

Developing New Elements of the HCQF Procedure

Section 1 - Introduction

Purpose and Parent Policy

(1) This procedure sets out the steps for development of new policies or procedures for the Hibernia College Quality Framework (HCQF) and other documented elements of the HCQF. [The Hibernia College Quality Framework \(HCQF\) Policy](#) is the parent policy.

Responsibilities

Staff Responsibilities

(2) The Quality Assurance and Enhancement Manager, under the guidance of the Registrar, is responsible for the day-to-day management of the HCQF and for editing the documented elements of it and ensuring it is up to date and effectively communicated to all College stakeholders.

(3) All staff in the College are responsible for contributing to draft policies and procedures when invited to contribute.

Faculty Responsibilities

(4) All Faculty and Adjunct Faculty are responsible for contributing to drafting policies and procedures when invited to contribute.

Hibernia College Governance

(5) The approval of policies and procedures is set out in the [Governance and Management Policy](#).

Section 2 - Procedure for Developing New Elements of the HCQF

Part A - Procedure for Developing a New Policy

Development Planning

(6) The need for a policy in a given area is identified. It could be identified by:

- a. A change in the regulatory environment
- b. The outcome of an internal or external QA event
- c. Developments within the College, such as the approval of a new programme
- d. Issues raised by members of the College community, through the members of the Academic Board, relating to any policy and procedure (The Academic Board decides whether to accept such a request.)

(7) The Quality Assurance and Enhancement Manager, in consultation with a key author and Executive Management

Team (EMT), develops a brief and plan for production of a policy including consideration of:

- a. Impact of development
- b. Stakeholder consultation
- c. Timeline for production and a governance decision

Drafting and Consultation

(8) The key author, with the assistance of the Quality Assurance and Enhancement Manager, prepares a draft of the relevant policy using the brief in consultation with colleagues and members of the College community.

(9) This step may be iterated until a satisfactory draft is prepared.

Finalisation

(10) Following the development of a draft, a final proposal is prepared which takes account of:

- a. The policy template
- b. Dependencies and internal consistency within the HCQF
- c. Regulatory considerations
- d. Development of an implementation plan and communication plan for the policy
- e. Presentation of the proposal to the relevant governance and decision-making body

(11) Finalisation is a joint responsibility of everyone involved in the process but is overseen by the Quality Assurance and Enhancement Manager.

Governance Decision

(12) When the final proposal is put to the relevant governance and decision-making body, they may approve, not approve or propose changes to the draft.

(13) Changes can be proposed pending approval or resubmission to the relevant body as specified in the [Governance and Management Policy](#) and [The Hibernia College Quality Framework \(HCQF\) Policy](#).

(14) When the relevant governance committee has approved the policy, it will be communicated and implemented accordingly.

- a. In the case of governance policies, these are forwarded to the CEO who will recommend their approval to the Board of Directors.

Implementation

(15) As part of the development and drafting process, early consideration is given to implementation in the form of an implementation and communication plan.

(16) This is a document which supports the integration of the policy into day-to-day work and Standard Operating Procedures (SOPs). The implementation and communication plan should consider:

- a. Resource requirements
- b. Changes to SOPs, roles and responsibilities
- c. Training requirements for Staff and Faculty
- d. Communication requirements to notify Staff, Faculty and students about changes

(17) It is important to note that development and implementation of policies and procedures are not isolated from one another. Development has to bear implementation in mind early in order for the documented changes to be implemented as intended.

Part B - Procedure for Procedure Development

(18) The development of a procedure is procedurally equivalent to the development of a policy, with due consideration given to the fact that a procedure must stem from a parent policy and cannot be developed in isolation.

Part C - Procedure for Development of Strategies and Resources

Strategy Development

(19) Strategies are developed as needed and determined by the EMT.

(20) The procedure for development of strategies conforms as closely as possible to the procedure for development of a policy, adapting what needs to be adapted for the procedure to remain suitable.

Resources

(21) Resources are developed to meet the needs of the policy area, as determined by the person or body with primary responsibility for implementation of the policy.

(22) The procedure for development of resources conforms as closely as possible to the procedure for development of a policy, adapting what needs to be adapted in the process.

Status and Details

Status	Current
Effective Date	2nd November 2020
Review Date	2nd November 2023
Approval Authority	Academic Board
Approval Date	23rd September 2020
Expiry Date	Not Applicable
Enquiries Contact	Quality Assurance

Glossary Terms and Definitions

"Policy" - Policies are principled statements adopted by the College at a high level to enable decisions about actions and desired outcomes to which the College is committed. They clearly articulate the formal position of the College on specific issues in order to guide internal decision-making. Policies set out 'what to do' on a given issue. They have a medium- to long-term review cycle.

"Procedure" - Procedures are the broad actions that must be carried out to implement a policy. They set out 'how to do' what the policy specifies must be done.