



Reengagement Panel Report

Assessment of Capacity and Approval of QA Procedures

Part 1 *Details of provider*

1.1 Applicant Provider

Registered Business/Trading Name:	FRS Training
Address:	Derryvale, Roscrea, Co. Tipperary, E53 EV90
Date of Application:	Original application form - May 2018. Updated form - 11 March 2019
Date of resubmission of application:	N/A
Date of evaluation:	Site Visit - 23 April 2019
Date of site visit (if applicable):	23 April 2019
Date of Reconvene Meeting (if applicable):	Review of Changes - 30 January 2020 Review of Clarifications - 20 February 2020
Date of recommendation to the Programmes and Awards Executive Committee:	Initial Recommendation - 06 May 2019 Final Recommendation - 8 April 2020

1.2 Profile of provider

FRS Training is a training organisation that has been in operation since 1980 and has been a QQI centre since October 2008. The organisation offers courses in a range of sectors including Agriculture and Horticulture, Construction, Healthcare and Personal Skills. FRS Training is the training division of FRS Network. FRS stands for Farm Relief Services and FRS Network is a farmer owned co-operative organisation established in 1980 for the provision of skilled people to meet customer requirements. FRS has expanded into five distinct divisions namely Farm Services, Fencing, Training, Recruitment and Herdwatch with a network of 20 offices nationwide and 20,000 customers.

The training organisation operated as a limited company called FRS Training Limited until 2019. The limited company was converted to an Industrial & Provident Society with effect from 2 January 2019.



The shares in FRS Training are owned by National Co-op Farm Relief Services (72%) and by six regional FRS co-ops (28%).

FRS Training (FRST) offers courses certified by QQI, City and Guilds, Lantra and RTITB. Courses are offered throughout the country on FRST premises and third-party premises. Clients include state companies, semi-state companies, private companies, community employment schemes and individuals.

FRST has a number of partnerships/contracted training agreements with other organisations to deliver training services. The list of partners includes a number of ETBs, Teagasc and the organisation Turas Nua. Turas Nua is partly owned by the FRS Network group and is the company which administers part of the Job Path back-to-work programme. The scale of FRST operations has increased significantly in recent years with the introduction of these partnerships.

FRST has indicated that the number of QQI awards in 2017 was 4,163 the number of non-QQI learners was approximately 49,000 of which some 46,000 were enrolled in Turas Nua courses.

Part 2 Panel Membership

Name	Role of panel member	Organisation
John Fitzgibbons	Chair	Director of FET, Cork ETB
Cathleen Hartnett	Panel Member	Independent QA Advisor
James Maher	Panel Member	Curriculum and QA Officer, Teagasc
John Tynan	Panel Member	Design and Crafts Council of Ireland
Kevin Devine	Report Writer (Meeting 23 April 2019)	Retired - formerly Deputy Principal Ballyfermot College of FE
Anne Higgins	Report Writer (Meeting 29 January 2019)	QA Officer, Galway Roscommon ETB



Part 3 Findings of the Panel

3.1 Summary Findings

The findings of the panel recorded here are based on the meeting with FRST on 23rd April 2019. The panel had an earlier meeting with FRST on 29th January 2019, but the panel concluded that it was necessary to re-convene the meeting at a later date to ensure the re-engagement process was based on the provider’s latest and most up-to-date QA documentation.

Following the panel visit on 23 April 2019, the panel recognised the work that FRST had done at that time in developing their QA processes; however further developments had been identified that needed to be addressed before their QA procedures could be recommended for approval. The panel recommended that FRST QA procedures be refused pending mandatory changes.

FRST submitted revised documentation in December 2019 addressing these mandatory changes. Following a review of the QA documentation, which was discussed by the panel on 30th January 2020, the panel requested further clarification which was considered on 20th February 2020. The panel has decided to recommend approval of FRST’s draft QA procedures with specific advices set out in Section 6.2

All of the mandatory changes were focussed on the separation of functions and roles within FRS Training’s quality assurance processes and procedures, to ensure objectivity and impartiality in decision making; to limit over-reliance on key individuals and to ensure that there is the internal capacity to fully and comprehensively quality assure the extensive scope of provision.

The panel notes that significant work had been done by FRST since the initial meetings with the panel. The panel commends FRST for the open way in which they have continued to engage in the process and recommend that they continue to review and develop their processes and systems to build on their existing strengths.

3.2 Recommendation of the panel to Programmes and Awards Executive Committee of QQI

	Tick <u>one</u> as appropriate
Approve FRS Training draft QA procedures	✓
Refuse approval of FRS Training draft QA procedures pending mandatory changes set out in Section 6.1	



QQI

Quality and Qualifications Ireland
Dearbhú Cáilíochta agus Cáilíochtaí Éireann

(If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve FRS Training draft QA procedures	



Part 4 Evaluation of provider capacity

4.1 Legal and compliance requirements:

	Criteria	Yes/No/ Partially	Comments
4.1.1(a)	Criterion: <i>Is the applicant an established Legal Entity who has Education and/or Training as a Principal Function?</i>	Yes	Industrial & Provident Society (previously a Limited Company, converted to an Industrial & Provident Society with effect from 2/1/2019) Registration No. 5877R
4.1.2(a)	Criterion: <i>Is the legal entity established in the European Union and does it have a substantial presence in Ireland?</i>	Yes	The documentation needs to be updated to reflect recent changes
4.1.3(a)	Criterion: <i>Are any dependencies, collaborations, obligations, parent organisations, and subsidiaries clearly specified?</i>	Yes	The documentation has been updated to reflect recent changes and to clarify the relationship between FRS and other entities in the FRS Network.
4.1.4(a)	Criterion: <i>Are any third-party relationships and partnerships compatible with the scope of access sought?</i>	Yes	Partnerships with various ETBs and Turas Nua are identified in public information
4.1.5(a)	Criterion: <i>Are the applicable regulations and legislation complied with in all jurisdictions where it operates?</i>	Yes	Operates only in Republic of Ireland
4.1.6(a)	Criterion: <i>Is the applicant in good standing in the qualifications systems and education and training systems in any countries where it operates (or where its parents or subsidiaries operate) or enrolls learners, or where it has arrangements with awarding bodies, quality assurance agencies, qualifications authorities, ministries of education and training, professional bodies and regulators.</i>	Yes	In good standing with QQI. FETAC and subsequently QQI provider since 2008

Findings



The panel has been assured that the provider is compliant with legal requirements and the panel accept this assurance.

There is a complex group structure which has recently been changed and following the initial panel report the documentation has now been updated to reflect this (Refer to Specific Advices 6.2.5).

4.2 Resource, governance and structural requirements:

	Criteria	Yes/No/ Partially	Comments
4.2.1(a)	Criterion: <i>Does the applicant have a sufficient resource base and is it stable and in good financial standing?</i>	Yes	On the evidence available to the panel the provider has adequate resources and is in good financial standing.
4.2.2(a)	Criterion: <i>Does the applicant have a reasonable business case for sustainable provision?</i>	Yes	The provider has a long-established track record
4.2.3(a)	Criterion: <i>Are fit-for-purpose governance, management and decision making structures in place?</i>	Yes	The panel identified a number of mandatory changes and these are set out in Section 6.1 and these changes have now been made.
4.2.4(a)	Criterion: <i>Are there arrangements in place for providing required information to QQI?</i>	Yes	In good standing with QQI

Findings

Following the initial site visit in April 2019, the panel considered that some changes should be made to the governance, management and decision-making structures and identified these changes in Section 6.1 of this report.

All of the mandatory changes were aimed to emphasise separation of functions and roles to ensure objectivity and impartiality in decision making; limit over-reliance on key individuals, and to ensure that there is the internal capacity to fully and comprehensively quality assure the extensive scope of provision.

These changes have now been made by FRST.

**4.3 Programme development and provision requirements:**

	Criteria	Yes/No/ Partially	Comments
4.3.1(a)	Criterion: <i>Does the applicant have experience and a track record in providing education and training programmes?</i>	Yes	The provider has a long-established track record
4.3.2(a)	Criterion: <i>Does the applicant have a fit-for-purpose and stable complement of education and training staff?</i>	Yes	There is a pool of staff well established. There are regular training sessions with these staff.
4.3.3(a)	Criterion: <i>Does the applicant have the capacity to comply with the standard conditions for validation specified in Section 45(3) of the Qualifications and Quality Assurance (Education and Training) Act (2012) (the Act)?</i>	Yes	Following the mandatory changes made Programme Development is now treated as a function separated from operational functions and the development function is allied to the QA function
4.3.4(a)	Criterion: <i>Does the applicant have the fit-for-purpose premises, facilities and resources to meet the requirements of the provision proposed in place?</i>	Yes	The provider is well established and well resourced, and has good procedures for assessing suitability of premises for delivery.
4.3.5(a)	Criterion: <i>Are there access, transfer and progression arrangements that meet QQI's criteria for approval in place?</i>	Yes	This policy area is addressed in the QA Manual and the associated documentation. There should be more information on access, transfer and progression on the website.
4.3.6(a)	Criterion: <i>Are structures and resources to underpin fair and consistent assessment of learners in place?</i>	Yes	The procedures for ensuring fair and valid assessment are well documented. There is a robust results approval process
4.3.7(a)	Criterion: <i>Are arrangements for the protection of enrolled learners</i>	Yes	The documentation needs to be updated to reflect the new



	<i>to meet the statutory obligations in place (where applicable)?</i>		corporate structure and current QQI protocols.
--	---	--	--

Findings

The provider has a long-established track record and is well resourced.

Following the initial site visit in April 2019, the panel considered that programme development should be treated as a separate function allied to the QA function (Refer to Mandatory Changes 6.1.3).

This change has now been made by FRST

4.4 Overall findings in respect of provider capacity to provide sustainable education and training

The provider is well resourced, has a well-established track record in providing courses, and has the capacity to continue to do so.

Following the initial site visit in April 2019, the panel identified some mandatory changes (set out in Section 6.1 of this report) and identified some documentation which needed to be updated to reflect recent corporate changes.

These changes have now been made by FRST and the documentation has been updated.



Part 5 Evaluation of draft QA Procedures submitted by FRS Training

The following is the panel’s findings following evaluation of FRS Training quality assurance procedures against QQI’s Core Statutory Quality Assurance Guidelines (April 2016). Sections 1-11 of the report follows the structure and referencing of the Core QA Guidelines.

1 GOVERNANCE AND MANAGEMENT OF QUALITY

Panel Findings:

The panel acknowledge the commitment of the provider to ensuring that there is a robust QA system in place. Much of the groundwork for this has been laid.

Following the original site visit in April 2019, the panel considered that revisions should be made to separate the QA and operational functions of the provider. The panel found that where individuals were involved in both roles, the capacity of the provider’s system to objectively monitor and review activity is greatly reduced (Refer to Mandatory Changes 6.1.1).

The panel considered that steps were required to ensure that there is a clear distinction between decision making processes and approval processes. This clear distinction should be reflected in the membership, terms of reference and reporting structures of internal committees (Refer to Mandatory Changes 6.1.2).

These changes have now been made.

2 DOCUMENTED APPROACH TO QUALITY ASSURANCE

Panel Findings:

The QA system is supported by documentation and the main document is the QA Manual.

The current manual is based on the QQI core guidelines although some of the material is carried forward from an earlier format. There is also recently-developed material in a separate Power Point format which was presented to the panel. Following the initial site visit in April 2019, the panel considered that a revision of the manual to incorporate the material in the Power Point presentation would be used to simplify the content (Refer to Specific Advices 6.2.1).

The panel considered that keeping terminology consistent throughout would help in this exercise. For example, the terms “learner handbook”, “learner manual” and “centre handbook” are all used to describe essentially the same item (Refer to Specific Advices 6.2.2).



3 PROGRAMMES OF EDUCATION AND TRAINING

Panel Findings:

The provider is well resourced, has a well-established track record in providing courses, and has the capacity to continue to do so.

Following the initial site visit in April 2019, the panel considered that the programme development procedures should be revised to clearly identify approval points. There should be an initial approval to develop the programme and a post-development approval before submission for validation to QQI. Programme development should be treated as a function separate from operational functions and the development function should be allied to the QA function (Refer to Mandatory Change 6.1.3).

This change has now been made.

4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT

Panel Findings:

The panel noted that there is a systematic approach to staff recruitment and selection with set criteria for selection. The services of a professional recruitment company, FRS Recruitment (part of the FRS Network group), are used for recruitment.

There is a process for the regular monitoring of tutor performance and regular training/feedback sessions.

Tutors are provided with a handbook setting out policies and procedures. This document is referred to as a “Tutor Handbook” or a “Contracted Tutors Handbook” or a “Tutor Manual” in different areas of the documentation. The documentation should be amended for consistency (Refer to Specific Advices 6.2.2).



5 TEACHING AND LEARNING

Panel Findings:

There is a process for the regular monitoring of courses throughout the year. There are direct and indirect feedback mechanisms for learners.

The provider documentation describes the role of Subject Matter Experts (SMEs) or Subject Matter Quality Assurers. These SMEs play an important role in monitoring the quality of delivery and are described in the Quality Manual as follows:

In this model the tutor/assessors performance is overseen by a Subject Matter Quality Assurer (SMQA) who is knowledgeable about the qualifications, occupationally competent in the skills area being delivered, and has significant industry level experience (occupational expertise at field level).

This model would provide assurance where the individuals are independent of the provider or at least are separate from day to day management. In the Quality Manual two of the four listed SMEs are the Training Manager/Quality Assurance Manager and the Operations Manager. This highlights the need to have a clear separation between QA activity and line management (Refer to Mandatory Change 6.1.1).

This change has now been made.

In this case also terminology should be revised for consistency (SME/SMQA) (Refer to Specific Advice 6.2.2)



6 ASSESSMENT OF LEARNERS

Panel Findings:

The procedures for ensuring fair and valid assessment are well documented. There is a robust results approval process.

Many of the assessment procedures depend on the role of the quality committee and the make-up of the committee can lead to an over-reliance on specific individuals because some key staff have responsibilities across more than one role (Refer to Mandatory Changes 6.1.4).

This has been addressed in the changes made.

The panel recommends that more information on the development of appropriate assessment instruments should be included in the Quality Manual (Refer to Specific Advices 6.2.6).

The panel recommends that more information on the assessment process, including information on appealing assessment results be made available to learners through the website (Refer to Specific Advices 6.2.3).

7 SUPPORT FOR LEARNERS

Panel Findings:

FRST documentation describes a number of policies and procedures designed to support learners. This information was supplemented in discussions with the panel.

The provider assured the panel that learners are encouraged to communicate directly with FRST management or indirectly through tutors. There is a systematic process of monitoring programme delivery and providing feedback.

The documentation describes a process of establishing learner listening groups to systematically collect feedback and the panel commends the provider for this.

The learner handbook needs to be updated. The edition in the documentation seems to date back to 2017.

Some of the information on QQI needs to be updated - it may well be more effective to reduce the descriptive content here and provide hyperlinks to the relevant website (Refer to Specific Advices 6.2.4). This issue is also addressed in 9 - Public Information below.



8 INFORMATION AND DATA MANAGEMENT

Panel Findings:

FRST at present does not have an integrated IT system to combine applications and learner data. Applications are made online and the information is then transferred to a learner database. This information is used for QA purposes. The Quality Manual states that:

A wide range of key performance indicators are used to support the internal programme review process, which in turn provides a basis for future programme planning, enhancement and development.

The most recent edition of the Quality Manual has been updated to cater for recent GDPR legislation. FRST has a data protection manual available to all staff which governs their Data Protection Policy & GDPR compliance. The panel commends the substantial work done in this area by the provider.

At present FRST does not make use of any Virtual Learning Environments such as the Moodle platform. There is an intention to develop on-line resources and ultimately to offer some blended learning courses. No dates have been set for this and the panel did not discuss this topic further with the provider.

9 PUBLIC INFORMATION AND COMMUNICATION

Panel Findings:

The FRST website provides details of all programmes offered. Most of the information required for QQI programmes is on the website but is not easily accessible and there should be more systematic information on access, transfer and progression

In the case of the Boom Sprayer Pesticide Application programme (5N1797), the learner is directed to find support information in another part of the website by pasting or typing a lengthy link address. The information in this area is useful in itself but the dates quoted are in 2013 and need to be changed.

In the case of the Horticultural Tools and Equipment programme (4N0683) there is no reference to QQI on the relevant website section. There is a reference to QQI in a brochure which can be downloaded. There is no link to learner support in this case.

It was not obvious to the panel how PEL information was available on the website for learners applying for the Healthcare Support Level 5 Major Award. This is the only award where PEL arrangements are needed.

The panel recommends that the website is reviewed to ensure all required QQI material is up to date and readily accessible (Refer to Specific Advice 6.2.4).



10 OTHER PARTIES INVOLVED IN EDUCATION AND TRAINING (incl. Apprenticeships)

Panel Findings:

FRST have a number of partnerships with other organisations. There has been a significant growth in the number and scale of such partnerships in recent years. The provider notes that, over time, demand for specific courses can vary significantly depending on many factors such as legislation, technology, economic factors and demographics. A partnership process often provides a way for providers to respond quickly to changing demands.

ETB Partnerships – The FRST Application document lists 18 programmes that are delivered under contracts with Tipperary ETB and one programme with Kildare-Wicklow ETB. The programmes lead to QQI awards at Levels 3, 4, or 5. In all cases the programmes are described as “Prime contractor through contracted Training. ETB is the first provider for this programme”. There are framework agreements in place with the relevant ETBs.

Teagasc Partnership – Teagasc is the first provider of a QQI Level 6 programme “Best practice in Milking” and FRST provide the training under contract.

Turas Nua - FRS Training is the sole provider of training to Turas Nua. Turas Nua is partly owned by the FRS Network group and is the company which administers part of the Department of Employment Affairs and Social Protections Job Path back-to-work programme. Job Path is an employment activation scheme and most of this training is uncertified. There were approximately 46,000 learners on this scheme in 2017 and approximately 35,000 by mid-year in 2018.

The panel acknowledges the opportunities for learners created by these relationships and the challenges to FRST in providing robust quality assurance for each of the different types of provision.

11 SELF-EVALUATION, MONITORING AND REVIEW

Panel Findings:

FRST has instituted procedures that address monitoring, review, and self-evaluation. There have been a number of reviews and evaluations carried out before the current re-engagement process commenced. The provider is using the re-engagement process itself as an opportunity to assess and improve all areas of its operations. The current phase is seen by FRS as Stage 2 of a Gap Analysis process. The panel acknowledges and commends the commitment of the provider to this process.

The panel considers that the separation of roles between QA and operations is especially important in this area. The policy currently outlined in the QAM states that all minor programmes will be evaluated



each year. Given the number of minor programmes this is an onerous requirement and it may be more efficient to evaluate a group of awards together and cover each award in a two- or three-year cycle.

Evaluation of draft QA Procedures - Overall panel findings

Following the original site visit in April 2019, the panel considered that some changes should be made to the governance, management and decision-making structures and identified these changes in Section 6.1 of this report.

All of the changes were focussed on the separation of functions and roles to ensure there is objectivity and impartiality in decision making; limiting over-reliance on key individuals and to ensure that there is the internal capacity to fully and comprehensively quality assure the extensive scope of provision.

The provider has gone through a period of rapid expansion and has been developing QA systems to meet the new requirements. A new QA Manual was produced in January 2019. Much of the other systems documentation dates to 2018 and earlier. Further changes were incorporated in a Power Point presentation to the panel in April 2019.

A consolidation process could simplify the QA manual and could lead to consistent terminology throughout (Refer to Specific Advices 6.2.1).

The mandatory changes were identified at the conclusion of the site visit on 23rd April 2019 by the panel. Following the decision by QQI, FRS had six months within which to address the mandatory changes identified.

The Panel reconvened on 30th January 2020 to evaluate evidence submitted by FRST in support of the changes made. The panel requested further clarification from the provider and convened again on 20th February 2020 to consider these clarifications.

Following an evaluation of the sum total of the evidence submitted, the panel is satisfied that FRST has adequately addressed the issues set out in Section 6.1 below.



Part 6 Mandatory Changes to QA Procedures and Specific Advice

6.1 Mandatory Changes

The following mandatory changes were identified at the conclusion of the site visit on 23rd April 2019 by the panel. Following the decision by QQI, FRS had six months within which to address the mandatory changes identified. The Panel reconvened on 30th January 2020 to evaluate evidence submitted by FRST in support of the mandatory changes. The panel requested further clarification from the provider and convened again on 20th February 2020 to consider these clarifications. Following an evaluation of the sum total of the evidence submitted, the panel is satisfied that FRST has adequately addressed the issues set out in Section 6.1 below.

The panel considers the provider should revise the QA policies, procedures and documentation to reflect the following changes:

1. There should be a clear separation between roles and responsibilities in the organisation so that QA roles and responsibilities are separated from operational roles and responsibilities. Currently some key staff fill both QA and operational roles and as well as an over-reliance on these individuals, the panel is of the opinion that clear separation of roles and responsibilities is necessary for objectivity and transparency.
2. There should be a clear distinction between decision making processes and approval processes. Currently some key staff fill roles in both types of process and as well as over-reliance on these individuals, the panel is of the opinion that clear separation of roles and responsibilities is necessary for objectivity and transparency.
3. Programme development should be treated as a function separate from operational functions and the development function should be allied to the QA function
4. There should be greater clarity in the membership, terms of reference and the reporting structures of internal committees.

6.2 Specific Advice

The following specific advices were given at the conclusion of the site visit on 23rd April 2019 by the panel.

The panel did not specifically review the implementation of these advices during its meetings in 2020, but noted that there is still a need for updating and revision of website information.

The Panel advises the following changes to the QA policies, procedures and documentation procedures of FRST:

1. That the Quality Manual be simplified, and consistent terminology adopted.
2. That all documentation is reviewed to ensure consistent terminology is used



3. That full information is provided for learners on the assessment process including information on repeating assessments.
4. That the website is reviewed to ensure all required QQI material is up to date and readily accessible including information on access, transfer and progression.
5. That all documents and information sources reflect the new 2019 corporate structure of FRST.
6. That full information is provided in the Quality Manual on processes and procedures relating to the development of appropriate assessment instruments.

Part 7 Proposed Approved Scope of Provision for this provider

NFQ Level(s) – min and max	Award Class(es)	Discipline areas
Level 3 to Level 6	Major, Special Purpose and Minor	Agriculture and Horticulture, Construction, Healthcare, Personal Skills.

Part 8 Approval by Chair of the Panel

This report of the panel is approved and submitted to QQI for its decision on the approval of the draft Quality Assurance Procedures of **FRS Training**.

Name:

Date:

20 February 2020



Annexe 1: Documentation provided to the Panel in the course of the Evaluation

Document	Related to
<u>Documents available at Panel Meeting</u>	
Power Point Presentation - QA Updates	Discussed at panel meeting 23 rd April 2019. Otherwise referred to as Stage 2 Gap Analysis
Contracted Tutor Handbook	Discussed at panel meeting 23 rd April 2019
<u>Documents available before Panel Meeting</u>	
Application form for Re-Engagement	Updated form 11 March 2019
FRS QA Manual Updated 2019	Dated 1 January 2019.
Gap Analysis Tool and Action Plan	Not dated. Mid 2018?
<u>Supporting Documents</u>	
Standard forms, documents in individual files	

Annexe 2: Provider staff met in the course of the Evaluation

Name	Role/Position
Siobhan Dooley	Chief Financial Officer, Director FRS Network.
Jim Dockery	FRS Quality Assurance Manager and Training Manager- Traditional team.
Maeve Malone	Head of Operations-Traditional Team & Training Manger Turas Nua
Geraldine Carroll	Head of Learning, Development & Innovation.
Paraic Treacy	Training Manager- Contracted Training (ETB)
Walter Balfe	QQI Observer (Meeting 29 January 2019)
Colette Harrison	QQI Observer (Meeting 23 April 2019)



QQI

Quality and Qualifications Ireland
Dearbhú Cáilíochta agus Cáilíochtaí Éireann

Appendix: Provider response to the Reengagement Panel Report

Dr. Deirdre Stritch
Approval and Monitoring Manager - QQI Awards
Quality and Qualifications Ireland (QQI)
26-27 Denzille Lane
Dublin 2
D02 P266

13th March 2020

Re: Reengagement application – response to final panel report.

Dear Deirdre,

FRS Training committed fully to the implementation of the mandatory changes as set out within the initial panel report of May 2019. This period saw a number of challenges, all of which were approached in a collaborative manner by the people involved; allowing for effective change and progress towards an appropriate, transparent and robust governance and management structure, mechanisms and procedures.

The following outlines the changes made within FRS Training and our quality assurance system, addressing each of the four mandatory changes required;

- 1. There should be a clear separation between roles and responsibilities in the organisation so that QA roles and responsibilities are separated from operational roles and responsibilities. Currently some key staff fill both QA and operational roles and as well as an over-reliance on these individuals, the panel is of the opinion that clear separation of roles and responsibilities is necessary for objectivity and transparency.*

Summary of changes:

FRST acknowledge the importance of objectivity and transparency within our quality assurance systems. A full review of our governance structures, organisational structure and individual roles and responsibilities was undertaken. Redesign of the Quality Assurance Manager role was carried out to remove operational responsibilities and the remit of the position was realigned in tandem with a redevelopment of quality assurance and governance structures. Similarly, the role of Operations Manager was reviewed and updated and is now clearly separate from quality assurance roles. Further reorganisation resulted in a change to the organisational structure, particularly team structure and reporting lines allowing for clear separation between quality assurance and operational teams.

Evidence:

Refer to document

QA Area 1 Governance and Management of Quality Assurance
(specific section – p 8, 1.3 Management of Quality Assurance)

- 2. There should be a clear distinction between decision making processes and approval processes. Currently some key staff fill roles in both types of process and as well as over-reliance on these individuals, the panel is of the opinion that clear separation of roles and responsibilities is necessary for objectivity and transparency.*

Summary of changes:

Changes to internal structures, roles and responsibilities as outlined in 1 above, together with updated governance structures have allowed for clear distinction between decision making and approval processes. Through implementing a range of governance units, each with clear terms of reference, permits for proposals and decisions to pass through separate approval processes to ensure objectivity and transparency. We note the benefit of removing the overlap of decision making and approvals from individual roles. Our QA documentation was updated to include a diagrammatic overview which demonstrates information flows; decision and approval, of key processes.

Evidence:

Refer to document

QA Area 1 Governance and Management of Quality Assurance

(specific section – all sections relevant. See Figure 2 - Overview of Structure and QA Process Information Flows)

- 3. Programme development should be treated as a function separate from operational functions and the development function should be allied to the QA function*

Summary of changes:

The panel noted the overlap of the programme development function and operational functions within our QA system. Following the redesign of roles, teams and the updating of internal committees and boards within our governance structure it was necessary to update procedures relating to programme development. Our Programme Development function update was informed by the expert panels feedback, QQIs Validation Polices and Criteria & QA Guidelines as well as our updated internal QA governance system. Our development function is now allied to our QA function and separate from that of operational functions.

Evidence:

Refer to document

QAP3.1 Programme Development and Approval

QA Area 1 Governance and Management of Quality Assurance

(specific section –See Figure 2 - Overview of Structure and QA Process Information Flows)

4. *There should be greater clarity in the membership, terms of reference and the reporting structures of internal committees.*

Summary of changes:

FRST are committed to the development of robust and effective quality assurance policies and systems and have updated our governance structure to include all internal boards and committees. As part of this update, membership, terms of reference and reporting structures have been carefully considered and clarified within our system and documentation.

Evidence:

Refer to document

QA Area 1 Governance and Management of Quality Assurance

(specific section – p 1-7 Governance)

Our draft QA Manual has been updated for consistency of structure, language and terminology as discussed within the panel report and will be kept under review throughout 2020.

We have invested substantial resources to address overlap within operational and quality assurance roles and decision and approval making processes that existed previously. Through the review of our governance, organisational structure, quality assurance mechanisms and individual roles and responsibilities, we have made significant progress in ensuring that our Quality Assurance function will run as a distinct function within our business and will continue to support the development and enhancement of our Quality Assurance function, policies and procedures.

We would like to thank QQI and the expert panel members for their constructive approach in providing valuable feedback, enabling us to improve our internal quality assurance at FRS Training.

Sincerely,



Paraic Treacy

Head of Quality & Academic Affairs