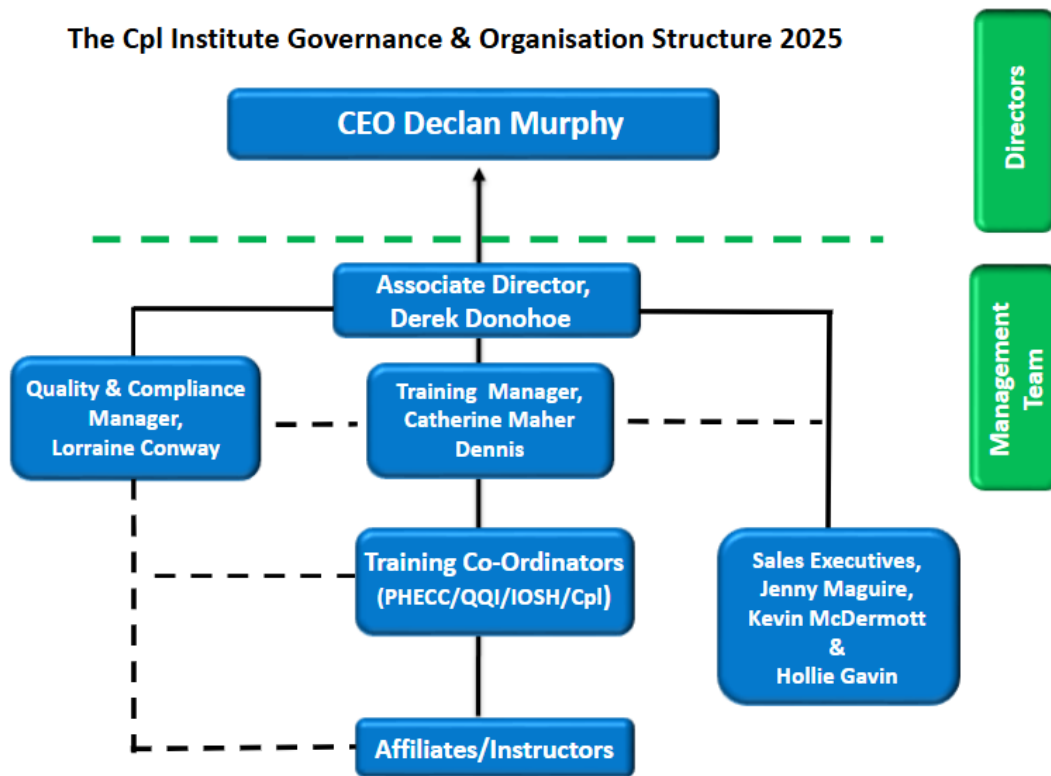


Figure 3. Organization Chart.

3.2 Human Resources, Roles and Responsibilities

ISO 9001:2015 Clause - 5.3 organizational roles, responsibilities and authorities

A summary description of the key roles and responsibilities are provided here. Please refer to Appendix 2 for additional details on role profiles.

3.2.1 Senior Management Team

The Senior Management Team (SMT) is comprised of the Associate Director, Training Manager, Quality and Compliance Manager and the Fleet Services Manager. This team brings together senior academic, compliance and commercial positions, to help ensure that The CPL Institute has a coordinated, clear and strategic direction.

The Senior Management Team is responsible for overseeing the day-to-day management and academic development of The CPL Institute, implementation of the Quality Management System and serves to complement the work of the Academic Council.

Key Responsibilities:

- Develop and implement The CPL Institute Quality Management System
- Oversee the operational management of The CPL Institute
- Consider and monitor human resources requirements
- Oversee marketing and brand awareness
- Manage resources to make sure that appropriate and effective facilities, technology and support, and services are available and scheduled to ensure the quality of delivery to learners
- Oversee access, facilitation and support for learners
- Monitor progress against strategic goals
- Manage The CPL Institute Risk Register
- Managing and deploying of resources and technology, including e learning content creation, Learning management and associated performance management and development of staff skills.
Manage technology and associated resources
- Managing and deploying staff, including recruitment, performance management and development of staff.
- Manage the suite of training courses provided in line with accreditation body requirements and industry standards.

3.2.2 Associate Director

Overall responsibility for commercial activities and legal compliance of The CPL Institute.

Key Responsibilities:

- Overall responsibility for education and training governance (including accredited QQI, PHECC, IHF and IOSH courses) and any delegated responsibilities.
- Overall responsibility for the quality management systems and associated processes.
- Responsible for the direction, guidance and management of the CPL Institute management team and revenue streams, including staff development, development and management of all existing and new training courses, development and management of technology, Fleet Safety Services and Quality Management system.
- Ensuring the organisation generates the volume and quality of commercially appropriate business deals to ensure the growth and profitability of the organisation.
- Management of business operations including IT, IT security and IT resources, profitability of the organisation, FTE head counts within the organisation.
- Ensure the resources (human and technology) in use within the organisation are appropriate to ensure effective business operations and requesting additional resources with appropriate business case where required
- Appropriate assessment, mitigation and reporting of risks to the organisation in the operations of the business.
- Responsible for the daily operation, effectiveness and continuous Improvement of the overall The CPL Institute.
- Responsible for all marketing, communications and sales activities.

3.2.3 Quality and Compliance Manager

Overall responsibility for the quality assurance systems including monitoring and performance. Act as the Data Protection Officer for The CPL Institute.

Key responsibilities include:

- Ensuring that processes for quality assurance and data management are established, implemented and maintained.
- Ensuring compliance with accreditation body requirements and compliance with appropriate regulatory and statutory requirements.
- Overseeing performance monitoring and measurement and continuous improvement process including academic body self-evaluations, internal and external audits.
- Engaging with external consultants/evaluators.
- Identification of need for improvements and implementation of new procedures.
- Accreditation body communication on all quality matters

3.2.4 Training Manager

The Training Manager has overall responsibility for The CPL Institute academic leadership, teaching and academic standards.

Key responsibilities:

- Overall responsibility for managing the course delivery, management of Instructors/consultants and supervision of the training administrators.
- The management of policy, planning, assessment, record management and development of existing and new training Courses developed by The CPL Institute. This applies to all modes of delivery i.e. in person, blended and fully online.
- Assist with management of academic and quality accreditation, registration and the certification processes, maintaining appropriate records.
- Overseeing the management of all training courses (in person, blended, fully online and eLearning) (in person, blended and fully online and compliance to the requirement of accreditation bodies, QQI, PHECC, IHF, IOSH and national requirements.
- Responsible for PHECC, IOSH, QQI and The CPL Institute Course delivery and administration
- Principle Instructional designer for blended and fully online learning.

3.2.5 Training Administrators

Training Administrators have specific responsibility for delivery of training operations and to ensure training planning and delivery is conducted in accordance with the requirements of the Quality management systems and those of the accreditations bodies. The training administrators maintain a strong support link between The CPL Institute, Instructors, Clients and its learners.

Key Responsibilities:

- Key contact for all operational issues and liaison with learners, Instructors, clients and associated stakeholders on a regular basis.
- Responsibilities for supporting PHECC, IOSH, QQI and The CPL Institute course delivery and administration are assigned to an individual administrator, however cross functional training is required for operational resilience.
- The administration of all course documents and records for learner entry, course planning, Course delivery, assessment and internal verification and certification.

- Contribute to course development specifically in relation to the teaching and learning strategy.
- Provide support to instructors and learner in all aspects of planning and course delivery including in person, blended and fully online courses.

3.2.6 Sales Teams

The primary focus of this role is the generation of sales for The CPL Institute with a focus specifically on building relationships with new clients and maintaining relationships with our existing clients nationwide. The sales team are responsible for the initial booking of instructors and training venues.

Key Responsibilities:

- Ensuring the resources are available to deliver the services required by our clients and appropriate communication with stakeholders to ensure this is the case.
- Appropriate reporting of sales operations including, outbound calls, emails, client drops, visits, conversions in line with the outbound Sales Action Plan devised and agreed with the Associate Director.
- Accurate and effective pipeline forecasting weekly and monthly to ensure performance to expectation.
- Effective management of the booking process for instructors and training delivery venues.
- Effective relationship management with the Training Coordinators to ensure all sales information required to deliver our services professionally are given on a “Right First Time” basis including billing information and PO’s.
- Effective internal and external relationship management.

3.2.7 Instructors

Represent The CPL Institute and Delivering Course content, coaching, tutoring and assessing Learners on all The CPL Institute Courses in accordance with stated learning outcomes for individual modules and the overall Course outcomes.

Key Responsibilities:

- Working to The CPL Institute published Quality Manual process, specifically within the requirement of the PHECC Teaching Faculty Framework and PHECC Education and Training Standard, Irish Heart Foundation requirements or the requirements of the QQI Core Quality Requirements as appropriate. Are required to deliver service as outlined in their contract and service level agreement. Informing learners of the Course outline, delivery and assessment. Provide support where required.
- Act as the first point of contact for the learner with an issue relating to the Course of study and its components
- Affiliate Instructors (PHECC) must inform the learner of their status as an Affiliate and the relationship to The CPL Institute relationships.
-

3.2.8 PHECC Assistance Tutor/Tutor

To support the delivery of all PHECC Responder Courses within the organisation, provide supervision for learners and act as peer supports Responder Instructors, and Faculty staff. This role is essential to the faculty provisions and are guided by the PHECC Faculty Framework Document.

3.2.9 Internal Verifier

ISO 9001:2015 Clause - 5.3 organizational roles, responsibilities and authorities, 7.2 Competence

The Internal Verifier (IV) is a nominated training administrator of The CPL Institute. The roles involved checking assessments, marks/grades, calculations and confirms all in keeping with our QA Procedures. Also, will complete an IV Report as part of the process.

Key Responsibilities

- Adherence to assessment procedures.
- Learner evidence matches the assessment specifications of the award.
- Appropriate assessment methods are used for testing of all learning outcomes.
- Documentation was issued to learners i.e., assessment briefs, learner declarations.
- Documentation was used to record learner results and was completed effectively.
- Evidence is available for all learners, results are recorded, and feedback has been provided on grading.
- Percentage marks and grades awarded are consistent with grading band.
- Provisional results are available (QQI Only).
- Results are recorded/available for all learners submitted for provisional results.
- Note any irregularities on IV report and take corrective action.
- Liaise with Examination Board and Training Manager on any issues arising from the IV process.
- Maintaining confidentiality and adherence to data protection policies and guidelines.
- Will sit on Examination Board Committee and other boards and sub-committees when requested.

3.2.10 External Examiner

ISO 9001:2015 Clause - 5.3 organizational roles, responsibilities and authorities, 7.1.1 General b)

To ensure that there is independent, confirmation of fair and consistent assessment of learners which is in accordance with awarding body specifications. This role also acts as an external compliance monitor that assess periodic on sit visit during training delivery.

Key Responsibilities:

- The External Consultant is a member of the self-evaluation panel and will sit on relevant boards and sub-committees when requested
- The design of an evaluation process compatible with the organisation's activities.
- Conducting on-site observations and consultations with Instructors.
- The preparation and submission of external Examiner's Report. This report is available to the Examination Board and provides evidence that the External Examiner process has taken place. It comments on the outcomes of results moderation against national standards, acknowledges strengths, any gaps identified and highlights areas for improvement.
- Maintaining confidentiality and adherence to data protection policies and guidelines.

Selection Criteria

- Broad technical/subject matter expertise within the appropriate award area/field of learning.
- Have the required knowledge and expertise to confirm that policies and procedures in relation to awards and assessment are being implemented.
- Experience of carrying out assessment or similar relevant work within the industry/field.
- Have administrative and IT skills e.g., report writing.
- Be able to operate within the code of practice and/or guidelines issued by the awarding body.
- Be independent of our organisation.
- Carry out their role as Examiner with integrity and professionalism.

3.2.11 Learner Representative

ISO 9001:2015 Clause - 5.1.2 Customer Focus

The purpose of the Learner representative is to inform and provide a Learner's perspective to the relevant Academic Council, Boards or any sub-committees. The Learner representative is ideally a Learner which has completed a few modules with The CPL Institute. The same expectation of confidentiality applies to the Learner representative as it does to all attending members of committees.

Key Responsibilities

- Attend the Academic Council meetings
- Provide Learner feedback and perspective to the relevant Council/Board
- Attendance at the Examination Board (id required) may be confined to those sections where the Learner representative does not have a conflict of interest within the item of discussion such as results sheet which include the attending Learner representative results.
- Maintaining confidentiality and adherence to data protection policies and guidelines.

3.3 Recruitment and Selection of Staff

ISO 9001:2015 Clause - 7.1.1 General, 7.2 Competence

The CPL Institute recognise that the recruitment, selection and retention of staff and Instructors is one of the most important roles for our Senior Management Team and is critical to the development and success of our business. Overall responsibility for the allocation, recruitment and management of resources is held by the Associate Director.

The CPL Institute will use professional recruiters to assist in resourcing professional and experienced staff and associates nationwide.

The CPL Institute recruitment process aims to:

- To sustain a working environment that attracts, develops and retains committed employees, who share in the company's goals, objectives and ongoing achievements.
- To take all reasonable steps to ensure that all candidates receive, and are seen to receive, fair and equitable treatment
- To take all reasonable steps to ensure that the Company meets all its Statutory, industry accreditation and moral responsibilities/requirements

The appointment of staff to work on designated courses will be subject to satisfactory clearance from Garda Vetting where required. The requirement to undergo vetting will be set out in the job description.

All staff are responsible for notifying the company of any change in their status i.e., charges leading to possible conviction.

The CPL Institute commits itself to ensuring the following:

- CPL will not discriminate against any candidate during the recruitment process. Interviews will be carried out objectively and individuals will be judged on merit and their ability to do the job. It is also our policy to ensure that as much accommodation as possible is carried out to facilitate the participation of individuals with additional needs in the recruitment process and in the workplace
- Recruitment is legislatively compliant and promotes equality.
- It has adequate numbers of personnel in place to: - Meet the current and projected demand for its service - Carry out the activities described in the QMS policies and procedures - Maintain PHECC/IHF/QQI/IOSH requirements for course approval - Systematically organise, deliver and monitor the quality of courses and awards.
- All personnel are issued with a written statement of terms of employment/engagement
- All staff take part in an induction training process.
- All staff are fully cognisant and compliant with the Safeguarding and Protection policies and procedures of The CPL Institute.
- All staff are performance managed as described by group Human Resources functions.
- All new staff are required to undergo a probationary period.

3.4 Recruitment, Induction and Revalidation of Instructors

ISO 9001:2015 Clause - 7.1.2 People, 7.1.1 General b), 7.1.6 organisational knowledge

The CPL Institute is committed to ensure there is a robust systematic approach to recruiting appropriately qualified and experienced personnel to carry out education and training activities. Overall responsibility for the allocation, recruitment and management of academic resources is held by the Associate Director. This is a delegated function to the training manager. This policy applies to all Instructors irrespective of the teaching mode of delivery, i.e. in-person, blended or fully online.

A minimum standard and role profile is in place for the academic and subject matter experience of: - PHECC Faculty (All instructors, PHECC facilitators, tutors, assistant tutors, affiliates etc), all Instructors and contract subject matter representatives. These specify the composition of institution's personnel to meet education and training standards for each course on offer. Qualifications and certifications must be evidenced and maintained as valid.

The CPL Institute will ensure that it maintains enough academic faculty/instructors to ensure appropriate tutor/instructor-to-learner ratios, in keeping with accreditation body guidelines including those specified by PHECC, IHF and QQI course approval criteria.

The CPL Institute will take all reasonable steps to ensure the application of consistent practice throughout all areas of the company's policies and procedures, with particular emphasis on those applicable to recruitment, selection and retention of suitable employees.

The CPL institute is committed to taking all reasonable steps to ensure that the successful candidates meet all its statutory, industry accreditation and moral responsibilities/requirements, including appropriate qualification and experience as set put by QQI, IOSH, IHF and PHECC to deliver accredited courses and includes provision of evidence of clinical updates as necessary i.e., PHECC CPGs at CFR and First Aid Response level.

All personnel and contracted Instructors are issued with a written statement of terms of employment/engagement. In addition, all instructors agree to a service level agreement specifying requirements and a code of conduct is also in place (see section 3.6). This is further detailed in the SOP 16 describing the recruitment and approval of Instructors.

All instructors contracted to The CPL Institute are responsible for their own insurance arrangements as set out in the contract of services.

All Instructors will undergo The CPL Institute induction training prior to commencement. This induction consists of:

- All Instructors (staff and contractors) are given a comprehensive induction which includes an online presentation covering an overview of the company and sets out our expectations in relation training delivery and quality, IT skills, academic integrity and online teaching practice.
- Induction includes information about the role and responsibilities of the Instructor, our Quality Management System (QMS), a walkthrough of all relevant course paperwork and forms to be completed.
- Information on technology requirements as applicable to blended or fully online elements of a courses. A teaching guideline is provided for teaching synchronously over Zoom/Teams.
- A copy of the code of conduct for staff and Instructor is also provided.
- All new instructors are required to complete Equality and Diversity training and GDPR training. Records are maintained.
- Whilst much of the induction can be done online Instructors will be offered the opportunity for a face-to-face meeting with the Training Manager on commencement.
- There is an Induction Checklist in place (Ref SOP 30, Training Induction) which is used as a guide to ensure that all core issues are covered at Induction, including HR, Health and Safety and Quality policies and procedures.

Revalidation

The CPL Institute commits to ensuring that all courses, and instructors delivering approved courses are fully approved and re-accredited. In relation to accredited courses, in accordance

with PHECC, QQI and Irish Heart Foundation requirements, all Instructors are monitored through a structured and rolling two-year schedule, see section 6.1.7 Monitoring Teaching and Learning.

Instructors are responsible for maintaining their own certification. Each faculty member's approval status is tracked to ensure timely renewal and documentation of compliance with PHECC's Faculty Framework, IHF and QQI quality framework requirements.

Recertification Cycle

- PHECC and IHF: All PHECC faculty (Instructors, Tutor/Facilitators) and IHF instructors are re-approved every 2 years in accordance with the PHECC Faculty Framework. The CPL Institute tracks expiry dates and initiates the recertification process at least 3 months in advance of renewal deadlines.
- QQI: Instructors delivering QQI-accredited programmes must also demonstrate ongoing professional development and current subject-matter expertise. This is reviewed as part of the provider's annual tutor review and development process.

Renewal Criteria

For both PHECC, IHF and QQI programmes, instructors must meet the following criteria and provide evidence for renewal:

- **Valid Certification** in relevant subject areas (e.g. CFR, FAR, etc.) within the 2-year window, IHF instructors must recertify before the current instructor card expires.
- **Evidence of Delivery:** Minimum number of 4 courses delivered within the recertification period (as per PHECC's and IHF requirement for active status)
- **CPD Records:** Completed Continuous Professional Development activities relevant to the subject and instructional practice. Complete any relevant updates as required (e.g. guidelines updates, attendance at workshops, online courses, etc)
- **Observed Delivery:** At least one monitored course delivery during the approval period. This included evidence of equipment and resources and appropriate maintenance process.
- **Learner Feedback:** Review of anonymised learner evaluations
- **QA Compliance:** Adherence to the provider's Quality Assurance procedures
- Mandatory training must be valid for GDPR, and Equality and Diversity training.
- Provision of valid adequate insurance cover with a respectable insurance company, more particularly professional indemnity insurance, public liability insurance and employer's liability insurance (where relevant/ the business employs staff).

3. Monitoring and Support

- The provider assigns a qualified monitor or lead instructor to observe instructors during live training sessions, using a standardised checklist based on PHECC and QQI quality indicators.

- Any performance concerns or quality issues trigger a structured support process, including mentoring, retraining, or temporary suspension from delivery until issues are resolved.

4. Record-Keeping and Approval

- All records relating to faculty renewal, observation, CPD, and learner feedback are stored.
- A summary report is compiled and reviewed annually, and recommendations for approval or renewal are formally recorded.
- Final sign-off is completed by the Training Manager or Academic Director.

This process ensures that all instructors are up to date, delivering consistently high-quality training, and meeting the expectations of both PHECC and QQI for professional competence and educational delivery.

3.5 Training and Continuous Professional Development

ISO 9001:2015 Clause - 7.2 Competence

To ensure competence of our personnel, job descriptions have been prepared which identify the qualifications, experience and responsibilities that are required for each position. Qualifications include desired requirements for education, skills and experience. Appropriate qualifications and work experience, along with the provision of any required training, provide the competence required for each position.

Qualifications are reviewed upon hire, and when an employee changes positions or the requirements for a position change. The CPL group Human Resources Department maintains records of employee CVs. The CPL Institute maintains copies of appropriate certification and qualifications as required.

Staff training records are maintained to demonstrate competency and experience. The Training Manager maintains and reviews the training records to ensure completeness and to identify possible future training needs. Training records are maintained and include as a minimum; copies of certificates for any training undertaken to date, current job description and curriculum vitae.

The requirements for training are communicated to the Staff Induction.

We always endeavour to promote and encourage the further upskilling and development of staff and contracted Instructors. Support, supervision activities and performance management take place formally once a year. All formal discussions are documented and available on the employee's FRANKLI People profile.

- We provide membership of professional bodies for employees as required.
- We encourage all members of staff to engage in CPD and we maintain a record of all CPD activities for staff. Contracted Instructors are responsible for their own CPD and are requested to submit evidence of CPD activities on an annual basis.
 - Instructors are invited to attend training events organised The CPL Institute when relevant and appropriate.

- PHECC education award holders must maintain CPD in line with the requirement of the PHECC Teaching Faculty Framework V1 2015. This requires CDP be demonstrated that covers: 1. Retaining Competencies 2. Developing expertise and 3. Developing experience.
- We review our feedback course evaluation reports to check if there is a need for training and/or upskilling for Instructors in relation to assessment, particularly marking and grading. We also review Internal Verification training.
- We organise internal training events e.g., workshop on new training materials and technology as required.
- We offer instructors the opportunity to avail of any of our suite of short eLearning course free of charge.

In relation to blended and fully online teaching and learning, course content is constantly evolving as are online methodologies and tools. The CPL Institute encourages staff to keep up to date with learning tools and techniques and supports this through Continuous Professional Development.

Types of content include:

- Video and Audio
- Curricula and Syllabi
- Online learning and teaching platforms and VLEs, such as Astute and LearnUpon
- Content creation tools such as Articulate including Rise and Storyline
- Online forms and documents
- Websites
- Microsoft TEAMS/Zoom

3.6 Code of Conduct – Staff and Contractors

ISO 9001:2015 Clause - 4.2 Understanding the need and expectations of Interested parties,
7.1.4 Environment for the operation of processes

The Code of Behaviour establishes acceptable boundaries of behaviour for workers/instructors/contracted personnel and clarifies how to communicate with learners in a way which respects their right to be listened to, treated with respect and treated fairly. The Code of Behaviour also clarifies the boundaries and specific requirements for acceptable behaviours between Instructors and learners, children/young people and vulnerable adults,

This code of conduct applies to all staff carrying out activities on behalf of The CPL Institute and it is the responsibility of all to familiarise themselves with it.

General requirements

- Take reasonable steps to ensure the health, safety and welfare of all
- Dress in a way which is appropriate to their position and duties.
- Refrain from using offensive language.
- Not attend work or carry out duties whilst under the influence of alcohol, illegal drugs or other substances which prevent them from doing so competently.

- Comply with reasonable requirements as laid down in role description
- Treat each other with respect and not act in a way which is discriminatory towards individuals or groups and observe the nine ground/reasons of discrimination: gender, disability, age, religion, family status, race, civil status, sexual orientation or membership of the travelling community.

Teaching practice

- There is an explicitly ban on the use of foul or sexualised language.
- Good practice includes valuing and respecting individuals, and the adult modelling of appropriate conduct will always exclude bullying, shouting, racism, sectarianism or sexism. Lack of respect may be shown in words, conduct, acts or demeanour. It is recognised that harassment and bullying can seriously damage working and social conditions, and it will not be tolerated during work, study or any other activity of The CPL Institute
- Instructors should practice the use of positive reinforcement to praise and encourage all learners including children, young people, vulnerable adults
- All learners including children and vulnerable adults are encouraged to report cases of bullying to a staff member of their choice. Complaints must be brought to the attention of The CPL Institute senior management immediately.
- All learners including children or vulnerable adults are not discouraged from making a disclosure of abuse through fear of not being believed, and to listen to what they have to say. If this gives rise to a child protection concern, it is important to follow the procedure for reporting such concerns, and not to attempt to investigate the concern oneself.
- Guidelines for teaching synchronously over Zoom/Team shall be adhered to. All instructors are expected to be familiar with the technology and VLE required to facilitate online courses.

Regulatory Requirement -Working with children, young people, vulnerable adults

- Under the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 and Children First Act 2015 all people working with children and vulnerable adults are required to undergo vetting.
- Instructors are required to have valid Garda Vetting, proof of same must be provided to The CPL Institute prior to booking or attending a course where children, young people or vulnerable adults are to be present
- Be aware of your responsibilities to report breaches of the code of behaviour or any concerns raised during the training event to management

Safe supervision Working with children, young people, vulnerable adults

- Ensure that everyone knows who is on duty or volunteering in an activity.
- Children/young people are not left unattended.

- Adequate numbers of workers/volunteers are available to supervise the activities (best practice would indicate that there are male and female workers/volunteers present to supervise coeducational activities).
- Adult-child ratios should be specified; Best practice would be a ratio of one adult to 6 number of children/young people
- Workers/volunteers always know where children/young people are and what they are doing.
- If a training event is a decided event for children, young person or vulnerable adult then Instructors must have undergone induction training to introduce guiding principles and child safeguarding procedures.

Code of practice for learners and staff involved with work placements

- Staff and learners likely to be undertaking direct work involving children or vulnerable adults based in work placements associated with designated Courses will be required to hold a current Garda Vetting report that indicates that the person is acceptable for working with children and vulnerable adults.
- Staff and learners on external work placement or other external work activity should familiarise themselves, and comply with, the Child Protection and Safeguarding policy and procedures in place at the work placement facility.
- The CPL Institute recognises that work placements will have their own specific Child Protection and Safeguarding Policies and Procedures in place and acknowledges that these will take precedence over The CPL Institute's own policies in relation to activities undertaken on the work placement.

3.7 Oversight and committees

ISO 9001:2015 Clause - 7.3 Awareness

3.7.1 Separation of Academic Governance and Training Delivery

ISO 9001:2015 Clause - 7.1.6-5.34.2 Understanding the need and expectations of Interested parties, 8.5.1 Control of Product and service provision

It is the policy of The CPL Institute to clearly separate the governance of training quality from training delivery. This ensures no interference between commercial performance and quality of training delivery. Please see the organisational chart in Figure 4 that shows a clear separation of academic oversight and training delivery.

The Cpl Institute – Management & Academic Structure

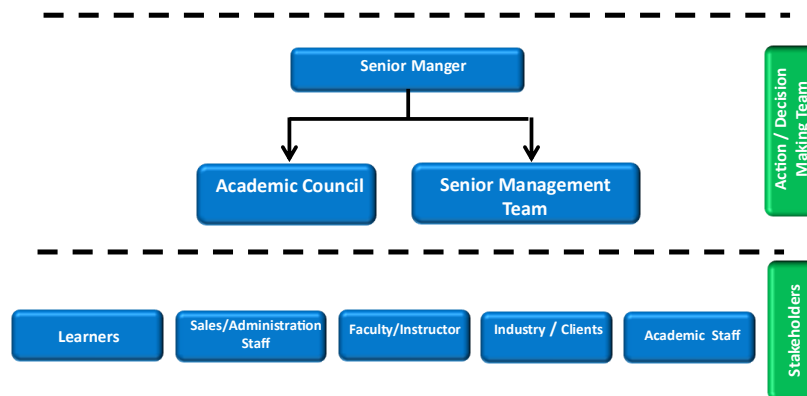


Figure 4, Management and academic structure.

The academic council brings together internal staff and subject matter expertise who are tasked with ensuring the quality of our training is not impacted by commercial influences. The other main separation of responsibilities required by accrediting bodies is the separation of Course development/revision from Course approval. In our organisation the Risk and Course Development Committee [RPDC] is responsible for risk management and commercial decision regarding new Course development while the Academic Council [AC] is responsible for Course approval.

In recognition of the importance of academic oversight, effective teaching practices and to provide for effective external oversight, The CPL Institute has established the Course Review Board (PRB). The Course Review Board protects learner interests and monitors the implementation of the quality processes which are designed to maintain high standards of training provision. Refer to Figure 5, for details of the Information flow of academic governance.

All meetings have a term of reference specified and minutes and actions are recorded and tracked.

Academic Governance

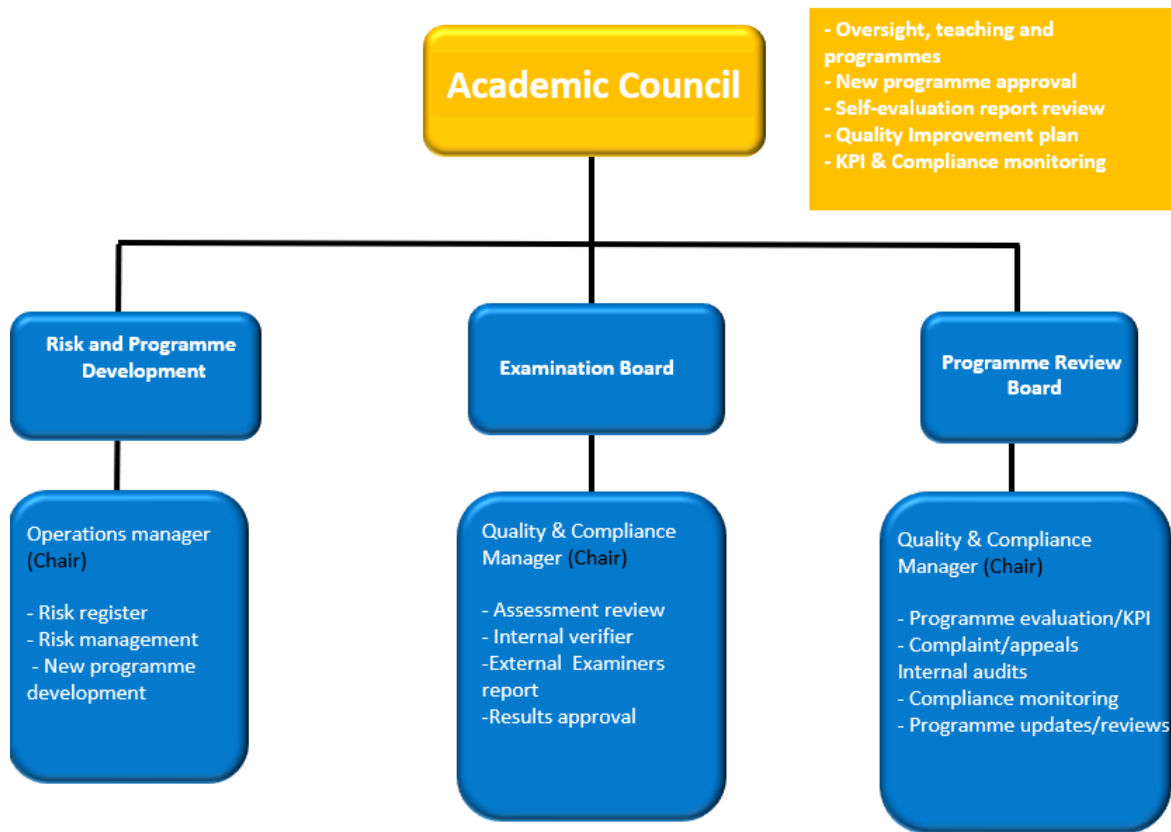


Figure 5. Academic Governance

3.7.2 The Academic Council

ISO 9001:2015 Clause - 7.1.6 organizational knowledge

The purpose of The CPL Institute Academic Council [AC] is to ensure the quality and academic governance of the training functions. The council shall ensure the quality of all accredited and nonaccredited training courses. This group also approve accreditation body self-assessment reports (PHECC, IHF and QQI), audit reports (external/internal) and the quality improvement plan (QIP).

A clear separation must be kept between quality of training and the commercial operation of the organisation. The council shall have external academic members.

Our accredited courses include Quality and Qualifications Ireland (QQI), Institution of Occupational Safety and Health (IOSH), Pre-hospital Emergency Care Council (PHECC) and Irish Heart Foundation. This Academic council will oversee the effective operation of the following sub-groups:

- The Programme Review Board (PRB)
- The Examination Board (EB)
- The Risk and Course Development committee will escalate accordingly.

The Academic Council is comprised of representatives drawn from a range of subject matter experts, learner representatives, and members of The CPL Institute. The Academic council meets at a minimum yearly or as required.

3.7.3 Risk and Programme Development Committee

ISO 9001:2015 Clause - 6.1 Actions to address risks and opportunities, 8.2.2 Determining the requirements for products and services, 8.2.3 Review of the Requirements for products and services

Course development requirements evolve each year in response to needs identified through risk management, strategic planning, market demand, academic practices and quality assurance reviews, including staff and learner feedback. This is supported by informal discussion and consultation which takes place on an ongoing basis throughout the year.

New course development is managed by our PRDC, or Programme Review and Development Committee. The risk and Programme review board are responsible for the implementation of the development of new courses in line with the process described in 8.2 Design and Development of New Courses. This process is used for both accredited and non-accredited courses

This group reviews and manages risk and is responsible for the updating and management of the risk register. The group meet to review risk mitigation and to agreed and implement new mitigations as required.

This group meets at a quarterly each year.

3.7.4 Programme Review Board

ISO 9001:2015 Clause - 8.2.3 Review of the Requirements for products and services

The PRB protects learner interests and monitors the implementation of the quality processes which are designed to maintain high standards of training provision. This group are also responsible for monitoring the quality of our training courses and updating course content and assessment as required. Significant complaints, learner results appeal, changes to RPL and access criteria for course are also escalate to the group for review. This group meets at a minimum of 2 time a year, to facilitate reporting and escalation.

3.7.5 Examination Board

ISO 9001:2015 Clause - 8.2.3 Review of the Requirements for products and services

As part of The CPL Institute governance process, The Examination Board monitors the assessment procedure to ensure it is quality assured, comprehensive and reflective of accreditation body requirements include those of QQI, PHECC, IHF and IOSH. This group monitors grading and internal verification and approve results for QQI submission. The Examination Board sits at a min 6 times a year.

3.7.6 Governance meeting schedule

ISO 9001:2015 Clause - 8.2.3 Review of the Requirements for products and services

Academic Council	Yearly	Sept or January
Risk and Programme Development Committee	Twice yearly	As scheduled
Programme Review Board	Twice yearly	As scheduled

Examination Board	6 times a year	Feb, April, June, August, October, December *
ISO 9001 Quality Review	Yearly	Q1
Quality Group Meeting	Twice yearly	Q2/Q4

*Meetings are scheduled in line with QQI examinations submission dates.

3.8 Equality and Diversity Policy

ISO 9001:2015 Clause - 7.1.4 Environment for the operation of processes

CPL has a stated policy that outlines our commitment to equal opportunities in the workplace which we have included. This is detailed in the CPL Group Equality and Diversity Plan 2019.

We believe companies must build a culture in which anyone feels that they can be challenged to do their best work — and rewarded accordingly — regardless of their race, gender or orientation and that embracing equality and diversity in the workplace benefits not just the Company but also individual employees, departments and our job candidates, learners and clients. Each person brings their own background, work style, distinct capabilities, experience and characteristics to their work. We recognise that a talented and diverse workforce reflects the diversity of society, and we want to utilise the widest range of skills, knowledge and experience within our client’s business within legislation guidelines.

We are committed to equality of access and attainment among learners, and we actively seek to implement policies and procedures which promote equality and avoid discrimination. Our Equality and Diversity policy is applicable to all present employees (temporary and permanent), all potential employees, all independent contractors, Instructors, partners and customers (individual learners and client companies).

It is the policy of The CPL Institute to create an environment for employees, learners, clients and service providers that is free from discrimination based on the following nine grounds of discrimination and as described the Equal Status Acts 2000-2008:

1. gender,
2. marital status,
3. race
4. family status,
5. religion,
6. sexual orientation,
7. disability,
8. age,
9. membership of the Traveller community.

All decisions made by The CPL Institute will be cognisant of the nine grounds of discrimination. All staff have received training on this policy, there is also a separate induction module on equality and diversity for our newly contracted Instructors. Equality and diversity are also included at Learner induction.

It is CPL’s policy to ensure that entry into the Company and subsequent progression within the Company is determined by the application of objective criteria regarding individual performance and merit. The Company will take all reasonable steps to ensure that you are

treated equally and fairly and that employment decisions are made upon objective and job-related criteria.

Job applicants are requested to disclose details of any learning or medical support requirements they have and wish to make us aware of, on the application form. Learners are also invited to disclose any support requirement to their instructor at any stage of a Course. This also applies to any learner who develops/discovers a support requirement which they did not have or were not aware of at the time of application.

The Company will also take all reasonable steps to provide a work environment that is free from intimidation, hostility, humiliation and other forms of harassment. Internal staff that believe they are suffering from inappropriate treatment on any of the grounds set out above, may raise a complaint under the Grievance Procedure or, if appropriate, the Bullying and Harassment policy.

The CPL Institute expects that all employees, independent contractors, Instructors, learners, partners and associates are responsible for maintaining and adhering to this policy, to adhere to legislation in relation to equality and diversity, and to contribute to a positive environment.

To ensure learning and teaching resources promote equality of opportunity, it is essential to develop inclusive content that reflects diverse perspectives and learning needs. This includes using accessible formats, culturally sensitive materials, and unbiased language.

Mechanisms to promote a safe and accessible online learning environment include implementing strict anti-discrimination policies, providing accessibility features such as screen readers and subtitles, offering diversity and inclusion training for educators, and fostering an open feedback system to address concerns. Additionally, ensuring gender sensitivity and inclusivity can be achieved through gender-neutral language, representation of diverse role models, and creating safe spaces for discussion and collaboration.

Learners can avail of the published procedure on our website and in the learner information handbook or speak directly to an instructor or member of the training team. See Appendix 7 and appendix 8.

3.9 Child Safeguarding and Work Placement Protection Policy

ISO 9001:2015 Clause - 7.1.4 Environment for the operation of processes

The CPL Institute are committed to safeguarding the well-being of children and young persons and vulnerable adults who are participating in training courses either (either in person, blended or fully online or residents where learners are completing a work placement.

These procedures aim to reflect national legislation, guidelines and best practice for the protection and welfare of Children and Young People and vulnerable adults. To this end, we adhere to the Children First Act 2015 and Children First: National Guidance for the Protection and Welfare of Children and all associated guidelines, as well as Safeguarding Vulnerable Persons at Risk of Abuse: National Policy and Procedures, published by the Health Service Executive.

Safeguarding Policy

- Our priority to ensure the welfare and safety of every child and young person who attends our service is paramount
- We are committed to upholding the rights of every child, young person and vulnerable adult who attends our service, including the rights to be kept safe and protected from harm, listened to and heard
- These procedures are for use of any learner/Instructor/staff member, that may want to report any concerns in respect of the protection of a child, young person or vulnerable adult. It specifies the actions and behaviours required by Instructors when dealing with Children/Young People and in the reporting of suspected child/young/vulnerable person abuse/neglect.
- It also provides a code of conduct applicable in respect of dealings with Children or Young People and sets out the reporting requirements in cases of suspected abuse of a child/young/vulnerable person in The CPL Institute or associated work placements. This duty applies to all management, staff, learners, Instructors and others contracted in by the company.
- The CPL Institute commits to a written assessment of risk of harm to children while availing of the service, and the measures that will be taken to manage any identified risks.
- Responsible Named Persons – these will be specified in role requirement as required to ensure we are meeting our responsibilities under Children First legislation and Children First: National Guidance for the Protection and Welfare of Children.
- The CPL Institute commitment to reviewing our guiding principles and child safeguarding procedures at least every two years, or sooner if necessary due to service issues or changes in legislation or national policy.

Scope

While most persons studying, working and using the facilities of The CPL Institute are adults, it is acknowledged that there may be learners on Course that are under the age of 18 or learners on certain Courses that interact with children and/or vulnerable adults as part of their training. These may also be learners under this scope on PHECC approved training course booked through external faculty affiliates or attend through a corporate client requests.

Under the Child Care Act 1991, any person under 18 years of age is considered a child and should be protected under Children First, the National Child Protection guidelines. Categories of such persons include:

- Registered learners who are not yet 18 years of age.
- Children and vulnerable adults who interact with learners, staff and Instructors on work placement or during work placement visits.

Learners are responsible for informing themselves of the requirements under this policy and registration as a learner is considered confirmation of participation with the policy.

Our booking process entails a confirmation if person in these categories is to attend a course. When identified as a requirement, it is at the discretion of The CPL Institute if the course booking is confirmed, and the course scheduled. In the case that the booking is confirmed the above procedure including garda vetting will be applied.

The CPL Institute commits to:

- A Named person is appointed to lead the development of guiding principles and child safeguarding procedures and for ensuring that policies and procedures are consistent with best practice. The CPL Named Person delegated responsibilities are assigned to the Quality and Compliance Manager and overall responsibility for ensure we have a statement and procedures in place is held by the Associate Director.
- Under the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 all people working with children and vulnerable adults are required to undergo vetting. Our organisation must vet applicants and Instructors who will be working directly with children with the National Vetting Bureau prior to appointment and commencement of work.

Vetting and training requirement

The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 and Children First Act 2015 provide a statutory basis for the vetting of persons.

- The CPL Institute will ensure that all management and staff who are involved in the provision of designated Courses where they will meet children or vulnerable adults, will undergo Garda Vetting as is required by current policy and legislation. Garda vetting cannot be applied for on a personal basis.
- The CPL Institute will ensure that all staff who are involved in the provision of designated Courses where they will meet children, or vulnerable adults will receive child protection awareness instruction and a briefing on The CPL Institute's Safeguarding and Protection Policy.

Section 4 - Communication Policy and Plan

4.0 Introduction

ISO 9001:2015 Clause - 7.4 Communication

Good communication is essential to The CPL Institute success as a provider of high-quality training Courses. Therefore, we actively create an open culture with active engagement, resulting in staff and instructors having a clear understanding of what is expected of them.

The purpose of the Communications Management Policy is to define the communication requirements for the CPL institute and how information will be distributed. The Communications Management Policy defines the following:

- What information will be communicated—to include the level of detail and format
- How the information will be communicated—in meetings, email, telephone, web portal, etc.
- When information will be distributed, the frequency of communications both formal and informal
- Who is responsible for communicating information?
- How changes in communication or the communication process are managed
- Any standard templates, formats, or documents the project must use for communicating
- An escalation process for resolving any communication-based conflicts or issues

4.1 Communications Management Approach

ISO 9001:2015 Clause - 7.4 Communication

The Associate Director will take a proactive role in ensuring effective communication. The communications requirements are documented in the Communications Matrix presented in Appendix 3. The Communications Matrix will be used as the guide for what information to communicate, who is to do the communication, when to communicate it and to whom to communicate.

4.2 Publicly Available Information

ISO 9001:2015 Clause - 7.4 Communication

It is our policy to present all information in a clear, accurate and transparent fashion which allows for comparison. External communication published in relation to Courses of education and training considers all legal compliance obligations including the requirements of the Training and Education Act 2012.

Information must be presented in a form that does not conflict with our Equality and Diversity Policy.

Public information is provided through the following means.

- The CPL Institute website – www.theCPLinstitute.ie
- Facebook – www.facebook.com/theCPLinstitute
- Twitter – www.twitter.com/theCPLinstitute
- LinkedIn – www.linkedin.com/company/the-CPL-institute

The company marketing team operate an editorial calendar in which all upcoming Blogs, News Articles, Flyers and promotions are planned, in the case of social media automatically scheduled. Topics covered in Blogs, News Articles, Flyers and promotions include achievement of accreditations, new training courses on offer, legislation updates, client legal and compliance obligations. Pay Per Click targeted paid adverts are also used to reflect upcoming training using keywords.

Information available on our website includes:

- Whether the Course leads to an award.
- The name of the awarding body.
- The title of the award and reference code.
- Whether the award is recognised on the NFQ (including type and level).
- Course fee and any other applicable fees
- Access, Transfer, Progression (where applicable).
- Learner support policy.
- Learner charter
- Course description.
- Evaluation reports.
- Quality Manual.
- Third-party relationships related to PHECC-approved courses (Affiliates).
- Complaint's policy and procedure.
- Equality and diversity policy.
- Protection of enrolled learner arrangements.

4.3 Corporate Clients and Stakeholder Communications

ISO 9001:2015 Clause - 7.4 Communication, 8.2 Requirements for products and services, 8.2.2 Customer Communication

In accordance with our commitment to exceed our customer's expectations, our organization highlights effective customer communication as an essential element of delivering customer satisfaction.

The training administrators and sales team are responsible in the first instance for establishing methods of communication with our customers to ensure enquiries, contracts or order handling; including amendments, customer feedback and complaints are handled expeditiously and professionally.

Appropriate handling of customer communication helps to reduce customer dissatisfaction and, in many cases, turn a dissatisfying scenario into a satisfying experience. Customer communication occurs through the following formats, events and processes:

1. Website detailing our products and services.
2. Enquiries, quotations and order forms, invoices and credit notes
3. Confirmation of authorised orders, booking details, and amended orders. Automated through ARLO learning management software.
4. Course scheduling and client requirements through email

5. E-mails, Phone Calls, letters and general correspondence
6. Learner registration and attendance and any issues arising
7. Customer feedback evaluation provide through phone call/email
8. Complaints and issues management process and corrective actions.
9. Issuing of certification

As part of the quality assurance process all stakeholders will be identified, the quality and compliance manager will be responsible for ensuring communication with each stakeholder is specified. Standard communications will occur in accordance with the Communication Matrix; however, depending on the identified stakeholder communication requirements, individual communication is acceptable.

4.4 Communication with learners

ISO 9001:2015 Clause – 7.4 Communication, 8.2 Requirements for products and services, 8.2.2 Customer Communication

Our communications policy to learners aims to ensure:

- Ensure learners are provided with all necessary information, advice and support in a manner that is appropriate to their abilities.
- Create a good working relationship with learners and improve customer care for learners.
- Encourage effective feedback from learners. Ensure consultation with regular and contracted staff, learners and other stakeholders regarding developments in training services
- Encourage openness in internal communication and the sharing of information.
- Ensure the public made aware of any third-party relationships related to PHECC-approved courses and the responsibilities of those involved

Learner communication occurs through the following formats, events and processes:

1. Website detailing our products and services. All marketing content is clearly presented on our website, outlining the nature of course delivery (live Zoom sessions), course duration (1–5 days), access and technical requirements (internet access, Zoom access, headset), and the learner expectations for engagement, assessment and participation.
2. Information is written in plain English and is optimised for prospective learners accessing information online via mobile or desktop.
3. Learner handbook (issued prior to course commencement), including the courses entry criteria, required resources included those required for online learning, objectives and main topics which are covered, learning outcomes, learning and assessment methods, teaching methods, supports, appeals/complaints and certification.
4. QQI and PHECC award specifications.
5. Enquiries, quotations and order forms, invoices and credit notes.
6. Confirmation of authorized orders and amended orders, booking details and course instructions (In person, Blended, Fully Online) This communication is automated through ARLO learning management software.

7. E-mails, Phone Calls, letters and general correspondence.
8. Learner feedback evaluation provided through a link to Airtable data base
9. Complaints management process.
10. Issuing and recording of certification

The following documents are provided to all learners, before or at the commencement of a Course:

- A course reference manual (where applicable) e.g. PHECC FAR courses receive a First Aid Manual and CPG and IHF course materials.
- A course timetable/assessment plan outlining the weighting and timing of assessments
- Assessment paperwork, progression details, eligibility and assignment deadlines if applicable
- Criteria for assessment, including descriptors of expected standards of attainment for marking bands
- Guidance notes and submission process for each assessment activity
- Instruction for online learning and technology requirements.

4.5 Communications with Instructors

ISO 9001:2015 Clause - 7.4 Communication, 8.2 Requirements for products and services

It is our policy to facilitate effective two-way communication with our instructors.

Communications with Instructors/consultants are achieved by the following methods:

1. Contracts and service level agreements.
2. Code of Conduct
3. Internal CPL Institute training (Induction, GDPR, Equality and Diversity etc)
4. Website detailing our products and services.
5. Training packs including presentations, lesson plans, assessment marking schemes, general course materials including declaration forms, attendance sheets, examinations records and documents. These are issued prior to course commencement, either electronically or by courier delivery.
6. Booking enquiries, scheduling, invoices and credit notes.
7. Confirmation of authorized orders and amended orders, Booking details and course instructions. Course booking confirmations are automated through ARLO learning management software.
8. Instructor course evaluations provided through a link to Airtable data base.
9. E-mails, Phone Calls, letters and general correspondence.
10. Complaints management process.

4.7 Internal and Staff Communications

ISO 9001:2015 Clause - 7.3 Awareness, 7.4 Communication

Communications with relevant staff are achieved by the following methods:

1. Operations staff meetings meeting is held weekly. Staff meetings are chaired by the Associate Director or deputised by the Quality and Compliance manager. There is a set agenda for the staff meeting to include the following discussion items:
 - Matters arising from previous staff meeting

- Activity Report on each function
- Items for review
- Project updates etc
- Quality review and updates
- Training review and updates
- New developments (e.g., New Courses)

Meeting actions are recorded and tracked to completion and meeting minutes will be stored on the SharePoint server in an accessible folder.

2. Regular E-mail/Phone calls - between staff
3. Microsoft teams messages service is used for minor questions or clarification that are not recorded.
4. Staff appraisals, yearly.
5. Specific committee and board meetings are specific in Section 3.7.
6. Quality management review board meeting held yearly.

4.8 Communication Methods and Technologies

ISO 9001:2015 Clause - 7.1.3 Infrastructure, 7.1.6 organizational knowledge, 7.4 Communication

The CPL group maintains a SharePoint platform within the operation which all training materials and documents are stored, archive various documents, and conduct communications. This platform enables senior management, as well as stakeholders with compatible technology, to access documents and communications at any point in time. SharePoint also provides the ability for managers and training administrators and team members to collaborate on work and communication. Organizational naming conventions for files and folders will be applied to all live and archived work. See SOP 01 Document control for further information.

For stakeholders who do not have the ability to access SharePoint, a web link is established for the company. The Associate Director is responsible for ensuring all communications and documentation are copied to the web site and that the content mirrors what is contained on the SharePoint platform. This includes all learner information for accredited courses and public access to key quality management documents and policies.

The CPL Institute maintains software licenses for ARLO learning management software. All team members are responsible for developing, maintaining, and communicating schedules, course booking, tutor booking and venue arrangements using this software. Individual training is provided.

All learners are registered by the training administrators on ARLO. The course confirmation email is automated through ARLO. For each course a template has been created that provide the learners with information specific to that course. This included links to course materials and pdf. copies of course materials, including the Learner information handbook. In, addition, all communication to learners and Instructors is automated for courses schedule reminders and course joining instructions. All communications are tracked and logged to ARLO.

The CPL Institute maintains software licenses for Airtable software. All team members are responsible for developing and maintaining, participant course evaluation, Instructor course evaluation, Instructor database and training course master database on this platform.

In addition to individual emails The CPL Institute maintains the generic email addresses with assigned responsibility for monitoring.

The CPL Institute email accounts are:

- info@cplinstitute.com - general queries- managed by the operations manger
- support@cplinstitute.com - request from learners, instructor, clients - managed by training administrators
- attendance@cplinstitute.com – receiving completed course sign-in sheets - managed by training administrators
- submission@cplinstitute.com - receiving projects, assignments and extension requests from learners - managed by training administrators
- invoiceus@cplinstitute.com - receives instructor, client invoices - managed by training administrators
- salesteam@cplinstitute.com - internal sales related queries - managed by the sales team.

4.9 Use of Logos and accreditation provider materials

ISO 9001:2015 Clause - Define Scope 4.3, 7.4 Communication, 8.5.3 Property belonging to customers or external providers

As a provider recognised by QQI we are obliged to comply with QQI’s requirements. We understand that if we provide enrolled learners with information which is false or misleading in a material respect, we are committing an offence. The Quality Officer is responsible for ensuring that all references to QQI and the NFQ are clear and accurate and that The CPL Institute uses only the current versions of the NFQ examination Board and the QQI award brand using QQI Brand Guidelines.

As a provider of PHECC accredited course we understand our obligations in respect of using PHECC approved assessment documents and certifications process. The ATIs use of the PHECC logo is addressed in the policy as follows:

“The PHECC logo may be used only by organisations/institutions who are granted approval and are in current good standing, provided that the prescribed text accompanying the logo reflects their status and purpose accurately. PHECC academic recognition indicates a standardised quality of training provision and entitles training institutions to advertise and run PHECC approved courses as well as to award co-branded PHECC certification. PHECC recognition also assures prospective clients that the institution or organisation they are engaged with has reached a sufficiently high standard to have been accredited to the statutory EMS regulator. The appearance of the PHECC logo on third-party materials indicates affiliation, sponsorship, endorsement, certification, accreditation or approval of a particular initiative. It is strictly confined to for this purpose and should not be used to imply any other commercial gain, advantage or opinion.”

4.10 Communication Escalation Process

ISO 9001:2015 Clause - 7.1.6 organizational knowledge, 7.4 Communication

As issues or complications arise with regards to communications it may become necessary to escalate the issue if a resolution cannot be achieved within the team. While escalations are a normal part of operations management, as such, it is imperative that any disputes, conflicts, or discrepancies regarding communications are resolved in a way that is conducive to maintaining the training schedule, training outcomes and ensuring the correct communications are distributed to prevent any ongoing difficulties.

Team members will raise operations issues at the weekly operations meeting. Items that cannot be resolved within the operation of The CPL Institute are escalated to the Global Operations Director during the weekly one-to-one meeting.

Section 5 - Documentation Requirements and Control

5.0 Introduction

ISO 9001:2015 Clause - 7.5 Documented information

This quality manual contains documented statements of our quality policy and quality objectives and references the documented procedures required by ISO 9001:2008 and other documents needed to ensure effective planning, operation and control of our key processes. The level and type of quality management system documentation established for our business is continually reviewed to ensure it remains appropriate for the complexity of the interactions of our core processes and the competence of our employees. Quality management system documents and data exist in hard copy and electronic format.

5.1 Quality Manual Document Control Policy and Procedure

ISO 9001:2015 Clause - 7.5.3 Control of documented information

8.5.2 Identification and traceability

8.5.4 Preservation.

Document Control Policy and Procedure

1. Purpose

The purpose of this policy and procedure is to establish a controlled system for the creation, review, approval, distribution, and revision of documents within the Quality Management System (QMS) to ensure accuracy, consistency, and compliance with relevant standards and regulations.

2. Scope

This policy applies to all quality-related documents, including but not limited to the Quality Manual, standard operating procedures (SOPs), operational policies, Standard Operating procedures, Teaching records, course presentations and lesson plan. It is applicable to all employees responsible for creating, managing, and using these documents.

3. Responsibilities

- **Quality Manager:** Oversees the document control process and ensures compliance with this policy.
- **Document Owners:** Responsible for drafting, reviewing, and updating documents relevant to their department.
- **All Employees:** Required to use controlled documents and report any discrepancies or outdated documents.

Document Creation and Approval

- All documents must be uniquely identified with a title, version number, and date of issue.
Documents shall be drafted by subject matter experts and reviewed by the relevant manager.
- Final approval shall be granted by the Quality Manager or the appropriate manager before release. Described in SOP

- Approved documents shall be stored electronically in a secure document control system and considered uncontrolled when printed.

Document Distribution and Access

- Controlled documents shall be accessible to authorised personnel only.
- Electronic documents shall be stored in SharePoint with version control functionality
- Obsolete documents shall be removed from active circulation and archived in accordance with the document retention policy.
- A document register shall be maintained for controlled document.

Document Revision and Change Control

All quality management system documents are controlled and revised in according to the Control of Documents and Records Procedure (SOP QC 01) which defines the process for:

- Approving documents for adequacy prior to issue
- Reviewing and revising as necessary and re-approving documents
- Ensuring that changes and current revision status of documents are identified
- Ensuring that relevant versions of applicable documents are available at points of use
- Ensuring that documents remain legible and readily identifiable
- Ensuring that documents of external origin are identified, and their distribution controlled
- Preventing the unintended use of obsolete documents
- Ensuring that documents of external origin are identified, and their distribution controlled

7. Document Retention and Archiving

Documents shall be retained for a specified period as per legal, regulatory, or organisational requirements.

Archived documents must be stored securely and be accessible only to authorised personnel. The retention period for each document type shall be outlined in the organisation's Document Retention Policy.

8. Compliance and Audit

Periodic audits shall be conducted to ensure adherence to the document control procedure. non-conformities identified during audits must be addressed through corrective actions. Any violations of this policy may result in disciplinary actions as per company guidelines.

10. Review and Updates

This policy shall be reviewed periodically to ensure its continued effectiveness and compliance with any changes in regulatory or organisational requirements.

Amendments to this policy shall be approved by senior management and communicated to all relevant personnel.

Document Approval

Document Owner: Lorraine Conway, Quality and Compliance Manger

Approved By: Derek Donohoe, Associate Director

Approval Date: 21/03/2025

Review Date: 21/03/2028

The company uses standard forms and online an electronic document management system called SharePoint that is backed up via cloud data centre. Access is restricted by the Associate Director to The CPL Institute staff members.

Documents which are controlled include but are not limited to the following's examples:

- Quality manual
- Procedures
- Contracts and Service level agreements
- Assessment documents
- Learner Course documents
- Standard Operating Procedures

5.2 Control of Records

ISO 9001:2015 Clause - 7.5.3 Control of documented information

Records are established to provide evidence of conformity to the requirements specified by the standard, customer requirements including those of accreditation bodies of QQI, PHECC and IOSH and of the effective operation of the quality management system are formally controlled through the application of the Control of Documents and Records Procedure SOP QC 01.

Records which are controlled include but are not limited to:

- Internal Audit Reports
- Management Review Reports
- Customer Complaints
- Learner records
- Instructor records
- Course presentations, lesson plans and assessment

5.3 Control of Learner Records

ISO 9001:2015 Clause - 7.5.3 Control of documented information

Secure Administrative Systems are in place with up-to-date learner records.

This policy applies to all courses irrespective of the teaching mode, i.e. in-person, blended or fully online.

ARLO is the learning management system software in use. The system facilitates the effective collection, management, maintenance and reporting on learner related information. The following controls are applied.

- Course Administrators and Managers use ARLO as the secure online record system to manage learner records for current use and historical review. All course registrations are managed on ARLO irrespective of accreditation or mode of delivery.
- When learners register with The CPL Institute, a learner record is created and the learner is registered on a course, see SOP 29, Registration of Learners on Arlo – PHECC and CPL Courses and SOP 12, QQI and IOSH Learner Records and registration.

- Access to the system is strictly limited to internal staff, with varying levels of access. Access is control by the Associate Director and an individual ARLO account must be created.
- Each learner record includes a profile, assessment results, academic history and financial record.
- Amendments to information held on the system may only be made by authorised staff members.
- The system supports the development of various reports and support the development and delivery of relevant courses, monitor quality assurance and support continuous improvement.
- The system generates statistical and other reports to meet internal and external information requirements.

Airtable is an online database platform that allows for large volume of information to be stored, filtered and categorised. This system is use for example, to create and store database of Courses and awards and course evaluations.

Microsoft SharePoint is used by the CPL Group for document storage and management. Additional records maybe securely stored on the Microsoft SharePoint CPL group system. These include scanned copies of the learner attendance, consent form and assessment materials. Access is controlled by the Associate Director and only specified members of The CPL Institute have access to the dedicated SharePoint sublocation, access by all other CPL Group staff and mangers is restricted.

5.4 Control of Information and Data – GDPR

ISO 9001:2015 Clause - 7.5.3 Control of documented information

This policy applies to all courses irrespective of the teaching mode, i.e. in-person, blended or fully online.

The CPL Group and subsidiary The CPL Institute operates the information management systems in compliance with GDPR legislation. The CPL Institute manages personal data throughout its lifecycle within the organisation, with data management being a part of all employee’s daily role.

Data Rights Management can be found in Appendix 5.

The following is a list of the data that is collected by employees and sub-contractors of The CPL Institute as part of delivering Courses:

- Name
- PPS Number
- Date of Birth
- Address
- Gender
- Contact information

- Nationality.

This information is collected solely for the purposes of:

- i) Adhering to awarding body requirements,
- ii) Issuing of certification,
- iii) Contacting a learner in the event of further information being required.

Security

All data that is collected is stored securely, with access limited to both hard and soft copies of same. Each employee is provided with a unique account and profile to access the SharePoint network; PC are password protect with a requirement to change every 90 days.

Maintenance and Storage of Learner Files

We maintain learner files for a maximum of six months following certification. The hard copy files (assignments) are then removed from current file storage and placed in file archive for a further 3- year period. After this three-year period of archive storage, we destroy the hard copy records these are then confidentially shredded by a licensed provider. A certificate of destruction is issued upon completion of this. Soft copies are deleted from the system as outlined under the retention schedule.

The CPL Group uses external expertise to assist in data protection legislation. The Data Protection officer function is contracted to

Training in data protection policies and procedures is provided to employees annually. In the event of a data breach, the Breach Management Plan is followed.

How Long Do We Retain Information?

We have developed a record retention schedule for all the personal data we hold. Each retention period varies dependent on the nature and the purpose of the processing.

The main factors which determine retention periods are as follows:

1. How long it is required to perform the task.
2. Any legal requirements to hold onto the data.
3. Any pending legal actions.

Who Do We Share Information With?

We share information for the purpose of course certification and processing with:

- Quality and Qualifications Ireland (QQI)
- Pre-Hospital emergency Council (PHECC)
- Irish Heart Foundation
- Institution of Occupational Safety and Health (IOSH)

- Funding and Referral Agencies including government tendering process, including Skillnets and Education and Training Boards (ETB's)
- Sectoral and affinity Bodies
- External experts

Queries and Complaints

If you are unhappy with the way we handle your personal data and wish to complain, or if you simply want further information about the way your personal data will be used, please contact us at the below:

Data Protection Officer

CPL Recruitment
83 Merrion Square S,
Dublin, D02 R299
Telephone: +353 1 614 6000
Email: dataprivacy@CPL.com

You have the right to lodge a complaint with the Data Protection Commission. To contact the Data Protection Commission, please use the following details:

Data Protection Commission
21 Fitzwilliam Square South
Dublin 2
D02 RD28
Ireland
Telephone: +353 (0)761 104 800
Telephone: +353 (0)57 868 4800
Email: info@dataprotection.ie

5.5 Use of the Personal Public Service Number (PPSN) - QQI only

ISO 9001:2015 Clause - 7.5.3 Control of documented information

8.5.3 Property belonging to customers or external providers

As a unique identifier for individuals, the PPSN is a valuable piece of personal information that must be respected and safeguarded against misappropriation or misuse. We uphold data protection principles about the PPSN and take all reasonable security steps about the storage and handling of the PPSN and associated data. We do not disclose a person's PPSN to anyone, unless we are satisfied that the person making the enquiry is entitled to that information.

Use of the PPSN by The CPL Institute staff members is confined to staff members who need to use it and is redacted except when required for the inputting of learner data on the QQI QBS (the PPSN is used by QQI to uniquely identify individual learners).

We understand that it is an offence for any person or body to request or hold a record of a PPSN unless they are permitted by law to do so.

Section 6 – Operational Planning and Control - Teaching and Learning

6.0 Control of Service Provision - Teaching and Learning

ISO 9001:2015 Clause - 7.1.4 Environment for the operation of processes, 8.1 Operational planning and control, 8.5 Product and service provision

The CPL Institute is committed to providing learners with a high-quality learning experience in a safe training and learning environment, ensuring the highest standards in teaching and learning. We are continually improving the quality of our teaching and learning and associated services. This policy applies to all courses irrespective of the teaching mode, i.e. in-person, blended or fully online.

6.1. Teaching and Learning Policy

The CPL Institute is committed to providing a learning environment that enables learners to reach their maximum potential while achieving the best possible assessment results. This policy outlines our approach to teaching and learning and how our intention to have an ethos that promotes learning and high-quality teaching and learning practices.

We will achieve this by:

- Courses are typically delivered through face-to-face lectures or delivered in person or directly via online platform such as ZOOM. Some courses are delivered by self-paced learning using an eLearning approach.
- The CPL Institute promotes a learning model and ethos that ensures flexibility for adults' learners and recognises that managing learning can be difficult while juggling further education and other commitments in life. Learners are supported through effective timely supports and effective access routes for learners between courses or for progression to other courses in their field of practice.
- The CPL Institute has a learner-centred approach to teaching and learning with course content and assessment strategies that reflects learner needs, the range of learning styles of the learners and the different learning environments both on- and off-the-job.
- We offer learners the opportunity to meet individually and collectively with faculty and/or management. This is on a course-by-course basis and as required.
- We ensure that the modes of teaching and learning we use are appropriate to the course being delivered to ensure that our Learners fully understand the learning objectives, assessment and self-directed learning requirement of their course.
- Teaching methods and delivery are designed to ensure a range of methods are used appropriate to subject matter and learning objectives and include presentations, group work, role play, demonstrations, and practical exercises.
- Teaching methods and delivery are designed to ensure that courses are delivered in keeping with PHECC education and training standards and clinical practice guidelines, PHECC course are designed to ensure that the Knowledge Objectives, Attitudinal Objectives and Skills objectives are clear and understood.
- The teaching and learning strategies for each module and for the course are set out clearly in the course validation documentation and course lesson plans with samples of teaching and learning activities provided for each module.

- We promote a commitment to self-directed and lifelong learning and must be dynamic to reflect ongoing changes for e.g. a change to the First Aid Response instructor standard and in PHECC Clinical Practice Guidelines (CPGs).
- We set out the skills and expertise required for staff involved in delivery of the course at the design stage.
- Our courses are developed with a mix of pedagogical techniques and are peer reviewed to ensure adequate review of the methodology employed.
- Instructors are required to complete feedback forms after each course and evaluate the effectiveness of these methodologies.
- We systematically monitor, review, and evaluate courses and associated activities
- We strive to provide adequate guidance and support systems are put in place throughout the course and Respect and respect the diversity of learners and their needs, enabling flexible learning pathways, i.e., admission, transfer & progression
- We are committed to self-monitoring and continually improving the quality of training and learning.

6.1.1 Learner Admission Policy

ISO 9001:2015 Clause - 8.1 Operational planning and control, 6.0 Control of Service Provision - Teaching and learning

This policy applies to all courses irrespective of the teaching mode, i.e. in-person, blended or fully online.

Access - the process by which learners may commence a course of education and training having received recognition for knowledge, skill or competence required.

The CPL Institute aim to provide a quality further education service that is accessible to all and allows for the acquisition and development of skills and knowledge at all levels. It is the policy of The CPL Institute, as far as practical, to admit all applicants who fulfil minimum academic requirements for it Courses.

If a client books a group of employees onto a course, the client requirement is gathered by the sales team. This is then transferred to ARLO, and a course registration is completed. The course minimum requirements are communicated on our website and on the initial contact and sales stage.

All Courses offered are subject to minimum enrolment numbers and the appropriate Instructor/learner ratio (reference PHECC education standards and IHF requirement).

The following outlines The CPL Institute Policy on admissions:

- There is a place available to be offered, i.e., the course is not full
- We set out minimum entry requirements on the website and in each Course award specification for QQI courses. These are comprehensive, clear and explicit. That the applicant meets the minimum entry requirements. These are summarised below:
 - The candidate is active or working in the area of proposed course of study and has equivalent work/life experience in this related area/discipline/subject. This

is normally equivalent to, or comparable with, at least two years relevant experiential learning. This period is not prescriptive and will be interpreted flexibly as a part of consideration for entry, or

- The applicant’s ability to complete the Course satisfactorily and benefit from it as a career, or
 - Have completed level 4 for entry to level 5 or completed level 5 for entry to level 6, or
 - Applicants who do not fully satisfy the general criteria will be considered and may be admitted if they are able to demonstrate that they are capable of successfully undertaking and completing the Course at the required standard and are able to contribute fully to, and benefit from, the learning experiences delivered within the Course, or
 - Holders of the Leaving Certificate Applied may gain entry QQI FET Level 5 or Level 6 award Courses.
- In addition to minimum entry requirements, non-native English speakers have an English language requirement. EU and Non-EU, non-native English speakers who are applicants to Level 5 and 6, taught Courses are required to be competent in the English language. Learners must have the necessary English language level required to complete the training. This is confirmed by the client to our sales team on course booking. Also, the course confirmation email state that *“You must be competent in the written and spoken language in which the course is being delivered. This is English unless otherwise indicated. The use of a translator is only permitted with prior agreement from The CPL Institute. The translator cannot be a participant on the course.*
 - The applicant learner and employer (as appropriate) agree to abide by our terms and conditions.
 - The principle of equality and inclusivity is central to the implementation of our Admissions Policy.
 - All applicants who seek additional supports or who has reasonable accommodation requests will be catered for as per section 7.2.(Support for Learners).
 - Some courses have specific prerequisites such as PHECC FAR re-certification and Instructor courses whereby the applicant must hold a valid qualification. These are specified in the course entry criteria and verified prior to the course commencement by the training administrators.
 - Applicants who may not be able to demonstrate compliance with the entry criteria may request access by means of Recognition of Prior Learning (see section 7.1.4).
 - The applicant should demonstrate the capacity to successfully participate on the Course for which they have applied. This includes the academic, practical, and work experience (where applicable) elements of the Course.
 - In the event of an application being refused, the applicant is entitled to appeal this decision. Any applicant wishing to appeal a decision may do so by contacting the Training Administrator, who will log the appeal as an action for review. See 7.2.3 Learner Issues/Customer Complaints/Rechecks and Appeals

Subject to meeting the above requirements, places are offered on a first come first served basis along with our terms and conditions. Course enrolment is considered complete when all information and any supporting documentation requested has been submitted by the applicant and successfully inputted into our ARLO learning management system.

6.1.2 Learner Progression and Transfer Policy

ISO 9001:2015 - 8.1 Operational planning and control

Transfer - the process by which learners may transfer from one Course of education and training to another Course having received recognition for knowledge, skill and competence acquired: and

Progression - the process by which learners may transfer from one Course of education and training to another course.

Courses at The CPL Institute are aligned to either QQI at the appropriate level of the National Framework of Qualifications (NFQ), IOSH, IHF or PHECC accreditation body requirements. Procedures for admission, transfer, progression and recognition are in line with the national legislation

The CPL Institute is committed to non-discrimination, diversity in its learner body, and the protection of the dignity of the learner at all stages in the learner lifecycle from application to graduation for major award. It is the policy of The CPL Institute, as far as is practicable, to admit all applicants who what want to achieve in further education and meet the minimum requirements for its courses and Courses.

We are committed to implementing Section 56, Part 4 of the Qualifications and Quality Assurance (Education and Training) Act 2012. Progression is defined by the Act as the process whereby a learner may transfer from one Course of education and training to another Course, where each Course is of a higher level than the preceding Course.

It is our policy to do all we can to facilitate learners gain access to the Courses we offer, transfer to other Courses/providers and progress to courses leading to awards at higher levels of the NFQ. Learners who successfully complete a course leading to an award with The CPL Institute can progress to courses at a higher level on the National Framework of Qualifications NFQ, IOSH, IHF, or PHECC approved courses.

We allocate places on courses based on objective criteria in a fair, transparent and consistent manner. To ensure this we provide information to applicants and learners regarding Access, Transfer and Progression and help them make informed choices regarding their choice of Course. Information on access, transfer and progression is available in our Learner Information Sheet and on our website or by contacting one of our Training Administrators. Information on minimum entry requirements for each Course is also readily with the advertise Course. At Induction, our instructors explain applicable transfer and progression routes, the next level available and how this links forward to higher levels within the framework of the NFQ

As the courses we offer are usually of a short-term duration, typically transfer queries are addressed by the Training Manager on an individual basis.

QQI/NFQ Transfer and Progression

The CPL Institute offers awards on the National Framework of Qualifications. The National Framework of Qualifications (NFQ) defines the relationship between awards. This contributes to improved transfer and progression. The NFQ is based on the European Credit Transfer System (ECTS) which allows for transfer and progression:

- between levels
- between award-types at the same level
- between named awards

The CPL Institute Courses are normally divided into modules. Modules are sub-Courses within Courses. A module is a rung on a progression ladder. Typically, the National Framework of Qualifications level for modules increases as a Learner progresses through successive stages of a Course. Full-time Learners study all the modules in a stage in parallel, while part time Learners may study as little as one module at a time. Our modules are usually studied part time.

Learners may apply for permission to transfer to another Course. Transfer applications, which must be made in writing, should be submitted to the Training Manager, who will process the application.

While every effort will be made to allow adequately qualified learners to change Course, it will not be possible to permit a transfer into a Course which already has a full complement of learners.

Learners who are being considered for a transfer to another Course, should register for and attend the Course to which they were admitted. In no case may learners register for a Course until their application to transfer has been formally approved by the Training Manager.

The CPL Institute has adopted an approach based on the principle that Learners achieving an award are eligible to progress to a Course leading to another award at the next level up where there is such an award in the same or a related field of learning and may be eligible to progress to a higher level than that. At the same time, where there is not an award at a higher level in the same or a related field of learning, the framework concept implies that Learners achieving an award are eligible for transfer to a Course leading to another award at the same level.

Where Courses are organised in stages, a Learner, to be eligible to progress to a particular stage, is normally required to demonstrate achievement of the minimum intended learning outcomes of all the preceding stages.

6.1.3 Recognition of Prior Learning (RPL) Policy

The CPL Institute will assist them Learners to gain entry to a Course of education and training, to be granted credit or exemptions and/or receive a QQI award by recognising the knowledge, skills and competencies they already have acquired.

The CPL Institute actively promotes the principles of lifelong learning, including the recognition of learning wherever and whenever it is achieved; in this regard, it is committed to enabling more inclusive approaches for mature and lifelong learners at different stages of their personal and professional lives, who wish to undertake their studies on a full or part-time basis.

The CPL Institute acknowledge prior learning received at another provider or from another awarding body which will mean that the learner may receive recognition of skills and knowledge already acquired and/or certified or prior learning or experiential (non-certified), which can then go towards certification for the Course of study which is leading to a Major, Minor or Special Purpose award.

This prior learning can be recognised on the National Framework of Qualifications and may entitle the applicant to:

- Admission to a Course or course of study.
- Exemptions from some components of a Course.
- Exemptions from some components of a Course which duplicate the learning an individual has already acquired.
- Credits towards a qualification.

Where prior certificated learning is the basis for RPL, the learner is required to provide the relevant syllabus and a transcript of results and Certificate.

The CPL Institute reserves the right to seek supporting evidence from the training provider/education institution referred to, in the application and where appropriate seek other supporting reference documentation from an employer or referee.

Only when The CPL Institute is completely satisfied that the learner meets the criteria, that an exemption will be granted. Exemptions may be granted at any stage of a Course.

Evidence of learning must be presented by the applicant in the form of official transcripts of results and formal syllabi accompanied by relevant supporting documentation.

Recognition of Prior Experiential Learning (RPEL) Process

This involves the awarding of credit for learning from experience. The process of RPL is acknowledgement of a individual's current skills and knowledge acquired through previous education and training, work or life experience. It allows for both formal and informal learning. There are three types of RPL:

1. Uncertified
2. Certified
3. Experiential

In this process, the candidate must demonstrate that the learning outcomes have been achieved by producing a portfolio of evidence to support the claim for access, exemption, or

credit (in some instances the Training Manager or the assessor may decide to use an alternative method of assessment, e.g., project/assignment or examination). All applications will be reviewed by The CPL Training Manger and/or a suitably qualified subject matter expert such as a PHECC Tutor or independent Instructor. Supporting documentation and authentication of evidence of work-related experience may be required from an employer.

The portfolio of evidence must be written in such a way that the matching of the knowledge, skills and competencies of the module learning outcomes to the prior learning and is clearly demonstrated. As part of the process the learner may be interviewed by an appointed tutor/assessor.

Types of Evidence required to facilitate RPCL/RPEL requests includes:

- Interview may be held with Course instructor a nominee.
- Portfolio of work which may include completed assessment items from previous study.
- Authentication of evidence of work-related experience by the applicant's supervisor or employer, reference, letter of verification.
- Description of each module studied (this should include syllabus, module learning and the number of contact hours)
- Official Certificates and Official transcripts of results.
- Published work, self-study details, project plans, designs, completed documents
- Work history, job descriptions, responsibilities, professional accreditations
- Descriptions of courses, cert of attendance and sample material.
- Method of assessment of each module studied (this should include a breakdown of assignments, exams and any other assessment required for completion of the unit).
- A gap analysis is performed on module learning outcomes (MLOs) for the target Level.
- Supplementary assessment tasks or challenge test - oral, written or practical.
- A list of required evidence is compiled (e.g., CV, Certificates, References, Evidence of work completed etc.).

All supporting documents must be issued by the relevant provider or institution and properly certified as genuine copies. These supporting documents should be accompanied by English translations if not originally issued in English.

The CPL Institute reserves the right to seek supporting evidence from the named education providers referred to in the application and where appropriate to request reference documentation from an employer or referee.

An evaluation of an application for RPL may also involve a formal interview as appropriate. We maintain the right to refuse RPL applications.

Note: RPL for PHECC award is limited to PHECC guidelines.

6.1.4 National and International Practice

In relation to Course approved by QQI, The CPL Institute offers Further Education Training Courses in line with the National Framework of Qualifications.

To enhance our educational provision and keep up to date with national and international standards of practice:

- Engage with awarding bodies.
- Maintain membership of representative bodies and organisations.
- Provide staff members with opportunities to engage with peers.
- Engage in a variety of knowledge sharing activities with industry stakeholders
- Attend seminar/briefings on best practice
- Maintain CPD for all staff and align to new practices

Learners where English is not their first language are admitted to The CPL Institute Courses and given support if there is a language barrier. The Recognition of Prior Learning (RPL) in relation to international qualifications is referenced against the NARIC service offered by QQI and other QQI publications which demonstrate international systems equivalency in relation to the NFQ.

Given the nature of Courses offered by The CPL Institute, continual reference with regards to Course and systems updates is made to publications and learning material. Learning Material is updated with reference to material published by from the HSE, DOH, HIQA (Health Information and Quality Authority), other relevant regulators (e.g., Health and Safety Authority, Data Protection Commissioners,) as well as to QQI policy and guideline updates.

6.1.5 Learning Resources

The CPL Institute provides high quality course reference handbooks, topic specific handouts, presentations and other learning materials that are regularly updated. The materials are structured to cater to the needs of adult learners, through the provision of separate sections that support each learning outcome. In addition, all learners receive a digital copy of the Learner information handbook.

Learners on fully online programmes have access to a digital library, and other resources applicable to their course. Learning resources are provided either digitally through the LMS, directly by email or physical copies are provided for in person courses.

The CPL Institute Instructors encourage self-directed study and learning through a focus on the learning outcomes which are in the course reference handbooks or learning material. The learners must complete some self-directed learning activities and in turn, are covering the learning outcomes.

If required, Learners have access to a Instructor to support them with their studies. Tutorial supports are provided through a variety of media including, e-mail, telephone and face-to-face. Any or all the following areas may be discussed during tutorials:

- Revision of study topics.
- Assignment preparation, guidance and feedback.
- Additional issues that may arise relevant to the learning process e.g., Module Material.

Group activities are encouraged (as appropriate and specified in the lesson plan) to provide learners with the opportunity to collaborate with other learners and develop their understanding and appreciation of the learning outcomes associated with the module. Some of this is done through online media.

6.1.6 Contingency Planning

All our Training Administrators are cross trained in each other's roles and can fill in for one another if needed, or appropriate designate appointed to deal with any issues that may arise in the event of a planned or unplanned absence. Administrator training includes all course planning, daily operation and system management including trouble shooting of eLearning systems.

Instructors are required to let a Training Administrator know at the earliest possible opportunity if they think they might be delayed or absent. We utilise ARLO to identify appropriately approved Instructors in place that we can utilise if any of our instructors are unavailable at short notice. In the case of the unavoidable absence of an instructor for any reason, a replacement Instructor from our panel of Instructors who is suitably qualified is contacted by the Training Administrator and asked to cover for the absence. Only in exceptional circumstances do we cancel, postpone or reschedule a course or make a change to the timetable. Our objective is to conduct all Courses without interruption and avoid causing any disruption or inconvenience to our learners. SEE RPL 6.1.3

6.1.7 Monitoring Teaching and Learning

ISO 9001:2015 - 7.1.5 Monitoring and measuring resources, 8.1 Operational planning and control, 8.4 Control of externally provided processes, products and services

The CPL institute is fully committed to monitoring the learning experience on an ongoing basis with a view to improving the quality of its teaching and learning. In addition, a process of objective review and continuous improvement seeks out opportunities to improve the quality of delivery across our training and education programmes.

Course delivery is monitored in a way which allows for the identification of needs and the modification and adjustment of the programme and the delivery method as appropriate. Ongoing monitoring and periodic review of a programme is used as an opportunity to evaluate that programme and ensure that the programme remains appropriate, and that the programme achieves the objectives set for it and responds to the needs of learners.

To support ongoing compliance and instructional quality, a qualified and approved PHECC/IHF/QQI instructor will be observed and monitored at least once during each approval cycle. This is every 2 years for PHECC and Irish Heart Foundation awards and 3 years for QQI awards. In addition to the internal course monitoring programme, all Irish Heart Foundation Instructors are monitored under the Irish Heart foundation validation process. This is a further risk mitigation.

The monitoring may be conducted, in person onsite, or online as appropriate. This is a condition stipulated in the instructor service level agreement. All new instructors are subject to monitoring for a minimum of their first courses and additional internal and external verifications of course paperwork and assessment process.

This observation focuses on verifying that:

- Courses are delivered with an appropriate course material and PHECC/QQI/IHF/IOSH assessment material is used for assessment
- Correct assessment procedures and techniques have been applied. - signed student attendance and assessment result records. - student and faculty feedback.
- Courses are delivered with an appropriate balance between presentations, discussion, skills demonstrations, practical work, and blended learning.
- Meeting the learning outcomes set out by the accreditation body and the CPL Institute.
- Operating in compliance with the provider's Quality Management System (QMS)

For PHECC/IHF awards the following equipment and maintenance requirements are monitored and verified:

- Instructors verify that the course equipment is clean and in working condition before the course
- Appropriate equipment is available in sufficient quantities (as outlined in the instructor manual) and in good working order at each course
- Equipment serviceability is documented and monitored
- It is the responsibility of the instructors to follow the appropriate decontamination of equipment according to the manufacturer's instructions
- Proactive feedback from learners and faculty sought regarding equipment available and its suitability/quality.
- Manikin serviceability and records of servicing is maintained and monitored. Defined system in place to update equipment
- IT Resources.

The monitoring process includes the completion of a structured observation checklist, and any identified issues are addressed through targeted feedback, additional support, or retraining as needed. This ensures high standards of course delivery, learner safety, and regulatory compliance across all accredited programmes offered.

The Associate Director and the Training Manager will be responsible for the day-to-day monitoring of staff and Instructor performance. Review of contractor's performance forms part of the continuous monitoring of the quality assurance process.

A renewal process is in place for the continued renewal of all Instructors/faculty members and is specified in 3.4 Recruitment, Induction and Revalidation of Instructors and The CPL Institute Instructor Service Level Agreement.

6.1.8 The CPL Institute Academic Integrity Policy

ISO 9001:2015 - 7.1.4 Environment for the operation of processes, 7.1.5 Monitoring and measuring resources, 8.1 Operational planning and control.

Academic misconduct is any action that results in a learner having an improper advantage in relation to their assessment(s) or deliberately disadvantages other learners. Examples of academic misconduct include cheating in exams, plagiarism, presenting falsified or improperly

obtained data or being assisted in the presentation of assessment tasks. It can be committed intentionally or accidentally. Learners are responsible for conducting their studies honestly, ethically and in accordance with accepted standards of academic conduct and have a duty to present only their own work for assessment.

Any form of academic misconduct is unacceptable. Cases of alleged academic misconduct are managed in accordance with this policy.

The CPL Institute operates a robust assessment process and ensures that all learners are assessed using fair and consistent assessment procedures. As part of this process, identification of academic misconduct is central to our assessment processes, and assessments are only awarded marks when the learner evidence submitted is the original work of the learner.

The CPL Institute upholds the principle of academic integrity, whereby appropriate acknowledgement is given to the contributions of others in any work, through appropriate internal quotes, paraphrasing and citation references. Learners should be aware that good referencing is integral to the study of any module and part of good educational practice.

What is academic misconduct?

The CPL Institute understands academic misconduct to be the inclusion of another person's writings or ideas or works, in any formally presented work (including essays, assignments, projects, reports, examinations, oral, poster or slide presentations) which form part of the assessment requirements for a module or programme of study, without acknowledgement of the original source of the material through appropriate referencing.

Academic misconduct is a form of academic dishonesty, where ideas are presented falsely, either implicitly or explicitly, as being the original thought of the learner.

The presentation of work, which contains the ideas or work of others without appropriate referencing and citation in whole or in part (other than information that can be generally accepted to be common knowledge) is an act of plagiarism.

It can include the following:

1. Presenting work written by a third party, including other learners, friends, family, or work sourced through internet services or using an Artificial Intelligence (AI) service such as Chat GPT.
2. Presenting work copied extensively with only minor textual changes from the internet, books, journals, an Artificial Intelligence (AI) service such as Chat GPT or any other source.
3. Improper paraphrasing, where a passage or idea is summarised without due acknowledgement of the original source or copying directly to work.
4. Failing to include references of all original sources and not identifying resources used.
5. Representing collaborative work as one's own and not referring to the team activity.

Plagiarism is a serious assessment offence and although plagiarism may be unintentional, it is defined by the action rather than the intention. All learners must therefore ensure that they complete consistent checks on evidence being submitted for assessment and marking to ensure that the work is their own and appropriate sources are cited as such.

Learners are responsible for being familiar with The CPL Institute policy on plagiarism and are encouraged, if in doubt, to seek guidance from their instructor or from the support team at The CPL Institute. Plagiarism is a serious academic issue, and The CPL Institute will investigate all alleged instances of plagiarism thoroughly.

Securing Assessment Integrity

The CPL Institute has systems and processes in place to ensure the security and integrity of assessment processes, assessment materials, instruments and records. Assessment materials refer to any documentation associated with the planning, conducting and concluding of the assessment process. Examples of assessment material include (but are not limited to):

- Assessment briefs
- Examination papers
- Solutions/Marking schemes/Model answers
- Practical/Skills Demonstration instructions
- Examination scripts
- Learner assessment evidence refers to any assessment evidence (hard copy, soft copy, artefacts, etc.) which forms part of a module or courses assessment.
- Assessment records include paper documentation, certification records, learner records, results sheet, electronic records/files, databases, photos, examination.

The following applies to the management of assessments:

- The CPL Institute Policy on plagiarism and associated procedures will be published, available widely and accessible to all Instructors and Learners.
- All assessments briefings will contain the instruction to use appropriate referencing and citation.
- Educating learners about what constitutes academic integrity. As part of the induction process, learners will receive info on academic integrity.
- Assessments will change occasionally for each module and/or will be rotated on some modules.
- Where assessments are being carried out at practical classes or demonstration of skills, these assessments will be recorded and periodically reviewed by Instructors, internally or by external examiner to ensure consistency of marking. Each learner will identify themselves on the videos as part of their introduction.
- Learners are required to confirm in writing that all assessment work submitted is their own. When assessment evidence is being submitted, the learner is required to complete an assignment submission form. Assignments are **not** accepted if they are not accompanied by the assignment submission form.
- Assignment evidence submitted via email is receipted by the training administrator. Instructors advise learners to retain a copy of all assignments submitted for reference.
- Exam that are conducted online are proctored by the instructor and the learners camera must remain on at all time.

Suspected Academic Misconduct

Where an instructor suspects assessment malpractice this will be referred to the Training Manager, taking account of the specific context and nature of the case, any of the following courses of action may be followed:

- All material related to the alleged malpractice should be made available to the Training Manager.
- Alleged cases of plagiarism should be examined carefully to establish the facts and relative context of the alleged offence considering the nature and extent of plagiarism as well as the experience of the Learner.
- In all cases of referral, the learner should be informed that their assignment or examination script is under scrutiny as an alleged instance of plagiarism. The Training Manager will outline the grounds of suspicion, a copy of the piece of work and any supporting evidence will be provided.
- Where two or more learners present identical pieces of work, both learners will be informed and their work reviewed. If the learner who plagiarised admits to it, the other learners' assessment work is marked as normal while the plagiarised work receives a zero mark and must resubmit.
- If the outcome of this investigation is that there is no case to answer, then the case is closed, and recorded.
- If required, the learner will be contacted directly and may be invited to attend meeting.

The learner is requested to bring all evidence of their work to give them the opportunity to demonstrate that the work presented is their own original work. At the meeting, the concerns are raised with the learner and the learner is given a fair opportunity to respond. A record of the meeting is maintained.

- The Learner is notified in writing of the outcome including the penalty, if applicable, within 5 working days.
- The learner will be provided with advice about correct referencing and how to avoid plagiarism in the future. The Learner may be required to resubmit the work without any further penalty.
- The Learner has the right to appeal the decision and should do so within five working days of receiving the outcome notice. The process in place for appeals is further outlined in the learner information handbook under Learner Issues/Customer Complaints/Rechecks and Appeals.
- If the learner does not engage with the process, by not responding or by refusing to attend an interview, the learner will be deemed unsuccessful in the assessment.

A judgement is made on the required penalty for a plagiarism offence based on the following criteria:

- a) History of the learner and whether the case is a first, second etc. time offence.
- b) Amount of plagiarism involved (the percentage of the document plagiarised).
- c) Level of Award and Credit weighting.

d) Value of the Assessment/Assignment.

Plagiarism will not be tolerated by The CPL Institute. If an instructor's/assessor's suspicions confirm that plagiarism has occurred, the learner will be informed and advised of the appropriate actions that will be undertaken:

- Resubmission of the learner work.
- Re-examination of all assessment submissions.
- Removal from programme for continued breaches.
- Recorded on the learner's file.

All queries in relation to our Academic Integrity Policy should be addressed to our Training Manager at support@theCPLInstitute.ie.

6.2 Supports for Learners

ISO 9001:2015 - 8.2 Requirements for products and services, 8.1 Operational planning and control

The CPL Institute is committed to delivering Courses with a comprehensive support system that facilitates effective learning and enables learners to reach their maximum potential while achieving the best possible results. The CPL Institute promotes a learning model that ensures flexibility for adults' learners and recognises that managing learning can be difficult while juggling further education and other commitments in life. Learners are supported through effective timely supports and effective access routes for learners between Courses or for progression to other Courses in their field of practice.

To provide learners with additional support needs where required so that they can achieve assessment of the standards being assessed we practice the following:

- Learners may identify to staff any additional support needs when applying for a Course.
- Individual meetings with learners to assess additional support needs and agree appropriate accommodation(s).
- Monitoring and review of resources to ensure they are fit for purpose and readily accessible.
- Blended or online delivery will be supported by a consistent, reliable and scalable IT infrastructure and a range of learning resources and software
- Ensure learners are fully informed of the supports and resources available to them. An email address is provided: support@theCPLInstitute.ie
- Provide sufficient pre-entry information on the content, assessment and demands of each Course to enable potential learners to make an informed choice about their participation on a Course.

- Ensuring learners have access to Instructors and administrative support throughout their Course. Our instructors are available to meet with our learners on a one-to-one basis if a learner has a particular concern or an issue they wish to raise in confidence. This can be conducted in-person or via Zoom/Microsoft teams.
- Support from a scribe or a reader to complete examinations/assessments, rest periods or additional time allocated to complete assessments.
- Providing reasonable accommodation to ensure that learner needs are met, such as access and physical modifications to the training location e.g., seating arrangements
- All courses on our LMS adhere to WCAG 2 standards (<https://www.w3.org/WAI/standards-guidelines/wcag/>) and include audio narration
- Support the learners in obtaining work placements
- In addition, when a user launches the course there are option available to modify the following:
 - AI narration
 - Volume
 - Playback speed
 - Video setting for capture and transcript
 - Font size
 - High contract and reduced motion.

In addition, to direct support with Course content, we recognise that learners sometimes need help and guidance on administrative or personal issues e.g., delay an assignment because of sickness or cancel enrolment and postpone it to another date.

We recognise that exceptional circumstances may arise where learners may not be able to submit assessments/projects etc on the due date/attend an exam e.g., domestic crisis, death of a close relative. Where this arises, learners are asked to contact the Training Administrator directly to discuss the circumstances and apply for compassionate/special consideration. A process is in place to allow learners to apply for an extension to project and assignment deadlines without penalty.

It is the policy of The CPL Institute to consider learner supports at the Course review and development stage so that we can provide an effective learning environment specific to the Course needs and requirements. We ensure that the premises we use for training delivery are accessible, comfortable, well-serviced and maintained, fit-for-purpose and conducive to learning. Instructor and Learner course evaluations are all considered as part of the review process so that we can continually improve are Courses and the learning experience provided.

6.2.1 Reasonable Accommodation and Diversity Policy

ISO 9001:2015 - 7.1.4 Environment for the operation of processes, 8.2 Requirements for products and services

The CPL Institute is committed to ensuring that learners have access to all Courses. We are committed to equality of opportunity for learners, staff and stakeholders and take a pro-active approach to accommodating diversity.

We recognise our responsibility to learners who have a disability/specific need, and we aim to provide reasonable accommodation when it is practicable and feasible to do so (an accommodation is a modification of classroom, or an evaluation procedure designed to address a particular need).

A Reasonable Accommodation is any action that helps to alleviate a substantial disadvantage due to a disability and/or a significant ongoing illness.

As per The Equal Status Act 2000: “Discrimination includes a refusal or failure by the provider of a service to do all that is reasonable to accommodate the needs of a person with a disability by providing special treatment or facilities, if without such special treatment or facilities it would be impossible or unduly difficult for the person to avail himself or herself of the service.”

We invite learners who have any additional needs/requirements to speak to either an instructor or Training Administrator in confidence before the scheduled course date and where practicably will do our best to accommodate special requirements and assist those who may need special assessment arrangements – e.g., additional time or the provision of special equipment.

In our course confirmations to learners, we also state *“The CPL Institute will make every effort to ensure that courses are inclusive. However, we require notification if you have any injuries, illnesses, physical disabilities, learning difficulties, or if you are pregnant, to ensure we can assist you effectively.”*

Our specific Policy on Equality, Diversity, Inclusivity, and Accessibility in Learning and Teaching and anti-harassment and bullying and our Anti-Bullying & Harassment Policy for The CPL Institute are available in Appendix 7.

6.2.2 Learning resources - Assuring Physical Premises, Equipment, Technology and Facilities

ISO 9001:2015 - 7.1.3 Infrastructure, 7.1.4 Environment for the operation of processes

8.1 Operational planning and control, 8.4 Control of externally provided processes, products and services

We ensure that the premises, equipment, and facilities we use for training are fit-for-purpose, suitable for our learners and our Courses and are maintained in such a manner to ensure the health, safety and comfort of Instructors and learners. We have an up-to-date Health and Safety Statement, and Risk Assessment for The CPL Institute premises in Dublin.

When we use off-site venues for Course delivery, we either use conference facilities in four-star hotel as a minimum standard or clients’ own premises. In using such venues, we have a checklist of criteria which the Training Administrator verifies that the venue meets prior to booking.

The training venues we use must be accessible for all, comfortable, well-ventilated, quiet, clean, safe and well serviced. Venues must also be able to provide suitable space for training equipment and supports, be served by public transport and have parking facilities. Our

instructors are required to familiarise themselves with the venue prior to the training course commencing and to advise our learners regarding welfare facilities, housekeeping, safe access and exits, including fire assembly points, at induction.

We evaluate the venues we use as part of our ongoing monitoring and evaluation and ask both learners and Instructors for their feedback in their evaluation forms. Instructor and learner feedback forms assess the suitability/satisfaction with the choice of venue. This feedback is used to inform us for repeat bookings. Instructors are asked to inform the Training Administrators of any issues with room maintenance or technical equipment as soon as the issue is identified. Facilitates requirements are also included in our on-site compliance monitoring processes and are included as part of an external audit at random to verify criteria are being met.

Our premises selection criteria for each training venue reflects course requirements and the specific needs of our learners. When we use external premises for our public courses we request and review a copy of the Premises Insurance and Safety Statement.

All instructors are responsible for ensuring that their training venues are assessed and for confirming the suitability of the venue same to The CPL Institute by completing a Training Venue Inspection Checklist for each course they deliver. In addition, Instructors delivery PHECC/IHF course must complete and confirm a checklist of the equipment used during the course.

Blended and Fully Online Technology

The aim is to make use of technology available to assist in the development of effective training interventions that achieve our strategic objectives, by imbedding appropriate training provision in our organisation. The in-person VLE takes into consideration a changing learning environment for adult learners driven by stakeholder requirements.

Infrastructure and Resources to Support High-Quality Blended Learning

To ensure the successful implementation of blended learning, it is essential that the required infrastructure and resources are thoroughly understood, carefully planned, and routinely monitored and evaluated. A well-structured blended learning environment requires both physical and digital components to work seamlessly together to provide an effective and engaging learning experience for students and staff. Institutions must invest in comprehensive planning and continual assessment to ensure their infrastructure supports the evolving needs of learners.

The first key component of a robust blended learning infrastructure is **technology infrastructure**. This includes ensuring that there is reliable, high-speed internet connectivity available for remote learners. A secure and scalable Learning Management System (LMS) must be in place to deliver content effectively and support interactions between learners and Instructors. Currently the CPL Institute uses a mix of Learnupon and Astute. Cloud-based platforms should be utilised to provide flexible access to learning materials, allowing students to engage with their coursework anytime and anywhere. Additionally, virtual classroom tools such as Zoom, Microsoft Teams, and other collaborative software are integrated to facilitate real-time interactions and enhance the blended learning experience.

The CPL institute is committed to supporting the learning environment by various software solutions that facilitate content creation, delivery, and collaboration, such as multimedia tools,

discussion forums, and assessment platforms. To ensure a secure digital environment, we implement robust security measures, including firewalls, encryption protocols, and regular data backups, to protect sensitive learner information and prevent unauthorized access. This is provided by the parent group CPL IT department and ensures a secure digital environment though the group extensive IT and cyber security protocols.

Support services also play a vital role in maintaining the quality of blended learning. A dedicated training administrator is available to troubleshoot technical issues, ensuring minimal disruption to the learning process. Instructors and learners receive comprehensive information to familiarize themselves with the tools and platforms used in blended learning. Regular feedback collection mechanisms are employed to gauge user satisfaction and identify areas for improvement.

Furthermore, monitoring and evaluation are essential to maintaining the effectiveness of the blended learning infrastructure. Data analytics are leveraged to track student engagement levels, course completion rates, and overall learning outcomes, providing valuable insights for continuous improvement. Regular feedback from learners and instructors is reviewed to ensure that the blended learning environment remains responsive to their needs and expectations.

Verifying the Identity of Learners

Ensuring the integrity and credibility of blended learning requires the CPL Institute to establish reliable methods for verifying the identity of learners. Effective identity verification processes help prevent academic fraud, uphold assessment standards, and create a trustworthy learning environment. A range of technological and procedural measures are employed to confirm that learners engaging in online activities are indeed who they claim to be.

The first approach to verifying learner identity is user authentication. This involves requiring students to use secure login credentials, such as a unique username and password, to access the learning management system.

Another effective method for identity verification is through proctored assessments. Live monitoring is conducted to ensure that students are taking assessments independently and without unauthorized assistance. The proctoring of examinations is conducted in real time by the instructor. Exams in blended learning are conducted by provision of a secure link to the individual, provided at the exact time of the examination and is always conducted with cameras on. The exams are submitted directly to a data base, Airtable. The instructor has no access to the submitted exam. These are sent independently to the instructor by the administration team for marking.

Reliability and Scalability

For blended learning initiatives to be successful, the infrastructure must not only be reliable but also scalable to accommodate the evolving needs and align with our strategic goals. Reliability ensures that the blended learning environment functions consistently without disruptions, while scalability allows the system to grow in response to increased demand and changing technological requirements.

Reliability in blended learning infrastructure is achieved through several key measures. Ensuring system uptime is critical, as students and staff require 24/7 access to learning resources and communication tools. The CPL group have robust business contingency plans in

place, including regular system maintenance and disaster recovery protocols, to minimise downtime and data loss. Furthermore, compliance with national and international standards regarding data security, accessibility, and academic integrity is crucial to maintaining trust and operational efficiency.

In terms of scalability, the CPL institute has planned for future growth by adopting flexible and adaptable learning solutions. Capacity planning involves assessing current and projected student numbers to ensure that the infrastructure can accommodate increasing demand. Our current provision meets current and projected needs.

Staff training and professional development are also essential to ensuring the successful scaling of blended learning initiatives. Instructor and support staff must be equipped with the necessary skills and knowledge to manage and utilise the evolving technologies effectively. Ongoing training programs are provided to keep them updated on new tools, teaching methods, and best practices.

In conclusion, achieving a high-quality blended learning experience requires us to invest in a well-planned and continuously monitored infrastructure. By ensuring the availability of robust technological resources, implementing effective identity verification measures, and maintaining reliability and scalability in line with strategic goals, the CPL institute can create a learning environment that is accessible, inclusive, and future-ready.

6.2.3 Learner Issues/Customer Complaints/Rechecks and Appeals

ISO 9001:2015 - 8.1 Operational planning and control, 8.7 Control of nonconforming outputs

This policy applies to all courses at The CPL institute irrespective of the modes of teaching delivery, i.e. applies equally to Classroom, blended and fully online formats. We facilitate learners and customers who wish to appeal an assessment result which they consider to be invalid or unfair or who wish to make a complaint about any aspect of our assessment process or services. A complaint can be made informally to any member of staff, who will discuss the complaint with the learner and attempt to resolve. Formal complaints may be made via email.

Re-check means the administrative operation of checking (again) the recording and combination of component scores for a module and/or stage.

Review means the re-consideration of the assessment decision, either by the original assessor or by other competent persons or a committee. Learners are required to state the grounds for the requested review. The grounds for review will normally be that the learner suspects that the assessment was erroneous in some respect.

A **complaint** is an expression of a concern that a particular assessment procedure is unfair or inconsistent or not fit-for purpose.

The following principles underpin our appeals/complaints process:

- It is designed to be accessible and learner-focused; easy to understand and implement for the learner.
- It is a transparent process where appellants are given clear reasons for the decisions reached.
- Appeals/Complaints/Concerns are resolved at the earliest possible opportunity.

- The process is based on the principles of natural justice and gives learners the opportunity to voice their concerns in writing and in person as appropriate, giving access to the evidence to all parties and treating all documentation confidentially.
- Appeals provide an important source of feedback for the further development and supports improvement.

Assessments Appeal Process:

Learners are informed about the process at the beginning of a course and our policy is available on the website.

Learners that are being registered for a QQI award are notified of their provisional results in advance of the final submission to QQI. Learners have 10 working days to appeal the result from when they receive their provisional results. If no requests for further information or appeal are received, the learner's results are submitted to QQI, and the learner will be certified.

All learners (including PHECC, IHF, IOSH and CPL Institute certified courses), if unsatisfied with the course result, may make an informal appeal on the day of assessment. The instructor will provide the learner with feedback on the day and address any concerns.

A formal appeal, if required, should be requested in writing stating the grounds for appeal. This is typically done by email.

If the learner wishes to see the assessor's feedback, we email out their relevant assessment material with the examiner's comments on the marking sheets.

Complaints Process:

Any applicant wishing to make a complaint or appeal a decision (either access, assessment or serviced based) may do so by contacting the Training Administrator via email at support@theCPLinstitute.ie. This will be logged for action, escalated as required, investigated and be managed in accordance with our procedure for managing formal complaints (See SOP 02, Non-Conformance, Appeal and Customer Complaints).

When the investigation is complete the learner/customer will be notified of the outcome in writing. Corrective action identified will be recorded and tracked for completion. These will inform our continuous improvement cycle.

A response will be issued by the Training Manager within 14 days from acknowledgement of the complaint.

Course Evaluation feedback is further described in section 9.2, course evaluation.

6.2.4 Protection of Enrolled learner

ISO 9001:2015 - 8.4 Control of externally provided processes, products and services

The CPL Institute has learner protection in place for all learners who enrol on validated Courses in accordance with the Qualifications and Quality Assurance (Education and Training) Act 2012. The arrangements are in the form of insurance which will provide learners with refunds should the organisation cease to trade.

The CPL Institute Training recognises that exceptional or unforeseen circumstances may arise outside of current contingency arrangements that require a training course to cease prematurely. If such a situation arises learners will be offered an alternative date in order to complete the training course or have their moneys rebated.

Section 7 - Assessment of Learners

7.1 Assessment of Learners Policy

ISO 9001:2015 - 8.3 Design and development of products and services, 8.4 Control of externally provided processes, products and services, 8.5 Product and service provision

It is the policy of The CPL Institute that all learners should receive fair, transparent and consistent assessment, irrespective of learning mode, i.e. face to face, blended, fully online, that satisfy external awarding body requirements, and The CPL Institute internal quality standards, this is a fundamental quality objective. This policy applies to all courses at The CPL institute irrespective of the modes of teaching delivery, i.e. applies equally to classroom, blended and fully online formats.

The CPL Institute policies and procedures in relation to the assessment of learners are informed by QQI's Assuring Assessment, Guidelines for Providers (2013). In addition, reference is made to QQI's Core Statutory Quality Assurance Guidelines, Sector Specific Quality Assurance Guidelines for Independent/Private Providers (both published April 2016) and PHECC Education and Training standards and PHECC Responder Handbook, 2019. IFH requirements are detailed in the training Reference Guide for Training Site Coordinators.

Learners will be made aware of the methods of assessment and their responsibilities for achieving and demonstrating the required knowledge and skills in advance of any assessment event taking place.

The circumstances of each learner will be taken into consideration, and our procedure will detail guidelines for approaches and acceptable facilitation for those with additional support needs.

We are committed to all aspects of the assessment process and will ensure that it is:

- Understood by Staff and Learners.
- Valid for the purpose of awarding body requirements.
- Fair to learners, in terms of both access and process.
- Learners receive feedback on their performance and remediation occurs as appropriate
- That students with additional learning needs are reasonably accommodated during the assessment process
- Internally verified to ensure the process is fair and consistent.
- Externally Examined to ensure it is consistent with national standards.
- Consistent with awarding body assessment policy and guidelines.
- PHECC, IHF and IOSH awards only use PHECC assessment material

Evidence of assessment will be maintained to allow verification and validation of the assessment process.

It is our policy to ensure that learners are given sufficient information on assessment requirements.

There are five stages to the assessment process.

1. Assessment and feedback

2. Authentication
3. Results Approval
4. Appeals Process
5. Certification

7.2 Effective Management of Assessments

ISO 9001:2015 - 8.3 Design and development of products and services. Course

Responsibilities: The Associate Director is responsible for ensuring assessment practices are fit for purpose and in line with awarding body guidelines.

The Training Manager has overall responsibility for ensuring the assessment process is adequately resourced, recorded and tracked, including the allocation of an internal verifier and the appointment of an external examiner.

The training administrators are responsible for the recording of receipt, saving of all learner assessment materials, issuing assessment to instructors for marking and feedback to the learners. All recorded are saved on Arlo or SharePoint. The Administrator also acts as the internal verifier.

Learners are responsible for demonstrating learning achievement and for ensuring the academic integrity of their work.

Instructors are responsible for ensuring assessment at appropriate points in the course and ensure that feedback on outcomes of the assessment is provided to the learner. Instructors will also act as the subject matter expert.

Information to learners: To ensure learners have access to information for them to successfully participate in the assessment process.

7.3 Assessment Planning and Design

ISO 9001:2015 - 8.3 Design and development of products and services

The Training Manager is responsible for ensuring assessments are developed in line with course learning objectives and mapped accordingly.

The course reviews and development outline in Figure 7, Course maintenance and associated description provides an overview of the process steps in developing and reviewing a training course, which includes the development and review of appropriate assessments as an integral part of the Course. A lead Subject Matter Expert appointed by the Training Manager and a member of the PRB designs a Course Assessment Plan based on the validated assessment plan in line with the award specifications. This must ensure that students with additional learning needs are reasonably accommodated during the assessment process.

The assessment plan includes mapping of course descriptors and key learning objectives to the assessment instruments. Assessment briefs provide comprehensive information to the learner as to what to expect and detailed marking schemes. Assessment methodologies ensure that Learners receive feedback on their performance and remediation occurs as appropriate. New assessment materials are peer review by Instructors as the subject matter expert.

The CPL Institute recognises that the learner is responsible for demonstrating their learning achievement through meeting learning outcomes as measured during course assessment.

To demonstrate that learners have reached the standards of knowledge, skill and competence identified in all the learning outcomes, learners are required to complete both summative and formative assessment.

These are defined as follows:

Formative Assessment

Formative assessment is an ongoing process used during learning to monitor the learners progress, provide feedback, and guide instruction. It helps identify areas where students need improvement and supports their development by offering opportunities for adjustment.

Summative assessment; is an evaluation of student learning at the end of an instructional period, such as a course. It is designed to measure the extent to which learning objectives have been achieved and typically results in a final grade or score.

The following is typical assessment types used by the CPL institute:

In Person and Blended Learning:

- **Formative:** Uses a mix of in-class participation, group projects, quizzes, and online submissions to evaluate student knowledge.

PHECC course formative assessment is integrated into online eLearning modules, or conducted during the online synchronous zoom element, and is designed to ensure that the Knowledge Objectives, Attitudinal Objectives and Skills objectives are clear and understood.

- IHF provide their own blended learning content and assessment.
- **Summative Assessments:** Use methods appropriate to the course such as exam, written project, skills demonstration in line with the awarding body guidelines and requirements

The Summative assessments for PHECC and IHF awards are conducted in person in a classroom environment using skill and examination assessment sheets that are developed and published by PHECC and IHF.

- **Real-Time Feedback:** Allow immediate feedback on in-class activities and online quizzes.
- PHECC course formative assessment is integrated into online learning modules, and is designed to ensure that the Knowledge Objectives, Attitudinal Objectives and Skills objectives are clear and understood. Summative assessment is conducted in person in a classroom environment.

Fully Online: (QQI/IOSH)

- **Formative:** Use methods appropriate to the course such as exam, written project, skills demonstration in line with the awarding body guidelines and requirements

- **Summative Assessments:** Uses a mix of gamification tool, quizzes, and online submissions to evaluate student knowledge. IOSH course assessment is conducted using IOSH approved assessments for examination and project assessment.
- **Frequent Assessments:** Implement regular quizzes, gamification tools, discussion prompts, and reflection journals to keep students on track. Carried out synchronously through zoom.
- **Peer Assessment:** Encourage peer reviews in group work to promote collaboration and accountability. This is often carried out in a breakout room.
- **Adaptive Feedback:** Use automated systems to provide instant feedback on quizzes, while instructors give personalised feedback for written assignments.

The Summative assessments for QQI courses offered may use one or more of the following assessment techniques:

- Project
- Assignment
- Learner Record
- Portfolio of work
- Examination (Theory)
- Skills Demonstration
- Case Study
- Supervisor's Report

Review of assessment instruments, assessment briefs and marking scheme is carried out in conjunction with full course reviews carried out by the PRB. Review is typically carried out every five years but may be more frequent if the need is identified sooner.

Our training Instructor contact, and associated service level agreement requires all our instructors be committed to conducting fair and consistent assessment of learners, endeavour to provide a positive and safe learning environment, and are available to answer any questions or ease any concerns the learners may have in relation to the assessment.

7.4 Assessment Feedback

Feedback on the assessment result will be embedded within the assessment design process.

All assessments are marked and Instructor record and outlining areas for further improvement in subject knowledge and academic skills and this is designed to support the learner in future assessment. This is learning outcome focused, indicating how the outcomes may be more fully addressed or how they may be exceeded and may comprise of identifying specific issues relating the learner's work or generic – referring to general points about the assessment.

Assessment submitted online via email will receive assessment feedback on projects and examination by email. For QQI awards this is issued at the provisional result stage.

Learners will be encouraged to discuss this feedback with their assessor. A request for a discussion about assessment feedback may be made by email and the assessor will arrange a

time for a Zoom or telephone call to review the assessment. For formative assessment the instructor will provide real time feedback or arrange for a individual coaching session if the learning requires further support. The aim of this consultation will be to give formative feedback to learners, especially to those who may need to repeat the assessment. The instructor may explain the basis of the learner's grade/mark against the assessment criteria and provide guidance on the learning outcomes. These interactions will be informal and will be distinct from a request for a formal recheck or review of the ratified result following the Examination board meeting. (For further information see 6.2.3 Learner Issues/Customer Complaints/Rechecks and Appeals.

7.5 Assessment Information to Learners

ISO 9001:2015 - 8.3 Design and development of products and services

The Training Manager is responsible for ensuring that the learners have access to any information they need relating to assessment. Instructors have a role in disseminating the information.

All our courses whether, in person, Blended or Fully Online (zoom) have a face-to-face interaction with the instructor.

To ensure learners have access to information for them to successfully participate in the assessment process, pre-course information and supported by:

- All learners receive instructions, in which the assessment for a QQI/PHECC/IHF/IOSH Award is clearly outlined. Information is provided on the relevant QQI awards specification or to PHECC education and training standard.
- Learners should identify to staff any additional support needs when applying for a course.
- Learners are also made aware of the assessment process and course specific requirements by the instructor at induction. All critical assessment-related dates are highlighted at induction on Day 1 of the training course.
- Provision of assessment information including Assessment and Assignment Brief Template.
- Learner handbook distributed to all learners, as required.
- Group briefing prior to each assessment activity and during the delivery of each Course.
- Towards the end of the course, the instructor will take the class through the assessment process and answer any questions that the learners may have. Assessment and marking schemes are discussed with the learners as well as briefing and submission dates for QQI assessments, Guidance on use of technology is also provided as required, if the exam is conducted online.

- PHECC and IHF course assessment is carried out using PHECC standard assessment sheets.
- The instructor will provide feedback at the end of each assessment to the learner.
- Course details on website include assessment details.

7.6 Security and Moderation of Assessment Processes

ISO 9001:2015 - 8.3 Design and development of products and services

To ensure the security and integrity of assessment materials, the assessment process, learner's evidence and submission requirements are stored in a secure storage area allocated for all assessment materials. The following applies:

- Learners are advised to retain copies of their completed assignments.
- Once assignments are received, they are checked by the Internal Verifier to ensure that all components of the work are complete.
- Assessment master copies are stored with restricted access on The CPL Institute Microsoft SharePoint.
- Hard copies stored secure location with designated access.
- Relevant Instructor supervise exams, verifying the exam material was delivered securely and opened just prior to the assessment is signed by both them and a learner.
- Learner assessment material is sent by registered post. Where appropriate, assessment material may be sent electronically.
- The training administrators keeps a record of all assessments submitted and these are logged to ARLO learning management system. This record acts as the receipt system for learner work. The training administrator collates all the learners' assignments into a folder clearly dividing each learner's work together and ensure they are stored securely.
- For QQI courses. Assessments are sent to Assessors by registered post so we can confirm delivery. A registered post envelope is also provided to the Assessors to send back the corrected assignments.
- Results of assessments are maintained electronically and retained securely, as per retention schedule.
- Cross moderation maybe applied
- Random observation of assessment activities may be carried out by the Training and Academic Affairs Manager.
- For fully online courses the exams maybe conducted online. This is provided through a secure Airtable link, and the submission is automated back to an Airtable data base. These are proctored assessments. Live monitoring is used to ensure that students are taking assessments independently and without unauthorized assistance. The proctoring of examinations is conducted in real time by the instructor.
- eLearning systems verifying learner identity by user authentication. This involves requiring students to use secure login credentials, such as a unique username and password, to access the learning management system.

Consistency of Marking and Cross Moderation

To ensure all assessments are marked in a fair and consistent way among all assessors the following is applied:

- Tutor Induction to include training in assessment methods and marking.
- Assessment guidelines documented in line with course requirements, including sample answers, marking schemes and guidelines.
- Cross-moderation will be organised where appropriate.
- Where there are multiple courses in any certification period, the Tutor of one course may serve as the cross-moderator for a course delivered by another
- Random observation of Instructors by Training Manager during assessment events
- Internal verification and external examiner processes review all results
- Review of learner Evaluation forms.

7.7 Assessment Verification

ISO 9001:2015 - 8.3 Design and development of products and services, 8.4 Control of externally provided processes, products and services

Verification defines how the CPL Institute is to ensure the integrity, consistency, and fairness of learner assessment results through internal and external independent, authoritative external authentication. This applies to all validated programmes that lead to QQI, IHF or PHECC certification. It covers the internal and external authentication of final assessment results and supporting evidence across all levels of programmes offered.

7.7.1 Internal Verifier

Internal verification is the process by which we monitor assessment processes and procedures relating to planning, managing and operationalising assessment.

We have procedures in place to confirm that our assessment procedures have been applied consistently across all our assessment activities and that learner results are recorded accurately – this is the responsibility of the Training Manager supported by the Training Administrators.

Following completion of a course assessment learners will have their papers marked and graded by the instructor. The instructor collates all learner assessments, and associated documents into a “course returns” pack, which is returned by registered post to our Training Administrator for processing. Our Training Administrator reviews all paperwork in the course returns pack for completeness, will flag any issues with the trainer for follow up. The workflow is tracked through our ARLO learning management system.

Our Internal Verifier checks all learner assessments for QQI, IHF and PHECC awards for each certification period, reviews all marking and grading and highlights any inconsistencies and completes an Internal Verification report.

We implement a structured internal verification process to ensure the accuracy and consistency of assessment outcomes:

1. **Internal Verifier Appointment:** A trained staff member, independent of the course delivery team, is assigned to conduct the verification.

2. **Sampling:** All learner assessments are reviewed to confirm correct application of assessment criteria and marking schemes.
3. **Cross-Checking:** Learner results are cross-checked against attendance records, tutor feedback, and assessment evidence. We look for trend in marking and if there are repeated failures.
4. **Verification Report:** The verifier completes a report highlighting any discrepancies or areas of concern and provides recommendations for quality improvement.

Where issues are identified, they are reviewed by the training manager and, if necessary, a reassessment or additional support for the learner is arranged.

When carrying out Internal Verification, the Internal Verifier checks for:

- Courses are delivered with an appropriate course material and PHECC/IHF assessment material is used for assessment
- Correct assessment procedures and techniques have been applied. - signed student attendance and assessment result records. - student and faculty feedback
- Missing or inappropriate evidence
- Identify evidence which is borderline between grades e.g., learners who have not or who have only just achieved within the grading band
- Missing or inappropriate assessment briefs
- Data omission, transcription/calculation errors
- Inaccurate data entry – award codes, name spelling, results etc.
- Provisional outcomes
- Notes any adaptations made/reasonable accommodation implemented.

Having completed the IV process, the Internal Verifier completes the IV Report confirming the outcome of the process. It captures evidence that the internal verification process has taken place, acknowledges strengths, any gaps identified and highlighting areas for improvement.

The report will be retained and made available to the External Examiner and Examination Board. The Training Manager arranges for external authentication to take place and ensures the Internal Verifier is available to liaise with the External Examiner before, during and after their review.

The Training Manager arranges the External Examiner review within a reasonable timeframe before the QQI submission deadline, generally 10-14 working days before QQI's final submission date. The timeframe depends on the size of the cohort going through for certification and the training schedule.

7.7.2 External Examiner

The external authentication systems we have in place ensure that learner assessments are independently checked as part of our assessment process. This is applied to all QQI, and PHECC accredited Courses. It provides independent confirmation that we have assessed our learners fairly and consistently, that our marking and grading is valid and reliable and meets the national standard for the award and that we are compliant with the requirements for the award. The Training Manager is responsible for selecting, appointing and quality assuring a suitably

qualified External Examiner. We contract an External Examiner based on their suitability for the role as outlined in Section 3.2.10, based on the selection criteria we have in place.

All portfolios are submitted to the External Examiner for moderation of results. The external Examiner is expected to comply with the relevant standards of the awarding body. We also include portfolios from new instructors and any critical points between bands or grades.

Documents to be made available:

- PHECC Examination papers and assessment skills records.
- QQI Assessment, Assignment, Project Briefs – Examination papers – Marking schemes & Outline Solutions – Assessment plan(s), Access to recorded skills demonstrations.
- Marking schemes
- Learner Assessment Portfolios (assessment evidence)
- Assessment Results (recorded on a Provisional Results Sheet)
- Course lesson plan
- Internal Verification Report(s)
- Feedback report for each course from learner and Instructor Airtable database
- Any other relevant documents requested by the EA
- QQI national grading analysis
- QA policies and records

The EA undertakes a thorough review of the Learner Portfolios of Assessment:

- Assessment Tasks: Appropriateness and alignment with learning outcomes (QQI) or learning objectives (PHECC).
- Course training materials: Appropriateness and alignment with QQI award specifications or PHECC education and training standard.
- Marking and Grading: Consistency with marking schemes; accuracy of scoring.
- Feedback: Evidence of constructive Instructor feedback.
- Skills Demonstration Checklists (PHECC): Completion, accuracy, and instructor signatures.
- Evidence of Learner Achievement: Clarity that minimum standards or outcomes have been met.
- Consistency Across Learners: Comparability of results across assessors, groups, and delivery modes.
- % of inconsistencies found in marking by instructors during IV & EA
- % of learner achievement in line with or surpassing the national average for their QQI course.

The EA undertakes a thorough review of the Provider's Training Quality Management System (QMS)

- The EA is to check documentation and records to confirm QA processes have been applied effectively:
 - Assessment development and approval records, when course materials have been amended.

- Internal Verification Reports
- Assessment scheduling, and control measures
- Learner appeals and complaints procedures
- Records of reasonable accommodations
- Monitoring of Instructor/Assessor performance
- Course completion and certification data

7.7.3 Verification Analysis

3. Verification Analysis				
Operational Objective	Performance Measure	What is Analysis		
		How	Who	When
Fair and consistent assessment in place for each course	10% or less of learner portfolios found to be incomplete during IV & EA	Internal verification	Course Administrator	IV after each course
	% of inconsistencies found in marking between instructors during IV & EA	External Examiner review of learner portfolio	Examination Board	Bi-monthly
Learners are provided with timely and appropriate support before, during and after their assessment	90% of learners are satisfied with their support before, during and after assessment	Internal verification, Feedback on Airtable	Course administrator reporting to exam board	IV after each course
	90% of learners present for assessment	Internal verification, Attendance Records,	Course administrator monitors non-attendance, reporting to exam board. Quality	IV after each course

		Summary Report, Annual Report	Manager completes analysis annually.	
Learner achievement is in line with or surpasses national averages for their course	90% of learner achievement is in line with or surpasses the national average for their course	External Examiner review of learner portfolio	Examination Board	Bi-monthly

Remediation: Appeals, Re-Checks and Reviews

Please refer to 6.2.3 Learner Issues/Customer complaints/Appeals/ Rechecks, for the details of our remediation processes.

The Appeals procedures with detailed timeframes and processes are also available in the Learner information sheets.

Repeating an Assessment

Where a learner fails an assessment, or fails to avail of an assessment opportunity, they will be afforded a maximum of 1 repeat attempts, except where the programme validation states otherwise, as follows:

- Repeating an assessment must be agreed in advance, this is to be requested by email to support@theclpinstitute.ie
- Details on repeat assessment opportunities are included in the learner’s handbook and communicated directly to the learner.
- Learners may be asked to resubmit their assessment based on the feedback they have been given or given a new assessment task
- There will be a set timeframe within which the repeat assessment must be submitted which will be outlined in the course introduction.
- The CPL Institute will ensure that for examinations and skills demonstrations a different exam paper and brief are used.
- Typically, the repeat assessment period will be within 6 weeks of the final result being issued.
- Where a learner fails to achieve a pass mark of the assessment within the maximum number of repeat opportunities, they will not be permitted to progress further.
- Learners cannot repeat an assessment to improve their grade

7.8 Assessment Result Approval

We ensure that results are fully quality assured and signed off by the Chair of the Examination Board prior to submission to QQI.

Members of the Results Approval Panel

- Training Manager
- Quality and Compliance Manger
- Training Administrators

The Examination Board formally reviews and approves results data, confirming that our assessment results are fully quality assured and signed-off prior to submission to the awarding body for certification and issuance to the learners.

The Quality and Compliance Manager acts as the Chair of the Examinations Board and convenes a meeting of the Panel for each certification period. A minimum of 3 people is required to convene a meeting. The External Authenticator may attend the Examination Board meeting to present his/her report if required. The Examination Board reviews the provisional results, learner evidence, IV plan, EA plan, IV report and EA report.

A report of the meeting is prepared by the Chair and retained for auditing and monitoring purposes. The report includes:

- Formal proposals.
- Recommendations of IV and EA reports.
- Approval of provisional results presented to the meeting.
- Request for certification Period from QQI.

The Panel highlights any issues identified and improvements recommended by the EA and required corrective action. The outcome of the results approval process is that results are submitted to QQI by the Quality Officer via the QBS who confirms that The CPL Institute has implemented all elements of the authentication process and adhered to all agreed procedures.

Results are issued to learners including results appeals information immediately on approval by the Examination Board.

7.9 Certification Process

ISO 9001:2015 - 4.2 Understanding the need and expectations of Interested parties, 8.3 Design and development of products and services, 8.3 New Course Approval, Validation

The Training Administrator submits all learner results to the relevant awarding body for certification.

QQI awards are submitted through the QQI QBS portal. For procedures, please see SOP 06, QQI, QBS, Final Submission and Certification.

Once the certificates are received from QQI, they are scanned and saved to SharePoint in the relevant course folder. The certificate and letter can now be sent to the learner/client by post. ARLO is updated with the date certificates were sent and the course is closed.

PHECC course awards are issued on completion of the internal verification and approval process.

Each certificate is logged and given a unique number. In addition to continuous tracking and recording of all PHECC certificates and numbering, an annual certification report is required.

Certification of PHECC awards is further described in SOP 13 PHECC Certification.

IHF Heartsaver certification are now all processed through the Laerdal Learning Platform (LLP).

7. 10 Consistency of Marking and Cross moderation

ISO 9001:2015 - 8.3 Design and development of products and services, 8.4 Control of externally provided processes, products and services, 8.6 Release of products and services

We have systems in place to ensure that there is consistency in marking and grading across assessments and that lecturers are marking and grading in line with national standards. To ensure the quality and consistency of our assessment grading practices we apply the following:

- We address marking and grading at Trainer Induction.
- We may request written assignments to be corrected/graded by an instructor that did not deliver the course.
- Cross moderation/second marking maybe carried out of a sample across a range of learners and assessors.
- If the assessor identifies a material difference in the standard of marking greater than 5%, the lead assessor has the authority to alter the mark awarded.
- If significant differences are identified on a consistent basis, further remedial actions may be actioned, e.g., further training, coaching etc.
- We have detailed marking schemes including assessment criteria in place for all Courses, which shows clearly how the learner evidence is to be marked and graded. These are reviewed and updated in line with our Course reviews.
- Assessment briefs, examination papers, model answers and marking schemes are devised by the Subject Matter Expert and signed off by the Training Manager. Our detailed marking schemes are based on the validated Assessment Plans.
- Marking and grading on new Courses or by new instructors are subject to cross-moderation.
- The Internal Verifier reviews each instructors marking and grading to ensure consistency across the board and observations are recorded in an Internal Verification Report. Any instances of inconsistent marking are communicated to the Training Manager.
- We ask our External Authenticator to record any observations in relation to inconsistencies in marking in the External Authentication Report. If the External Authenticator has any concerns in this regard, they are discussed at the Examination Board meeting, and a decision is made about corrective action.

Section 8 - Design and Development of Course Materials

8.1 Design and/or Development of Training Course Policy

ISO 9001:2015 - 8.2.2 Determining the requirement for products and services, 4.4.1 Quality management system and its process, 8.3 Design and development of products and services, 8.4 Control of externally provided processes, products and services

The purpose of this policy is to highlight The CPL Institutes commitment to developing and providing the highest standard of Courses possible to learners, while ensuring national standards and Course guidelines are also a focal point of the delivery.

This policy will inform the designing and approving of Courses constructed to ensure that the learning outcomes required for a specified award have been addressed and mapped to specific industry requirements.

To achieve this, we will ensure that:

- Course development objectives and strategies are consistent with The CPL Institute's strategic planning and contributes to achieving The CPL Institute's aims and objectives.
- All aspects of the course are considered at the design stage to include teaching and learning, assessment, access, transfer and progression, supports and resources. These are mapped to the requirement of the awarding accreditation body, including the National Framework of Qualification and PHECC requirements.
- Are compliant with internal and other regulatory or professional policies and requirements.
- We monitor the course on an ongoing basis and undertakes consultations with stakeholders to identify opportunities to improve the quality and effectiveness of its courses and services.
- Where one course is a pathway to another, courses are designed to ensure that learners can make a successful transition.
- Updates are subjects to formal internal approval process.
- Courses are designed with the intended mode of delivery and learning environment in mind.
- New course materials are piloted and tested by a mix of internal staff and instructors as appropriate.
- Educational content material is developed in a separate process to how it is approved. To clarify, the same person or group should not create and then approve its own course content.

8.2 Design and Development of New Courses

ISO 9001:2015 - 8.2.2 Determining the requirements for products and services, 8.3 Design and development of products and services

The development and approval of Courses includes the following stages:

1. Identification of Training Need Analysis/Feasibility Study
2. Course Design and Development
3. Course Approval

4. Validation/Revalidation (Internal and/or External)
5. Course Maintenance

8.2.1 Training Need Analysis/Feasibility Study

ISO 9001:2015 - 8.3 Design and development of products and services

We ensure that the Courses we develop meet an identified need and that we have evidence available to make an informed decision to progress proposed Courses to the design and development stage.

Evidence of Need may include meeting minutes, market research reports • Records of enquiries from the Sales Team, Training Administration staff and Instructors, Industry reports, networking within, and knowledge of, the relevant industry sectors, linkages between our consultancy and training departments, monitoring changing policy, regulations, and legislation relevant to our sector.

We review relevant reports and consult with subject matter experts. We record and monitor inquiries and referrals from clients, businesses, prospective learners, local agencies, local and national advertising, word of mouth etc.

The Senior Management Team considers the proposal, and approval can be granted based on the following:

1. The proposed course is aligned with The CPL Institute's strategy.
2. There is evidence of learner demand for the Course.
3. There is support for the introduction of the course (such as from industry/employers, legislation demands or regulatory bodies).
4. The Course is ratified by the Academic Council.

8.2.2 New Course Design and Development

ISO 9001:2015 - 8.3 Design and development of products and services, 8.2.2 Determining the requirement for products and services, 8.4 Control of externally provided processes, products and services, 8.6 Release of products and services

We design all elements of course irrespective of delivery mode to including structure, materials, delivery and assessment methodologies to meet the needs of potential learners, meet the requirements of the awarding body (if applicable) and meet the needs of the industry sectors we operate in.

The Associate Director is responsible for the initiation of new accredited course development based on systematic needs analysis. Courses developed for non-accredited course can be initiated by the training manager.

Ideas for new programmes emerge from various sources including:

- Learner and employer feedback, e.g. survey responses, learner-Instructor discussions, group meetings.
- Tutor and programme leader discussions and feedback.
- Responses to marketing activities and promotions, e.g. phone calls, web chats, social media postings, competitor analysis and survey responses.

- Forward planning business meetings, analysis of employment and training data and reports, plus wider discussions with stakeholders.
- All of the above factors may be used in the new programme development process.

The Risk and Course Development Team (RPD) develops the accredited course and engages with outside expertise, stakeholders, members, learners etc. as appropriate. If the course is accredited the following will apply:

- Leads to a QQI award, the Course design will be based on QQI Course Validation Guidelines and the requirements of the award specification (if applicable).
- In a Blended learning-based or fully online Course, the design will be based on the QQI Statutory Quality Assurance Guidelines for Providers of Blended Learning Courses.
- Leads to a PHECC award the Course design will be based on the STN020 2024 Quality Review Framework and the appropriate Education and Teaching Standard and The PHECC Guidelines for blended learning as appropriate.
- IHF course are develop and run in accordance with IHF published materials.

The teaching and skills expertise required for the course, the strategies for teaching, learning and assessment appropriate to the course context, objectives and the resource and staffing requirements and technology requirement and supports are considered and addressed at the Course design stage.

All courses must be developed in line with the stated learning outcomes and student ratios (where applicable) for each course as set out in the QQI award specifications and PHECC education standards. We will promote the use of a broad range of teaching and learning strategies and ensure a balance between theory and learning and include the promotion of self-directed learning, as appropriate. All course information will include detailed lesson plans, suggested timetables, information about Access, Transfer and Progression and specific minimum learning outcomes and competencies.

Design Principles

To guide the development of learning experiences, design models can help ensure we are designing courses efficiently and in a manner that correlates with how people tend to learn best: ADDIE is one of the most used design models. The CPL Institute considers that the ADDIE model provides an effective and straightforward instructional design framework.

ADDIE is an acronym for the five steps of a development process which can be followed to transform a face-to-face course to a blended learning mode. ADDIE stands for:

- Analysis
- Design
- Development
- Implementation
- Evaluation

The CPL Institute applies the ADDIE model as a structured framework that supports the development of our learning experiences, making it ideal for designing fully online and blended courses.

Its five stages—Analysis, Design, Development, Implementation, and Evaluation—ensure that every aspect of the course is planned, executed, and reviewed systematically.

In addition, all course design will incorporate the principles of Universal Design for Learning (UDL). This is a set of principles for curriculum development that give all individuals equal opportunities to learn, including Students with Disabilities.

Universal Design for Learning (UDL) is based on three core principles that guide the creation of inclusive educational environments. The CPL Institute incorporates the 3 core principles when designing learning experiences, these can be demonstrated as below:

1. Multiple Means of Engagement (The 'Why' of Learning) – Motivating Learners

This principle focuses on providing various ways to engage and motivate students.

- Offering choices in assignments (e.g., written reports, video presentations, or hands-on projects).
- Instructors providing real-world examples to make learning relevant and meaningful.
- Using gamification elements like badges or progress tracking to boost motivation.
- Allowing self-paced learning options to accommodate different learning speeds. Applicable to some course approved for blended and fully online learning.
- Encouraging collaboration through group discussions and peer feedback.

2. Multiple Means of Representation (The 'What' of Learning) – Presenting Information

This principle focuses on providing various ways to present content to accommodate different learning styles.

- Providing content in multiple formats such as text, audio, video, and images.
- Using captions and transcripts for videos to support students with hearing impairments.
- Where appropriate, use visual aids like charts, graphs, to complement textual explanations.
- Allowing access to assistive technologies such as screen readers and text-to-speech software.
- Providing summaries or outlines of key concepts before diving into complex material.
- Using simplified language or glossaries to aid comprehension for diverse learners.

3. Multiple Means of Action and Expression (The 'How' of Learning) – Demonstrating Knowledge

This principle focuses on allowing learners to express what they know in different ways.

- Allowing students to complete assessments through written essays, oral presentations, or creative projects.
- Providing opportunities for interactive learning through hands-on activities and simulations.
- Using digital tools like speech-to-text software to support learners with writing challenges.
- Encouraging students to use multimedia (e.g., podcasts, videos, infographics) to showcase their understanding.
- Offering flexible deadlines or extended time for assignments to accommodate different needs.
- Using formative assessments such as quizzes, polls, and reflections to gauge understanding in various ways.

By incorporating these UDL principles, the CPL Institute aims to create more inclusive, accessible, and effective learning environments for all students.

Testing is conducted prior to advancing to the approval stages. This is an Informed peer review and may be both internal and external and enable commentary to be made on both academic content and pedagogical approach. Instructors act as subject matter experts in the final stages of trialling new course content, and this allows us to ensure that learning resources, materials and delivery mechanisms are appropriate and fit-for purpose.

Further information on the design principle specific to Blended and fully online course is available in the CPL Institute document for Strategic Planning and Guidelines for Blended and Fully Online Learning, V1.0 January 2025.

8.3 Accredited New Course Approval, Validation

ISO 9001:2015 - 8.3 Design and development of products and services, 8.4 Control of externally provided processes, products and services, 8.2.2 New Course Design and Development

All materials are reviewed and piloted with a sample of internal staff and course instructors. Checks include content accuracy, accessibility, alignment with learning outcomes, and LMS compatibility. This is recorded in a programme review document.

All course documentation is approved by the RPD Team and the Academic Council before being submitted to the awarding body for validation/revalidation or prior to delivery. Following approval and sign-off by the Academic Council, the Quality and Compliance Manager completes the relevant certifying bodies application for validation and completes the submission documentation.

The Quality and Compliance Manager tracks the status of the application to confirm that the application is progressing satisfactorily, reports on progress of the application and co-ordinates follow up action to address any queries raised.

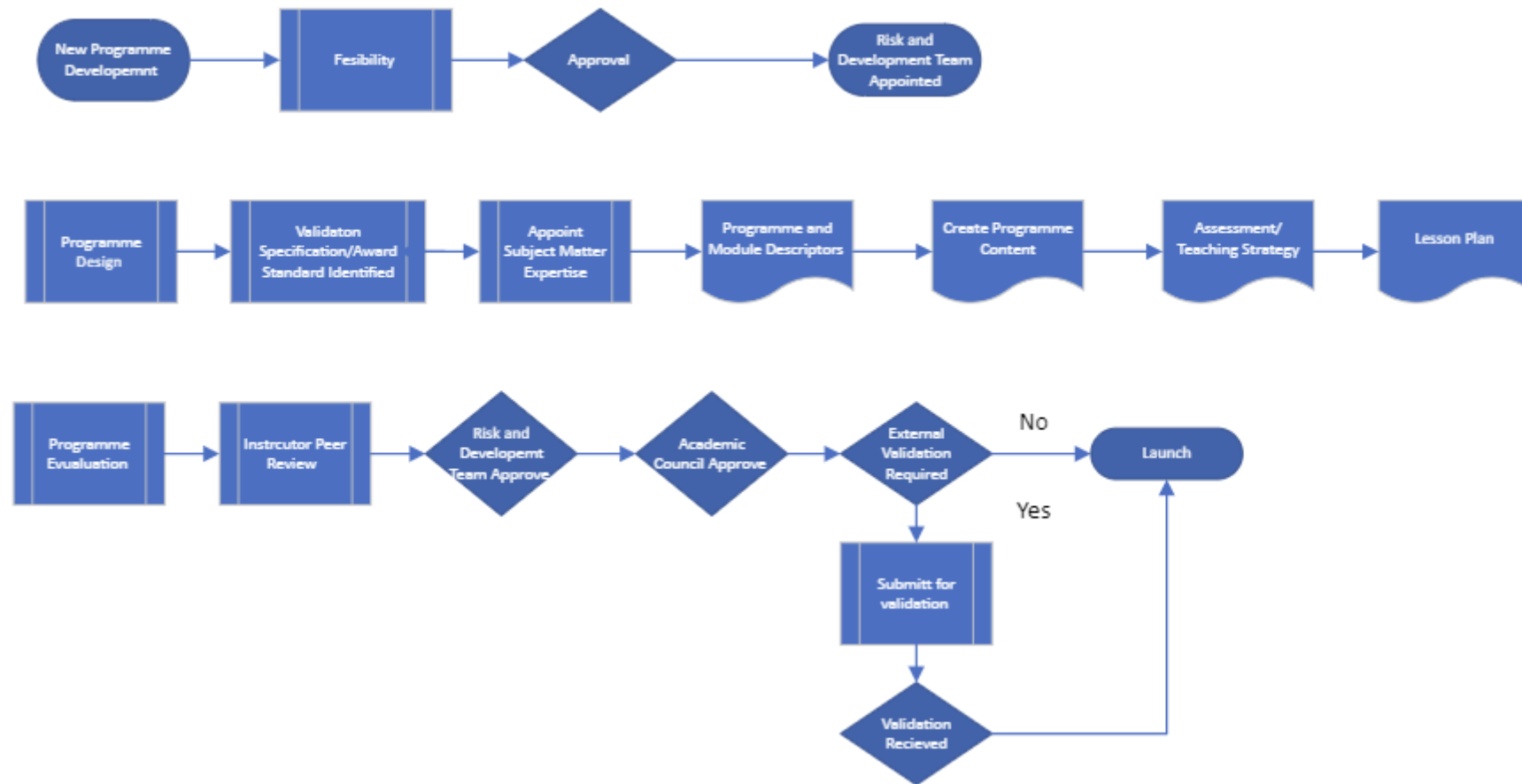
If a course involves a 'second' provider, we draw up a Memorandum of Understanding to formalise and approve the arrangements between The CPL Institute and the second provider clearly outlining the areas of responsibility and accountability for all stakeholders involved in this Course. However, we currently do not engage in Collaborative Provision.

We secure course validation by the relevant certifying body (QQI, PHECC, IHF, IOSH,) before enrolling learners on any course leading to a recognised award. We review our capacity to uphold the terms and conditions of validation and ensure that our courses meet the validation criteria as part of our course review.

We arrange for the revalidation of continuing courses every 5 years (or in accordance with the expiry of the duration of the validation if different). We understand that validation is for a maximum of five years and automatically lapses unless renewed through re-validation. We carry out a Self-Evaluation/5-year programmatic review to coincide with revalidation – data from this review is used to inform and support the revalidation process. We understand that a validated Course may be reviewed by the relevant certifying body (QQI, PHECC, IHF and IOSH,) at any time and we facilitate such reviews.

See Figure 6, Process flow of New Accredited Course Development and Validation below

Figure 6, New Programme Development and Validation



8.4 Course Maintenance and Approval

ISO 9001:2015 - 8.3 Design and development of products and services, 7.1.1 General b), 8.2.4 Change to the requirement for products and service, 8.5.6 Control of Changes

The CPL Institute designs non accredited courses and maintains course curriculum to ensure that courses are responsive to changes and in line with Industry and regulatory requirements. These are reviewed at a min every three years.

We are committed to delivering high quality training Courses. The delivery of a course is considered from the development stage. We identify and put in place the human, physical and academic supports and resources necessary for delivery of courses as set out in approved course descriptors prior to course delivery. The course resources necessary for successful participation by learners are identified and documented at the course design stage and are listed in the course descriptor.

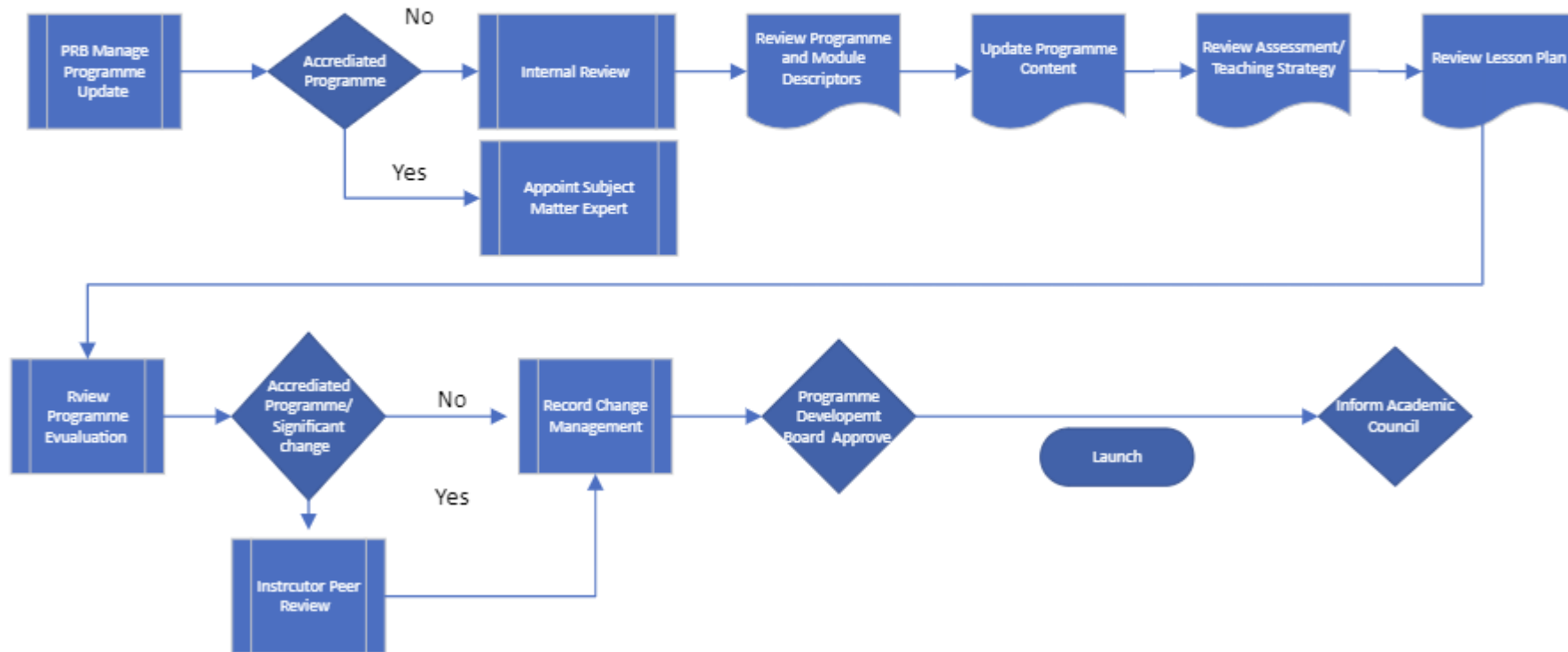
We regularly engage with key stakeholders to monitor changes in the sector. We review the content of each module on a periodic basis as part of our annual course review to ensure that the content and teaching and learning strategies reflect advances in the relevant disciplines and that the pedagogic style incorporates best practice. Refer to SOP 05, Changes and updated to course materials for further information.

The CPL Institute courses are updated internally where minor changes are required or by an independent subject matter expert when significant change is required. Significant changes to an accredited course may be update by an independent subject matter expert or the training manager and are peer reviewed. These are reviewed in line with updates or changes in PHECC education and training standards, clinical practice guidelines or examination standards and updates and changes in QQI, IHF and IOSH validation materials.

All updates and changes to course are managed and approved by the Programme Review Board. A register of course content and change amendment is maintained. Document controls are described in SOP QC 01, Document control.

The Associate Director is responsible for disseminating information on innovations in the curriculum to the course team. Course materials maybe updated in between to reflect legal and regulatory requirements. As part of the course review assessment techniques and examinations are updated if required to reflect updated work practices and content. See Figure 7, process flow of course Maintenance.

Figure 7, Programme Maintenance and Approval



Section 9 - Quality Measurement, Analysis and Improvement

9.1 Quality Assurance

ISO 9001:2015 - 9.1 Monitoring, measurement, analysis and evaluation

The Quality and Compliance Manager takes responsibility for the quality assurance system of The CPL Institute learning and development services. The Quality and Compliance Manager uses a range of performance evaluation tools to make recommendations for improvement and to achieve the intended outcomes of our quality management system. For example, recommendations may emerge from the review groups and from findings raised in internal/external audits.

In order to determine and select opportunities for improvement or to implement any necessary actions to meet the requirements of customers and relevant interested parties, or to enhance customer satisfaction, our organisation drives improvement via the analysis of relevant data.

The data inputs for the improvement process include:

- Risk and opportunity evaluations.
- Assessment of the changing needs and expectations of interested parties.
- The conformity of existing products and services.
- The effectiveness of our quality management system.
- Supplier performance.
- Levels of customer satisfaction, including complaints and feedback.
- Internal and external audit results.
- Corrective action and non-conformance rates.
- Data from process and product key performance indicators and their trends.
- Data from online LMS, LearnUpon.
- Self-Evaluation of Courses.

We also ensure that opportunities for improvement from daily feedback on operational performance are evaluated by the Quality and compliance Manager as appropriate. Opportunities for improvement from analysis of longer-term data and trends are evaluated and implemented through the management review process and are prioritized with respect to their relevance for achieving our quality objectives. This applies to all course and delivery modes. The overall effectiveness of continual improvement program including corrective actions taken is assessed through our management review process. The team will always take a collaborative approach when carrying out the Quality Assurance Review processes.

The aim of or quality assurance is to provide re-assurance that we:

- Completing the Self-evaluation process.
- Completing Course reviews.
- Identify trend in data analytics.
- Addressing areas for improvement.
- Highlighting, maintaining and sharing good practice/innovations.
- Compliant with Quality Assurance requirements.

- Compliant with the training standard/award specification requirements (if appropriate).
- Adhering to the organisations policies, procedures and guidelines.

9.2 Monitoring and Measurement of Processes – Course Evaluation/Customer Satisfaction

ISO 9001:2015 - 8.5.5 Post delivery activities, 8.7 Control of nonconforming outputs, 9.1.2 Customer Satisfaction

Learner evaluation and feedback is one of the primary mechanisms to monitor our courses and identify ways to improve the quality and effectiveness of our courses and services. We have a structured process for feedback for improvement from learners for every course we deliver, including courses taught in a blended or fully online mode.

Instructor evaluation and feedback is an integral part of our commitment to high quality teaching and learning. Therefore, regular monitoring and evaluation is a fundamental element to our process of continuous quality improvement through collecting, collating and analysis of feedback from our instructors on courses.

All learning programmes are subject to continuous evaluation through a structured quality assurance process. Our sources include learner feedback (e.g., module evaluations), staff reflections, and completion rates, and analytics from the VLE, where applicable. This data informs programme monitoring reports and periodic programme reviews. We analyse and support programme development in identifying trends, implementing enhancements, and closing feedback loops. The CPL Institute has established a systematic and cyclical approach to the evaluation and continuous improvement of its blended and fully online learning provision. This process is embedded within the quality assurance framework and involves gathering and analysing data from multiple sources.

Evaluation of online provision is undertaken both as part of individual programme reviews and thematically across programmes. During programme reviews, the quality and effectiveness of blended and fully online learning will be assessed in the context of the specific learning outcomes, student feedback, and delivery methods of that programme

To facilitate monitoring the performance of courses and to support continuous quality improvement, we seek course evaluation feedback on all aspects of our courses, review that feedback and implement recommendations for continuous improvements. Results and findings from the on-going monitoring and evaluation activities feed into annual quality improvement plan and course reviews. These are reported to the academic council are considered at quality management reviews.

The success in meeting our customer's requirements and in achieving a high level of customer satisfaction with our products and services is evaluated on a continuous basis. This is done using our online customer feedback form available on our website, or via a QR that is shared at the end of the presentation for all courses. The form automatically links to a secure database, using a software course called Airtable. Learners are complete the feedback form at the end of each course delivery, irrespective of learning mode, i.e. face to face. blended, fully online

Similarly, course Instructors are requested to complete a feedback survey at the end of each course delivery.

These are reviewed weekly by the Training Administrator Team daily, actions logged, and issues are escalated as required. Please see SOP Management of Feedback. A report of feedback received from learners and clients is supplied to all instructors monthly. This provides insights into performance and area of good/poor practice.

The CPL Institute commits to monitoring the quality of teaching and resources by conducting a rolling schedule of evaluations of course delivery and management. The monitoring may be conducted, in person onsite, or online as appropriate. As part of our quality objectives, we commit to conducting onsite observation of course delivery. This may be carried out by a staff member of the CPL Institute or an Instructor qualified in the subject area. This is a condition stipulated in Instructor service level agreement. A course monitoring report is produced, and any associated corrective actions are added to the quality improvement plan.

The Quality manager undertakes annual analysis of learner and Instructor course evaluations.

9.3 Analysis of Data Key Performance Indicators

ISO 9001:2015 - 4.4 Quality management system and its processes, 10.3 Continual Improvement

6.2 Quality objectives and planning to achieve them

To facilitate internal self-monitoring on the performance of courses and to support continuous quality improvement, we monitor and report on the following:

- 100 % Attendance Records maintained on course delivery
- Completion rates and drop-out statistics
- Marks and grades
- Learner course evaluation feedback
- Instructor course evaluation feedback

The LMS used by the organisation provides access to key learner analytics that support monitoring of learner progress and engagement. Available data includes:

- Login frequency and session duration
- Completion status for activities and modules
- Time for completion
- Failure rates of summative assessment.

Data analytics from the LMS are to be used in two main ways:

- Ongoing learner monitoring – Administrators are expected to review learner engagement and progression weekly using LMS data dashboards to identify any disengagement or support needs early.
- Programme Review and Evaluation – At the end of each course, a summary of learner analytics (participation rates, time for completion) is compiled and reviewed as part of the programme evaluation process.

The use of data analytics should inform decisions about learner support, course pacing, and resource effectiveness. For example, if a significant number of learners do not access a key resource, this may prompt a revision or change in how it is introduced.

Key performance quality indicators are monitored and analysis across all our course. These are updated annually.

9.4 Control of Product - Nonconforming Services (Complaint/Failures) and Corrective Action

ISO 9001:2015 - 8.7 Control of nonconforming outputs

To ensure the control of product, only approved training course material (presentation/workbook/assessment/documents etc.) is used in the delivery of our training. Instructors cannot supply their own materials. We control the output of materials. We ensure that all materials have been internally approved are version controlled, and that documented information exists to provide evidence of conformity with acceptance criteria and identifying the person(s) authorizing release. In rare cases (due to customer requirements and/or production emergencies) unverified product may be released or delivered under controlled conditions. This is approved by the Associate Director and only allows the use of existing course documents. Course material products are not normally released or delivered until all course planning has been completed and are dispatched under controlled conditions by private courier. All Course returns are tracked and reported upon weekly.

Non-conformity and Corrective Action with aspects of quality and the requirements of ISO 9001:2015 are reported to the Quality Manager in order that an investigation can be initiated. These usually take the form of customer complaints, see section 7.2.3 Learner Issues/Customer Complaints/Rechecks and Appeals.

The appropriate manager documents the non-conformity using the non-conformance and complaint investigation report and considers the root-cause of the non-conformity. If necessary, other responsible parties will be consulted to identify the root cause and plan appropriate action. The Quality Manager records the report together with any agreed corrective action within the Quality Improvement log. The results of the corrective action are recorded within the Corrective Action Report. Please refer to SOP. 02, Non-Conformance, Appeal and Customer Complaints).

The Quality and Compliance manger undertakes an annual analysis the Complaints and Appeals registers

9.5 External Expertise and Internal Audit

ISO 9001:2015 - 9.2 Internal Audit, 10.1 Improvement, General

To assist with the monitoring of training courses and to provide independent guidance we may employ external expertise. The role of the external subject matter expert is an external professional/subject matter expert tasked with quality checks on our training delivery and administration systems. We also class the role of external ISO 9001 audit as part of our external validation. The following is a non-exhaustive list of tasks we may carry out to assure quality:

External Evaluator: Monitors training performance by completing onsite trainer observation checks

External Evaluator: ISO 9001:2015 Yearly audit of Quality Management System by SGS Ireland.

External Evaluator: Learner Involvement in Academic Council.

We benchmark by participating in sectoral forums or QQ, IHF and PHECC provider networks, engaging in peer review activities with other training companies through personal contacts, and comparing data against sectoral reports and quality improvement plans shared through QQI events.

Internal audit is the conducted of the Quality Management System in all areas of The CPL Institute's activities to ensure that the Quality Management System is reviewed on a regular basis to check its continuing suitability and effectiveness and continuous quality improvement.

The Quality and Compliance Manager undertakes an annual analysis of learner, trainer, stakeholder, external authenticator and Internal verification feedback and the complaints and appeals registers.

These are before passing to the Programme Review and Development Committee or the Academic Council.

9.7 Provider Self Evaluation, Monitoring and Quality Improvement Plan

ISO 9001:2015 - 9.1 Monitoring, measurement, analysis and evaluation, 10.3 Continual Improvement 10.1 Improvement, General

Review and self-evaluation are a fundamental part of the quality assurance system.

The CPL Institute has a self-evaluation system in place which facilitates the review and reporting on the quality of Courses and related services. The views of learners, stakeholders, members of the Course team and of independent evaluator/s, who have the necessary expertise to compare our Courses with similar Courses offered elsewhere, are included in each self-evaluation.

Aims of the Self-Evaluation Process:

- To identify and highlight areas where we are doing well.
- To identify and highlight where there are gaps and where we need to improve.
- Measure how effective our QAS is in achieving a consistent and high-quality service.
- Ensure we are meeting the needs and expectations of our learners and other stakeholders.
- Measure the success of our learners in reaching the intended learning outcomes.

Steps in our Self-Evaluation Process:

- Plan and Prepare
- Carry out evaluations with stakeholder groups
- Document what we are doing well and areas where we need to improve
- Document evidence
- Acknowledge success
- Prioritise areas for improvement/decide on actions
- Collate, distribute and publish self-evaluation reports
- Implement actions in line with our Quality improvement plan

We undertake a fully Self-Evaluation every five years. This is a wide-scale comprehensive review of all aspects of the Course management and the Quality Management System which may lead to changes in the Course/curriculum and is timed to coincide with Course revalidation where

applicable. This process involves self-evaluation, reflection, reviewing and reporting on the quality and effectiveness of our Course and services combined with the input of an independent external review. Self -assessment for PHECC is done in line with the yearly annual approval process.

The report is presented to the Academic council for review along with recommendations for improvements. Actions agreed for implementation to address the findings are added to the quality improvement plan. The learning from this process and the data collected is used to improve, develop and inform future practices to meet changing needs.

The CPL Institute implements a range of self-monitoring activities which are built into the daily role of all staff involved to ensure the quality of services offered. Information from self-monitoring feeds into the evaluation process. Focus on completion rates and feedback from learners and Instructors helps us to evaluate the learners experience, satisfaction, achievement of objectives etc. and to identify any gaps or areas for improvement in the courses provided. Regular client feedback is sought by our Training Administrators and Sales team.

The Course reviews and development process as illustrated in Figure 6 and 7, this outlines the process implemented. In addition to feedback from learners, instructors and clients, inputs to the process also includes tutor observations, reviews of changes in legislation and accrediting body requirements, inputs from audits and reporting on significant deviations by our Examination Board.

We have a documented rolling Quality Improvement Plan [QIP] that is designed to drive continuous improvements in all areas of our training services. The QIP is a live document which is reviewed and updated at regular quality assurance co-ordination meetings. The QIP is managed by the Quality and Compliance Manager.

9.8 ISO 9001:2015 Quality Management Review

ISO 9001:2015 - 9.3 Management Review

The purpose of a Management Review meeting is to review and evaluate the effectiveness of your Management System, helping you to determine its continued suitability and adequacy. This is held annually and seeks to encouraging top management to consider the degree by which the Management System:

- Achieves the expected results.
- Meets the organisation's requirements.
- Functions in accordance with the established operating procedures and processes.
- Can identify non-conformities and monitoring subsequent corrective and preventive actions.

A Management Review also ensures that all levels of management are made aware of any changes, updates, revisions, etc. to the day-to-day workings of the Management System itself.

Changes to external and internal issues that affect the Management System. Examination of the performance of the Management System.

Note that there is a difference between Operations Team Meetings and ISO Management Reviews. The former may address the day-to-day working practices, sales, production,

resources and staffing matters, but the Management Review focuses solely on the requirements of the Management System, as described within our Manual.

9.9 Quality Group Management Review Meeting

The organisation conducts a formal Quality Group Management Review meeting on a six-monthly basis in accordance with ISO 9001:2015 Clause 9.3. The purpose of this meeting is to evaluate the continuing suitability, adequacy, effectiveness, and alignment of the Quality Management System (QMS) with organisational objectives and regulatory requirements.

The meeting reviews key inputs including quality objectives and KPIs, customer feedback, audit results (internal and external), non-conformities and corrective actions, risks and opportunities, resource requirements, and changes affecting the QMS. Specific consideration is given to compliance with awarding bodies and regulatory frameworks such as Quality and Qualifications Ireland and Pre-Hospital Emergency Care Council where applicable.

Outputs from the meeting include decisions and actions relating to continual improvement, resource allocation, process effectiveness, and any required changes to the QMS. Actions are documented, assigned, and monitored to completion through the organisation's quality assurance processes.

Records of all management review meetings are maintained.

Section 10 - Risk Management

10.1 Introduction

ISO 9001:2015 - 6.1 Actions to address risks and opportunities

The CPL Institute recognises that the nature of our activities and the educational space in which we operate may expose us to risks which have the potential to impact or harm our staff, learners, stakeholders, and success of our organisation.

It is our policy to adopt best practice in the identification, analysis, evaluation, control, monitoring and review of hazards and risks to ensure that they are avoided, reduced, shared or accepted.

Purpose and Scope

The risk registers and risk management process seek to construct a risk management framework that ensures all levels of risk and uncertainty are identified and managed. The risk register scope extends to commercial and educational risks.

All potential threat(s) to the delivery of our service will be appropriately managed, identified, observed and resolved where concerns arise.

The CPL Institute will manage risk for overall operational and academic activities including staff, accreditation bodies and contractors involved in the delivery of educational activities.

This approach is in line with best practice principles of Risk Management as referenced in section 6.1.2 of ISO 9001/2015 and the risk management processes outlined in ISO 31000:2009.

Health and safety risk management is described separately in The CPL Safety Statement.

10.2 Responsibility

Core Responsibilities include:

Associate Director

- Holds the responsibility for the management of risk.
- Delivery of learning and development at a consistent professional standard.
- Identification and determination of the levels of risk.
- Ensuring that the organisation has an effective risk management process.
- Delegating authorities and responsibilities.
- Coordinate and communicate risk assessment process within the Business Unit.
- Regularly reviews the risk register.
- Ensure risks are escalated through to the CPL Group Director and reviewed annually by the academic committee.
- Allocate time and resources to risk management.
- Identify the need for new risk assessment and revision due to changes in training activities, new/significant change in accreditation body regulations/guidelines.

- Approving the completed Risk Management Procedures, sign-off on completed risk assessments and associated guidance documents.

QA and Compliance Manager

- Ensuring the development of the risk management policy and procedures and the risk assessments and control measures plans.
- Development of a reporting system for all identified risks.
- Oversee operational policies for risk management and reporting identified risk situations.
- Ensuring that the risk management procedures are understood and effectively communicated.
- Ensuring that all staff and contracted individuals are consulted in respect of risk management issues aligned to their roles.

Risk Assessment – Finance Officer/Contracted Activities/H and S Consultants/

- Providing direction on the development of the risk register for analysing of the impact of identified risk areas.
- Identifying, analysing and evaluating risks at multiple levels in the organisation.
- Advise Quality Team of all identified risks.
- Assist to monitor and review the risk register as appropriate and advise on management plans.
- Reviewing processes in place for risk to identify and assess the level of risk involved in business areas as required.

10.3 Risk Register

ISO 9001:2015 - 6.1 Actions to address risks and opportunities, 5.1.2 Customer Focus

It is The CPL Institutes policy that the following information in relation to hazard/risk description is identified and recorded within the Risk Register. Each entry is recorded in the following way:

- a) A unique reference number for each entry.
- b) Description of the Hazard/Risk description.
- c) The risk rating based on the probability and severity.
- d) Description of the existing risk controls.
- e) Description of the additional actions required to reduce the risk and target date for completion.
- f) Risk Owner.

g) Residual risk.

The risk register is maintained by the Quality and Compliance Manager.

Risk Assessment Methodology

Risk assessment seeks to answer five simple questions related to our working environment, business operations and teaching practices as depicted in figure 7 below:

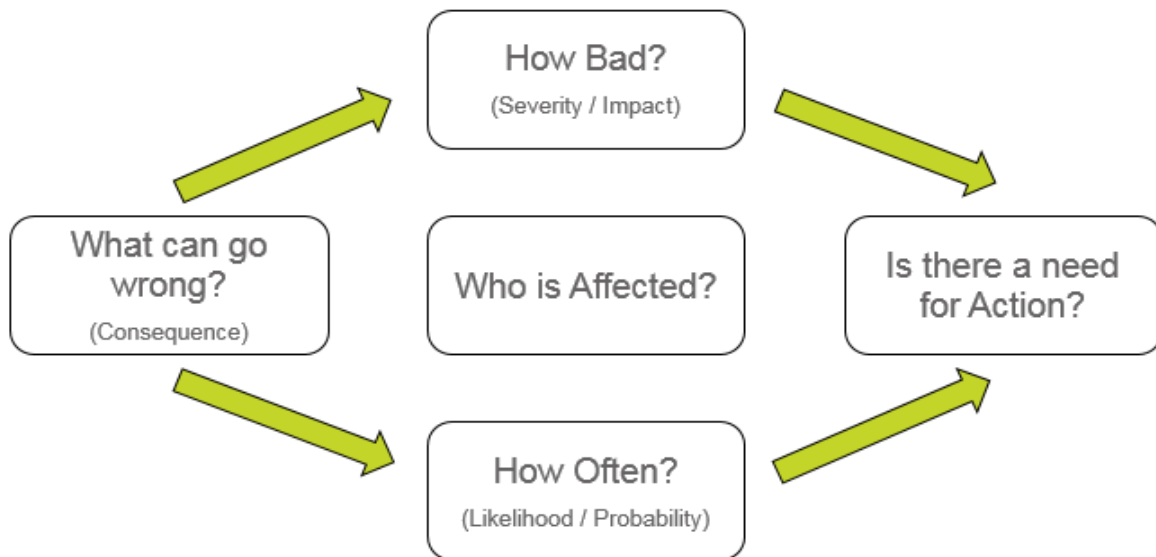


Figure 7: Risk Assessment

The CPL Institute risk management process is built on recognised risk management processes (ISO 31000/9001).

The risk management methodology is designed to actively reduce risk to an acceptable level or as low as is reasonably practicable (ALARP).

The definition of a risk is the predicted probability and impact of the consequences or outcomes of a hazard. Risk Assessment is the process of identifying, analysing and evaluating a risk to ensure the appropriate controls are in place and the risk is managed appropriately.

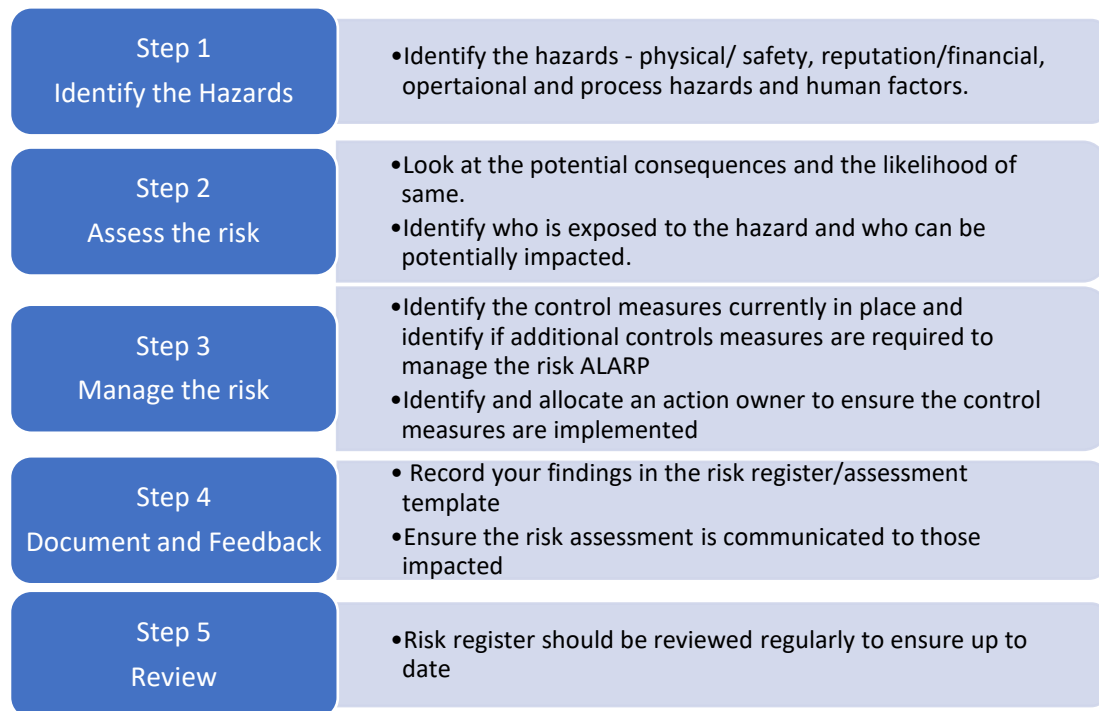


Figure 8: Risk Management

10.4 Risk Management Process

ISO 9001:2015 - 6.1 Actions to address risks and opportunities

Step 1: Risk Identification

Identify hazard to the operation and recording each hazard and the risk description on to the risk matrix and the control measures under the identified category.

Step 2: Assess the Risk- categories and classification

Using the 5 x 5 rating scale, analyse the risks in terms of likelihood and impact using the following steps:

1. Score the Likelihood

Consider the likelihood that each risk may occur. Record the level under the column heading – (Likelihood “L”) on the risk assessment register.

Likelihood Criteria

The following applies when considering the likelihood of the event taking place:

- Remote – Exceptional circumstances.
- Unlikely – Rare probably of occurring.
- Possible – Might or could occur at some time.
- Likely – Occur in most circumstances.
- Highly Likely – Expected to occur in most circumstances.

2. Score the Possible Impact

Consider the possible impact that each risk may have. Record the level under the column heading – (Impact “I”) on the risk assessment

Impact Criteria

The following applies when considering the event taking place:

- Insignificant – Low level impact with negligible consequences.
- Minor – The consequences could threaten the role at hand, requires observation to minimise impact.
- Moderate – A significant/medium potential of causing harm or difficulties.
- Major – High potential to cause significant occupational health, safety and welfare incident(s), financial loss or reputation damage.
- Extreme – Extreme potential to cause very serious occupational health, safety and welfare incident(s) and organisational damage

3. Calculate the Risk Level

Use the 5x5 risk matrix to determine the overall risk level of each risk. Record the outcomes and scores and link to required control measures. Core Stages

- Discuss the actions to be taken to mitigate against each risk and record on the risk assessments.
- Review and amend as required but no less than yearly.

Prioritise highest rated risks concerns, and identification of new control measures required to mitigate these.

The product of the risk probability and risk severity score derives the risk rating:



Table 1: Risk Rating Matrix

RISK MATRIX						
		Severity /Impact				
		1 Insignificant	2 Minor	3 Moderate	4 Major	5 Catastrophic
Likelihood	5 Frequent	5	10	15	20	25
	4 Occasional	4	8	12	16	20
	3 Remote	3	6	9	12	15
	2 Improbable	2	4	6	8	10
	1 Extremely Improbable	1	2	3	4	5

Table 2: Risk Tolerability

Risk Tolerability	Description	Action Required
Intolerable Risk 15 - 25	<i>The risk level is unacceptable under the existing circumstances. Additional mitigations must be implemented, or event or associated activities must be cancelled</i>	Where an Intolerable risk is identified, the activity must be stopped until further actions are identified to bring the risk to an acceptable level.
Moderate Risk 6 – 14	<i>The risk level is acceptable based on the identified risk mitigations in place.</i>	Tolerable risks must be reviewed by Risk owner / risk assessment group. Addition actions should seek to reduce the risk to as low as practicable. Risk actions must be monitored.
Acceptable Risk 1 - 5	<i>Acceptable risk – No immediate action / further action required</i>	Risk owner / risk assessment group must ensure control measures in place remain in place.

Depending on the likelihood and severity of a risks, they may be red risks (Intolerable), amber risks (Tolerable) and green risks (Acceptable).

The CPL Institute reduces risks to ALARP and to manage the risk accordingly. This is outlined in Table 2: Risk Tolerability.

Risks are assessed on both an inherent (as is status with controls already in place) and residual basis (after additional mitigation measures have been incorporated).

Once the risk has been rated, it is assessed with a view to deciding whether the level of residual risk is tolerable and what further action is required.

4. Management of Risk Controls and Mitigating Actions

When the risk rating is identified as within the tolerable or acceptable region, the Risk Assessment Group must consider potential mitigating actions to reduce the probability and/or severity to as low a level as reasonably practical in line with the hierarchy of controls.

There are several ways in which risk can be reduced, as illustrated in the graphic below.

1. Avoid the Risk

Avoiding a risk is considered when the consequence of a risk is too high to accept and cannot be easily reduced or shared. Avoiding risk may involve:

- Not undertaking the activity that would create the risk
- Removing the source of the risk
- Termination of the activity from quality and financial perspectives

2. Reduce the Risk

The following may reduce or control the likelihood of an event occurring:

- Policies and Procedures
- Internal and External Audits
- Contractual Conditions
- Preventive Measures
- Continuous Quality Improvement Activities
- Adherence to Quality Standards
- Staff Training
- Support and Supervision

3. Share the Risk

The following should be considered for sharing risk:

- Using a third party to complete a specialist or difficult activity (Second Provider agreements)
- Using Insurance (Check that the insurer and insurance policies are suitable and will cover specific risks)
- Limiting liability by using waivers and disclaimers

4. Accept the Risk

The acceptable net risk threshold is described as follows:

- Not undertaking any activities that would have an extreme impact on the organisation, unless the likelihood of occurrence is at the lowest level and after all control measures have been taken.
- We will not undertake any activities that would have a major impact on the organisation where it is seen that risks are highly likely to occur.
- All activities sitting in the minor/moderate risk group will be concerned only when we can address all risks with control procedures.

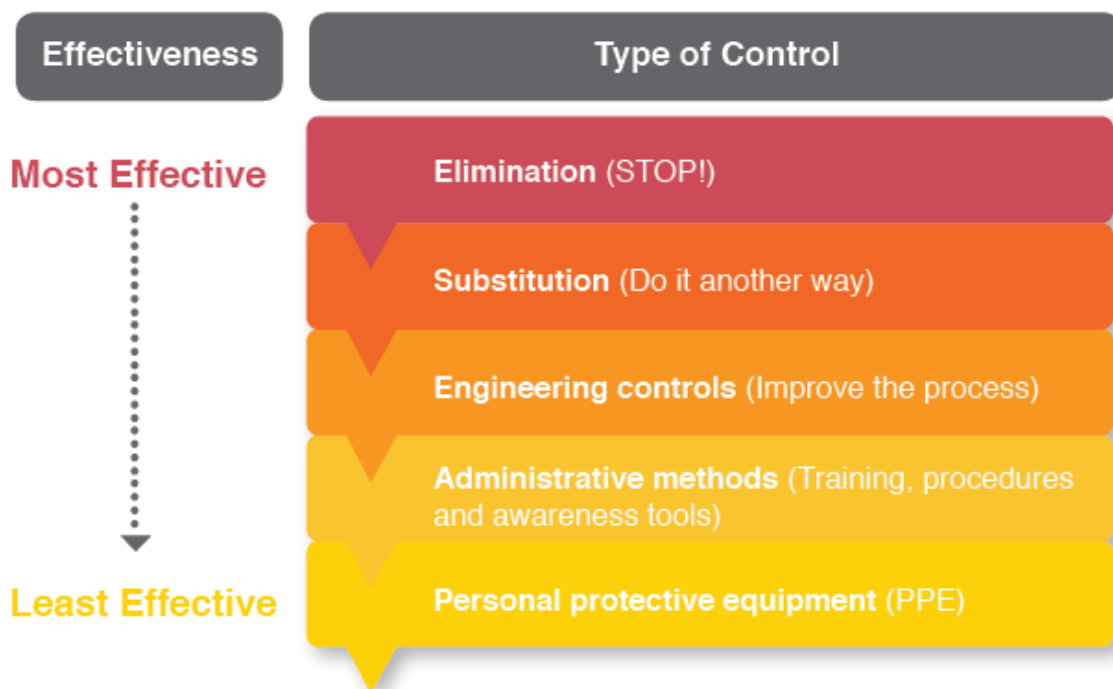


Figure 9: Risk Reduction Measures

In deciding what is the best way in which to reduce the risk for a particular situation, it must be kept in mind that not all mitigating measures reduce risks to the same extent. Before a decision is taken to focus on a specific action, the effectiveness of the various options needs to be evaluated. As a rule, mitigation will involve a combination of approaches involving the following key defences: i.e., technology, training and procedures/regulations as appropriate.

5. Document and Feedback

All risk assessment must be documented in the risk register to manage and control risk assessment. This will be implemented through the filename using the following sequence.

Business activity - Activity/Task - Revision Number - Example: PHECC – New CPG -001

Once any change has been made to the risk assessment or risk register entry, the revision number must be changed in the filename to reflect this.

The revision number can be changed as often as required.

5. Review and Reporting

All instructors are required to submit feedback on the completion of a course delivery. Feedback is monitored and reviewed for hazards or trends that could constitute a risk to the overall business or operation.

All operational issues arising are recorded in a nonconformance log. This is monitored and reviewed for hazards or trends that could constitute a risk to the overall business or operation.

Upon the revision of the risk assessment the revised controls will be communicated to applicable staff.

A risk review must be carried out if there has been a change or proposed change to the activity and/or level of risk. Examples of what could trigger a risk review:

- Changes in task/activity e. g, significant change to course approvals, change to delivery such as moving to online delivery.
- Accidents/Incidents/increase in non-completion rates etc
- Introduction of new systems/process/equipment
- Significant change in staff levels/business model
- Significant change in accreditation body/industry practice
- Once a new risk assessment revision has been created the superseded document must be removed from circulation and archived by the business unit.

It is the responsibility of the Risk Owner to ensure the hazard on the risk register is kept up to date.

Based on the overall profile of the risk identified, risks are escalated through to the Associate Director and reviewed annually by the academic committee.

Risk will also be reviewed when the risk profile has changed for example if increased/decreased due to a change in circumstances or new risk identified. This allows the business to be aware of significant risks which may impact the company or its operations and how they change over time.

Similarly, such information will be communicated regularly to the Group Director as part of the company's overall governance arrangements.

10.5 The CPL Institute Risk Matrix

ISO 9001:2015 - 6.1 Actions to address risks and opportunities

Score	1	2	3	4	5
Impact Definition	Insignificant	Minor	Moderate	Major	Catastrophic
People/Safety	<p>Minor impact on Skills</p> <p>Minimal injury or illness requiring no time off work – Few consequences.</p>	<p>Minor impact on capability</p> <p>Minor injury or illness requiring time off work for < 3 days. Nuisance operating limitations. Use of emergency procedures.</p>	<p>Unavailability of core skills affecting service</p> <p>Injury requiring time of work for 4-14 days. Significant reductions in safety margins, Serious incident. Injury to persons.</p>	<p>Unavailability of critical skills affecting service</p> <p>Injury leading to long term incapacity/disability. Substantial reduction in safety margins.</p>	<p>Protracted unavailability of core skills affecting service</p> <p>Incident leading to death or multiple permanent injuries or irreversible health effects.</p> <p>Multiple deaths.</p>
Operations/Process	<p>No significant operational impact, stakeholders not impacted, no external media or regulatory focus.</p> <p>Reduced service.</p> <p>No academic risk.</p>	<p>Minor operational impact some stakeholders aware but negligible operational impact.</p> <p>Minor Damage/loss key information/process does not correct.</p> <p>No academic risk.</p>	<p>Increased operational impact: significant stakeholder awareness and some inconvenience.</p> <p>Compromise key information/process impacting on service or customer satisfaction. Some impact on teaching/academic process.</p>	<p>Large operational impact; loss of service to stakeholders, significant governance weakness.</p> <p>Compromise of key information/process impacting on regulatory requirement/confidential data/learning experience.</p> <p>Impact on quality of teaching/academic process.</p>	<p>Significant impact on operations; loss of stakeholder confidence and major inconvenience; external investigation; major governance weakness; total systems failure. Regulatory noncompliance.</p> <p>Significant Impact on quality of teaching/academic process.</p>

Reputation/Financial	Local only, quickly forgotten. Impact on annual budget minor.	Scrutiny by board of directors - short term impact Impact on annual budget < 10 %	Persistence concern - Scrutiny by external agencies/stakeholders. Impact on annual budget < 10 %	Long term brand impact. Major operations/sales impact. Impact on annual budget. 10/20 %	Major impact on long term ability to delivery company mission/affecting organisational abilities. A major impact on Annual budget > 30 %
Score	1	2	3	4	5
Likelihood Definition	Extremely Improbable	Improbable	Remote	Occasional	Frequent
Meaning	Only in Exceptional circumstances. Greater than 1 in 10 – year event.	Not expected to occur. 1 in 5-year event.	May occur. Annual event.	Will probably occur, but not persistently. Quarterly event.	Will probably occur frequently. Monthly or more frequent event.

References

Regulatory and Related Legislation

- ISO 9001:2015 Quality management system - Requirements
- Qualifications and Quality Assurance (Education and Training) Act 2012
- QQI Core Statutory Quality Assurance Guidelines (2016)
- QQI Quality Assuring Assessment Guidelines for Providers (Revised 2013)
- QQI Assessment and Standards (Revised 2013)
- QQI Guide on How to Reset/change QBS Password
- Sector Specific Independent/Private Statutory Quality Assurance Guidelines (2016), QQI
- QQI Policy Restatement - Policy and Criteria for Access, Transfer and Progression in Relation to Learners for Providers of Further and Higher Education and Training (NQAI, 2003, Restated 2015)
- QQI Policy Restatement - Policy and Criteria for Access, Transfer and Progression in Relation to Learners for Providers of Further and Higher Education and Training (NQAI, 2003, Restated 2015)
- Principles and Operational Guidelines for the Recognition of Prior Learning in Further and Higher Education and Training (2015)
- Policies and Criteria for the Validation of Courses of Education and Training – QQI 2017.
- PHECC First Aid Response, Education and Teaching Standard.2018
- Cardiac First Aid Response Community education and Training standard. V3, 2016.
- Emergency First Aid Response Education and Training Standard, 2014.
- PHECC Teaching Faculty Framework, V2 Nov 2021.
- PHECC Quality Review Framework, STN020 2024.
- PHECC Responder Handbook, PUB034, V4, 2019.
- PHECC Recognised Institutions and Affiliation with organisations and faculty, 2017.
- PHECC guidelines for blended learning
- Irish Heart Foundation Reference Guide for Training Site Coordinators

Appendix 1. Context & Interested Parties

ISO 9001:2015 - 4.2 Understanding the needs and expectations of interested parties

Interested Parties the main stakeholders of the CPL Institute who receive our products or services, who may be impacted by them, or those parties who may otherwise have a significant interest in our organization. the purpose of this matrix is to identify operational purpose and strategic direction that may affect our ability to achieve the intended result of the Quality management system.

This chart is to better understand the expectations of our relevant interested parties so we plan to deal with their requirements through the quality management system. The interested party groups, although not exhaustive, are representative of THE CPL Institute main stakeholders.

Power (Effects of influence) = Priority x Relevance		Priority of Interested Party (Effects on decisions)			
		No importance	Minor importance	Some importance	Major importance
Relevance of Interested Party (Effects on activities)	Not relevant	1	2	3	4
	Minor relevance	2	4	6	8
	Influential	3	6	9	12
	Significantly relevant	4	8	12	16

	4.1	4.1	4.2a			4.2b	4.2c	4.3	4.3	4.4	
	External Issues	Internal Issues	Interested Party	Priority (1 to 4)	Relevance (1 to 4)	Power (P x R)	Interested Party Requirements	Criteria & Methods	QMS Scope Applicability	QMS Scope Exclusion(s)	QMS Processes
1	Market impact on the financial performance of the CPL group	Financial present in group leading to operational cost reduction	Stakeholder/Cpl group	4	4	16	To be a profitable accreditation training provider	Monthly sales performance and account management review. Annual forecasting and budget control	Governance	None	Leadership, Role of Sales
	Market Impact on the financial performance of Servisource	Financial present in group leading to operational cost reduction	Stakeholder/Cpl group	4	4	16	To be a profitable accreditation training provider	Monthly sales performance and account management review. Annual forecasting and budget control	Governance	None	Leadership, Role of Sales
2	National Economic performance	Reduced sales	Stakeholder/Cpl group	4	4	16	To be a profitable accreditation training provider	Marketing support/ Monthly sales performance and account management review.	Governance	None	Leadership, Role of Sales
3	Customer corporate client perception	Impact on future business Achieving revenue targets	Current customer	4	4	16	Requirements documented by the contract/sales team Kept satisfied Kept informed	Sales Team manage client requirement at the booking stage. Client requirement form sent to all potential and stored on Airtable. Issue raised at weekly Ops Meeting Client manager assigned to big corporate clients, Manage closely Increase repeat orders	Customer process	None	Order/Quote Fulfilment Customer feedback and satisfaction. Non conformance reviews.
4	Too few qualified tutors/instructors	Impact on ability to provide training service to clients as per contractual arrangement. Supply goods and services on time	Suppliers	3	4	12	Good Communication. No late cancellations. Defined procurement/booking process and frequency. On-time payment.	Sales to manage Instructors. Ensure all Instructor get offered work.	Human Resources	None	Roles and Responsibilities/ management of Instructors
5	Outside competition for recruitment	Job performance	Employees	3	3	9	Good benefits package/fair Pay Safe and healthy environment Keep informed Working time arrangements	Monthly Business Ops Meeting Auditing Annual FRANKI Appraisals Employee feedback	Human Resources	None	Human Resources
6	Specific legislation/regulations	Level of compliance	ISO-Quality Management HSE – Health & Safety Executive	3	3	9	Compliance with accreditation regulations, accurate and timely reporting, technical data and expertise, analysis of business impacts and input into consultations	QMS and performance monitoring in place. ISO monitoring in place. Manage instructor base and change management of document course content as a compliance issue. Monitor industry changes.	Compliance issue	None	Compliance Obligations & Legal Requirements
7	Specific legislation/regulations	Level of compliance	PHECC -Quality Framework and Teaching framework QQI Accreditation.	3	3	9	Compliance with regulations, accurate and timely reporting, technical data and expertise, analysis of business impacts and input into consultations	Accreditation compliance and reporting	Compliance issue	None	Compliance Obligations & Legal Requirements
	Specific legislation/regulations Blended and fully on line learning	Level of compliance	PHECC -Quality Framework and Teaching framework QQI Accreditation.	3	4	12	Compliance with accreditation bodies and validation to delivery course in a blended and fully online format	Accreditation compliance and validations	Compliance issue	None	Compliance Obligations & Legal Requirements
	Specific legislation/regulations	Level of compliance	State law:The Children First Act 2015 introduces statutory obligations for organisations providing services to children, as defined in that Act.	3	3	6	To keep children safe from harm while availing of services. carry out a risk assessment. prepare and publish a Child Safeguarding Statement.	Accreditation compliance and reporting	Compliance issue	None	Compliance Obligations & Legal Requirements
8	Contracted Instructors	Compliance with SLA Manage Job Performance	The CPL Institute, Corporate Clients, Learners	2	4	8	Kept satisfied Kept informed/ good communication is essential	Requirements documented by the contract and SLA monitor courses for performance. Monitor Course feedback.	Compliance issue	None	Recruitment and selection of Instructors.

Appendix 2. Detailed Roles and Responsibilities

ISO 9001:2015 - 5.3 organizational roles, responsibilities and authorities, 7.1.2 People

Title: Training Quality and Compliance Manager

Summary of Role

The Training Quality and Compliance Manager is responsible for the development and implementation of the Quality Assurance system within The CPL Institute. Making sure adherence to relevant accreditation and QA system requirements of certification bodies. Assist with the management of The CPL Institute's ISO Quality Management System and management of internal training compliance procedures.

Detailed requirements include:

- Manage and implement Quality Assurance systems and procedures designed to enhance and monitor the effectiveness of all The CPL Institute's Courses.
- Ensuring that administration, assessment, data collection, and internal quality assurance procedures are implemented correctly and consistently.
- Work closely with all staff in The CPL Institute implementing and rolling out all Quality Assurance requirements in The CPL Institute.
- Certification is processed in line with ISO/QA requirements and external relevant certification bodies such as PHECC, QQI, IOSH, etc.
- Assist with the development and co-ordination of the appropriate recording systems, documentation, policies and procedures for quality assurance and ensuring that staff and associated stakeholders are familiar with these systems.
- Contribute to Course development process.
- Carry out internal audits, manage audit schedule, maintain records, reports and audit trails.
- Audit reports on Courses, Instructors and Learner evaluations.
- Continuous Evaluation of the effectiveness of the Quality Assurance policies and procedures within the company.
- Prepare reports as required by Boards and Sub-committees.
- Sit on Academic council, relevant boards and sub-committees when requested
- Managing where required, the Learner and client complaints procedure
- Oversee reasonable accommodation policy and report on same.
- Act as Internal verifier and liaising person for Examination Board
- Maintain and update a Quality Improvement Plan
- Oversee an annual self-evaluation and the ongoing monitoring of Courses and associated services, assist with external reviews.
- Ensure that procedures for assessment and moderation are implemented and security and integrity upheld.
- Assist assessment re-checks and cross moderation
- Oversee with the Internal verification process and QQI Certification period admin tasks
- Assist with all stakeholders for certification periods and awards
- Liaise with agencies, support the team to facilitate external Course validation from accrediting bodies.
- Is responsible for the implementation of the appeals policy.
- Maintaining confidentiality and adherence to data protection policies and guidelines.
- Responsible for internal and external audits and corrective actions plans.

Title: Training Manager

Summary of Role

The Training Manager is responsible for the development and management of training within the organisation. Making sure adherence to relevant accreditation and QA system requirements of certification bodies and to assist with the management of internal training compliance procedures and processes with both internal and external stakeholders.

Detailed requirements include:

- Train, coach and manage new and existing employees in administrative roles and support new workflows/procedure and course development.
- Manage the administration and document control of the training process and associated documents/procedures in a structured and process driven manner.
- Manage the training course assessment process (tutor/learner) and the associate submission to the certification bodies.
- Ensure all training materials and process are up to date, validated against current legislation where appropriate, and incorporate best practice for training delivery and learner outcomes.
- Work as part of the management team to determine new ways of working, deliver efficiencies, identify gaps, design and deliver training to provide required knowledge.
- The training manager will partner closely with all areas of the business to understand training needs. Design new course content and update existing Courses in line with the requirement of the quality management system. Training needs encompass theory, system processing, system enhancements, and new/updated processes
- Manage the relationship with the existing tutor/Instructor base and develop new relationships within the industry.
- Work closely with the quality manager in Committee preparation for ISO 9001 audit and industry certification process including QQI, PHECC, IHF and IOSH.
- Play an active part in the ISO management review board and QQI Academic Council meeting and other committee work as it arises.
- Ensure PHECC course are conducted in line with the of PHECC Teaching Faculty Framework, Quality Review Framework STN020 2024 and Education, Training Standards, and guideline for blended learning, as appropriate.
- Ensure IHF course are conducted in line with the Irish Heart Foundation, Reference Guide for Training Site Coordinators.
- Act as the instructional designer for blended and learning course.
- Develop monthly reports on training performance and KPI's.
- Assist in the development and maintenance of a risk register.
- Is responsible for the implementation of this Academic Integrity policy.

Title: Training Administrator

Summary of Role

Responsible for the administration of training taking place nationwide. This role covers all elements of administration from liaising with clients, to confirming bookings, to scheduling of instructors, to the preparation of all training material and processing training records and certificates.

Detailed requirements include:

- Administrative work including answering telephone enquiries, dealing with mail and email and other communications.
- Be the key point of contact for all training courses, either in person, Online or self-paced.
- Dealing with client queries, course changes and general customer service
- Record and track Instructor booking, hotel booking, training pre-courses administration and training paperwork return administration.
- Record and track learner registration and tracking of course records on ARLO and Airtable.
- Act as the internal verification of training results.
- Assist with the submission of training results to the appropriate training certification body.
- Assist in committee meeting preparation for ISO management review board and Academic Council meetings and other committee work as it arises.
- Minute and track actions meeting where required.
- Assist in the documentation and maintenance of process and procedures in conjunction with both the Training and Quality manager.
- Maintaining accurate records on the internal database system.
- Assist in compiling reports and tracking of administration tasks.
- One dedicated Administrator appoint the PHECC training administrator and Internal verifier
- One dedicated Administrator appoint the QQI training administrator and Internal verifier

Title: Sales Executive

Summary of Role

The primary focus of this role is the generation of sales for The CPL Institute with a focus specifically on building relationships with new clients and maintaining relationships with our existing clients nationwide.

Achieving sales targets, pipeline building and successful conversion to sales are some of the metrics of this role which indicate the post holder's success. The role includes:

- Development of a Sales Action plan including targeting Clients for sales development
- Ensure that the company's database of current and lost customers is reviewed and a systematic schedule of visits, conversion to sales and cross selling of services is delivered.
- Identification and targeting of new customers delivering holistic sales opportunities and execution of same

- Ensuring the resources are available to deliver the services required by our clients and appropriate communication with stakeholders to ensure this is the case.
- Appropriate reporting of sales operations including, outbound calls, emails, client drops, visits, conversions in line with the outbound Sales Action Plan devised and agreed with the Associate Director.
- Accurate and effective pipeline forecasting weekly and monthly to ensure performance to expectation.
- Effective relationship management with the Training Coordinators to ensure all sales information required to deliver our services professionally are given on a “Right First Time” basis including billing information and PO’s.
- Effective internal and external relationship management
- Development of one’s own network by attending appropriate networking events, development and maintenance of own professional networking sites such as LinkedIn.
- Continuous professional and personal development in line with the evolving offering of the organisation and your ability to capitalise and develop with it.
- Positive and proactive relationship management with the Learning and Development functions to ensure appropriate product knowledge and competence development.

Title: Assistant Tutor/PHECC

Summary of Role

To support the delivery of all PHECC Responder Courses within the organisation, provide supervision for learners and act as peer supports Responder Instructors, and Faculty staff. These roles are essential to the faculty provisions and are guided by the PHECC Teaching Faculty Framework Document.

Detailed requirements include:

- Motivate, support and guide learners to improve practice
- Identify teaching, learning and development need within the faculty
- Assist in the supervision of all training Courses, particularly instructor Courses and monitoring of same
- Assist in the identification of learner supports and provide guidance where required
- Assist in the design, development and review of all training Courses within the organisation, particularly at practitioner level.
- Ensure that lesson planning and mapping are completed in line with PHECC Education and Training Standards.
- Delivery training using appropriate methodology and interpersonal skills, in line with AT/T Courses.
- Report on matters arising in Responder Courses and advise of any corrective/remedial actions taken.

Competencies and Qualifications

Always maintain certification - CFRA Instructor Qualification must be maintained - Met renewal criteria for PHECC every submission period - Garda Vetted, Safeguarding and GDPR Trained - Regular participation in CPC training, events, reviews - Commitment to quality training on

behalf of the organisation - Mechanism for Review: - Continuous involvement in training provision and monitoring on behalf of the organisation

Contracted Instructors

Summary of Role

Represent The CPL Institute and Delivering Course content, coaching, tutoring and assessing Learners on all The CPL Institute Courses in accordance with stated learning outcomes for individual modules and the overall Course outcomes.

Key Responsibilities:

- Working to The CPL Institute published Quality Manual process, specifically within the requirement of the PHECC Teaching Faculty Framework and PHECC Education and Training Standard, Irish Heart Foundation requirements, or the requirements of the QQI Core Quality requirements as appropriate.
- Are required to deliver service as outlined in their contract and service level agreement. Informing learners of the course outline, delivery and assessment. Provide support where required.
- Act as the first point of contact for the learner with an issue relating to the course of study and its components
- Affiliate Instructors (PHECC) must inform the learner of their status as an Affiliate and the relationship to The CPL Institute relationships.
- Inform the administrator of any additional student supports required or student non-attendance. Inform the sales team at the time of booking if the learners are under 18 years of age or classed as vulnerable persons,
- Inform the training administrators of any change to availability, including unavailability due to ill health.
- Inform the training administrator of any operations issues, health and safety concerns/complaints
- Ensure appropriate Contractor (Instructor)-to-learner ratios are adhered to.
- Ensure learners are aware of the access, transfer, progression and RPL for the course.
- Ensure that the course accreditation information is discussed at the beginning of the course.
- Ensure all learners have been advised to complete online learner feedback
- Ensure that learners are made aware of how to access additional information on additional learner support, appeals and complaints procedures.
- Ensure that they are familiar with the current lesson plan and assessment procedures for the course to ensure implementation of current curriculum.
- Ensure that teaching is conducted with awareness of how to accommodate the cultural backgrounds and different learning styles of students.
- Ensure sufficient up-to-date resources (appropriate to the level of the course) are made available to learners. (PHECC course materials must be sourced through The CPL institute)
- Ensure PHECC approved courses are delivered in keeping with PHECC education and training standards and clinical practice guidelines.

- The Instructor should all times be aware of and ensure teaching is conducted in line will all regulatory requirement for GDPR and ensure documentation must be stored securely.
- The instructor is responsible for conducting all assessments in line with accreditation bodies requirements and as described in the Service Level Agreement.
- Ensure that all course documents are competed in full and returned in a timely manner.

Appendix 3 Communications Matrix

ISO 9001:2015 - 7.4 Communication.

Communication Type	Objective of Communication	Medium	Frequency	Audience	Owner	Format
Operations and Quality Meeting	Team review of operations and sales for the coming week. Review and tracking of operations issues and projects. Quality items discussed and tracked.	Face to Face/ Conference Call	Weekly	Associate Director, Quality Manager, Training Manager, Admin Team Sales Team	Associate Director	Standing Agenda Meeting Minutes, Soft copy archived on SharePoint site
Quality Meeting	Review of Quality monitoring, Compliance, process review.	Face to Face/ Conference Call	Twice yearly with Team Weekly with Associate Director	Quality Manager, Training Manager, Admin Team	Quality Manager	Soft copy archived on SharePoint site
ISO 9001 Management review meeting	To review and evaluate the effectiveness of your Management System, helping you to determine its continued suitability and adequacy	Face to Face/ Conference Call	Annual Review with Associate Director and Training Manager	Quality Manager, Training Manager,	Quality Manager	Soft copy archived on SharePoint site
Risk and programme developed	To review and manage risk register, risk assessments and discuss and new courses being developed that require accreditation provider approval	Face to Face/ Conference Call	Twice yearly review with Associate Director and Training Manager	Quality Manager, Training Manager,	Quality Manager	Soft copy archived on SharePoint site

Examination Board Meeting	Review of all QQI courses and submission, Review of Internal/External verification, and exam results approval.	Face to Face/ Conference Call	Bi- Monthly	Quality Manager, Training Manager, Admin Team	Training Manager	Soft copy archived on SharePoint site
Programme review Board meeting	Review of existing course programmes to maintain compliance and to discuss ongoing development	Face to Face/ Conference Call	Twice yearly	Quality Manager, Training Manager, Admin Team	Training Manager	Soft copy archived on SharePoint site
Stakeholder CEO Servisource	Report on the status of the project including activities, progress, costs, and issues.	Teams meeting Conference Call	As required	Associate Director	Senior Manger	Resolution of operational and budgetary issues. Strategic plan
Sales Team Meeting	Review of latest sales Review of operational Issues	Conference Call	Weekly	Sales team	Associate Director	Discussion on Operations Issues. Review of quote pipeline. Review of Airtable Client Requirement.
Stake holder (Tutor/Instructor)	Report updates on changes from Accreditation bodies and changes to quality management practices.	Email	As required	Quality Manager Training Manager	Quality Manager Training manger	Emails saved to SharePoint

Stakeholder (Accreditation bodies) QQI-PHECC, IHF - IOSH-RAC	Receive updates on changes from accreditation bodies via subscription to QQI, IHF and PHECC email distribution. Quality manager is the central point of contact. Respond to request for Information	Email	As required	Quality Manager	Quality Manager	
The CPL Notice Board newsletter	Notification of teaching/Admin updates or changes from Accreditation bodies and change to quality management practices.	Email distribution	As required	Instructors	Training Manager	Email stored on SharePoint
RI-ATI Info <ri-ati-info@phecc.ie >	All queries inbound to PHECC and updates outbound from PHECC	Web based queries portal and outbound from PHECC by email distribution	As required	Quality Manager and PHECC Administrator	Quality Manager and PHECC Administrator	Web based and email
Q Hub/Qhelp	All queries inbound to QQI and registration of submission and exam results.	Web based queries portal	As required	Training Manager and QQI Administrator	Quality Manager and PHECC administrator	Web based and email

ARLO email confirmations	Course booking confirmation and appointment schedule and course materials	Web based on ARLO system	Daily/ As required	Learners	Associate Director and sales team/administrators	System based and email
ARLO email confirmations	Course booking confirmation and appointment schedule and course materials	Web based on ARLO system	Daily/ As required	Instructors	Associate Director and sales team/administrators	System based and email
resus@irishhearth.ie	All queries inbound to IHF and updates outbound from IHF	Email based queries portal and outbound from IHF by email distribution	As required	Quality Training Manager and IHF Administrator	Quality Manager and IHF Administrator	Web based and email

Appendix 4, Data Rights Management

ISO 9001:2015 - 7.5 Documented information

Link Available here

[The CPL Institute Privacy Policy](#)

Appendix 5 Intellectual Property and Copyright

Link Available here

[Intellectual Property and Copyright Policy](#)

Appendix 6 Child Safeguarding Statement

ISO 9001:2015 - 4.2 Understanding the needs and expectations of interested parties

Link Available here

[Child Safeguarding Statement](#)

Appendix 7- Equality, Diversity, Inclusivity, and Accessibility in Learning and Teaching Policy

Link Available here

[Equality, Diversity, Inclusivity, and Accessibility in Learning and Teaching Policy](#)

Correlation Matrix: ISO 9001:2015 to The CPL Institute Quality Management System Manual

ISO 9001 Clause References	CPL Manual Section	Manual Section Reference
ISO 9001 Clauses - PLAN		
1 Scope	Section 1	Introduction
2 Normative references	Title	
3 Terms and Definitions	N/A	
4 Context of the organization	Title	
4.1 Understanding Context of the organization	1.1	Company Profile
4.2 Understanding the needs and expectations of interested parties	1.2	Relevant and Interested Parties
	3.2	Human Resources, Roles and Responsibilities
	3.7.1	Separation of Academic Governance and Training Delivery
	3.6	Code of Conduct – Staff and Contractors
	7.8	Certification Process
4.3 Determining the scope of the quality management system	2	Management System Scope
	3	Governance introduction
4.4 Quality management system and its processes	2.1	Quality Management Systems Purposes
	9.3	Design and/or Development of Training Course Policy
	8.1	Analysis of Data Key Performance Indicators
5 Leadership	Title	
5.1 Leadership and commitment	3.2	Human Resources, Roles and Responsibilities
	1.4	The CPL Institute Mission Statement and Values
5.1.1 Leadership And Commitment For The Quality Management System	2.3	Leadership and Management Commitment
5.1.2 Customer Focus	3.2.11	Learner Representative
5.2 Policy	2.4	Quality Policy
5.2.1 Establishing the quality policy	2.4	Quality Policy
5.2.2 Communicating the quality policy	2.3	Leadership and Management Commitment
	2.2	Quality Culture

5.3 organizational roles, responsibilities and authorities	3.2	Human Resources, Roles and Responsibilities
	Appendix 2.	Detailed Roles and Responsibilities
6 Planning	Title	
6.1 Actions to address risks and opportunities	3.7.3 Section 10	Risk and Course Development Committee Section 10 - Risk Management
6.2 Quality objectives and planning to achieve them	Section 10	Section 10 - Risk Management 9.3 Analysis of Data Key Performance Indicators
6.3 Planning of changes	2.5 3.7.3	Quality Principles Cycle Risk and Course Development Committee
ISO 9001 Clauses - DO	Title	
7 Support	Title	
7.1 Resources	N/A	
7.1.1 General	3.3 3.2.10 3.4	Recruitment and Selection of Staff External Examiner Recruitment and Induction of Instructors
7.1.2 People	3.4	Recruitment and Induction of Instructors
7.1.3 Infrastructure	6.2.2 4.8	Learning Environments- Assuring Physical Premises, Equipment, and Facilities Communication Methods and Technologies
7.1.4 Environment for the operation of processes	6.2.1 3.6 6.2.2 3.9 3.8	Reasonable Accommodation and Diversity Policy Code of Conduct – Staff and Contractors Learning Environments- Assuring Physical Premises, Equipment, and Facilities Child Safeguarding and Work Placement Protection Policy Equality and Diversity Policy
7.1.5 Monitoring and measuring resources	Title	
7.1.5.1 General	6.1.7 6.1.8	Monitoring Teaching and Learning Academic Integrity
7.1.5.2 Measurement traceability	N/A	N/A
7.1.6 organizational knowledge	3.4 4.8 4.10	Recruitment and Induction of Instructors Communication Methods and Technologies Communication Escalation Process

7.2 Competence	3.3 3.2.10 3.4 3.2.9	3.2 Human Resources, Roles and Responsibilities Recruitment and Selection of Staff External Examiner Internal Verifier Recruitment and Induction of Instructors
7.3 Awareness	3.7 2.3 4.7	Oversight and committees Leadership and Management Commitment Internal and Staff Communications
7.4 Communication	4.0-4.10	Introduction Communications Management Approach Corporate Clients and Stakeholder Communications Internal and Staff Communications Communication with Learners Communications with Instructors Communication Escalation Process
7.5 Documented information	Title	
7.5.1 General	2.3	Documented Approach to Quality
7.5.3 Control of documented information	5.1-5.5	Control of Documents Control of Records Control of Learner Records Control of Information and Data – GDPR Use of the Personal Public Service Number (PPS Number) - QQI only
8 Operation	Title	
8.1 Operational planning and control	Section 6	Section 6 – Operational Planning and Control - Teaching and Learning
8.2. Requirements for products and services	4.3 4.4 4.5 3.7.3 3.7.4	Corporate Clients and Stakeholder Communication, Communication with Learners Communication with Instructors 3.7.3 Risk and Course Development Committee 3.7.4 Course Review Board
8.3 Design and development of products and services	8.1 3.7.4 8.1 8.4	Design and/or Development of Training Course Policy Course Review Board Design and/or Development of Training Course Policy Course Maintenance and Approval

8.4 Control of externally provided processes, products and services	6.1 6.1.7 6.2.2 7.7 7.9 7.1 7.6 8.1	Teaching and Learning Policy Monitoring Teaching and Learning, Learning Environments- Assuring Physical Premises, Equipment, and Facilities Assessment Result Approval Consistency of Marking and Cross moderation Assessment of Learners Policy Assessment Verification Design and/or Development of Training Course Policy
8.5 Product and service provision	6.0 6.1.1 7.1 3.7.1 3.7.4 3.7.2 3.2.10	Control of Service Provision - Teaching and learning Learner Admission Policy Assessment of Learners Policy Separation of Academic Governance and Training Delivery Course Review Board The Academic Council External Examiner
8.6 Release of products and services	8.1 7.8 739	Section 8 Design and/or Development of Training Course Policy Certification Process Consistency of Marking and Cross moderation 3.7.4 Course Review Board
8.7 Control of nonconforming outputs	9.4 6.2.3	Control of Product/Nonconforming Services (Complaint/Failures)/Corrective action Learner Issues/Customer Complaints/Rechecks and Appeals
ISO 9001 Clauses - CHECK		
9 Performance evaluation	Title	
9.1 Monitoring, measurement, analysis and evaluation	9.2	Monitoring and Measurement of Processes – Course Evaluation/Customer satisfaction
9.1.2 Customer Satisfaction	9.2	Monitoring and Measurement of Processes – Course Evaluation/Customer satisfaction
9.2 Internal Audit	9.5	External Expertise and Internal Audit
9.3 Management Review	9.8	ISO 9001:2015 Quality Management Review
ISO 9001 Clauses - ACT		
10 Improvement	Title	

10.1 General	9.2 9.5 9.7	Monitoring and Measurement of Processes – Course Evaluation/Customer satisfaction External Expertise and Internal Audit Provider Self Evaluation, Monitoring and Quality Improvement Plan
10.2 Nonconformity in ISO 9001		
10.2 What is Non-conformance?	9.4 6.2.3	Control of Product/Nonconforming Services (Complaint/Failures)/Corrective action Learner Issues/Customer Complaints/Rechecks and Appeals
10.2 Corrective Action	9.4 6.2.3	Control of Product/Nonconforming Services (Complaint/Failures)/Corrective action Learner Issues/Customer Complaints/Rechecks and Appeals
10.3 Continual Improvement	9.3	Analysis of Data Key Performance Indicators