Report

QQI Reengagement
- Thematic Analysis -

September 2018-February 2020

QQI INSIGHTS

The Author

Dr Orlaith Mc Caul is an Adjunct Professor at Carleton University, Ottawa, Canada.

Formerly Dr Mc Caul served as the Head of Quality Assurance and Learner Assessment at the Higher Education and Training Awards Council.

CONTEXT STATEMENT
MARCH–MAY 2020

This analysis was carried out and the report was produced during February to May 2020 at the time of the COVID-19 pandemic. Every effort was made to include as many stakeholders as possible in the process using technology where face to face meetings were originally planned. Focus group discussions did not take place and were replaced with individual interviews where possible.

ACKNOWLEDGEMENTS

PREAMBLE

Quality and Qualifications Ireland (QQI), in its Statement of Strategy 2019-2021, commits to analysing and demonstrating the impact of measures taken to improve the quality of education and training for the benefit of learners. This report sets out the findings of an analysis of the QQI reengagement process from 2018 and 2019.

This report highlights the main outcomes of the reengagement process to date as set out in the published and unpublished reengagement reports. It also captures the views of stakeholders on their experience of the reengagement process which is considered to have been largely a positive one.

This report notes the sector-wide commitment of Irish higher and further education providers to quality assurance and enhancement as evidenced by the willingness to engage in this analysis despite a national and international pandemic.

This report reveals the common problem areas for providers as identified by panels through the process; primarily the documentation of Quality Assurance (QA) policies and procedures and governance arrangements in Higher Education (HE) and Further Education and Training (FET) providers. It will be of interest to providers which are preparing to, or currently engaged in the process. It may also be of interest to national and international stakeholders.

The findings in this report show that quality assurance and enhancement are well embedded and understood in higher and further education providers. Nonetheless, it illustrates that the governance of QA and the manner in which it is documented requires additional efforts to ensure a comprehensive and effective approach.

EXECUTIVE SUMMARY

This document outlines a thematic analysis of the QQI reengagement process and is based on a review of reengagement panel reports (32) both published and unpublished from September 2018 to February 2020. It takes into account the experience of providers that have successfully completed the reengagement process and those which are currently taking part in the reengagement process[1]. The views of panel members have also been collected through questionnaires and interviews and are reflected in this report.

The most common outcome for providers in the reengagement process is **refusal pending mandatory changes** (41%). The least common outcome is to be approved without mandatory changes (28%). A deferred decision[2] stage was used in 31% of total reports.

- 71% of providers in the reengagement process are required to make mandatory changes prior to completing the process[3].
- On average each provider is required to address six mandatory changes.
- Of the 140 mandatory changes recommended to date, 39% relate to governance and management of QA and 21% relate to the documented approach to QA.

Mandatory changes relating to governance and management in providers which have now successfully completed the process made up 44% of the recommendations. For providers currently in process, governance related changes make up 36% of changes. Mandatory changes related to QA documentation average 18%.

Ninety-five people (panel members and providers) took part in the online survey. 100% of providers agreed that the **reengagement process was helpful in improving QA**. 77% of providers agreed that there was adequate and clear documentation available from QQI to complete the process. 91% of respondents agreed that having **informal and formal access to QQI staff** for advice and clarifications was an invaluable aspect of the process.

96% of panel members **had a positive experience** with reengagement. 89% of panel members agreed that the preparation phase of the **process was fit for purpose**. All panel members who have been involved in more than one reengagement found the **reengagement process to have been consistent** across all providers.

This analysis finds the QQI reengagement process to be fit for purpose and a positive experience leading to improvements in quality assurance. Furthermore, it concludes that most providers in Ireland participating in the reengagement process require some improvements to meet the QQI criteria. These improvements most commonly concern governance and management of QA and the QA documentation.

---

[1] These providers have been through one stage of formal governance with QQI.

[2] Where a panel at a site visit identifies that a provider has a mandatory change to make, but this change is limited in scale and can be made speedily, a panel can defer its decision for six weeks to allow the provider time to address the issue(s) identified. After six weeks, the panel will reconvene (virtually, if necessary) to complete the process and in so doing, determine whether the issue(s) identified at the previous site visit has been satisfactorily addressed by the provider and thus make an overall recommendation to QQI.

[3] This is either through a formal refusal with mandatory changes or proposed mandatory changes identified through a deferred decision stage. Mandatory changes as used in this section refers to both.

TABLE OF CONTENTS

SECTION 1: BACKGROUND

1.1 CONTEXT

QQI (Quality and Qualifications Ireland) is an independent State agency responsible for promoting quality and accountability in education and training services in Ireland. It was established in 2012 by the Qualifications and Quality Assurance (Education and Training) Act 2012 (hereafter the 2012 Act). One of QQI's functions is to approve a provider's quality assurance procedures and monitor and review the implementation and effectiveness of such procedures (2012 Act, 9.c).

Under the 2012 Act, QQI was tasked with the development of QA Guidelines for providers. In turn, providers must submit their QA procedures for approval to QQI having had due regard to QQI's QA Guidelines. In 2016, QQI published Statutory Quality Assurance Guidelines to enable providers to fulfil their statutory obligations. QQI piloted and subsequently, established the "reengagement" process for private and independent providers as the mechanism by which providers could submit their QA procedures for approval. Through the reengagement process, QQI has been working with all independent and private providers in Ireland to ensure that their governance, QA and general institutional capacity are sufficient to sustain them and their programmes leading to QQI awards.

Reengagement is a once off, forward-looking process which feeds into ongoing *monitoring* and, ultimately, *institutional review*.

1.2 CURRENT REENGAGEMENT PROCESS

Reengagement for each provider is considered by QQI to be a one-off process to establish:

1. Quality Assurance procedures approved by QQI in accordance with either Section 29 or 30 of the 2012 Act; and
2. The provider's scope of provision i.e. the range of programmes leading to particular award types at specified levels on the National Framework of Qualifications for which the quality assurance procedures and organisational capacity are deemed appropriate and for which future applications for programme validation can be made.

Through a reengagement process, it is intended that QQI will recognise the work involved in developing and implementing quality assurance processes in the past while ensuring a sound statutory basis for future quality assurance development and enhancement.

QQI appoints independent, expert panels to evaluate reengagement applications. Reengagement involves a desk review of a provider's quality assurance documentation followed by a site visit by the panel. The purpose is to evaluate the providers quality assurance documentation and governance with reference to the QQI Guidelines and other relevant documentation such as the programme validation policy, with the intention of making a recommendation on approval, or otherwise, to QQI.

Following the site visit and subsequent ongoing discussions with the provider, the panel produces a panel report which is submitted to QQI's Programme and Awards Executive Committee for decision. Reengagement results in a published report and providers publish their approved QA procedures to their websites.

Legally, there are three possible outcomes to reengagement. QQI may:

(1) Approve the provider's draft QA procedures;

(2) Refuse approval of the provider's draft QA procedures pending mandatory changes (If this recommendation is accepted by QQI, the provider may submit revised documentation addressing the changes identified within six months of the decision); and

(3) Refuse to approve the provider's draft QA procedures.

Providers have recourse to a statutory appeals process. This provision has not been utilised to date.

Where a panel at a site visit identifies that a provider has a mandatory change to make, but this change is limited in scale and can be made speedily, a panel can defer its decision for six weeks to allow the provider time to address the issue(s) identified. After six weeks, the panel will reconvene (virtually, if necessary) to complete the process and in so doing, determine whether the issue(s) identified at the previous site visit has been satisfactorily addressed by the provider and thus make an overall recommendation to QQI.

1.3 SCOPE AND PURPOSE OF THIS ANALYSIS

Reengagement was initiated in mid-2018 and was preceded by a pilot project which is exempt from the scope of this analysis. All reengagements completed or having at least passed one stage of governance with QQI, since the process started in 2018, are included in this analysis. Section two of this report gives an analysis of how these providers have been classified in relation to where they are within the process. Reports of those providers who have successfully completed the process are now published on the QQI website (18) and those that are still in process are classified in this report as having unpublished reports (14). Section 2 of this report deals with this in further detail.

Providers that have applied, but whose applications have not gone to the committee stage for decision have not been included.

The aims of this thematic analysis are:

To facilitate the providers and panel members who have been through the process to give their experiences of and feedback for the process itself and the issues it has brought to light; this involved surveying and interviewing panel members and providers to;

1. review and analyse the panel reports generated to identify and expand on the main themes arising;
2. identify areas where the process can be adjusted to enhance its effectiveness;
3. support future applicants;
4. provide material that can be used across the Further Education and Training (FET), Higher Education (HE) and English Language Education (ELE) sectors;
5. enhance the transparency of the reengagement process and ensure it is a fit-for-purpose process.

This thematic analysis is also in line with QQI's Strategy Statement 2019 – 2021 in which QQI commits to analysing and demonstrating the impact of measures taken to improve the quality of education and training for the benefit of learners.

The report of the findings of the thematic analysis will be fed back into the system so that:

- Other providers applying for reengagement can benefit from the lessons learned.
- QQI can adjust the process as necessary to enhance its effectiveness.

The author is fully independent to QQI and the providers that have undergone the reengagement process or are likely to be applying for reengagement in the future.

1.4 METHODOLOGY

The planned methodology for this analysis was revised in light of constraints and limitations imposed as a result of the COVID-19 pandemic. The principle of maximum consultation with providers and panel members was upheld in the revised methodology.

The analysis consisted of a desk review of relevant documentation (set out in Appendix 5) including, but not limited to, QQI policies and procedures and reengagement reports both published and unpublished. An online questionnaire was established (results can be found in Appendix 2 and Appendix 3), which all panel members and applicable providers were invited to complete (95 respondents). Planned focus group meetings with panel members, report writers and providers respectively could not proceed as human mobility was restricted during the analytical process (March 2020). Individual interviews with a representative sample of each group were carried out by phone instead (representatives from 5 providers and 12 panel members were available to take part).

This report sets out the key findings of the analysis with particular reference to:

- Main themes arising from reengagement reports to date;
- Stakeholders' views on areas where the process could be adjusted to enhance its effectiveness.

SECTION 2: THEMATIC ANALYSIS

2.1 CONTEXT OF THE REENGAGEMENT PROCESS

QQI works with a diverse range of private and public providers and institutions in further and higher education and training. For some, QQI acts as an awarding body and external quality assurance body. For those that make their own awards, QQI is an external quality assurance body only. The 2012 Act ensures these relationships with providers are maintained until replaced. QQI use the term 'reengagement' to describe this transition process.

The policy documents that relate to reengagement are:

- Re-engagement with QQI - Overarching Policy for All Providers
- Policy relating to FET (Further Education and Training)
- Policy relating to HET (Higher Education and Training)
- Schedule of fees

Reengagement for each provider is intended to be a one-off occurrence which establishes its QA procedures with QQI in accordance with either Section 29 or 30 of the 2012 Act. This report specifically focuses on the reengagement of independent and private providers.

In Spring 2017, QQI began holding regional briefings for all independent and private providers to explain the reengagement policy and describe the proposed process. QQI carried out a pilot of the reengagement process in 2017 to test its efficacy before implementing the existing process. Further details of the reengagement process can be accessed on the QQI website.

In keeping with the QQI policy of disseminating information arising from its QA processes, this report identifies the common themes which have emerged from reengagement reports from 2018 and 2019. It is intended to provide information to aid the sector in reengaging with QQI and to learn from the strengths and weaknesses commonly found across the sector.

As part of this analysis, a review of 32 QQI reengagement reports (published and yet to be published[4]) between September 2018 and February 2020 was completed. The reports included higher education and further education providers, private and independent, ranging in size, sectoral focus and stages of organisational development[5].

The reengagement reports set out the findings of the panel visit process which evaluates the institutional capacity and quality assurance procedures of the applicant against the statutory QQI QA guidelines. The reports set out panel recommendations to QQI with respect to the decision for approval (or otherwise) of provider QA procedures (outcomes are further examined in section 2.2 below). The reports which have been reviewed for this analysis are each contextually situated, are specific to each provider's QA policies and procedures and focus largely on the provider's compliance with QQI QA guidelines.

QQI publishes reengagement reports where the process has been completed and does so to **enhance learning across the tertiary education sector**. In doing so, this affords organisations, beginning the process, an opportunity to learn from the experience of other organisations who have gone before them.

---

[4] Since the analysis was conducted, all reports referred to in this document have been published to the QQI website.

[5] Appendix 1

The QQI reengagement process has revealed some common themes in provider quality assurance. The reports have highlighted areas where panels noted **good practice** along with areas where **criteria were not satisfied** fully.

Since the option of the deferred decision stage was introduced in May 2019, it has been utilised by the majority of panels at the site visit stage of the reengagement process[6].

2.2 RECCOMENDED OUTCOMES

The published (18) and unpublished (14) reports are classified as;

- approved
- approved following a deferred decision stage (to address proposed mandatory changes) (6 weeks)
- refusal pending mandatory changes (6 months)

The published reports represent providers that have now successfully completed the reengagement process and are published to the QQI website. Of the now completed applicants initially;

- 45% were an approval with no changes.
- 33% were an approval via deferred decision stage with proposed mandatory changes to be addressed within six weeks.
- 22% were initially refused with mandatory changes. These providers were given a period of six months to address the changes and have subsequently been found by a panel to have successfully done so.

**Chart 1: Overall Outcomes September 2018 – February 2020
18 Providers – Published Reports**
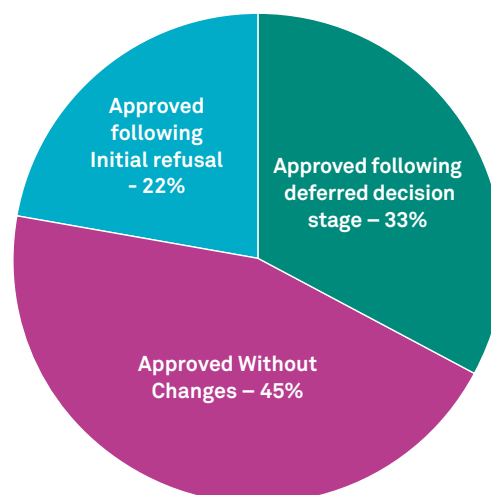
[6] This is limited to the reports reviewed for this analysis.

Of the providers that are currently in process and in receipt of confidential and therefore unpublished panel reports (14), the majority (64%) are currently classified as having an outcome of **refusal pending mandatory changes**. These providers are given six months to address the mandatory changes. Those currently in the refusal pending mandatory changes category have received an average of 9 mandatory changes to address. In addition;

- Three providers in this category had less than five mandatory changes to address.
- Five providers in this category had in excess of ten mandatory changes to address.

36% (the majority of mandatory changes) related to governance and management and 18% (second most common recommendation category) focused on their documented approach to QA. Governance and documentation collectively add up to the majority of concerns (54%).

Those providers classified, for the purpose of this analysis, as having unpublished reports (14) requiring mandatory changes and for whom decisions had been **deferred** amounted to 29% of the total. Those evaluations all resulted in a recommendation for QA approval. 57% of the mandatory changes for these providers relate to governance and management.

**Chart 2: Overall Outcomes September 2018 – February 2020
14 Providers – Unpublished Reports**
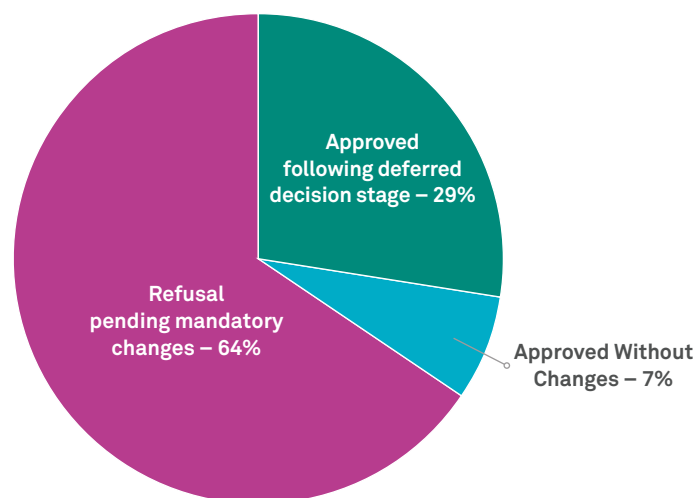
Taken in totality the most common outcome for providers has been **refusal pending mandatory changes** accounting for 41% of the overall outcomes. The least common outcome is to be **approved without any changes representing 28%** of providers.

**Chart 3: Overall Outcomes September 2018 – February 2020
Published and Unpublished Reports**
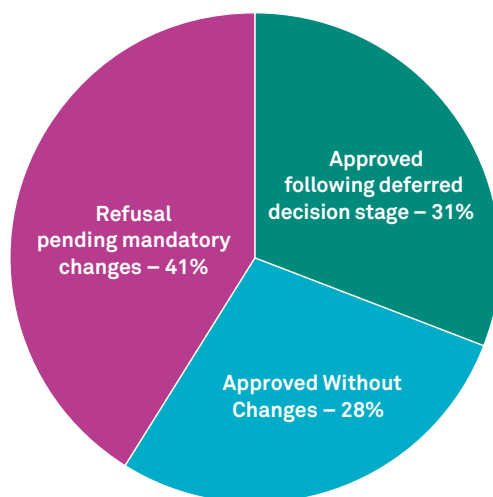
2.3 STRUCTURE OF THE PANEL REPORTS

QQI reengagement reports follow a standardised format. Capacity criteria are set out in two core sections. Part 4 evaluates the provider capacity in relation to;

1. Legal and Compliance Requirements
2. Resource, Governance and Structural Requirements
3. Programme Development and Provision Requirements

No particular concerns have been raised in either the published or unpublished reports in relation to these criteria.

Part 5 evaluates the draft procedures of the providers in relation to the 11 core statutory QA **guidelines and other topic-specific QA guidelines** as follows;

1. Governance and Management of Quality
2. Documented Approach of QA
3. Programmes of Education and Training
4. Staff Recruitment, Management and Development
5. Teaching and Learning
6. Assessment of Learners
7. Support for Learners
8. Information and Data Management
9. Public Information and Communication
10. Other Parties Involved
11. Self-Evaluation, Monitoring and Review
12. Topic-Specific QA Procedures

It is these criteria where the analysis has found common areas of good practice and concerns amongst providers. These are set out below.

2.4 MANDATORY CHANGES IN PUBLISHED AND UNPUBLISHED REPORTS

Mandatory changes and specific advice are set out in Section 6 of the reengagement reports. In the published reports, providers that initially went through the **deferred decision stage accounted for 33%** of the total. The total number of mandatory changes in the published report was 41. Of these;

- the lowest number of changes recommended was two
- the highest number of changes was seven

The **most common mandatory changes** recommended in the published reports for providers that went through the deferred decision stage relate to;

- Governance and management of quality at 46% (statutory guideline 1)
- The documented approach to QA at 23% (statutory guideline 2)

The most common mandatory change for providers that have completed the process, but which initially were refused approval, related to governance and management and it accounted for 37% of the recommendations.

Chart 4: Mandatory Changes in Published Reports
(Refused pending mandatory changes and approval via deferred decision stage)
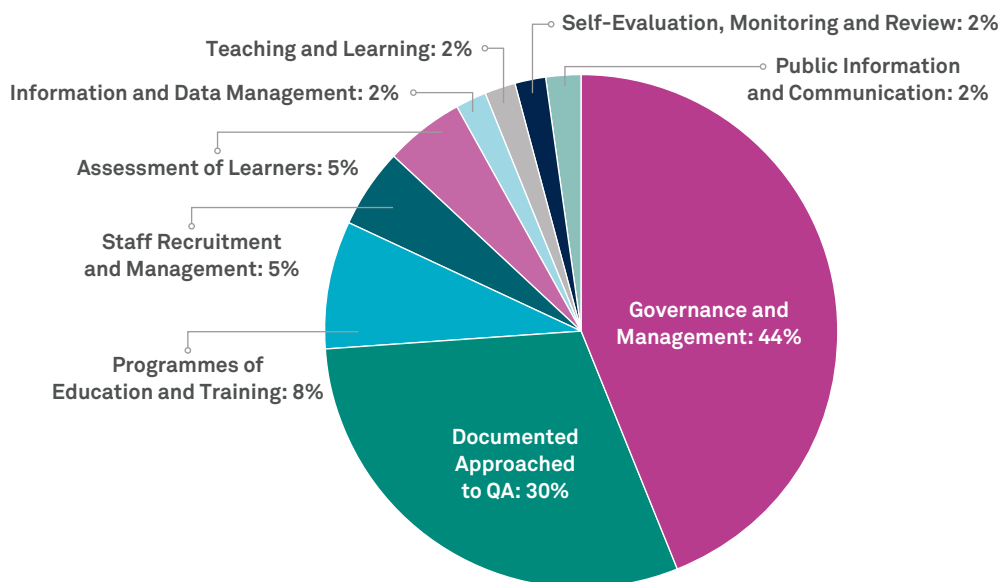
In the unpublished reports which were reviewed (14) a total of 99 mandatory changes are recommended representing an **average of seven mandatory changes per provider**.

- 36% of the mandatory changes relate to governance and management and
- 18% relate to the documented approach to QA.

Learner assessment related mandatory changes (statutory guideline 6) were the next most common recommended change amounting to 10%. Where topic-specific QA procedures were recommended (4 out of 99), these specifically focused on **blended learning.**

Common to both published and unpublished reports are primarily concerns related to governance and management and how QA is documented collectively making up 60% of the total number of recommendations.

A total of 140 mandatory changes are recommended in the reports (41 in the published reports and 99 in the unpublished reports).

Governance and management is the most common theme arising from the mandatory changes recommended in the reengagement reports making up 39% (54). Specifically, panels identified the following issues across providers;

(1) Notable here were concerns regarding **clarity on the separation of commercial decision making and academic decision making**.

At the time of the visit, the Panel requested that the terms of reference of the Academic Board and the Board of Directors be made clear, and explicitly confirm the separation of academic and commercial decision-making. It also requested that the ultimate authority of the Academic Board for academic decision-making be confirmed. The Panel identified this - as a proposed mandatory change. (Published Panel Report, 2019)

(2) Issues are commonly raised in relation to governance structures and their **fitness for purpose**.

Having reviewed the proposed governance arrangements presented by PROVIDER, the panel is of the view that it does not comply with statutory QQI guidelines. The panel has therefore determined that THE PROVIDER needs to reconsider the terms of reference and re-structure the proposed membership of the Board, the Academic Council, the Quality & Monitoring Committee and the Programme Development and Review Committee. (Published Panel Report, 2019)

(3) A lack of clarity on how **externality** is built into governance structures and **representation** of relevant stakeholders (e.g. academic staff and learners) in governance structures are notable themes.

The documented approach to QA represents 21% of the mandatory changes for providers.

(4) The main issue arising here related to **user friendliness and navigability** of the documentation.

The document in its current form contains unnecessary levels of background and contextual information, and is not consistently written in a user-friendly style. It needs to be comprehensively edited to ensure that it is informational in tone and uses plain language. (Published Report, 2019)

(5) Fifteen providers (46%) received mandatory changes requiring significant revisions to their QA manuals of which eight (25%) providers were required to completely restructure their QA manual.

The QA Manual should be restructured as it is not user friendly (Published Panel Report, 2019)

Policies and procedures need to be comprehensively reviewed to remove unnecessary duplication, and to reflect a consistent format, using a standard template. The Provider is advised that good practice would be to have a single, clearly written source from which the student handbook content is directly extracted. (Published Panel Report, 2019)

(6) To a lesser extent but not uncommon was a requirement to revise the documents to ensure that **terminology was used consistently** throughout.

Review all documents to ensure that there is full consistency and clarity (in terms of terminology, language, reporting structures (Unpublished Panel Report, 2019).

Panel members interviewed for this thematic analysis concurred with the findings set out above when the matter of documentation was discussed. Additionally, panel members consistently raised three further concerns.

(7) **Difficulty in mapping** the documentation provided to the standards set out in the QA Guidelines. **Gaps in documentation** particularly with respect to the QQI QA Guidelines was also a common concern.

This was highlighted by panel members as presenting a dilemma. While providers are encouraged to set out their policies in a manner which is relevant to their own situation, reviewers noted regular challenges in identifying where the documents addressed the criteria. QQI does not currently prescribe a particular format to be followed, it has however guided applicants towards samples of procedures which it considers to be well laid out and publishes the names of providers which have been approved and have published their documentation on the provider website.

(8) **Outdated materials** being presented.

Panel members interviewed identified 'version control' as a regular issue arising. This has been problematic as discussions taking place during the panel visit often revealed that between the time of document submission to QQI and the panel visit, ongoing amendments to procedures had been made. The importance of monitoring these amendments prior to the visit and advising panel members of revisions would be considered helpful.

(9) **Accessibility and Navigability** Issues.

This matter is highlighted above in the mandatory changes related to documenting the QA approach. It was also a common theme emerging from the interviews. The extent to which the QA documents were usable remains a concern. In particular, how easy it was for learners to navigate through them. Approved policies are published on provider websites however, panel members encourage providers to develop **web friendly/user friendly** documents where the relevant sections are easily identified and understood.

One theme which emerged from the interview process which was not dealt with specifically in the mandatory changes relates to the **self-evaluations** carried out by providers in advance of submitting applications for reengagement: the 'gap analysis'.[7] These are categorised under three headings;

---

[7] QQI provides a 'gap analysis tool' to applicants. This document, for a provider's own use, is designed to help a provider to conduct a gap analysis between their current resources, governance and quality assurance procedures and be aware of what is expected as set out in the QQI suite of guidelines.

(1) Concerns that the provider's gap analysis did not reflect a true representation of the status quo within the organisation with respect to QA.

Providers which had successfully completed the process highlighted the importance of this exercise in improving their QA procedures overall. The importance of the gap analysis accurately reflecting the current situation and identifying areas for improvement was heavily emphasised by panel members as fundamental.

(2) Limited institution wide involvement in the self-evaluation process.

Notwithstanding the acknowledgement that institute wide participation in the self-evaluation process can be a costly exercise and further acknowledging the need for clarity on leadership and management of QA processes, panel members highlighted that where it was clear that familiarity with QA policies and procedures was held by a few, providers did not fare well during the panel visits. Providers are therefore encouraged to meaningfully involve as many internal and external stakeholders as feasible in the self-evaluation/ gap analysis process.

(3) Evidence that the exercise was completed for compliance rather than continuous improvement.

In keeping with the points above, a majority of panel members raised concerns as to the **true objective** of the reengagement process for some applicants; i.e whether the process was carried out for compliance or for quality improvement. Where limited involvement was evident in the gap analysis process and where the analysis presented was not reflective of the reality of how QA is managed, providers tended to require significantly more effort to meet the standard for reengagement with QQI.

Overall, mandatory changes not categorised as governance or document related issues referred to a variety of other context specific issues. Largely these dealt with specific policies, procedures or aspects of the documentation which were deemed to be either **unclear or incomplete**. Clarity in relation to assessment of learners was the fourth most common area where panels raised concerns and recommended mandatory changes. Where specific changes were mandated under Topic-Specific QA Guidelines, **100% of these related to blended learning**.

2.5 SPECIFIC ADVICE

Specific advice offered by the panel to the provider also forms part of the reengagement reports. Addressing specific advice is not obligatory and it often refers to very discrete matters. Of the reports reviewed the lowest number of Specific Advice to a provider was one and this related to learner assessment. The highest number was 13 covering a variety of topics. Whilst specific advice is not a mandatory requirement for actioning by the provider, it is widely viewed as an opportunity for the provider to gain suggestions from the panel which are considered useful for the improvement of quality assurance.

Responses from providers in the published reports show that providers have acknowledged that this advice was helpful and are noted, where addressed by providers, in the overall completed reports. Specific advice is generally discrete, context specific and relates to further refinements of particular aspects of the QA documentation or more systematic articulation of particular policies.

As with mandatory changes, specific advice can be largely classed as pertaining to documentation (clarity and navigability). To a lesser extent but still notable is a common theme of governance structures particularly having clear terms of reference for committees involved in the provider QA.

2.6 GOOD PRACTICE

The panel reports highlighted several areas of good practice. Providers were commended for many aspects of their work, often context specific. This section highlights commendations made by the panels in relation to **how providers approached the reengagement process** and of **specific good practice evident in the providers QA**.

Providers that appeared to have **engaged in a meaningful** way both prior to, and during the reengagement process were commended for this practice.

> *It was clear to the panel that a provider had put substantive work into the reengagement process.* (Panel Report, 2019)

Where it was evident that **internal collaboration** had occurred in the reengagement process this was highlighted as being a very positive finding.

> *The constructive involvement of a wide range of staff in the self-evaluation process was evident.* (Panel Report, 2019)

Where **knowledge of the QA system** was observed to be **well embedded** within a provider this was also considered to be good practice:

> *Staff were articulate and knowledgeable of the QA systems.* (Panel Report, 2019)

Self-evaluation which included aspects of **externality and encompassed relevant stakeholders** drew particular commendation.

> *External involvement and in particular stakeholder engagement in the self-evaluation process [was evident].* (Panel Report 2019)

The **rigour with which the provider engaged in the self-evaluation** process emerged as a notable theme. Comprehensiveness of the self-evaluation and steps taken to address areas of improvement in advance of a site visit were considered to be good practice.

> *[The provider undertook] a systematic and thorough self-assessment\stakeholder consultation* (Panel Report, 2019)

In summary, providers were considered to be **engaging in good practice** if it was evident that there existed:

1. Staff familiarity with the documentation
2. Authentic collaboration in the approach to QA
3. Widespread participation in the QA processes and in the reengagement process
4. Openness and proactive engagement in the reengagement process
5. A clear commitment to QA
6. Demonstrable evidence of a quality culture

Of the upmost importance in relation to good practice is the necessity to have **clear QA documentation** which is **user friendly and navigable**. Where good practice in regard to the documentation was found it was commented upon by the panels. Approved Reports (2018, 2019) highlighted where documentation was;

- Clear for the intended readership
- Systematic and navigable
- Logically structured
- Comprehensive

Additionally, where documentation provided for internal and external stakeholder inclusion in QA this was considered to be positive. **Student-centred QA practices** outlined in the documentation were also noted as good practice.

Tailored support for students are in place (Panel Report, 2018)

The thematic analysis has found that **opportunities for capacity development in the sector exist in relation to governance and management of QA and how QA is documented** by providers. Sections 3 and 4 examine the themes in further detail from the perspective of the providers and the panel members.

SECTION 3: PROVIDERS' PERSPECTIVES

As part of this analysis, providers which have taken part in the reengagement process (completed and in process) were invited to take part in an online questionnaire. Twenty-two individuals responded to the survey. Five one-to-one interviews were carried out in place of focus group discussions which were not possible in the public health context. This section reflects the main feedback from the providers and advice, based on their experience, to QQI and other providers about to embark on the process.

- 77% of providers agreed that there was sufficient information publicly available to complete the process.
- 100% of providers agreed that there were sufficient opportunities to seek clarification.
- 55% of providers agreed that the opportunity to hear from and communicate with other providers was helpful. Not all providers which responded had this opportunity as it was introduced during the reengagement process.
- 91% agreed that access to QQI staff was helpful.
- 82% agreed that there was sufficient time between receiving notification of their invitation to reengage and application deadline the timelines for reengagement were adequate.
- 82% agreed that the panel reports were clear.
- 77% agreed that feedback providers received during the site visit was reflected in the report.
- 100% of providers agreed that the reengagement process was useful.

Providers which have completed the process and those still in process were asked to provide advice to colleagues considering the reengagement process. This section highlights **interesting common experiences** of participants which may be helpful for other providers considering taking part in the reengagement process.

(1) **Attend information sessions**. Formal opportunities to learn about the process and experiences of other providers are very helpful. Efforts should be made to involve as many members of staff as possible in these opportunities. **Opportunities to attend information sessions** prior to preparing their submission are **'very helpful'**.

(2) Take time to **familiarise yourself with the QQI documentation**. 77% of providers agreed that the published **documentation provided by QQI was adequate** to allow them to make a reengagement application.

(3) **Review QQI published reports** which can highlight areas of good practice along with areas where providers tend to require further work. Providers that engaged in the later part of the process benefited greatly from having **access to completed reengagement reports**.

(4) Make every effort to reach out to providers which have completed the process. **'Learning from the experience of peers'** was noted as being **important**.

(5 Familiarise yourself with common themes (such as issues with **governance and documentation) which make up over 50% of mandatory changes. Knowing how your institution addresses these issues** can help in preparing your documentation or making changes prior to the reengagement process.

(6) Approach the self-evaluation honestly and rigorously. Panels appreciate efforts made to prepare for the reengagement process.

(7) **Involve as many internal stakeholders** (staff and students) as possible in the reengagement process and make every effort to ensure externality in your QA processes and procedures.

(8) Make sure your documentation is clear and logical and is easily navigable. Make sure your terminology is consistent and that all your documentation is up to date and does not over-rely on legacy processes. Your documents must be easily mappable against QQI criteria.

(9) Providers advise that this process is cumbersome. It is resource heavy in both human and financial terms. Completing this process requires significant effort and focus. Involve your staff. 100% of providers have found the reengagement process to be useful in improving QA.

Providers are advised **not to hesitate to seek clarifications** throughout the process and to talk to other providers. As the reengagement process has developed, peer learning from QQI, panel members and providers has led to a perception of a **collective national effort** to engage in the continuous improvement of the quality of higher and further education in Ireland. There is a great willingness amongst stakeholders to assist those going through the process.

Informal aspects of the process are clearly an important aspect of reengagement and highly valued by providers. This theme is observed readily in supporting comments to the questionnaire, observations and in follow up interviews. Of the informal aspects most valued by providers, three were deemed to be **the most valuable part of the process**. These included:

1. **The availability of QQI lead staff** to provide advice and clarification
2. **The approachability and support of QQI lead staff**
3. **The opportunity to ask questions** of QQI during the process

91% of respondents in the survey agreed that having access to advice and feedback from QQI staff was invaluable in assisting with the application process. Providers are encouraged to avail of this opportunity.

From the providers perspective, the site visit was considered to be a highlight of the process and an opportunity to showcase the QA system. Opportunities to reflect on the feedback from the pre-site visit panel meeting and document review were noted as being helpful to prepare for the site visit. From the provider perspective, the **site visit was a valuable experience**. It provided an opportunity for **staff to fully engage** with the QA process, an **opportunity for helpful discussion** and a **capacity development opportunity** for the provider in relation to QA.

Providers noted that there was consistency experienced between recommendations discussed during the visit and the follow up draft report. The reports were considered to be helpful in providing a basis from which to focus areas for improvement.

Testimonials of providers are encouraging.

> *it was a very worthwhile process, professionally undertaken and the engagement with the panel was collegial, mutually respectful and positive. Likewise the QQI staff involved were exceptionally courteous, professional and supportive.* **(Provider, 2020)**

> *The exercise was invaluable. I cannot emphasise enough how useful -crucial - it was.* **(Provider, 2020).**

> *This process has enhanced our business and the way we carry out our business. We believe that it has strengthened many areas of the business. Our enhanced QA process is both comprehensive and accessible.* **(Provider, 2020)**

100% of respondents agreed that the process was helpful in strengthening QA procedures.

> *Perhaps most significantly was that the process meant all staff needed to engage with it and therefore a strengthened understanding of QA guidelines was developed by staff who wouldn't normally engage with them.* **(Provider, 2020)**

SECTION 4: PANELS' PERSPECTIVES

Panel members' views were gathered through online questionnaires (73 respondents) and individual interviews (12). Planned focus group discussions with chairs and report writers were not possible in the context of the public health emergency; however, one-to-one interviews were carried out as an alternative method. These interviews included five chairs and seven panel members[8] (some report writers also acted as active panel members).

- 86% of panel members agreed that the documentation and training available was sufficient.
- 93% agreed that the planning meeting (held 1-2 weeks in advance of the site visit) was invaluable.
- 9% felt that the preparatory phase (being appointed, receiving the draft QA procedures, attending the preparatory meeting) was adequate.
- 90% of panel members agreed that the agenda for the site visit was fit for purpose and 86% agreed that the time allocated to the site visit was sufficient.
- 96% of panel members agreed that determining the mandatory changes and specific advice prior to the end of the site visit was useful.
- 96% of panel members found the reengagement process to be a positive experience.

50% of panel members **agreed that there was consistency in outcomes** across providers. 10% could not agree nor disagree. 39% opted to make a comment in lieu of agreeing or disagreeing. Where panel members had only taken part in one panel, they did not feel in a position to make a comment. Three panel members highlighted this as an area of concern. While **all panel members agreed that the process was consistent**, there was not a similar level of agreement on the consistency of outcomes.

Follow up interviews interrogated this aspect of the work and panel members identified the introduction of the deferred decision stage as being a potential area where confusion may have arisen. What may have been considered a discrete mandatory change, and therefore an item which could have been addressed in a short time frame of up to six weeks, could have gone through a deferred decision stage. Similar mandatory changes identified in other providers had the potential to lead to a refusal to approve with providers having six months to address the changes.

The main criteria where similar mandatory changes could lead to different panel outcomes was criteria 2; the documented approach to QA. This is an area where further clarification was considered to be helpful.

Interviews found that the majority of panel members were **largely positive about the process** set out for reengagement by QQI and 89% reported the preparation phase of the process to be **fit for purpose** in the response to the questionnaire. In the spirit of seeking continuous opportunities for improvement, panel members' experience elicited the following observations, suggestions and advice to QQI and to providers approaching the reengagement process.

No significant changes were required from the point of view of the panel members in relation to the **availability of documentation**. 86% of panel members agreed that the **documentation and training provided by QQI was sufficient** to enable them to be able to carry out their role. The QQI documentation was generally considered to be **adequate** and **comprehensive**.

While the matter of **training** elicited a positive response in the questionnaire, there was **a varied experience** amongst panel members reported in the interviews with regard to **the training** that they

---

[8] See appendix 4 for further details on the interviewees.

received prior to being appointed as a panel member. The majority of panel members reported **not receiving any training**. For first time and less experienced panel members **this was perceived as a disadvantage**. As panel members generally had **limited experience of the training** provided for the reengagement process, no firm conclusions could be drawn on the quality and effectiveness of this. It was notable that where panel members had experience of training as both participants and trainers, their experience suggested this is an area where there remains more work to be done.

The limited number of panel members (3) who reported to have taken part in formal QQI training did report it as being a **useful experience** in preparation for carrying out their roles. In particular, panel members who attended formal training expressed appreciation for the opportunity to learn from the experience of more experienced panel members. As set out above, comments in the questionnaires and follow up interviews suggest a range of experience from no awareness of training opportunities, to positive experience of taking part in training, to concerns from those involved in the training about the rigour and effectiveness of the training events.

Interviews with panel members revealed a general concern that the **draft QA documentation** submitted by providers was often **cumbersome** and, for many panel members, took significantly more time to review than their expectations.

The role of the **Chair in providing guidance** and support to **less experienced panel members** was strongly appreciated as a fundamental part of the process. Individual support and mentoring by the Chairs for panel members was evidently critical to the success of the process from the panel members perspective.

The planning meeting is held after the panel members have had an opportunity to conduct a desk review of the draft QA documentation of the providers on an individual basis. The questionnaire found 93% of the panel members agreed that this was an invaluable part of the reengagement process. The benefits of the meeting were reported as follows:

(a) An important opportunity to **allow for panel members to meet** for the first time in advance of the site visit. This enables the panel **to gain a joint understanding** of the objectives or the exercise and to combine respective experience.

(b) Critical to **identify aspects of the submission that may require further clarification** from the applicant in advance of the site visit and to identify potential gaps or areas that may necessitate the provider to address prior to a successful recommendation.

(c) An opportunity to **agree the agenda** for the day and the identify focal areas for each panel member.

Given the fundamental nature of this part of the process, suggestions for further clarity on the objectives of this meeting were put forward from panel members. Panel members who had attended three or more planning meetings expressed concern that they were **handled very differently by different chairpersons**. Further concerns were raised regarding the degree to which certain **panel members were prepared**, particularly with respect to having adequately reviewed the documentation. QQI do provide guidance to panel members on what is required of them prior to the panel meeting and also provide guidance to panel members and chairs on the purpose and expected outcomes of the planning meetings. Nonetheless, recommendations of panel members where wide consensus existed include;

(1) **Further embedding** of the formalised document produced by QQI on the **expected outcomes of this meeting**.

(2) Greater focus on the requirement for panel members be fully familiar with the provider's draft QA documents and for each panel member to **prepare a written report** reflecting their concerns in relation to the QQI reengagement criteria on their individual document review in advance of the meeting. QQI could consider a proforma for this aspect of the preparatory phase.

(3) Strict adherence to the requirement for the **Chair to gather written comments** from panel **members in advance of the meeting**, a summary of which is to be produced for discussion at the meeting.

(4) The planning meeting to **identify clarifications and concerns** to be held a minimum **of 4-6 weeks** prior to the site visit and providers receive a reasonable opportunity to prepare and produce a response in advance of the site visit.

Interviews with panel members considered whether or how the planning meeting could be better used to improve the reengagement process. Rather than the primary purpose of the planning meeting being to provide an opportunity for the panel to meet and agree on a collective approach to the provider visit, panel members were open to and positive about the potential for a refocus of this part of the process.

Stakeholders perceive that potential exists to **refocus this meeting as the culmination of a desk review** rather than a **site visit planning and preparatory meeting**. The benefits of this were perceived to be multiple and include the following outcomes:

(1) The desk review could find the **draft documentation to be satisfactory** requiring no **mandatory changes** and result in a recommendation to the PAEC to approve the QA policies and procedures. This finding would **result in no site visit being required** at this point.

(2) The desk review **could identify areas for clarification and or improvement in QA processes and procedures** which could be provided in a follow up **written response by the provider**. The written response could include both clarifications and amendments and may then **negate the necessity for a full site visit**. Perceivably this desk review with this outcome and response could lead to a recommendation to QQI without a physical site visit.

(3) The review could identify areas for clarification or improvement in QA processes and procedures which could be provided in a follow up written response by the provider. The written response could include both clarifications and amendments and may then **require further discussions with the provider by a select number of panel members carried out remotely and may negate the necessity for a full site visit**.

(4) The desk review could **identify only exceptions to the norm** and where **clarification is considered to be insufficient** could result in a **streamlined site visit** with a reduced agenda and potentially fewer panel members required to attend.

Where a site visit is deemed necessary [this] would now be concentrated on the new documentation, revised in line with the recommendations of the panel. (QQI reengagement Panel Member, 2019)

Panel members agreed that the **agenda for the site meeting was fit for purpose** and that, on the whole, all **items on the agenda were addressed during the visit**. The panel members found it particularly helpful to **agree major findings and recommendations prior to departing** on the visit day. Opportunities for panel members to input into the panel report were considered to be adequate.

Panel members were very positive about the willingness of QQI to respond to general feedback from panels as the reengagement process developed. Specifically, panels highlighted improvements perceived such as the introduction of the **deferred decision** stage. These are believed **to significantly**

reduce the risk of reputational damage to the applicants where a deferred decision stage is considered to be preferable to a refusal to approve.

Panel members reported **the process to be "fair" and "positive"**. 89% of panel members found that the process **reflects the values of shared responsibility, collaborative effort, and objectivity and transparency** as set out in QQI's Statement of Strategy (2019 – 2021) and the principles for reengagement set out in the Reengagement Process Guide.

General concerns have been raised by the panel members (and providers) regarding the misuse of terminology. Specific incidences cannot be pointed to in this regard; however, the issue of confusion between **terminology relating to validation of programmes** being employed **during the reengagement process** by panel members was indicated as an issue in the early stages of the process. To some extent this has been attributed to the relative newness of the reengagement process in the further and higher education sectors. Chairs noted that this is occurring with less regularity as the reengagement process develops.

SECTION 5: CONCLUSIONS

General Findings

- It was widely recognised by stakeholders that the **reengagement process is relatively new** in the national context.
- **The importance of the pilot reengagement process** in informing the QQI process has also been highlighted by the sector.
- The introduction of the **deferred decision stage** has shown the sector that there is willingness of QQI to adapt the process in the interest of improving the quality of the process.
- The willingness and the **openness of the sector to provide feedback** into this review is also a testament to the national interest in and importance of this process to the higher and further education sector in Ireland.

With these in mind, the following observations and experiences are highlighted in order to provide an opportunity for reflection and potential for improvement.

(1) During the interview process, **all stakeholder groups** expressed **some experience of inconsistency** in the reengagement process. For panel members these inconsistencies ranged from chairing, reporting, panel membership and training. For providers, inconsistencies ranged from timeframes, communications, expectations to outcomes. These are to be expected given the diversity of actors involved in the reengagement process.

(2) All panel members reported **significant inconsistencies in the structure and quality** of the draft documentation produced by providers.

(3) Most panel members who have taken part in more than one reengagement reported **inconsistency in the focus of the pre-panel visit planning meeting**.

(4) There is a **widely held view amongst providers** of a perceived inconsistency in the process. Many providers believed that where similar issues arose at provider level (set out as mandatory changes), these are seen to be classified differently in panel reports i.e. mandatory changes and specific advices are perceived to be handled inconsistently. These are;

- Where mandatory changes have led to a deferred decision stage in one provider, similar mandatory changes are believed to have led to a refusal to approve pending mandatory changes in other cases.
- Panels can classify the same advice as a mandatory change for one provider and as specific advice in another.

A review of the reports and analysis of the **mandatory changes** against the QQI criteria and **related outcomes** concludes **that the reports are consistent** in recommended outcomes, despite the perceptions outlined above. Where a **deferred decision stage** has been used, providers were considered to have **sufficient capacity to address mandatory changes within six weeks**. Where mandatory changes led to a refusal to approve, these changes were considered to require **more than six weeks** to address and **up to six months to complete** and were set out in the context of a number of other issues also to be addressed by the provider.

It is accurate to say that matters related to governance, documentation clarity and documentation development can be classified as either a mandatory change or as a specific advice. The reports reflect the fact that these are considered in the overall context of the QA systems in place within each

provider. Mandatory changes are required where the QQI criteria will not be met without addressing these matters. Specific advice is given on very particular discrete aspects of the QA documentation and processes where there is room for improvement, however these do not materially affect the overall effectiveness of the QA systems in place.

(5) Providers reported confusion as to whether reengagement was an opportunity to have **QA policies and procedures approved**, or an **examination of the effectiveness of the procedures in operation**. This was also an issue highlighted by panel members. It was not possible to conclude if this was now fully addressed; however, it was acknowledged by panel members that much work has been undertaken to ensure that the focus is solely on the approval of procedures.

(6) Inconsistency in the quality of panel reporting was highlighted as a significant issue by Chairs. A review of eighteen published reports and fourteen unpublished reports would support this observation. Reports produced in the latter half of 2019 and early 2020 show a much closer adherence to commenting largely on QQI reengagement criteria.

(7) The treatment of the role of the "recording secretary"/ "note taker"/ "report writer" has drawn some confusion amongst panel members. This has been noted with respect to whether or not the role is held by someone who is a member of the reengagement panel, or independent of it. This has been addressed by QQI.

Panel members and providers would find it helpful if:

1. A concise QQI reengagement terminology guide/glossary could be published.

2. A formal and rigorous QQI reengagement training programme for panel members could be established. It is believed that these training programmes and associated learning outcomes could result in
   a. A formalised panel of designated QQI reengagement Chairs
   b. A formalised panel of designated trained QQI reengagement report writers
   c. A formalised panel of designated QQI reengagement panel members

3. A formalised, experiential learning programme (shadowing opportunities) be built into the existing process. This would enable interested parties to observe the reengagement process and improve capacity across the sector.

4. Sample approved QA policies and procedures published by QQI as representing best practice. While QQI do require providers to publish approved QA documentation some consideration should be given to producing a proforma which providers might use to structure their documentation.

5. Formalisation of the expected inputs and outcomes of the initial panel planning meeting.

Whilst it is well understood amongst the stakeholders that the primary objective of this aspect of the work of QQI is to **ensure the quality of higher and further education providers** in Ireland, it is also well appreciated that this process forms part of the objective of QQI to **promote quality and accountability in education and training services** in Ireland. With this in mind, the stakeholders raised the following as concerns which may impact on the ability of QQI to meet its objectives with respect to the reengagement process.

In line with national policy, some panel members can be paid to take part in the reengagement process. Some may not. Where panel members are drawn from institutions which are publicly funded, QQI is not permitted to provide remuneration. Panel members drawn from this category of institution take reengagement work on in addition to their full-time roles. For many in the system, there is a

recognition that being involved in the reengagement process as a panel member **requires undertaking a significant workload**. This results in the QQI reengagement process **relying on good will and perceived volunteerism** to enable the process to be successful. This is highlighted as a **general concern within the sector**. There is a perception that this characteristic (good will and volunteerism) may eventually negatively impact the integrity of the process. Existing panel members have described the process and documentation requirements as **cumbersome and onerous** and question the sustainability of reliance on good will and perceived or real volunteerism as an appropriate approach at this stage of the process.

Notwithstanding the current constraints posed by the restrictions on human movement due to the COVID-19 pandemic, the stakeholders recommend that QQI reconsider the reengagement process as it is currently designed and implemented.

It has been noted earlier in this report that "from the providers perspective the site visit was considered to be a highlight of the process and an opportunity to showcase the QA system" (Page 16). It was also noted that panels found instances where QA documentation read well, but the site visit demonstrated a lack of knowledge and understanding of the documentation amongst the wider staff. However, the question still remains as to whether or not a site visit is a necessary part of this aspect of the reengagement process. Stakeholders do not question the overall value of a site visit in the overall QA process, particularly when focusing on QA effectiveness, however they do question whether or not it is a necessary part of this particular part of the QA relationship between QQI and providers.

Keeping in mind the standards to be met by the providers to successfully reengage with QQI and the volume of work required to fully reengage the providers in a timely manner, the necessary involvement of a process largely garrisoned by good will and volunteers and the existing staffing levels in QQI, it may be appropriate to revise the process. Based on the overall feedback from providers and panel members and keeping in mind the current public health context and associated constraints this may include:

- Re-focus the process to concentrate *largely on a desk review* as the core exercise to determine eligibility for approval.
  » Recommendations for reengagement (approval) to be a possible outcome of the desk review and follow up responses where needed.
  » Training and appointing a team of core members of QQI staff to initially carry out this exercise is an option to be considered.
  » QQI to require a *site visit only in exceptional circumstances*.
  » Remote communications in lieu of a site visit.
  » Where site visits are required, the *agenda to be limited to exception*s identified in the desk review (AND not subsequently adequately addressed) with a more limited panel membership.
- *Increased use of technology* to support communication between the applicant and the review panel and limiting the need for panel member travel.
- "Bulk" commission and *contract experienced report writers and chairs* for the revised reengagement process.

This analysis included a review of 32 panel reports and has identified a diversity in the approach of panels to the drafting of the reengagement reports. Whilst there is a common template, and all reports address the QQI QA Guidelines, there are published reports that diverge from this objective. Reports from 2018 and early 2019 occasionally address matters relating to the validation of programmes. Panel member interviews support this finding. Whilst the internal QA of validation of programmes is rightly an important aspect of the review process, panel members raised concerns that **some members tended to focus on matters relating to the specific content of programmes.** Additionally, the analysis has found

that early in the implementation of the process, panels had a tendency to **focus on effectiveness of QA procedures**. QQI has recognised this and has taken steps to address these matters.

The **reliance on a small number of experienced report writers** is a matter for ongoing concern amongst report writers and Chairs. The fundamental role of report writers in the reengagement process is well understood both for **maintaining consistency** and for overall capacity development within the sector. Having a pool of report writers with a track record of producing quality reports will remain important to the process. It is recommended that the QQI secure a long-term commitment from report writers (to work on a cluster of reports for example over a one year period). This may help particularly in light of the volume of reengagement events and processes scheduled in the short and medium term.

Following on from this, the matter of **available report writers and the long-term sustainability of an available pool of talent drew much focus in the interviews with panel members**. Training opportunities were highlighted as a potential activity to support ongoing development of this resource. Whilst this report and analysis does not specifically analyse the available opportunities, nor the quality of any training, certainly this is an area where further development is warranted.

Report writers also commented on the **level of detail** that is currently required in the reengagement reports. This was said to be an important part of the capacity building aspect of the QQI role in the reengagement process. **Reports are considered to be an asset to the sector** to learn about the strengths and weaknesses identified as part of the overall QA improvement process. Some consideration should be given to streamlining the details of the report to comment on whether the standards have been met (or not) and matters considered valuable for sector wide learning to be gathered and disseminated in a different manner and fora.

Overall, the thematic analysis has found that the reengagement process is fit for purpose and leads to improvements in QA. It concludes that capacity development at provider level is necessary in the area of governance and management of QA as well as guidance on best practice in documenting QA.

APPENDICES

APPENDIX 1

List of panel reports (Published and unpublished reports)
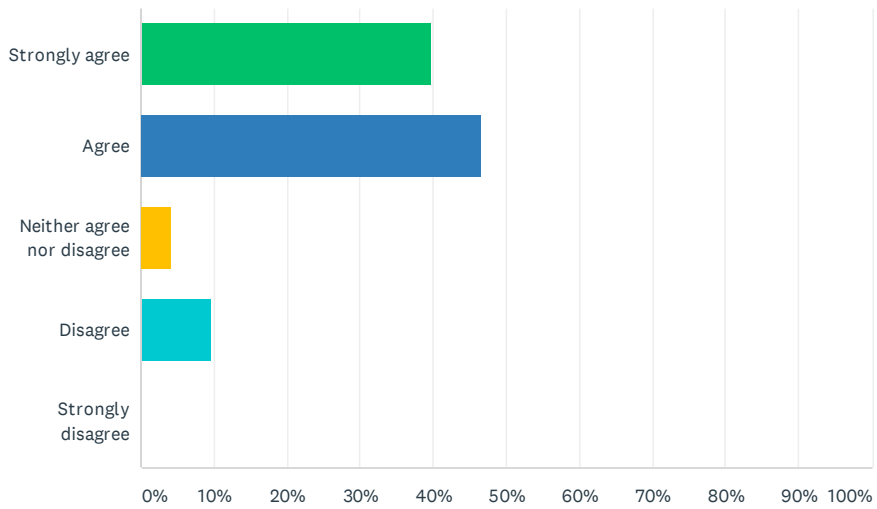
Total 32

September 2018 – February 2020

Year	Total number of reengagements	Approved	Refused with mandatory changes – in process
2018	3	3	0
2019	25	16	9
2020	4	4	0

APPENDIX 2

QQI Survey for Panel Members - Reengagement Thematic Analysis

Q1 The documentation and/ or training made available by QQI was sufficient to enable me to carry out my role.

Answered: 73   Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	39.73%	29
Agree	46.58%	34
Neither agree nor disagree	4.11%	3
Disagree	9.59%	7
Strongly disagree	0.00%	0
TOTAL		73

Q2 The preparatory meeting was an invaluable part of the process.

Answered: 73   Skipped: 0
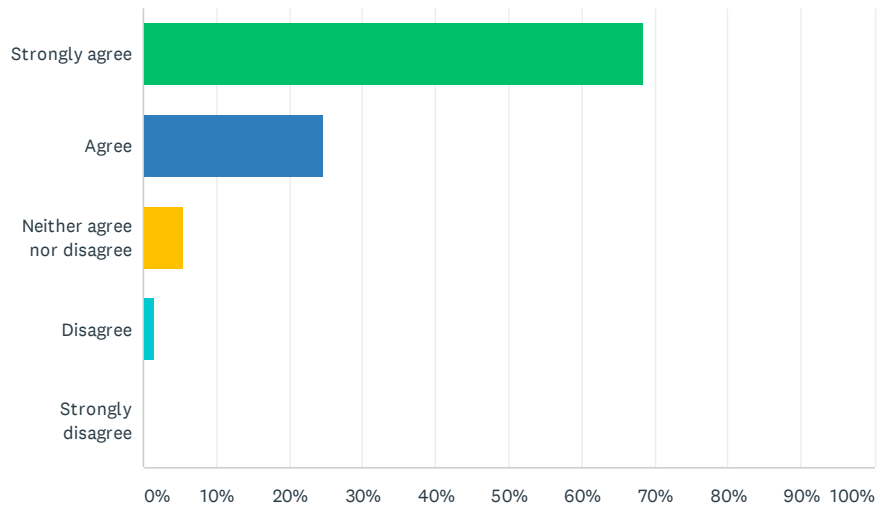
ANSWER CHOICES	RESPONSES	
Strongly agree	68.49%	50
Agree	24.66%	18
Neither agree nor disagree	5.48%	4
Disagree	1.37%	1
Strongly disagree	0.00%	0
TOTAL		73

Q3 The preparation phase of the process was fit for purpose.

Answered: 73   Skipped: 0
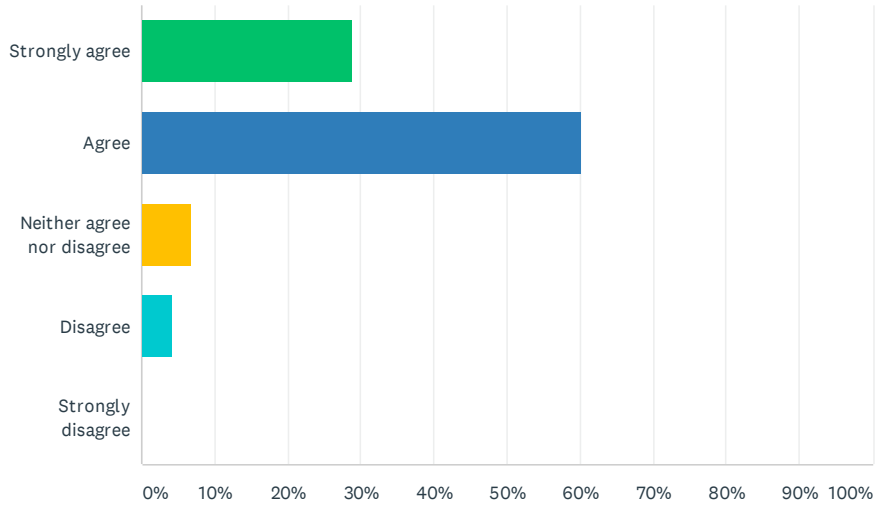
ANSWER CHOICES	RESPONSES	
Strongly agree	28.77%	21
Agree	60.27%	44
Neither agree nor disagree	6.85%	5
Disagree	4.11%	3
Strongly disagree	0.00%	0
TOTAL		73

Q4 The agenda for the site visit was clear and fit for purpose.

Answered: 72   Skipped: 1
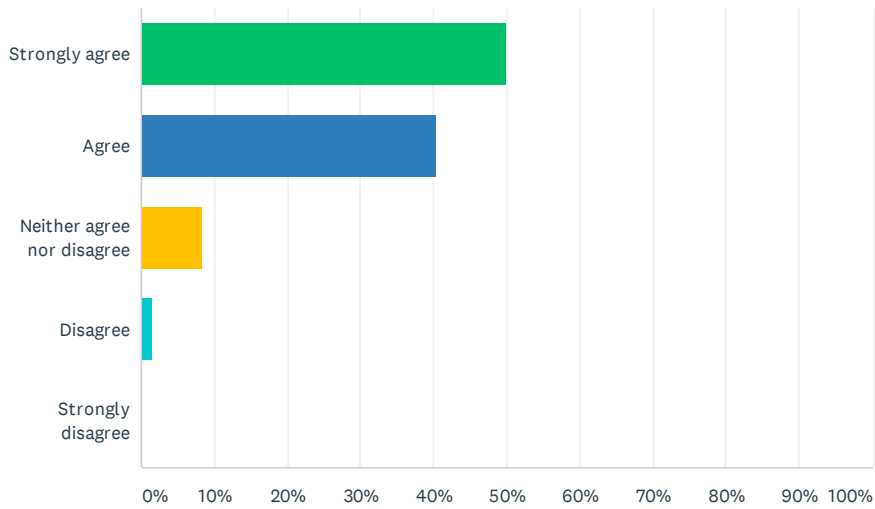
ANSWER CHOICES	RESPONSES	
Strongly agree	50.00%	36
Agree	40.28%	29
Neither agree nor disagree	8.33%	6
Disagree	1.39%	1
Strongly disagree	0.00%	0
TOTAL		72

Q5 There was adequate time allowed for detailed discussion and clarification.

Answered: 72   Skipped: 1
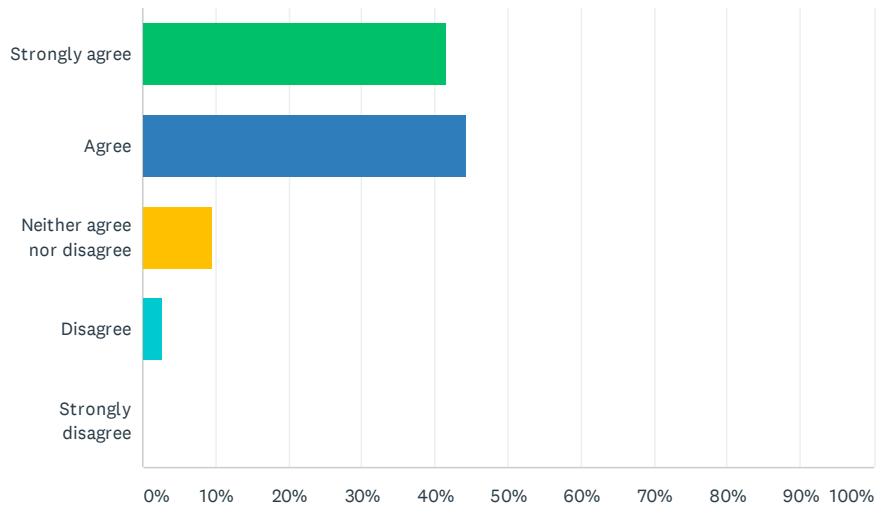
ANSWER CHOICES	RESPONSES	
Strongly agree	41.67%	30
Agree	44.44%	32
Neither agree nor disagree	9.72%	7
Disagree	2.78%	2
Strongly disagree	0.00%	0
TOTAL		72

Q6 Agreeing outcomes including all relevant findings such as mandatory changes and specific advice prior to departing the site meeting is a useful process.

Answered: 72   Skipped: 1
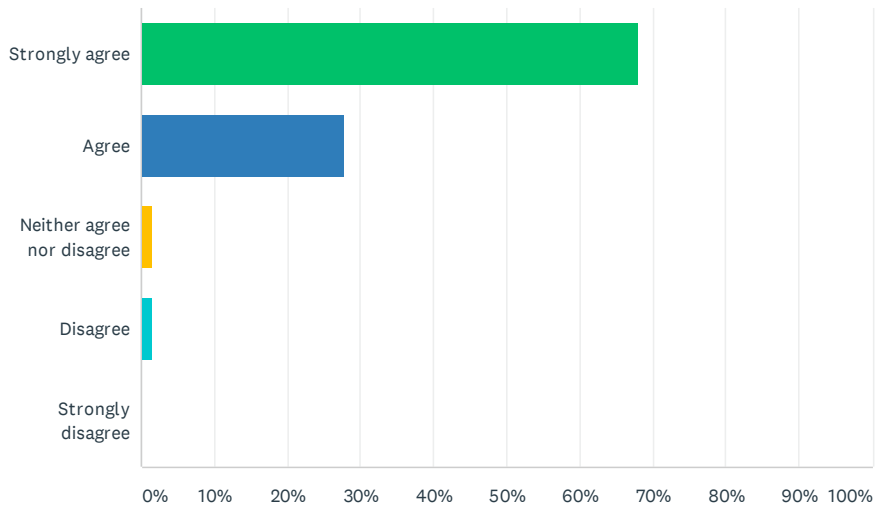
ANSWER CHOICES	RESPONSES	
Strongly agree	68.06%	49
Agree	27.78%	20
Neither agree nor disagree	1.39%	1
Disagree	1.39%	1
Strongly disagree	0.00%	0
TOTAL		72

Q7 There was sufficient opportunity to provide feedback on the draft report.

Answered: 72   Skipped: 1
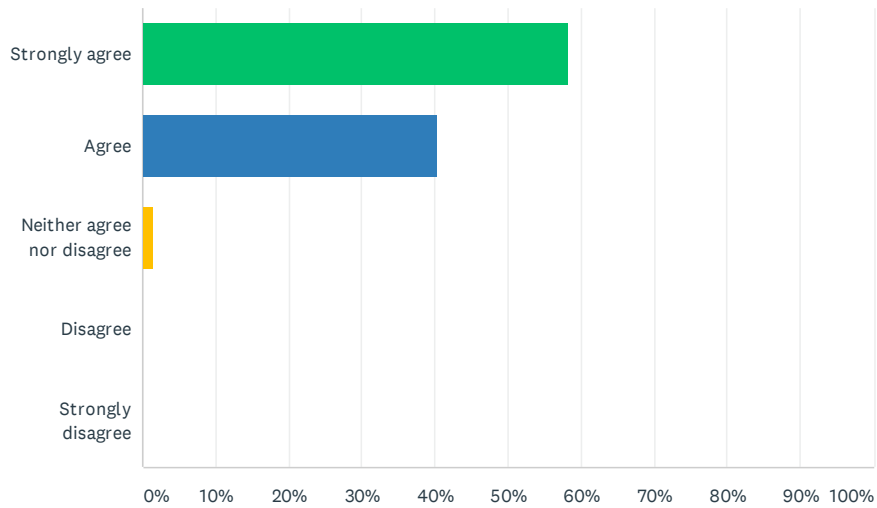
ANSWER CHOICES	RESPONSES	
Strongly agree	58.33%	42
Agree	40.28%	29
Neither agree nor disagree	1.39%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		72

Q8 The report adequately reflected the panel findings.

Answered: 72   Skipped: 1
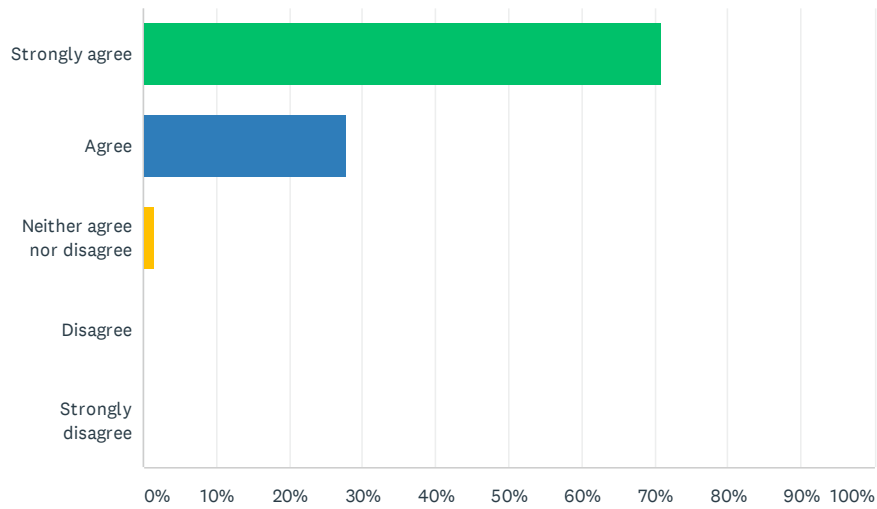
ANSWER CHOICES	RESPONSES	
Strongly agree	70.83%	51
Agree	27.78%	20
Neither agree nor disagree	1.39%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		72

Q9 My experience of the process has been positive.

Answered: 70   Skipped: 3
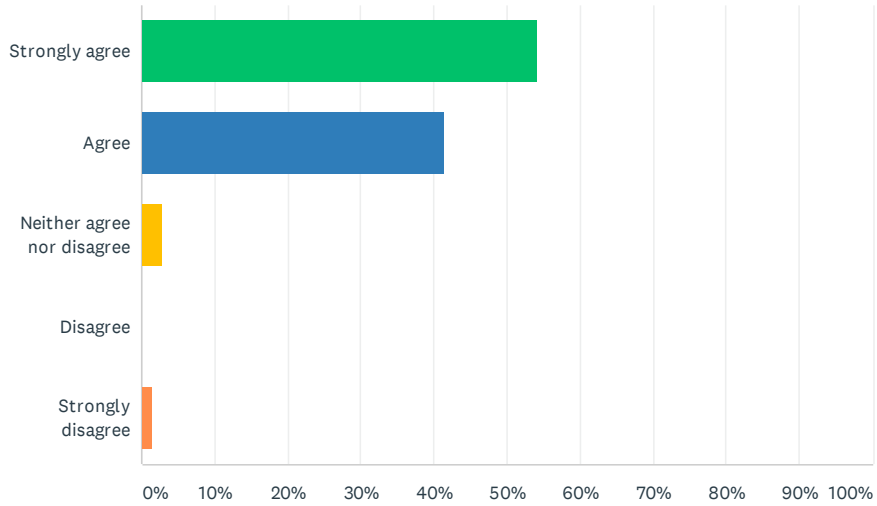
ANSWER CHOICES	RESPONSES	
Strongly agree	54.29%	38
Agree	41.43%	29
Neither agree nor disagree	2.86%	2
Disagree	0.00%	0
Strongly disagree	1.43%	1
TOTAL		70

Q10 In my experience the process and / or outcomes for each provider has been consistent.

Answered: 70   Skipped: 3
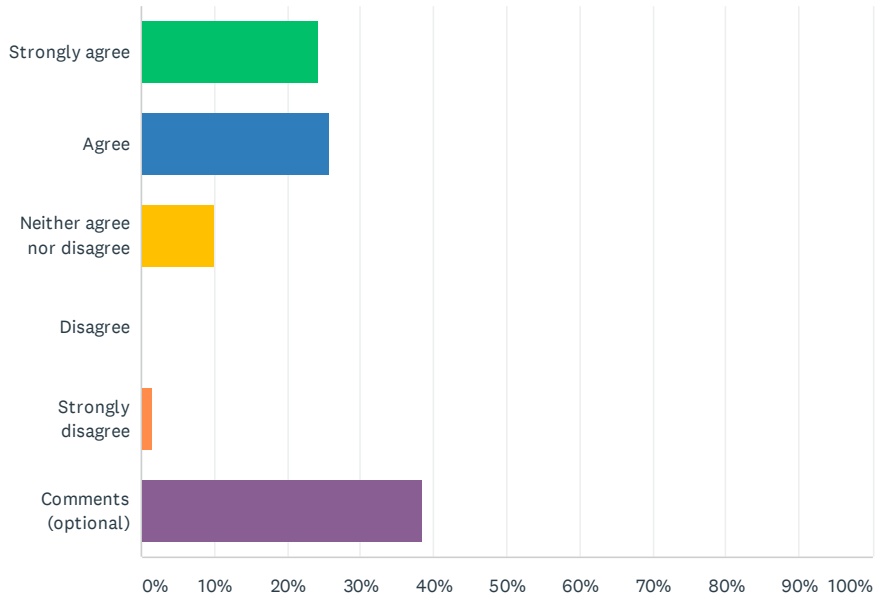
ANSWER CHOICES	RESPONSES	
Strongly agree	24.29%	17
Agree	25.71%	18
Neither agree nor disagree	10.00%	7
Disagree	0.00%	0
Strongly disagree	1.43%	1
Comments (optional)	38.57%	27
TOTAL		70

Q11 It was helpful to my professional development to have been involved in the QA reengagement process.

Answered: 68   Skipped: 5
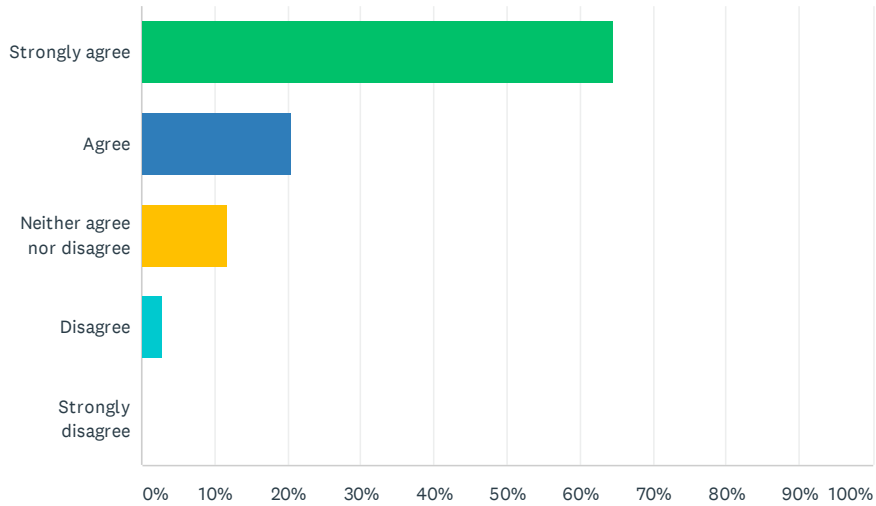
ANSWER CHOICES	RESPONSES	
Strongly agree	64.71%	44
Agree	20.59%	14
Neither agree nor disagree	11.76%	8
Disagree	2.94%	2
Strongly disagree	0.00%	0
TOTAL		68

Q12 The process reflects the values of shared responsibility, collaborative effort, and objectivity and transparency as set out in QQI's Statement of Strategy (2019 - 2021) and the principles for reengagement set out in the Reengagement Process Guide, Section 2.1)

Answered: 70   Skipped: 3
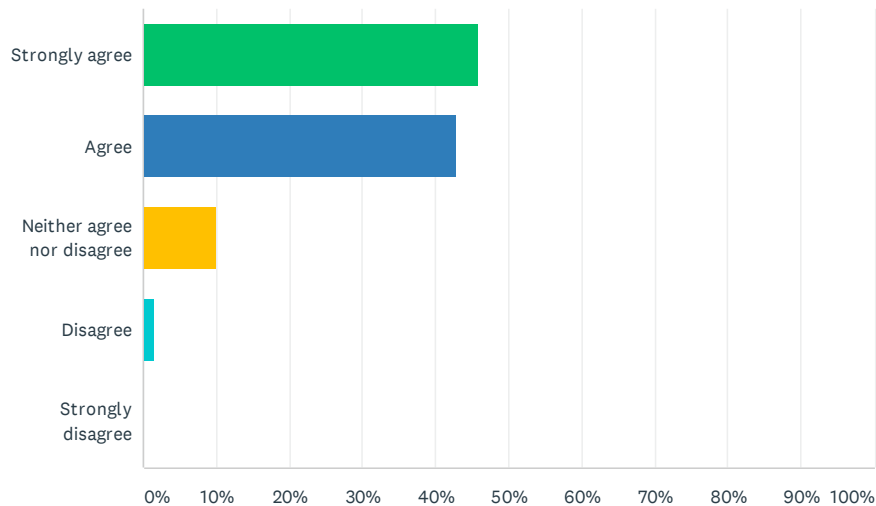
ANSWER CHOICES	RESPONSES	
Strongly agree	45.71%	32
Agree	42.86%	30
Neither agree nor disagree	10.00%	7
Disagree	1.43%	1
Strongly disagree	0.00%	0
TOTAL		70

APPENDIX 3

QQI Provider Survey - Reengagement Thematic Analysis

Q1 There was sufficient written information available publically for me to complete the application process.

Answered: 22   Skipped: 0
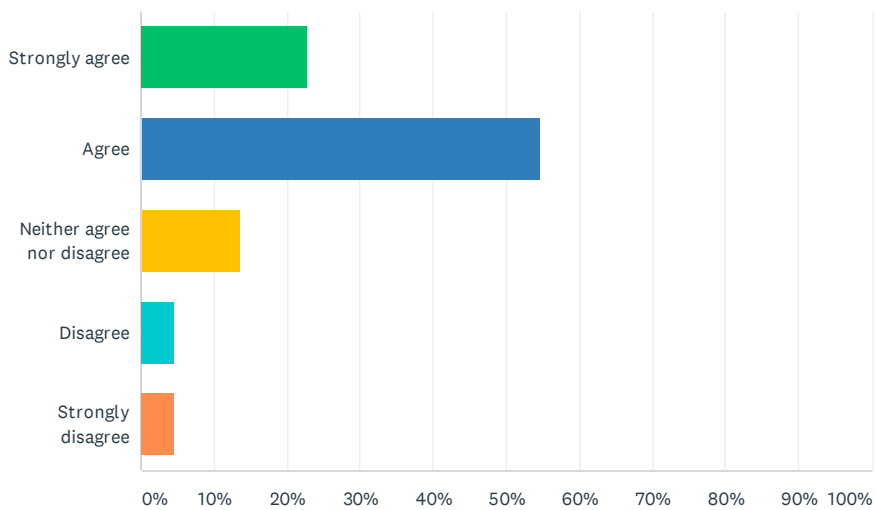
ANSWER CHOICES	RESPONSES	
Strongly agree	22.73%	5
Agree	54.55%	12
Neither agree nor disagree	13.64%	3
Disagree	4.55%	1
Strongly disagree	4.55%	1
TOTAL		22

Q2 There were sufficient opportunities to seek clarification on the process and content required.

Answered: 22   Skipped: 0
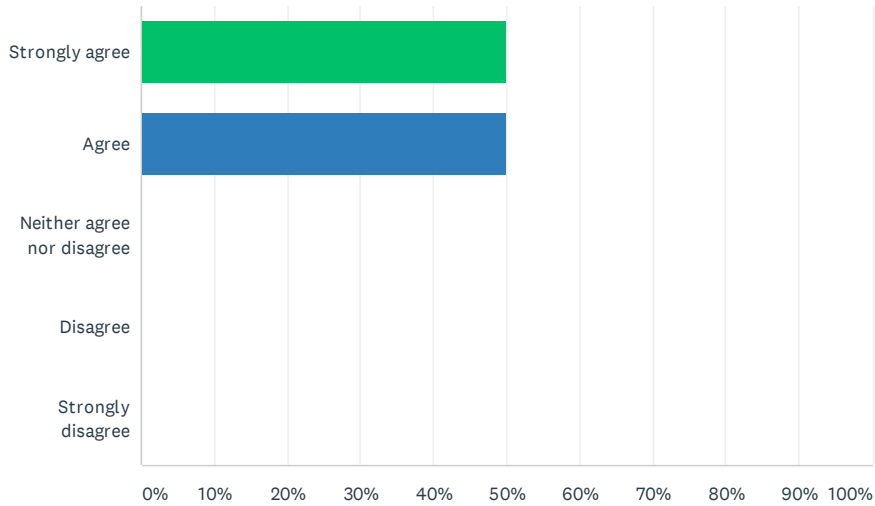
ANSWER CHOICES	RESPONSES	
Strongly agree	50.00%	11
Agree	50.00%	11
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		22

## Q3 Having access to advice and feedback from QQI staff was invaluable in assisting with the application process.

Answered: 22   Skipped: 0
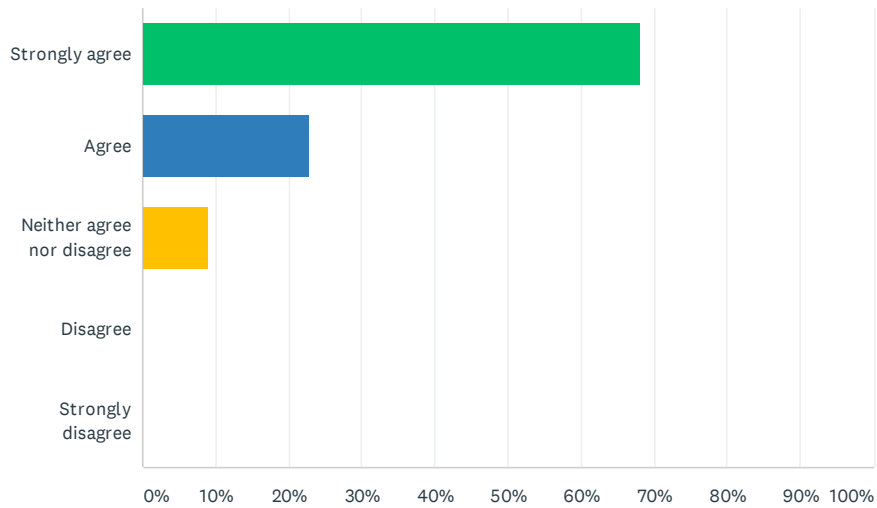
ANSWER CHOICES	RESPONSES	
Strongly agree	68.18%	15
Agree	22.73%	5
Neither agree nor disagree	9.09%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		22

Q4 Information from other providers' experiences (e.g. via published reports or briefing events) was very helpful.
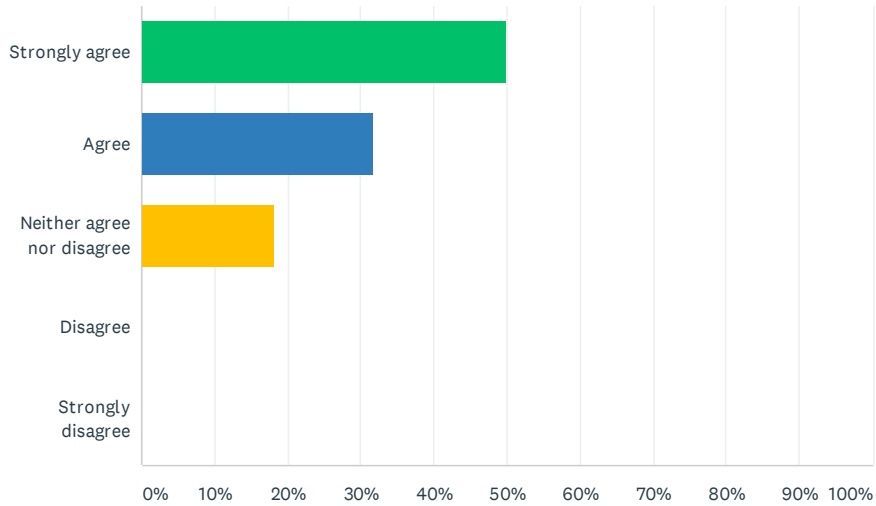
Answered: 22   Skipped: 0
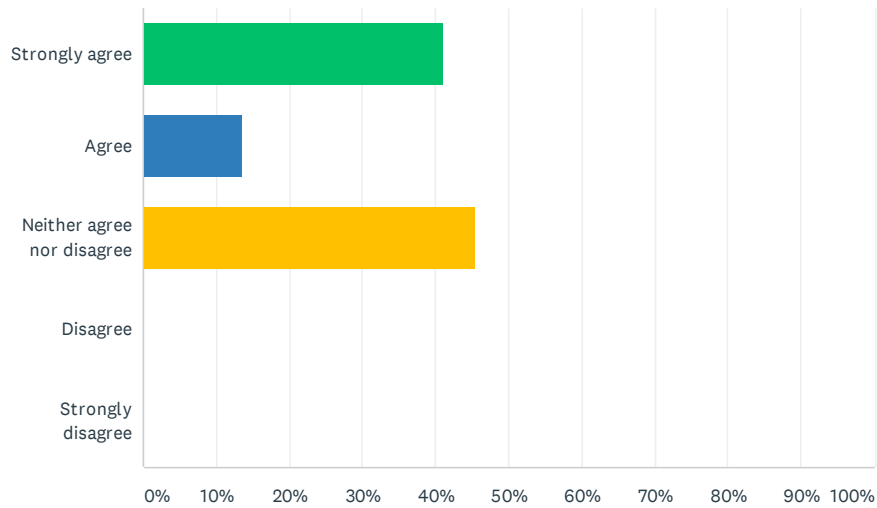
ANSWER CHOICES	RESPONSES	
Strongly agree	40.91%	9
Agree	13.64%	3
Neither agree nor disagree	45.45%	10
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		22

Q5 There was sufficient time between receiving notification of our invitation to reengage and our application deadline.
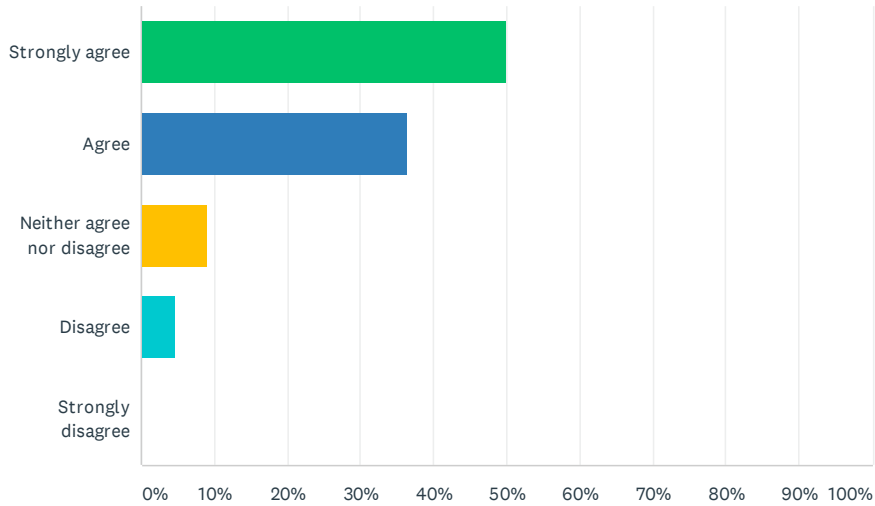
Answered: 22   Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	50.00%	11
Agree	31.82%	7
Neither agree nor disagree	18.18%	4
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		22

Q6 There was a reasonable timeframe between submission of documents and notification of panel visit.
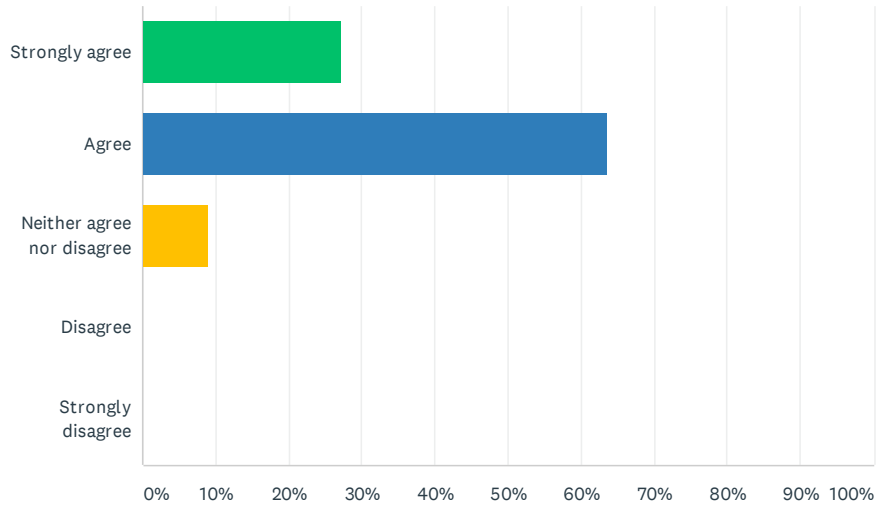
Answered: 22   Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	50.00%	11
Agree	36.36%	8
Neither agree nor disagree	9.09%	2
Disagree	4.55%	1
Strongly disagree	0.00%	0
TOTAL		22

Q7 Requests for additional information from the panel prior to the meeting were helpful.
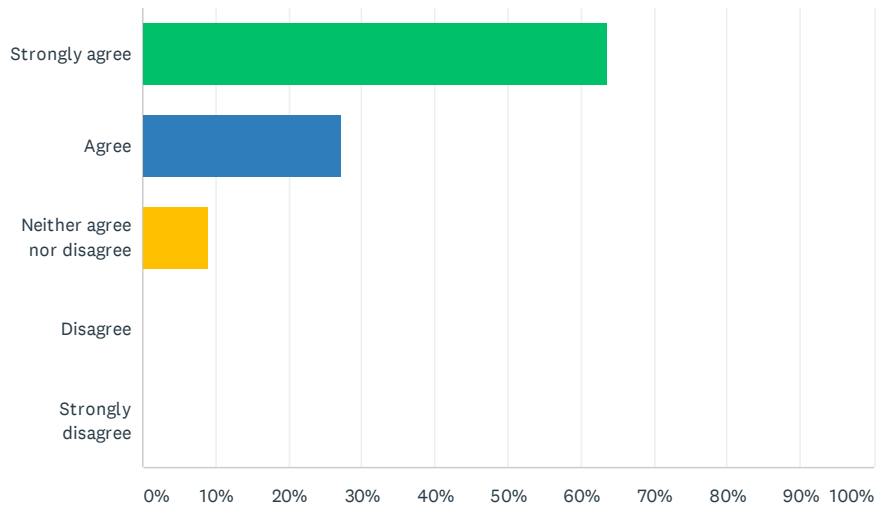
Answered: 22   Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	27.27%	6
Agree	63.64%	14
Neither agree nor disagree	9.09%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		22

Q8 The panel visit allowed for helpful discussions and opportunities to showcase our QA practice and culture.
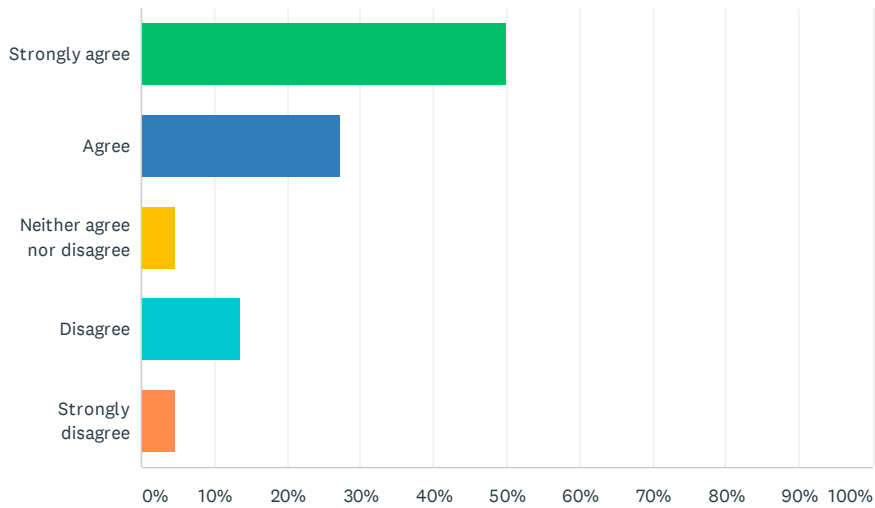
Answered: 22   Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	63.64%	14
Agree	27.27%	6
Neither agree nor disagree	9.09%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		22

Q9 Feedback received on the day was accurately reflected in the draft panel report.

Answered: 22   Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	50.00%	11
Agree	27.27%	6
Neither agree nor disagree	4.55%	1
Disagree	13.64%	3
Strongly disagree	4.55%	1
TOTAL		22

Q10 The reengagement process was a useful exercise in helping us to improve our QA procedures.
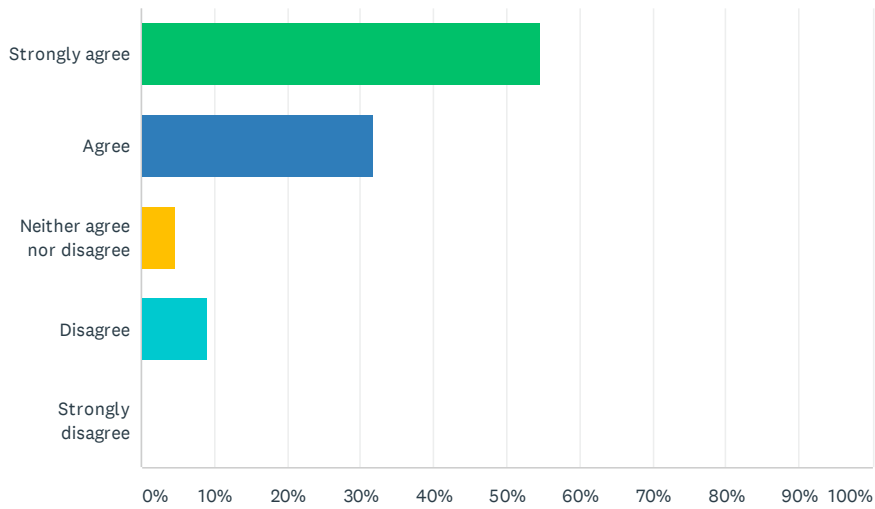
Answered: 22   Skipped: 0
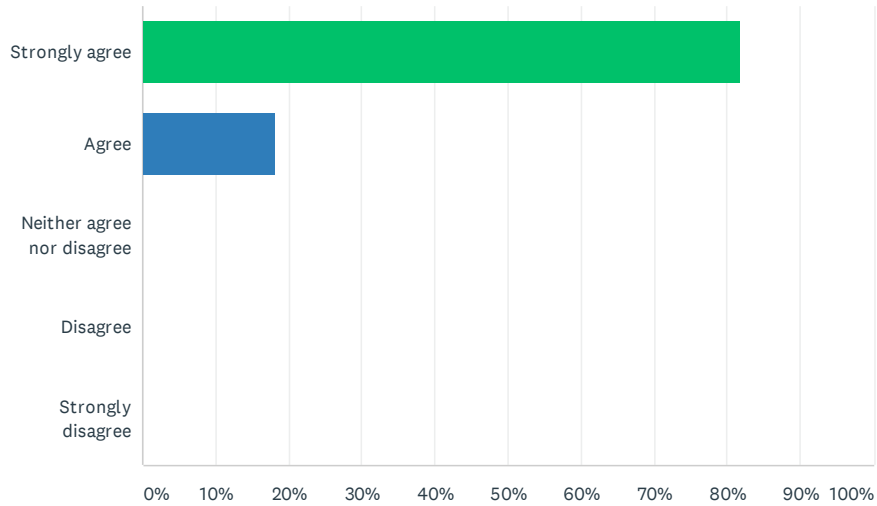
ANSWER CHOICES	RESPONSES	
Strongly agree	81.82%	18
Agree	18.18%	4
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		22

Q11 The draft panel report was delivered in a timely manner.

Answered: 22   Skipped: 0

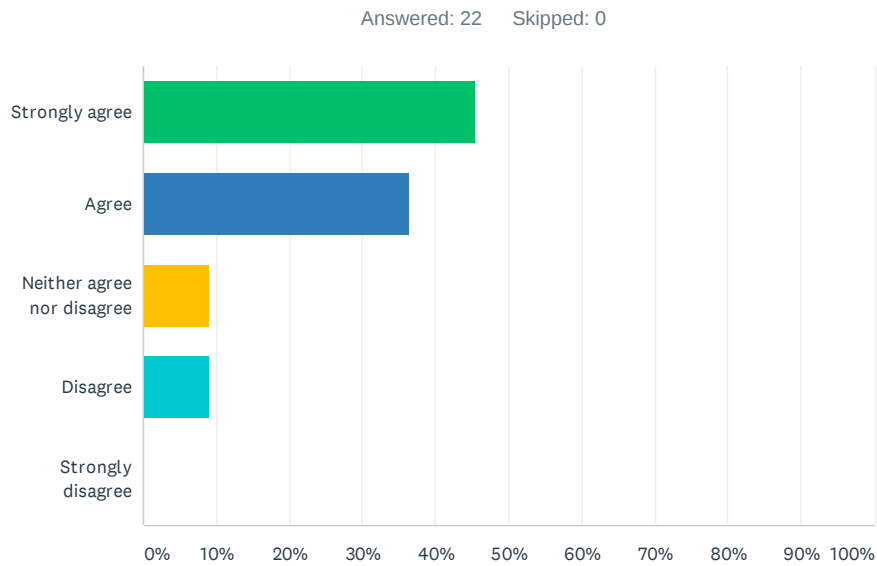| ANSWER CHOICES	RESPONSES	
Strongly agree	54.55%	12
Agree	31.82%	7
Neither agree nor disagree	4.55%	1
Disagree	9.09%	2
Strongly disagree	0.00%	0
TOTAL		22

Q12 It was clear from the draft panel report what needed to be addressed.

Answered: 22   Skipped: 0
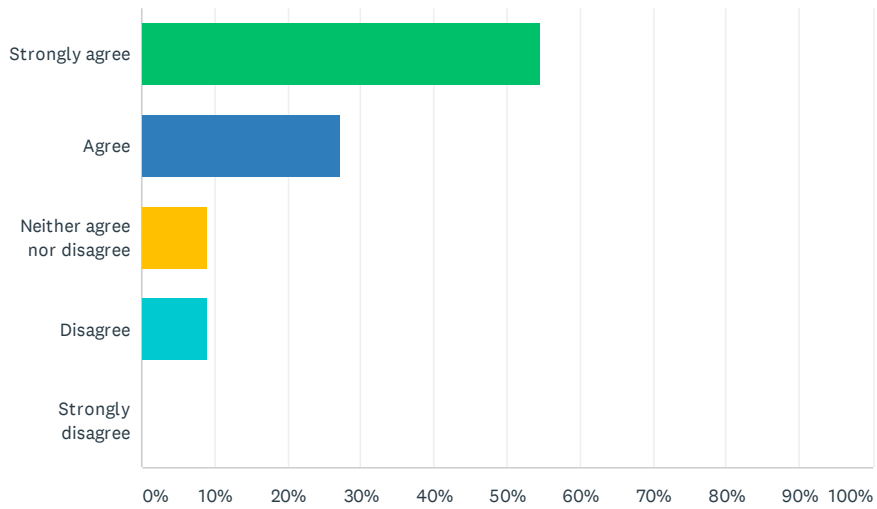
ANSWER CHOICES	RESPONSES	
Strongly agree	54.55%	12
Agree	27.27%	6
Neither agree nor disagree	9.09%	2
Disagree	9.09%	2
Strongly disagree	0.00%	0
TOTAL		22

Q13 Timeframes allowed for responding to issues raised in the panel report and visit were adequate.

Answered: 22   Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	45.45%	10
Agree	36.36%	8
Neither agree nor disagree	9.09%	2
Disagree	9.09%	2
Strongly disagree	0.00%	0
TOTAL		22

Q14 The process was helpful to us in strengthening our QA proceedures.

Answered: 21   Skipped: 1
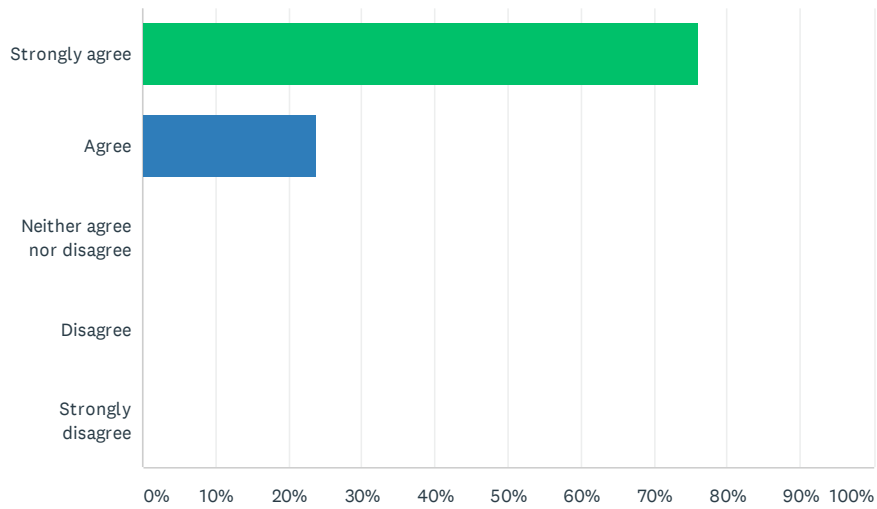
ANSWER CHOICES	RESPONSES	
Strongly agree	76.19%	16
Agree	23.81%	5
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		21

Q15 The process supports QQI's principles for reengagement set out in the Reengagement Application Guide, Section 2.1.

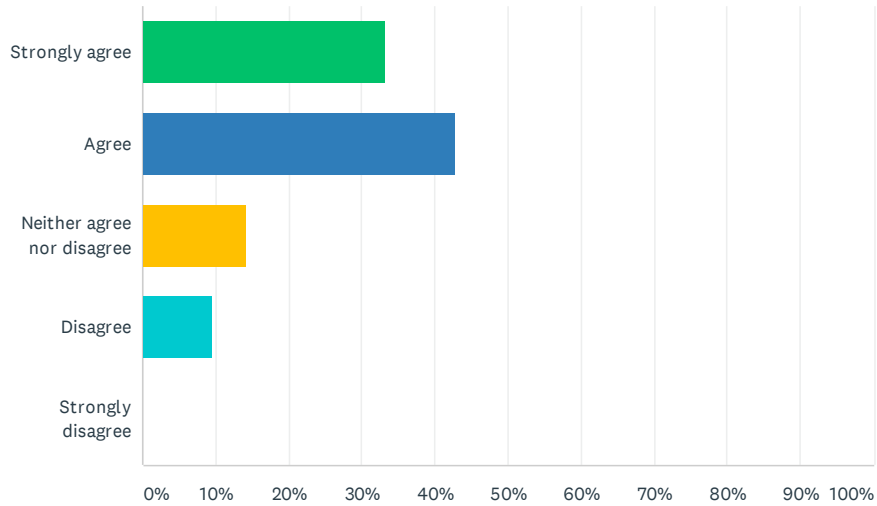Answered: 21   Skipped: 1
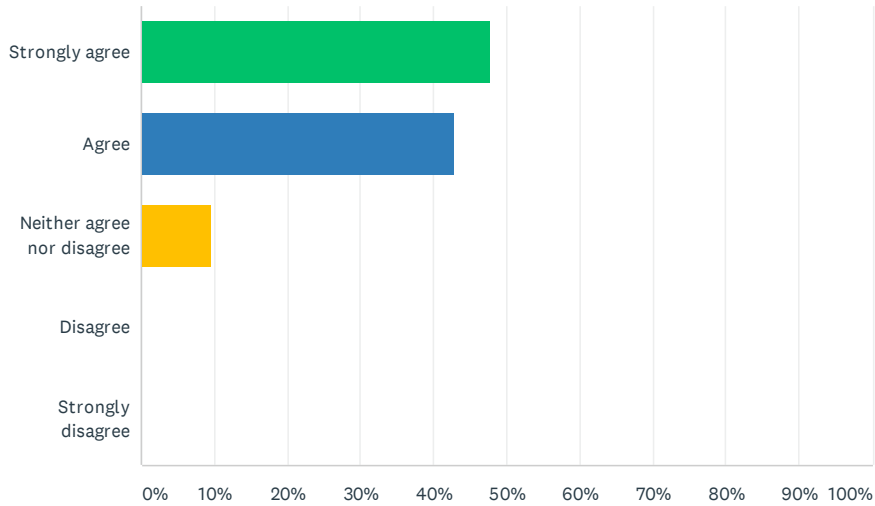
ANSWER CHOICES	RESPONSES	
Strongly agree	47.62%	10
Agree	42.86%	9
Neither agree nor disagree	9.52%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
TOTAL		21

Q16 The steps and timelines set out in the Process Guide accurately reflect our experience.

Answered: 21   Skipped: 1

ANSWER CHOICES	RESPONSES	
Strongly agree	33.33%	7
Agree	42.86%	9
Neither agree nor disagree	14.29%	3
Disagree	9.52%	2
Strongly disagree	0.00%	0
TOTAL		21

APPENDIX 4

List of interviewees

Panel members: 12

Providers: 5

Panel member ref. no.	Chair	Report writer	Number of panels
1	yes	no	3
2	yes	no	7
3	yes	no	3
4	yes	no	2
5	yes	no	2
6	no	yes	12
7	no	yes	4
8	no	yes	3
9	no	yes	3
10	no	yes	2
11	no	yes	1
12	no	yes	1

Providers: 5

Provider ref. no	Sector	Type
1	HET	private
2	FET and HET	private
3	HET	private
4	HET	private
5	FET	Community/ voluntary sector organisation

APPENDIX 5

List of all QQI documents reviewed

1. Re-engagement with QQI - Overarching Policy for All Providers

2. Policy relating to FET (Further Education and Training)

3. Policy relating to HET (Higher Education and Training)

4. Schedule of fees

5. Guide to Re-engagement Process – for providers

6. Gap Analysis Tool

7. Application Form

8. Panel Report template (March 2019 version)

9. Panel report template for deferred decision (September 2019 version)

10. Template agenda for site visit (HE)

11. Template agenda for site visit (FET)

12. SoPs for Reengagement (August 2019 version)

13. All published and unpublished reengagement reports approved by PAEC

14. Template agenda for panel planning meeting

QQI

Quality and Qualifications Ireland
Dearbhú Cáilíochta agus Cáilíochtaí Éireann

www.QQI.ie