Quality Assurance and Enhancement Policy (QA-Pol-023)

Document Title	Quality Assurance and Enhancement Policy
Document Number	QA-Pol-023
Version	2.0
Department	Quality Enhancement Office
Owner/Responsible for Implementation	QA Manager
Approving Body	Senior Management Team
Effective date:	February 2024
Next Review date:	February 2027
Related Documents	QA-Pol-022 – Risk Management Policy QA-GL-021 – Policy and Procedure Guideline QA-GL-024 – Internal QA Review Guideline

1. Purpose

This overarching policy is an explicit commitment to quality assurance and quality enhancement in all RCPI activities. The purpose of this policy is to ensure that:

- RCPI policies are underpinned by procedures and accountability
- Effective processes are in place to ensure that all RCPI offerings meet an acceptable threshold of quality in all aspects of their development and delivery and that this threshold is continuously elevated
- RCPI has a proactive approach to quality assurance through on-going monitoring, review and enhancement

2. Scope

The policy applies to all staff in RCPI and to all activities relating to the development, delivery and review of all offerings as well as to all activities that support the core business of RCPI. This policy is applicable to work that is subcontracted to, or outsourced to other parties.

3. Responsibilities

The QA Manager is responsible for the implementation of this policy.

4. Quality Assurance and Enhancement - Guiding Principles

4.1   RCPI Policies and Procedures:

- are informed by the relevant quality assurance guidelines (i.e. QQI, IMC) and relevant legislation
- are contextually relevant
- are customer centred
- focus on continuous improvement
- support a system of accountability
- facilitate diversity and support innovation

4.2   Offering development and delivery is undertaken by suitably qualified and experienced staff in collaboration with senior clinicians who have practical experience in the relevant areas.

4.3   RCPI ensures accountability for quality assurance and enhancement through:

- Subsidiarity principle as summarised on the coversheet of every policy and procedure
- Clarity of roles, responsibility and authority
- Engagement of all staff in the QA system
- Integration of regulatory obligations into the QA framework

4.4   RCPI adopts the Plan, Do, Study, Act (PDSA) model for its monitoring and review activities and follows up on review with the execution of detailed action plans. Working with the PDSA cycle ensures that areas for improvement are identified and strengths are built upon.
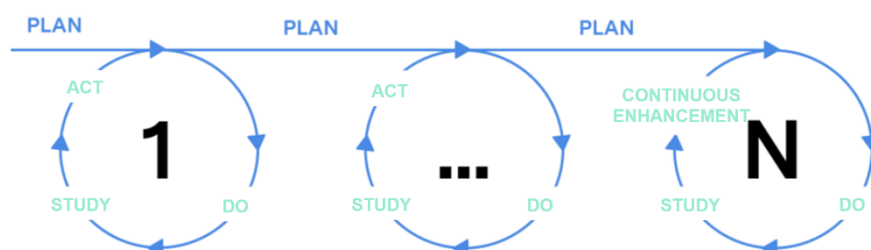

Figure 1 – PDSA Cycle

4.5   The findings of QA monitoring and review activities feed into the RCPI business planning process and, in turn, measure progress against the organisation's objectives.

4.6   RCPI trains its staff on the principles of quality, Quality Assurance, the role of QQI and the Medical Council and the practical application of the PDSA cycle.

4.7   Each department undertakes a review of their policies and procedures to ensure they reflect practice.

4.8   Monitoring and review of the QA System is carried out, through Departmental Assessments, to assess the:

- effectiveness of the QA systems and the usefulness of the outcomes of QA activities;
- efficiency and effectiveness of the governance system and to verify that decision making is systematic and formal.

4.9   The Quality Assurance Framework and Manual is published on the RPCI website so that all stakeholders are informed of RCPI's commitment to quality.

5.   References

European Association for Quality Assurance in Higher Education (ENQA) 2015 Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) Brussels, Belgium

https://enqa.eu/wp-content/uploads/2015/11/ESG_2015.pdf

Quality Qualifications Ireland (QQI) 2016 Core Statutory Quality Assurance Guidelines

https://www.qqi.ie/Downloads/Core%20Statutory%20Quality%20Assurance%20Guidelines.pdf