Quality Assurance Guidelines and Criteria for Provider Access to Initial Validation of Programmes Leading to QQI Awards

Further Education and Training

QQI, an integrated agency for quality and qualifications in Ireland
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1. Foreword

These Quality Assurance Guidelines and Criteria issued by QQI are based on those established by its predecessor body. These Guidelines and Criteria are issued as QQI Guidelines under Section 27(1) of the 2012 Act for the sole purpose of Providers making an application to QQI under the ‘Policy and Criteria for Provider Access to Initial Validation of Programmes Leading to QQI Awards, 2013’. Over time these Guidelines and Criteria will be replaced with new QQI Guidelines under the QQI Comprehensive Policy Development Programme.

This document sets out guidelines and criteria for further education and training quality assurance procedures. It is intended to be consistent with all types of programmes and providers. It is produced for the attention of and use by:

- Providers of further education and training when:
  - establishing quality assurance procedures in preparation for access to initial validation of programmes leading to QQI awards.
  - evaluating their effectiveness at the organisational level and/or programme levels.
- Those involved with the development of quality assurance procedures.
- Those involved with external quality procedures, including approval of quality assurance procedures, programme validation, quality monitoring, programme re-validation (formerly programmatic review) and institutional review.

These guidelines are not intended for use by the following:

- Providers with a current QA agreement with the former Further Education & Training Awards Council (FETAC).
- Linked providers as defined by the 2012 Act.
- Providers offering programmes leading to awards aligned to the National Framework of Qualifications.
- Providers of English Language Training.
2. Quality Assurance in Further Education and Training

2.1. Quality Assurance

In common usage the term ‘quality assurance’ (QA) means ‘the maintenance of a desired level of quality in a service or product, especially by means of attention to every stage of the process of delivery or production’. In essence this is the meaning it has in education and training, particularly in respect of provider-owned quality assurance - see below. Provider-owned quality assurance will address all legislative obligations of providers and should extend to specific areas including teaching, assessment, curriculum, learning environment, human resources (including teaching staff), accessibility, learner support services, finance, planning, partnerships, governance, management, etc.

2.2. Provider-owned Quality Assurance and External Quality Assurance

The term quality assurance is often seen as something imposed by one entity on another i.e. externally driven. In education and training, however, internally driven and provider-owned quality assurance is the more important.

In very broad terms, provider-owned quality assurance refers to the mechanisms and procedures developed and adopted by providers to achieve and maintain a desired level of quality of services and products. The desired level will be influenced by the provider’s goals as well as its external obligations (for example, to regulators and to statutory and professional bodies).

Provider-owned quality assurance involves planning, defining, encouraging, assessing and improving practice. It is predicated upon provider autonomy and the professional competence of its staff. It is informed both by the theory and the practical experience of teaching, learning and assessment. It involves providers:

- taking full responsibility for the quality of programmes and services offered to their learners
- accepting that quality outputs will require a consistent approach to all facets of provider activity - as an organisation as well as a provider of education and training programmes
- realising that Quality Assurance policies and procedures should be dynamic resources, capturing and communicating best practice in all aspects of the provider’s activities
- establishing and regularly monitoring critical indicators of quality
- promptly remediying any serious deficiencies identified
- seeking ways to improve performance against indicators
- using benchmarking and peer review to learn from peers
- providing credible and meaningful information on institutional and programme quality given to stakeholders.

Under the Qualifications and Quality Assurance (Education and Training) Act 2012, QQI has a responsibility for external quality assurance in respect of relevant providers. While external quality assurance generally involves regulation, it also shares the same broad objectives as provider-owned quality assurance—maintenance of a desired level of quality in education and training services and products. These dual objectives are achieved by QQI through:

- establishing criteria and guidelines for provider-owned quality assurance
- monitoring and review processes to ensure the implementation and effectiveness of provider owned quality assurance procedures.
2.3. **Quality Assurance of QQI**
As an organisation, QQI is responsible for establishing and maintaining an internal quality assurance system. It is itself subject to external review by ENQA in accordance with Part 3 of the Standards and Guidelines for Quality Assurance in the European Higher Education Area.
3. **Purpose of Guidelines**

These guidelines are intended to assist a provider in the development of a quality assurance system, appropriate to its own context, which will promote and support quality in its programmes and services.

The guidelines do not prescribe how providers are to carry out their work but will specify the areas of provision which QQI considers crucial to quality and for which providers are expected to establish and implement policies and procedures. It is essential for providers to understand that these guidelines are not a ‘how to’ manual. Instead, it is up to providers to establish a quality system which will incorporate both operational procedures and a system of review to monitor the effectiveness of those procedures.

The importance of quality assurance in ensuring that education and training is of high quality and responsive to learners’ needs is accepted nationally and internationally. This is evidenced by developments at both European and national levels which set an underpinning context for these guidelines. At a European level, quality assurance of VET/FET has been a subject of European collaboration since the early 2000s culminating in the EQAVET Recommendation in 2009. The national driver is the Qualifications and Quality Assurance (Education and Training) Act (2012), which sets out specific obligations for providers in respect of quality assurance procedures and requires QQI to issue guidelines for same.

4. **Principles**

The principles underpinning the QQI approach to quality assurance in further education and training are:

- the primary responsibility for quality and its assurance lies with providers
- quality assurance requires planning, resources and commitment
- continuous improvement must be the goal of a quality assurance process
- quality systems should enhance transparency
- quality systems are context dependent i.e. the scale and scope of a provider’s provision will impact on how it operates quality assurance
- ownership and understanding of a provider quality system by its management and staff are crucial.

5. **Components of a Provider’s Quality Assurance System**

A provider should have a documented quality assurance system which includes:

- The organisation’s **Mission** to clarify its role as a provider of education and training programmes.

- **Policy statements** showing full understanding of the legislative obligations of the provider in each of a range of areas specified in Section 7 below. The policies will inform:
  - management and staff as to the general approaches to follow in their work
  - learners and other stakeholders as to what they can expect of the provider.

- The **Procedures** designed to implement the policies.

- An **Internal Monitoring System** which will regularly check the effectiveness of the procedures and act as an early warning system in areas of provision requiring improvement. This should include the use of data collected and compared against indicators. For example: completion and progression rates.
• **A Self-Evaluation System** through which the provider will review and report on the quality of its own programmes and services. Each such evaluation will include the views of learners and of an independent evaluator who can make comparisons with other similar provision.

• A system of responding to the findings of monitoring and review which will address areas for **Improvement** and build on areas of strength. It is important that providers use indicators/benchmarks against which programme data can be compared.

These components are explained in more depth below.

A quality system can exist in small as well as large providers. A minimalist system, well communicated and integrated into the normal activities of the provider, will generally be more effective than one which is overly bureaucratic.

**Policies and Procedures**

It is important to be clear as to what is expected by QQI by way of documented policies and procedures, since providers will be expected to have both in their overall quality system. Policies and procedures are generally the means by which an organisation communicates how it will operate a particular process or service. The distinction between them relates to the level of detail which they contain.

A provider’s policies and procedures should demonstrate that

a) it has a clear understanding of its obligations, legislative and otherwise, in carrying out a particular process or service

b) the methodology it will follow in carrying out the process is clear and comprehensive with responsibilities assigned.

It is up to the providers to structure their policies and procedures in a form best suited to their own context and the needs and expectations of their learners.

**5.1. Policies**

A policy is a documented statement of a provider’s principles and approach to a particular area of education/training. It should be consistent with the provider’s overall Mission and should provide an underpinning rationale for staff working in that particular area. It is also a tool which a provider can use to inform current and prospective learners of what they can expect from that provider. Providing accurate and relevant information to learners is one of the key conditions necessary for the successful implementation of the National Framework of Qualifications.

Policies will not contain much detail regarding implementation methodologies but should demonstrate to QQI and others that the provider has a full understanding of its obligations arising from legislation, particularly the Qualifications and Quality Assurance (Education and Training) Act (2012). For detail of QQI policies derived from the 2012 Act, see [www.qqi.ie](http://www.qqi.ie)

To be effective, a policy must be disseminated to all those that it is intended to inform.

**5.2. Procedures**

To be translated into practice(s), a policy must be broken down into one or more clear and coherent procedures. These are statements of how the processes are to be carried out and their development will be informed by the relevant policy.

A procedure covering any process should, at a minimum, specify:

- **title** - relates to the task(s) which it is designed to perform
- **method(s)** - the action(s) used to fulfil the purpose of the procedure
• responsibility - who carries out the action(s)
• indicative evidence - what can be checked by a monitor to confirm that the procedure is effective
• monitoring - by whom, how often, in what way, etc.

5.3. **Internal Monitoring**

Policies and procedures are written in the expectation that they will be effective. However, effectiveness is not guaranteed and needs to be regularly monitored by designated staff within the provider. Procedures found to be ineffective need to be amended or replaced. This is a crucial part of a quality assurance system and can be done in various ways, some formal, others less so; it is important however that it be systematic and consistent.

Internal monitoring should act as an early warning system and identify areas of provision that are delivering quality and those that are not. To be able to do this, a provider will need to identify a measure of quality appropriate to the area and which can be checked in monitoring. For example: learner satisfaction ratings, certification rates, relevance of outcomes to the market place, error levels etc. Where the measure indicates that quality is lacking, then remedial action needs to be identified and taken. This might mean the relevant procedure needs to be applied more consistently or that the procedure or policy needs to be updated. In this way continuous improvement becomes a reality.

A clear and potentially effective system for internal monitoring will be expected of any quality system submitted for approval by QQI.

5.4. **Self-Evaluation and Improvement**

The self-evaluation by a provider of its own programmes and services is a fundamental part of its quality assurance system and is required by the terms of the Qualifications and Quality Assurance (Education and Training) Act (2012).

The purpose of self-evaluation is to explore, reflect and report on the effectiveness of programmes, services and the quality assurance system which supports them. In doing so, existing good practices can be identified and maintained while areas needing improvement can be identified and addressed.

The distinction between internal monitoring and self-evaluation is in frequency and scale. A self-evaluation will have a large focus, for example, one or more programmes, effectiveness of quality system, and it will be relatively infrequent. By law, a provider is required to involve learners and an independent, external person in the conduct of reviews. A self-evaluation also provides an opportunity to engage in crucially important dialogue with employers, higher education providers and any other agents relevant to the programme and the learners’ use of it.

The products of a self-evaluation are twofold:

- **A Self-Evaluation Report** which will include findings and recommendations for improvement.
- **An Improvement Plan** which will commit the provider to implement actions to build on the report’s recommendations, thereby consolidating areas of good practice and addressing areas requiring improvement.
6. EQAVET - European Context

Providers are directed to the EQAVET Framework, the European initiative for quality assurance in VET, designed to provide tools for the management of quality in vocational education and training. It has its legislative base in the Recommendation of the Council and the European Parliament\(^1\). QQI is an active contributor to EQAVET’s work on a European level and these guidelines are designed to be complementary with it.

This framework is based on the Quality Cycle (Fig 1) supplemented by indicators, case studies and learning material. This adherence to a high level quality model supported by focused resources, allows entities at both provider and system levels in countries across the EU to comply with the framework, but also to reflect the context and constraints imposed by national/regional requirements.

![Quality Cycle](Fig1.png)

The EQVET framework is supplemented by the experiences of providers in the EU who have already implemented quality frameworks aligned to EQAVET to establish and strengthen quality assurance processes. There are common themes, listed below, emerging from the work of these providers which are gathered and disseminated by the EQAVET secretariat:

- Management Culture
- Approaches reflect the provider’s circumstances
- A culture of self-assessment i.e. review
- Support for staff training
- Use data and feedback for improvement
- Involvement of stakeholders.

It will be expected that providers’ quality systems submitted for QQI approval will reflect the EQAVET framework. For further details please refer to [www.eqavet.eu](http://www.eqavet.eu). An [online tool](http://www.eqavet.eu) offers support and advice to providers in relation to implementation processes aligned to the EQAVET framework. In addition, the framework provides [case studies](http://www.eqavet.eu) and [indicators](http://www.eqavet.eu) which will be valuable resources for providers wishing to learn from the work of others.

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7. Areas to be Quality Assured

Listed in the table below are the minimum areas of education/training provision which providers must quality assure using a system as set out above.

The list of areas was compiled through consultation and reflects the essence of professional development, delivery and review of programmes in the context of current legislation. Most of these areas relate to existing practices with which any established provider of certified education and training programmes would be familiar. A provider is expected to be able to identify and capture how those practices are currently carried out within its provision.

This will form the starting point for future improvement as the provider will also have to specify the mechanisms whereby this practice will be monitored and, where necessary, improved over time.

Some of the areas, for example Access, Transfer and Progression and Protection of Enrolled Learners, are driven by the requirements of the Qualifications Acts and may not be familiar to providers who have not previously offered awards from the National Framework of Qualifications. In these cases, providers are expected to use these guidelines to identify and implement what is required of them under the legislation. QQI will have specific policy documents on such areas, to which providers should refer.

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8. Guidelines

Listed below are the guidelines for each of the areas of provision which a provider must quality assure.

8.1. Governance

A provider should have a system overseeing the work of the organisation to ensure its validity. This system, often called a governance structure, should enforce separation of responsibilities between those who produce/develop material(s) and those who approve it.

Included in the structure should be groups which approve:

- draft programmes prior to submission for validation
- learner results prior to submission for certification
- self-evaluation and programme improvement reports prior to submission.

These groups should be identified in the provider’s organisation chart and their terms of reference should be documented.

Providers whose scale is such that they cannot have internal committees should make alternative arrangements to have objective oversight.
8.2. Quality Management

It is crucial for a provider of education and training programmes to have a commitment to quality and a system to translate the commitment into reality. Such a system will demonstrate that a provider understands what it means to deliver high quality programmes and services in a regulated context and that the understanding is disseminated throughout the organisation.

As outlined above, the basic activities of a quality management system within a FE&T provider will comprise:

- Description of processes - i.e. documented policies and procedures
- Monitoring of processes - i.e. regular checks on the effectiveness of policies and procedures. It is important that providers develop indicators/data which can be used to measure effectiveness.
- Self-Evaluation - a process to collect information and data from a range of sources, including learners, staff, independent experts, employers and other providers which will contribute to a substantive and realistic evaluation of the process or programme being reviewed.
- Governance structures (ref 8.1 above)

A provider should fully document, in hard / soft copy, its quality system. It will contain a Quality Policy setting out the provider’s commitment to deliver quality programmes and services and to review their effectiveness.

The policy should clarify:

**Management Responsibility:** how management will exercise its responsibility to ensure effective resourcing and implementation of the quality system.

**Designated Responsibility:** a specific role(s) with responsibility for quality management will be identified in the organisation chart.

**Information Systems:** how controls and structures will be put in place to generate named data/reports which will be communicated to management for monitoring and planning purposes. The provider should identify appropriate quantitative measures which can be used as benchmarks/indicators, for example:

- Numbers per programme
- Learner profiles
- Learner satisfaction rates
- Completion rates - percentage of those who begin a programme who achieve an award
- Certification rates, including grade analysis
- Staff development days.
8.3. Staff Recruitment and Development

A key determinant of the quality of a programme or service is the capacity of those who are responsible for teaching/providing it. It is essential that every provider has a systematic approach to the recruitment and further professional development of people engaged in programme and service delivery. In particular the provider should ensure that staff has sufficient experience and expertise to fulfil their designated roles. Providers should also ensure that staff members have access to support and opportunities for development based on a systematic approach to the identification of their continuing professional training and development needs.

The provider’s policy in this area should express its commitment to appoint suitably qualified staff to the role of teacher/instructor and to provide opportunities for further development.

The associated procedures should address the following areas:

Staff Recruitment

The general criteria and approach used in the appointment of programme staff should be clearly stated. Where necessary, more detailed selection criteria should be used.

Staff Communication

It should be clear how the views of staff members are collated and used on a periodic and on-going basis through internal monitoring and programme review processes. It should also be clear how staff members are kept informed of issues relating to their programme areas.

A quality system will not be effective without the understanding and buy-in of staff. If the relevant staff are not aware of their responsibilities and the importance of them, then processes will not operate effectively.

Staff Development

On-going development of staff capacity is crucial to programme quality. A mechanism needs to be in place to impart feedback to staff members on their strengths and areas requiring improvement.

Planning and resources need to be committed to identifying and addressing staff training needs.
8.4. Teaching and Learning

The quality of the learning experience of learners should be monitored on an on-going basis by providers and there should be a policy in place to facilitate this. The policy should state the provider’s commitment to monitoring and improving the quality of teaching and learning on its programme and it should have associated procedures which clarify how the policy will be implemented. The procedures should address the following areas:

Staff Feedback: Staff should be encouraged and facilitated to reflect constructively on their experience of programmes and to use such reflection to make improvements as required. It is important that such feedback be collected and presented for consideration by management.

Learner Feedback: The views of learners should be canvassed on a regular basis and the feedback used to make programme improvements as required. The procedure should cover not just how feedback is gathered, but how it is analysed and acted upon as appropriate. Feedback should be sought on issues such as:

- Programme content
- Delivery modes
- Teaching and learning
- Learning resources
- Assessment
- Information
- Support services
- Accommodation for diversity - for example, non-native English speakers, people with a disability.

Feedback from other sources: it is important that the views of external stakeholders on the efficacy of programmes be collected when possible. Possible sources include:

- Employers
- Companies cooperating in work-based training
- Learners who have completed the programme previously.

The provider should clarify how it will communicate and use the feedback gathered from staff, learners and others.

The culture of self-evaluation/reflection with a view to improvement is to be encouraged at all levels of the organisation.

Learning Resources: the adequacy of the available resources required for effective learning should be regularly checked. These resources will vary according to the programme but examples will include:

- IT facilities
- Reading materials
- Guidance and other support service.
8.5. Access, Transfer and Progression

The Qualifications and Quality Assurance (Education and Training) Act (2012) sets out responsibilities for QQI and for providers in the areas of Access, Transfer and Progression. Provider responsibilities remain more or less as they were prior to this legislation, but there are increased emphases in some areas, particularly Information for Learners.

The provider’s policy should demonstrate its awareness of its obligations arising from the legislation and should express the provider’s commitment to enable learners to:

- make informed choices regarding the programme(s) on offer
- enter onto a programme with recognition of prior learning and without unnecessary barriers
- successfully participate in a programme
- enable learners who so wish to transfer or progress to another programme offered by the provider or others leading to an award within the National Framework of Qualifications.

The related procedures should demonstrate how it will meet these obligations in the following areas.

8.5.1. Access

The main AT&P implications for providers’ quality assurance systems relate to Access. Providers will be expected to facilitate, in as much as they can, a learner’s entry and successful participation in a programme. They will do this through their procedures on Information Provision, Learner Entry, Recognition of Prior Learning and Facilitating Diversity.

Information for Learners

Providers should ensure that they make all appropriate programme information available to prospective and current learners. This information, especially when used for marketing purposes, should be accurate and should not mislead.

Programme information will include:

- programme title (should not conflict with award title)
- programme structure and duration - example: entry and exit points
- award title(s), award type, framework level(s), awarding body(ies)
- entry requirements
- arrangements for recognition of prior experiential or certified learning
- assessment schedule, including appeal
- transfer and progression opportunities available on completion of the programme
- fees payable, if any
- protection of enrolled learners arrangements where appropriate
- grievance/complaints procedure.

Providers marketing and offering programmes to international students whose first language is not English need to ensure that all media employed accommodate and reflect the needs of such learners.

Public information made available by providers about themselves, their quality assurance policies and procedures and their programmes must comply with the requirements of the 2012 Act which set out the statutory requirements of providers in respect of public information i.e.
Learner Entry Arrangements

Providers must ensure that their arrangements for selecting learners for their programmes are transparent and fair and that potential learners can be made aware of the process involved. Providers should also ensure that any criteria for entry onto a programme are clearly stated in any programme brochures / website content.

Learners whose first language is not English should be clearly informed as to the level of English required for successful participation in the programme and what language supports, if any, will be available to them.

Recognition of Prior Learning

Recognition of prior learning is a process of identification, assessment and recognition of learning howsoever acquired. It is an important feature of the National Qualifications Framework and is defined as the ‘recognition of learning that has taken place, but not necessarily been assessed or measured, prior to entering a programme. Such prior learning may have been acquired through formal, non-formal or informal routes’

Not all providers will operate recognition of prior learning. Approval to operate RPL for access to credit or for an award must first be obtained from QQI.

Providers are required to develop a statement of the arrangements they provide, if any, in respect of the recognition of prior learning for entry to programmes, for credit towards an award and for access to an award.

Facilitation of Diversity

Access is to be viewed in terms of the ability to participate successfully in a programme without the hindrance of unnecessary barriers. Hence providers should comply with national policy in relation to equality and non-discrimination, with particular regard to the relevant provisions of the Equality legislation. It will be expected, for example, that providers will implement reasonable accommodations to facilitate international students and people with disabilities to participate in programmes and services.

8.5.2. Transfer and Progression

Providers are expected to identify for learners, as part of the programme information, the transfer and progression options which are open to them on receipt of an award i.e. what further award(s) is then available to them should they choose to pursue a further programme. These opportunities may arise directly from the award or may have been negotiated at a local or national level.

In designing programmes, providers should seek, where possible, to offer awards which present learners with the opportunity to transfer or progress should they wish to do so, either immediately on attainment of the award or at a later date.
8.6. Programme Development, Delivery and Review

The core function of a provider of education and training is the development and delivery of programmes which meet the needs of their learners. It is important that the quality of these programmes is managed to ensure the best learning experience for learners.

A provider’s policy on Programme Development, Delivery and Review should inform the work of those staff engaged in the design and delivery of programmes, so that programmes are constructed and delivered to allow learners to achieve the learning outcomes required for a specified NFQ award(s).

The associated procedures should address the following areas:

**Need Identification**: Programmes should be developed to meet an identified need and in fields of learning in which the provider has capacity and expertise. Evidence of such research should be available to any management/governance committee reviewing a proposal for new programme development.

**Programme Design**: All programmes should be designed and documented so as to meet the requirements of programme validation. Programme structure, delivery and assessment methodologies should:

- facilitate learners to achieve specified award(s)
- adhere to the provider’s policies on access, transfer and progression and assessment
- reflect the mission of the provider
- facilitate opportunities for learners, where appropriate, to practice skills in a real work environment.

All programmes should have Capacity to Succeed statements i.e. a clear statement of what, if anything, is required of a learner who can expect to successfully complete the programme.

In programmes which will be delivered online, at a distance or where a significant amount of training time is spent on placement or in the workplace, the statement should make clear to learners the implications of these arrangements.

In programmes offered to learners whose first language is not English, the statement should make clear the level of English required to successfully complete the programme.

The programme design should be ‘translated’ into a plan setting out timetables/schedules for delivery. For further guidance see the FETAC publication on: [Guidelines for Preparing Programme Descriptors](#)

**Provision and maintenance of learning facilities/resources**: programme resources necessary for successful participation by learners should be identified, documented and presented for approval through governance processes. The resources specified should be adequate and sustainable. (Ref 8.4 Teaching and Learning)

**Programme Approval**: All programme designs and documentation should be checked and receive approval from management prior to being submitted to QQI for validation. A record must be maintained showing that new programmes have been through an approval and oversight process (Ref 8.1. Governance).

Where a programme requires the involvement of another ‘second’ provider(s) in addition to the initiating ‘first’ provider, there should be clarity on the agreed scope of first and second providers’ quality assurance procedures.

**Programme Delivery**: See Teaching and Learning above. The provider is responsible for ensuring that the programme objectives are being achieved and it is essential that the conduct of programme delivery is monitored in an effective manner.
Reports on assessment outcomes and learner feedback should be regularly presented for management review.

**Learner Records:** Records of learner participation and achievement i.e. attendance, progress through the programme and certification, should be maintained so as to be readily accessible when required.

The provider should have arrangements to provide required information to QQI. This will include data for production of awards and statistical analysis.

Records should be maintained securely with access restricted to authorised personnel.

**Premises:** Physical premises/facilities should be accessible and maintained in such a manner as to ensure the health and safety of staff and learners.

Where temporary premises are used, selection criteria should be maintained reflecting programme requirements and the access needs of potential learners.
8.7. Fair and Consistent Assessment of Learners

This guideline should be read in conjunction with the FETAC guidelines on Quality Assuring Assessment.

A provider must have adequate and appropriate processes for the assessment and authentication of learner achievement and for the approval of assessment results. It must be able to demonstrate that the assessment is fair and consistent; that it is in accordance with national standards; that learners are kept informed of expected outcomes and of their progress in achieving them.

As QQI awards are made on the basis of assessment carried out by providers, it is critically important that provider assessment is fit for purpose and that results provided to learners are valid, reliable and are the product of a systematic, quality assured process.

The provider’s Policy on Assessment of Learners should express its commitment to carry out assessment so as to be:

- Understood by staff and learners
- Valid for the purpose of QQI awards
- Fair to learners, in terms of access and process
- Internally verified as fair and consistent
- Externally authenticated as consistent with national standards
- Consistent with QQI assessment policy and guidelines.

The associated procedures should address the following areas:

Information to Learners: All pertinent information relating to the assessment process should be available to learners prior to assessment commencing. This information should include details of:

- assessment methods and schedules
- assessment calendar, including expected certification date
- assessment briefs and grading criteria
- appeals process
- policy on repeats
- learner responsibilities in relation to assessment
- reasonable accommodations available.

Learners must be made aware of the QQI award(s) to which the programme leads and of the assessment and grading requirements. This information is available via the QQI online Award Directory.

Coordinated Planning of Assessment: Programme design, delivery and assessment should be coordinated so as to facilitate learners to maximise the value of their assessments across the programme i.e. the assessment of programme modules is integrated wherever possible and the needs of learners are considered when assessments are being scheduled. Ref Section 3.2.2 in Quality Assuring Assessment – Guidelines for Providers.
Security of assessment related processes and material: Assessment procedures and systems should incorporate mechanisms for the secure recording, storage and access of learners’ assessment records; in particular it should ensure that the security and integrity of:

- assessment materials i.e. test/assignment briefs, exams etc
- assessment processes i.e. supervision of tests, verification of authorship etc.
- learner work i.e. assignments, practical tests, exam scripts, project work etc.
- records of learner assessment.

In designing this procedure, the potential for learner appeal should be kept in mind with the associated need for retention of assessment material and other evidence (Ref Sections 3.2.5, 3.2.4 in Quality Assuring Assessment – Guidelines for Providers).

Reasonable Accommodation: Assessment methodologies should be adapted as necessary and reasonable; so as to cater for the needs of learners whose first language is not English, those with a disability, or other persons covered by the grounds of Equality legislation, who would otherwise be excluded from demonstrating their achievement of the standards being assessed.

The accommodation(s) used should be agreed by all those involved in the programme delivery and assessment. (Ref Sections 3.2.8, 3.2.9 in Quality Assuring Assessment – Guidelines for Providers)

Consistency of marking between assessors: The grading of learner assessments should be performed in a fair and consistent manner. This will involve comparison of results achieved across a range of learners and assessors to ensure consistency of marking. This may be done in a variety of ways depending on the centre context. For example: programme team meetings, cross moderation or sampling by an internal verifier.

Workplace Assessment: Assessment carried out by workplace supervisors and/or employers should be verified to be fair and consistent with the learning outcomes of the specified award(s). It is crucial that such assessment be planned and workplace assessors have sufficient briefing, information and materials to conduct valid assessment.

Assessment of Distance/e-learning based programmes: providers who plan to offer programmes on a distance/e-learning basis must demonstrate capacity to ensure the validity and consistency of assessment when carried out on this basis. It is particularly important that a provider, who intends to offer programmes where much of the skills assessment is done on work placement, sets out clear procedure(s) addressing:

- approval of assessment arrangements - assessor capacity and training/assessment resources
- verification of ownership of learner work.

Internal Verification: It is crucial that providers ensure that all assessment processes have been applied consistently and that the accuracy of assessment outcomes and records is verified. This systematic checking of assessment processes by a provider is referred to as Internal Verification (IV). Practice has shown that many errors occur between the carrying out of an assessment and its subsequent submission for certification can be picked up and corrected by systematic IV procedures. Examples of checks to be carried out during IV include:

- missing or inappropriate evidence
- missing or inappropriate assessment briefs
- data omission, transcription/calculation errors
• learner id conflict
• inaccurate data entry - award codes, name spelling, results etc.
• grading inconsistency between assessors.

**External Authentication:** Once internal verification is completed, providers must ensure there is objective and authoritative confirmation of fair and consistent assessment of learners in accordance with national standards. This confirmation is to be carried out by an external authenticator appointed by the provider. Providers should have a policy on appointment of authenticators to ensure that anyone appointed to the role has relevant subject matter expertise and can give independent feedback on the standard of learner work and of the assessment process as carried out by the provider.

The authenticator will have access to reports arising from the internal verification process. S/he will produce a report and may recommend that grades be changed and / or that assessment procedures require to be amended.

**Results Approval:** Providers have responsibility for assessment and must formally approve the outcomes to be returned to QQI for certification. A Results Approval Panel should be included as part of provider governance which will be representative of management and programme staff. (Ref 8.1 Governance). After each assessment period, the Panel should review learner outcomes in light of input from programme staff, internal verification report(s) and external authenticators’ report(s). Part of the review should include comparative grade analysis. Submission to QQI for certification should be sanctioned by the Results Approval Panel.

See FETAC documents referenced above for more detailed guidelines on internal verification, external authentication and results approval.

**Feedback to Learners:** Individual learners should timely and constructive feedback on their assessments which informs their participation on the programme. The feedback should be appropriate to the nature of the assessment i.e. formative or summative.

**Learner Appeals:** Providers should have an appeals procedure to be used by learners to appeal an assessment result which they consider to be unfair. This procedure should be communicated to learners as part of their programme information.
8.8. Protection of Enrolled Learners

The 2012 Act sets out (in Part 6) legal requirements for QQI and providers of education and training (providers) regarding the Protection of Enrolled Learners (PEL). It establishes that it is the responsibility of providers to ensure that there are adequate arrangements in place for PEL on specified programmes. QQI has published ‘Protection of Enrolled Learners: Protocols for the Implementation of Part 6 of the 2012 Act’. Providers are directed to this document for a full description of the Act’s requirements.

All providers, regardless of their relationship with QQI, must make certain categories of information available to learners, including the details of the arrangements for PEL that the provider has in place, in accordance with Section 65(4) of the 2012 Act, or where no PEL arrangements are in place, that this fact be made clear.

Unless specifically exempted all private, voluntary and public providers of QQI validated programmes (or those with delegation of authority to make awards) that charge fees and offer programmes of three months or longer must demonstrate compliance with the legal requirements for PEL (Protocols 3.2, 3.3, 3.4, 3.5 and 3.6 apply). These protocols apply to these providers when:

i. Submitting programmes for validation.

ii. An existing validated programme is subject to review of validation by QQI.

iii. Seeking delegated authority to make an award in respect of a validated programme.

iv. Submitting a proposal for the inclusion of an additional award(s) under delegated authority.

All relevant providers (including public providers) shall, if requested, assist QQI in the accommodation of learners affected by the cessation of a programme (Protocols 3.6 apply).

Providers who enter into a PEL alternate provision agreement with another provider must have appropriate PEL policy and procedures in place.
8.9. Collaborative Provision

Collaboration is the term used to describe the co-delivery of all or parts of a programme by two providers. *Since each collaboration will be unique and intrinsic to a particular programme, no collaborative arrangement can exist or should be entered into which has not been approved as part of a validated programme.*

Only those providers who intend to submit programmes in this form for validation need to develop quality assurance procedures for this area. No future application for validation of a programme involving collaboration will be accepted unless procedures have been approved.

If a provider is considering establishing a collaborative arrangement for a new programme to be validated by QQI, there are some generic guidelines shown below. However, it is important to understand that approval of these procedures does not allow a collaborative arrangement to be established. That can only be done once a programme detailing the specific arrangements has been validated.

In further education and training, collaboration normally takes the form of a (first) provider sub-contracting delivery of all or parts of a programme to another (second) provider. In such a situation, it is essential that both parties have clear agreement regarding their respective responsibilities. The first provider has the ultimate responsibility regarding the quality of the programme and should be the only one to return results to QQI for certification.

A provider’s policy on collaborative provision should clarify its responsibilities to its learners when its programme(s) are being delivered by a second provider. It should also set out any possible rationale it would have for establishing a collaborative arrangement for delivery of a programme. Any such rationale should be for the benefit of learners.

The first provider must operate the following generic procedures in establishing any collaborative arrangement:

**Agreed arrangements:** For clarity, it is essential that a written statement detailing respective responsibilities is agreed between the first and second providers. The agreement should set out what is to happen when either provider fails to meet its responsibilities. If Protection for Enrolled Learners is a requirement for the programme involved, then this should be addressed in the procedure.

**Monitoring arrangements:** As the first provider has overall responsibility for the quality of the programme, it is required to demonstrate how it will monitor the achievement of programme objectives and learner satisfaction on those parts of the programme delivered by the second provider.
8.10. Learner Record System

A provider should have a robust and comprehensive database system capable of:

- maintaining secure learner records for current use and historical review
- providing reports required for internal quality management (ref 8.2)
- generating data required for and compatible with QQI’s certification system (ref 8.7)
- generating statistical and other reports to meet QQI information requirements.

The provider should be aware of and comply with, its obligations under data protection legislation. This will include establishing data access controls, data backup systems and learner information material making clear what personal data will be required to be collected and for what purpose.

Administrative and IT resources should be sufficient to ensure that the database is maintained securely and that data, particularly that relating to learner assessment, are accurate and complete.
8.11. Self-Evaluation and Improvement of Programmes and Services

The self-evaluation by a provider of its programmes and services is a fundamental part of its quality assurance system. It is a way of developing through constructive questioning leading to positive recommendations and improvement planning. It should be viewed as a process primarily for the benefit of current and future learners and the provider staff.

What is Self-Evaluation?

Evaluation is a structured and systematic process to explore, reflect and report on the effectiveness of an activity. It aims to capture, interpret and disseminate learning from any actions undertaken. It seeks to identify good practice and to use the findings to inform future policy and practices.

Evaluations will seek to:

- Engage stakeholders
- Gather credible evidence from a range of sources
- Draw and justify conclusions
- Make recommendations for improvement
- Ensure the use and sharing of lessons learned.

What is to be Self-Evaluated?

A provider may seek to learn many things from a self-evaluation and, ideally, these should be for the benefit of the provider and learners themselves and not just to meet external demands.

The provider may choose to evaluate a single programme and related services or it may choose to identify a group of programmes which have enough in common to be evaluated together.

It is important that a provider identifies in advance what is to be evaluated and the criteria to be used to measure success. The provider can choose criteria which are of particular relevance to its own Mission but there are some aspects of the programme(s) which QQI require to be evaluated and reported on. These relate particularly to the quality of the programme(s) and the effectiveness of the quality assurance system. These criteria are set out in the evaluation checklist and report template which accompany these guidelines.

Who will be involved in a Self-Evaluation?

The Qualifications and Quality Assurance (Education and Training) Act (2012) requires that programmes and related services offered by a provider must be evaluated by the provider with the input of learners and an independent person. The term ‘external evaluator’ will be used here to refer to the latter role.

External Evaluator

When carrying out an evaluation the provider should involve, as an external evaluator, a person who is independent of programme delivery and capable of comparing the quality of the programme(s) being evaluated with that of similar programmes elsewhere. This role of this person should be to bring support, recognition and positive suggestions for improvement.

An evaluator should have education, training or industry expertise in the broad subject area of the programme being evaluated

Providers should consider the use of ‘peer review’ i.e. the involvement of a person from another provider, in further or higher education and training, capable of giving an informed view on the success of the programme and able to contribute to its improvement.
The criteria to be used by a provider when selecting an external evaluator should be included in the procedure for evaluation of programmes.

**Learners**

As the main consumers of the programme, it is important that learners can contribute to the evaluation. Providers must demonstrate that they can involve learners in the process of evaluation and need to develop effective methods of gathering learner feedback. These methods will contribute evidence for internal monitoring of a whole range of procedures i.e. learner verification, as well as meeting the needs of the evaluation process. Such methods might include: questionnaires, interviews, representative groups, focus groups, complaints processes, evaluation checklists and any other mechanisms appropriate to the learner groups and provider context.

When compiling feedback from learners, efforts should be made to ensure that it is representative, including learners whose first language is not English and those with a disability if present. Ideally the views of past learners should also be compiled. The feedback from learners who have left a programme without attaining the award(s) available would be especially informative.

**Management and Staff**

The involvement and engagement of teaching and other staff is fundamental to the success of any self-evaluation process. Central to this engagement is the realisation that self-evaluation (and quality assurance in general) is part of the teachers’ role - it is not something that is additional to teaching - and it needs to be promoted and described in this way.

The evaluation process should be seen to have the approval and commitment of management. Hence it should be promoted and supported by management in the allocation of time, expertise and resources.

Management should encourage a positive climate in which staff can be reflective and open in giving their views and suggestions on the performance of programmes and services.

Management can also show commitment to the process by assigning responsibility for coordinating the evaluation to a person with authority and decision making responsibility.

Staff attached to a particular programme will be central to the evaluation. They should be facilitated to contribute their views and suggestions for improvement. This can be done through programme team meetings, interviews, questionnaires or other methods appropriate to the context of the programme.

**Frequency of self-evaluation**

Self-evaluations should be carried out to a frequency appropriate to the duration and nature of the programmes concerned. The maximum period between evaluations will be five years but this would be appropriate only in exceptional circumstances. All providers will be expected to conduct and report on at least one self-evaluation annually.

**Methodology**

Two common approaches to conducting self-evaluations are as follows:

a. The provider conducts an initial self-evaluation by applying the evaluation checklist separately to each of the programmes being evaluated. The person co-ordinating the evaluation, together with the programme team, draws up a draft report based on the outcomes. At this stage the external evaluator becomes involved and, through a process of sampling, verifies the findings in the draft report. The external evaluator would contribute suggestions for improvement based on his/her own expertise. The evaluation report would contain the agreed findings of the provider and the external evaluator.
or

b. The evaluation is conducted with the involvement of the external evaluator from the start. A team would be established including staff member(s) and the external evaluator who would, in consultation with learners, complete the checklist and compile the agreed findings into an evaluation report.

Sources of Information

The provider should seek information from a variety of sources. This will require the use of a variety of techniques. For example:

- learner interviews
- programme team meetings
- questionnaires
- review of records and statistical reports
- review of complaints/incident reports
- meetings with management
- observation etc.

Self-Evaluation Checklist

The self-evaluation will examine many aspects of the programmes and services but should focus particularly on the quality of the learners’ experiences and achievements. When making judgements on any aspect of provision, the emphasis should be on the impact on learners and other stakeholders rather than on policies and procedures.

Hence the self-evaluation should involve the provider and external evaluator asking a series of questions pertaining to the presence of quality in its programmes and services. These questions, set out in a Self-Evaluation Checklist (template available from QQI) will be asked of the staff and learners involved in the programme and related services. The checklist addresses the broad policy areas reflected in these guidelines and allows the provider to evaluate the effectiveness of its quality assurance procedures as applied to a particular programme i.e. have they actually delivered quality in the programme and services and is there evidence to back that up?

In answering each question, the provider should grade itself according to the following scale:

3 = Strength There is evidence, from each programme evaluated, to indicate that achievement in this area is above average. This is an area where practice should be disseminated elsewhere.

2 = Acceptable There is evidence that achievement in this area meets expectations, though maybe not in all programmes evaluated. With further development, this could become an area of strength

1 = For Improvement There is little or no evidence that achievement in this area meets what is expected. Improvement is needed.

This will allow the provider to identify those policy and procedure areas which are succeeding and those which need improvement. The findings should be used to provide the basis of reflection and discussion which will culminate in the evaluation report.

It is critically important to understand why things are going well in some cases and not so well in others. Questioning is key.
Reporting

The aim of the self-evaluation is to produce a constructive report which will help the provider to maintain and improve the quality of its programme and services. While a self-evaluation may include a number of related programmes, each should be reported on separately. This report, allied with a Programme Improvement Plan agreed by management, will be sent by the provider to QQI.

a) Self-Evaluation Report

A self-evaluation report will build on the findings of the self-evaluation checklist and seek to provide qualitative and quantitative judgments on a programme and associated services.

The report structure requires the provider to focus on the effectiveness of the programme itself in terms of its achievement of its objectives.

The report should include considered reflection on the strengths and weaknesses of the programme together with agreed recommendations under a number of headings i.e.

- Programme Design and Content
- Programme Delivery
- Assessment of Learning
- Associated Services and Resourcing
- Attainment of Programme Objectives.

b) Programme Improvement Plan

Self-evaluation should be complemented by improvement planning, to build on strengths and to address identified areas, which need improving. A Programme Improvement Plan must be realistic and achievable, with priority given to those areas which will have the most potential for improving learner outcomes. A self-evaluation report submitted to QQI must be accompanied by a Programme Improvement Plan signed by management indicating how the findings of the evaluation report will be acted on so as to maintain and improve the quality of programmes. A Programme Improvement Plan can form the basis of a subsequent self-evaluation i.e. the questions can be reduced to:

‘Are the strengths / good practices still there?’
‘Have the improvement actions been carried out?’
‘What further improvements do we need?’

Templates for the self-evaluation report and programme improvement plan can be obtained from QQI, if required.
9. Assessment of Quality System by QQI

QQI requires all providers seeking initial validation of a programme to first submit their quality assurance procedures for approval (Ref: QQI Policy and Criteria on Initial Access to Programme Validation.)

The assessment for approval will be carried out by a panel of suitably qualified independent persons.

The provider’s submission for approval should include the following:

- Provider Mission Statement
- Organisation Chart showing the structure and staffing
- Documented quality system comprising components listed in Section 5 above.

The provider will be expected to verbally present the system to the panel and explain how it is to operate.

9.1. Criteria for Approval

The panel will use the following criteria as its basis for making a recommendation on approval.

- The quality system is comprehensive, containing policies and procedures for all relevant areas set out in Section 7 above.
- The provider has a governance structure capable of overseeing the effective implementation of its quality system.
- The provider’s policies demonstrate a full knowledge of legislative obligations on providers arising from the Qualifications and Quality Assurance (Education and Training) Act (2012).
- The procedures are capable of being effectively monitored by the provider and/or by QQI.
- The system for Internal Monitoring is credible i.e. it identifies
  - who is responsible
  - mode(s) of operation
  - frequency
  - indicator(s)/measures of effectiveness.
- The procedures for Assessment of Learners have the capacity to ensure that assessment as carried out will be fair, consistent and fit for purpose.
- The policy of Protection of Enrolled learners clearly states the provider’s obligations in this area.
- The system for Self-Evaluation and Improvement is credible and has the potential to support quality provision in the provider.
- There is evidence of involvement of all significant stakeholders in the process of self-evaluation i.e. learners, staff, independent evaluator, external stakeholders.
- The presentation to the panel demonstrates a full ownership and understanding of the quality system by provider management.
Appendix

**Glossary of Terms**

**Access:** Refers to a learner’s ability to avail of appropriate opportunities to enter and succeed in programmes leading to awards, with recognition of learning already achieved.

**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.

**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.

**Completion rate:** The number of learners who achieve an NFQ award on a programme of education and training expressed as a percentage of the number of learners who commenced the programme 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.

**Evidence:** Material generated by the application of a procedure which demonstrates its effectiveness.

**First Provider:** A person or body which organises or procures all or part of a programme, part or all of which is provided by another provider.

**Further Education and Training:** Education and training other than primary or post primary or higher education and training.

**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 in its own right.

**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 of Qualifications:** 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 programmes

Peer Review: The involvement in self-evaluation of a programme of a person from another provider, in further or higher education and training, capable of giving an informed view on the success of the programme and able to contribute to its improvement

Programme: A learning experience designed and offered by a provider, within the state, based on predetermined national standards and leading to a QQI award

Programme Review: The process whereby the provider reflects on its programme(s) to ensure its continued relevance. A review will be conducted more frequently but less formally and on a smaller in scale than a programme self-evaluation. The findings of reviews will contribute to a self-evaluation.

Progression: Refers to a learner’s ability to move to another programme leading to an award at a higher level of the Framework, having received recognition for knowledge, skill or competence acquired

Protection for Learners: Arrangements put in place by providers, offering programmes of three months duration or more and on a commercial basis, to protect the interests of learners in the situation where a programme ceases.

Provider: A person who provides, organises or procures a programme of education and training

Quality Assurance: The system(s) put in place by a provider to maintain and improve the quality of its programme(s)

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 programme. 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 programme 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 programme(s) and services. The findings of self-evaluation will be published in a standard format.

Special purpose award: This award type is made for specific, relatively narrow, purposes 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 programme 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 programme of education and training, to ensure that the proposed programme provides the learner with the opportunity to reach the standards of the award to which the programme is intended to lead.