

PROGRAMMES AND AWARDS OVERSIGHT COMMITTEE

Tuesday 22 December 2015 at 3pm

INCORPOREAL MEETING

Minutes of the fifth meeting of the QQI Programmes and Awards Oversight Committee on Tuesday 22 December 2015 at 3pm

PRESENT:

Dr Barbara Brittingham (Chairperson)	Ms Maria McLoughlin (Secretary, QQI)
Ms Liz Carroll	Mr Walter Balfe (Key Executive, QQI)
Ms Anne Mangan	Mr Peter Cullen, Head of Validation & Delegation, QQI
Ms Joanne Harmon	Ms Niamh Lenehan, Manager of Validation Operations, QQI
MS Mary Danaher	Ms Antoinette Beatty, Validation Unit, QQI

APOLOGIES:

Dr Sarah Ingle
Ms Karena Maguire
Dr Diarmuid O'Callaghan
Mr John Mulcahy
Ms Maureen Conway

This incorporeal meeting was held primarily to consider the decisions of the Programmes and Awards Executive Committee (PAEC) at its December 2015 meeting to refuse to validate 14 applications for programme validation from 10 FET providers.

1. NEGATIVE DECISIONS TAKEN BY THE PAEC ON PROGRAMME VALIDATION FOR CONFIRMATION OR REFERRAL BACK TO PAEC

The members of the committee were issued with the relevant documentation in advance of the meeting. On behalf of the executive, the Head of Validation & Delegation and the Manager of Validation Operations in QQI explained the context behind the situation where 14 applications for validation were refused, proposed changes to the application process and asked the committee for its advice and approval.

The current validation procedure was described, its failings acknowledged and the areas requiring immediate improvement identified. The main issues are as follows:

- Providers are not informed prior to the PAEC meeting of the evaluators' recommendation not to validate their programme. In the interests of fairness and transparency, providers need notice of such recommendations.
- Applications have in the past become developmental in nature with incremental changes being made based on panel and executive feedback. Programme developmental work should be done by the provider. QQI cannot nurture programmes.
- A wider panel of evaluators is required. The work of recruitment, selection and training has begun.

Following discussion and clarification, the PAOC unanimously agreed to refer these decisions back to the PAEC for reconsideration following a re-examination by the evaluators in light of provider responses.

Remedial measures

The Executive outlined, as detailed below, how the referred cases would be handled.

- Evaluators' reports to be made available to Providers prior to be sent to PAEC. This is to enable providers to check for factual accuracy and to make comments for PAEC consideration.
- More comprehensive programme documentation to be required of providers. This will include information on staffing and resources not currently obtained.
- Guidelines for evaluators to be revised to enhance the quality of their work
- Increase the size panel of evaluators
- Site visits may be used to verify / clarify application details

The Executive also indicated that it would present amended procedures at the next PAOC meeting

2. PROCEDURES FOR VALIDATION FOR APPROVAL

2.1 Amended procedure for devolution of responsibility to providers

The aim of this paper is to obtain PAOC approval for a revised procedure for devolving responsibility for undertaking validation sub-processes.

The motion to approve the revised procedure was passed unanimously

3. TERMS OF REFERENCE OF PAOC AMENDMENTS FOR NOTING

3.1 Amendments arising from recent Board meeting

The committee noted the key changes made to the terms of Reference for PAOC