



HCT Learning

Quality Assurance Manual

2020

Self-Evaluation, Monitoring and Review

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1 Self-Evaluation, Monitoring and Review

HCT Learning carries out a self-evaluation, monitoring and review on all our validated programmes, procedures and services. This includes a thorough review of the effectiveness of the quality assurance arrangements.

HCT Learning will monitor and review our policies and procedures on an ongoing basis. As part of this the self-evaluation process is carried out in order to examine and make recommendations for enhancements to our policies and procedures. The process will review all feedback in order to ensure its efficiency and that it remains relevant to our clients and learners needs. Feedback is collected from all programmes delivered from learners, clients and trainers for this purpose. A self-evaluation plan will be produced at the end of this and will be examined by the Academic Council.

We have introduced a Red Flag system to record this feedback and performance on our programmes. Where feedback falls below 70% a red flag will be raised, and our Corrective Action Plan will come into effect. Templates will be used for this feedback to ensure consistency nationwide.

This process of carrying out self-evaluation, review and monitoring is to instil and enhance public confidence in training provided by HCT Learning. Below is the process for completing this and the persons involved.

1.1 Red Flag Monitoring System

Our Red Flag Monitoring system has been developed to measure our performance in a range of areas, manage and monitor our services and programmes offered, promote learning experience improvements and to ensure we are continuously evolving to ensure we are offering the best practices possible. Essentially this system will monitor all programmes for potential issues that stand out. The system will trigger an automatic correction response where it detects non-compliance, or a system target has not been met. The Red Flag system will be dealt with in the first place by the Corrective Action Plan. However, issues that arise can also be considered during the next Academic Council meeting for discussion.

The advantages of a system like this are:

- Identify, track, monitor and manage possible issues and implement improvements
- Is statistically based, (number based)

- Real time monitoring of programmes
- Identify trends or reoccurring issues
- Is automatically flagged, which allows us to control, monitor and deal with the issue to resolve it
- Provide information on non-compliance – targets the issue immediately to ensure that smaller issues don't escalate into bigger ones
- Identify areas of improvement
- Give us control of services and programmes offered, by giving us full monitoring control of all programmes
- Improve services provided by us – enhance the performance of staff/trainers and learners
- It is multi-faceted, red flags can arise from feedback from a range of stake holders

MyHCT has a dedicated reporting section dedicated to our Red Flag system where all red flags highlighted are recorded on a status of open or closed. Our Red Flag system is monitored by the Centre Director and where the system flags an under 70% satisfaction the Corrective Action Plan will take effect. The bullet points below outline and explain when the Red Flag system will trigger a response. For example: Feedback from learners is entered numerically into MyHCT. This will then be flagged by the Red Flag system if their overall feedback falls below 70% on any single issue. Initially the satisfaction threshold has been set at 70% - this can be increased to 75% or 80% if necessary. The full list of what is covered by the system is:

- Learners attending a programme that is longer in duration than 4 or more days will be required to complete a mid-participants feedback, all learners who attend an HCT Learning programme will be requested to complete an end participant feedback on completion. After feedback has been completed it will be uploaded onto MyHCT and an automatic report will be generated: where under 70% satisfaction rate is achieved for a programme a red flag will be highlighted.
- Clients will be required to complete a mid-client feedback report for a programme if that programme is 4 or more days duration and an end programme feedback report once the programme has ended for all programmes delivered, this feedback is completed on the telephone and scores from that feedback are imputed into MyHCT: where under 70% satisfaction rate is achieved for a programme a red flag will be highlighted.

- All trainers delivering programmes on behalf of HCT Learning will be required to complete a mid-trainers feedback report for programmes that run for 4 or more days and an end trainers feedback report, this feedback is completed through the trainers portal which will then automatically update HCT Learning with the results: where under 70% satisfaction rate is achieved for a programme a red flag will be highlighted.
- All programmes delivered by HCT Learning will be reviewed from programme planning, delivery and assessment as a result the IV checker will be required to evaluate the trainers overall performance and provide feedback in a range of areas, feedback is sent to trainers on all individual programmes delivered, however where under 70% satisfaction rate is achieved for a programme a red flag will be highlighted.
- As part of our programme planning the trainers are required to complete a pre-programme client appointment. The purpose of this is to ensure the training venue is suitable for the programme to be delivered in it and that it is safe to do so. As part of this the trainers will be required to complete a pre-programme client appointment form and a risk assessment. If a case arises where a venue is not suitable or control measures for risks cannot be implemented, then a red flag will be raised to identify non-compliance and the programme will need to be rescheduled at a more suitable venue.
- HCT Learning has a policy for booking to be completed 7 days before programme commencement, the purpose of this is to confirm the total numbers of learners that are attending the programme, prepare for any reasonable accommodation that could be required and to ensure HCT Learning has arranged the correct amount of resources/materials for a programme where a booking form is late an automatic red flag will be highlighted.
- MyHCT will track the number of programmes that are cancelled or altered while in the planning stages (leads and provisionals) HCT Learning have a minimum requirement of 8 learners expressing interest in engaging in a programme before the programme is brought forward for programme set up. As a result, HCT Learning would expect some changes as part of the planning process, however when a situation arises where the changes or alteration to a programme is over 30% for the month a red flag will be highlighted.
- On completion of each submission cycle an automatic email will be sent from MyHCT to our clients/learners that we have worked with over that period. The End Submission Cycle Feedback once completed will be automatically uploaded onto MyHCT and where under 70% satisfaction rate is achieved a red flag will be highlighted.

- Learners attending our programmes will be required to sign in each day, once sign in sheets have been completed, they will be sent to our office and updated to MyHCT.
- Where a situation arises that learners on the programme drop out, this is communicated through MyHCT by marking the learners as a drop out. Where HCT Learning deliver a programme and attendance rates fall under 70% attendance a red flag will be highlighted.
- MyHCT will also review the number of learners that completed the programme, where a situation arises where a learner attends a programme however doesn't submit the assessments, staff will record this information on MyHCT by marking that a learner has attended but didn't submit. Where a situation arises where the completion rates on a programme are under 70% a red flag will be highlighted.
- All learner results are recorded on MyHCT for results letters and record of learners achievement, results and learners information are password protected and only authorised staff members can access this information, once results have been uploaded onto MyHCT and the achievement of the total learners pass rates is under 70% an automatic red flag will be raised.
- Grades: In order to ensure consistency of marking HCT have implemented a Red Flag system where if the overall marks been achieved by a total group is 10% under or over the other assessment within that field during a particular submission system, an automatic response will be triggered.
- The Board will review the company's positions and set budget allocation. They will complete cost analysis of programme delivery and set programme pricing, minimum numbers of learners required and trainers day rate. They will set programme costing provisions of profit required to deliver the programme. Any non-profit making programmes are automatically given a red flag and brought to the attention of the Academic Council.

1.1.1 Corrective Action Plan

A corrective action response will be automatically triggered once our Red Flag system has identified non-compliance of a system or a monitoring target has not been achieved. Our Red Flag system has been developed to measure our performance in a range of areas, manage and monitor our services and programmes offered, promote learning experience improvements and to ensure we are continuously evolving to ensure we are offering the best practices possible. The point of HCT Learning completing a Corrective Action Plan is so once an issue has been identified we can address it, develop a plan of correction by investigating the event in full, insuring that all courses that led to

the event are identified. This will establish improved procedures, processes or outcomes to the issues and implement a resolution to them, with a view of eliminating unsatisfactory practices, services, resources or logistics to our programmes or procedures and processes, in that event or in the future.

Our Red Flag system is monitored by the Centre Director and where the system flags an under 70% satisfaction response the corrective action response will require an action, this will be done by the following steps:

- The Centre Manger will identify the area in which the issues have been raised and select the best team members to help action the corrective action response.
- Identify the errors and deficiencies that led to the red flag being raised, ensuring that all underlying causes of the issues have been identified to be dealt with to ensure that the chances of the situation reoccurring again is limited.
- Analyse each identified error and deficiencies individually, collecting all possible corrective actions, debating the outcomes that would be best suited to eliminate the issue and ensure the issue doesn't reoccur.
- Decide on the chosen outcome, identify the steps that need to be completed for the successful implementation. These could include cost analysis, update to policies, procedures or approaches to programme delivery.
- Set achievable deadlines and targets.
- Implement and monitor corrective actions to ensure its effectiveness, which could result in further monitoring or future change.
- Present corrective actions to the Academic Council meeting with feedback.

The Corrective Action Plan will be required to be completed as part of this documentation and will be made up of the following headings:

- Date the red flag was identified
- Name of area that the red flag was identified in
- The team coordinated to complete the investigation
- A clear identification of the problem
- Causes and issues that led to the red flag being raised
- Possible outcomes to eliminate the issue from reoccurring
- Chosen outcome

- People responsible, timelines and actions required
- Confirmation date of implementation
- Monitoring date completed and outcome

Quality and Monitoring Committee: This committee will meet when a red flag has been raised and requires immediate attention or at their scheduled bi-monthly meeting. The purpose to the meeting is to review all activities over the past 2 months, including:

- All feedback received from learners, clients, trainers that have participated on a programme
- Investigate total number of programmes delivered, sector the programme is related to, minor award break down, total number of learners booked, started and certified
- Grades analysis based on programmes delivered
- Feedback provided to the trainer as part of past submission
- Reasonable accommodation/extensions and repeats requested and approved/declined with reasons
- Analysis of RAP report, External Authenticators report, Certification Report – Group Total, Internal Verification Checklist & Report and Internal Verification Assessors Marking Report
- Monitoring of our learners engaging in programme delivery working sector review
- Review red flags that were highlighted – with a view of monitoring and updating the procedure that the programme events/incident lead to the red flag being raised, then deciding if procedure requires an immediate update or the update is scheduled for discussion at our next Academic Council meeting
- Corrective Action Responsive: an examination of all red flags that required immediate attention and as a result the Corrective Action Plans were completed immediately

Once all information has been gathered a report will be generated that will be presented at the next Academic Council meeting.

1.2 Monitoring of Procedures

Procedures at HCT Learning will be monitored on an ongoing basis to safeguard our quality assurance company policies and procedures, to enhance our practices and advance our services which will be beneficial to achieving our desired academic standards. This will involve:

- Monitoring procedures will be an automatic response to a Corrective Action Plan and implementation where it effects our policies and procedure

- Each procedure will be scheduled for routine monitoring periodically (during each quality and monitoring committee)
- Could trigger a response from new programmes developed or reviewed

By constantly reviewing and monitoring our procedures it allows us to check that they are fit for purpose, are performing effectively, working well and are constantly reviewed. HCT Learning will use a monitoring template to track the amendments made.

Our monitoring of procedures template will consist of the following headings which will require a response:

- Name of persons carrying out the monitoring
- Date of monitoring
- Was the procedure enacted since the last date monitored
- If enacted, did the procedure work well
- If not enacted is the procedure still fit for purpose
- Reason for monitoring, e.g. scheduled, monitoring due to event/incident
- If due to an incident, give a brief account of the incident
- Suggest improvement to the procedure/any actions required

Once a procedure has been monitored the documentation completed will be brought forward to the next Academic Council meeting for approval, in which the monitoring procedure will normally result in the procedure getting the 'all clear' unless, e.g. there was a change in legislation/QQI guidelines which have implications for the procedure. During the Academic Council meeting the tasks will be assigned in order to implement the policy:

- People responsible, timelines and actions required
- Confirmation date of implementation

Once the procedure has been implemented it will be brought forward to the next Quality and Monitoring Committee bi-monthly meeting where final monitoring of the procedure will be checked to ensure its effectiveness.

- Monitoring date completed and outcome

In some cases if the Quality and Monitoring Committee decide that from reviewing the procedure in light of an event or incident rather than to enhance the procedure that the procedure was not fit for

purpose and as a result may need to be implemented immediately - where this event is presented the monitoring procedure will take the following procedure:

- Name of persons carry out the monitoring
- Date of monitoring
- Was the procedure enacted since the last date monitored
- If enacted did the procedure work well
- If not enacted is the procedure still fit for purpose
- Reason for monitoring e.g. scheduled, monitoring due to event/incident
- If due to an incident, give a brief account of the incident
- Suggest improvement to the procedure/any actions required
- If due to an incident, give a brief account of the incident
- Suggest improvement to the procedure/any actions required

An authorised person in the centre has the capacity to provide the procedure with the 'all clear' and assign tasks for the implementation of the policy.

- People responsible, timelines and actions required
- Confirmation date of implementation

Please note however that monitoring procedure are always subject to retrospective approval from the Board – and will be presented at the next Academic Council meeting. As the Quality and Monitoring Committee bi-monthly and the Academic Council meet every quarter there should never be a situation where a monitoring procedure is closed off without the input from the Academic Council. The procedure will still be brought forward to the next Quality and Monitoring Committee bi-monthly meeting where final monitoring of the procedure will be checked to ensure its effectiveness.

- Monitoring date completed and outcome

Findings from the final monitoring of procedure stage will also be communicated to the next Academic Council for final closure of the procedure.

Academic Council: This is a fundamental part of our monitoring and review of our quality assurance systems, they will be required to formally evaluate and approve a range of areas of our quality

assurance practices to ensure programmes and services are enhanced and maintained to remain fit for purpose, during each Academic Council meeting they will be required to:

- Review red flags that have been identified through MyHCT
- Evaluate corrective action responses that have been completed
- Inspect Corrective Action Plan to programme content
- Approve new procedures that have been identified as part of the Quality and Monitoring Committee
- Examining the RAP and External Authenticator Report
- Investigate the Quality and Monitoring Committee bi-monthly report
- Assess the effectiveness of a quality assurance policies by reviewing one policy per meeting
- Review monitoring completed and outcomes from amendments identified for implementation for improvement from previous meetings

During each meeting held by the Academic Council, the council will be required to evaluate the effectiveness of each quality assurance policy. The cycle of the evaluation will be completed over a three-year duration and on completion will trigger an automatic response to a self-evaluation. The Academic Council meet each quarter and the purpose of including this as part of their agenda is to:

- Govern our quality assurance practices by contributing to the strategic implementation of monitoring and review
- Evaluate the effectiveness of our quality assurance documents, programmes, resources, facilities, managements and administration
- Enhance quality assurance policies and identify amendments to procedures
- Confirm correct frameworks in place to meet academic obligation
- Evaluate the operational and management processes and procedures
- Provide recommendation of improvement to policies and company practices
- Safeguard academic standards being achieved by the centre
- Identify deficiencies, improvements, responsibilities and timelines for practises

Each element of our quality assurance policy will be reviewed in order to promote continuous development of our services and practises offered over the duration of three years. The cycle will be presented in the following format unless due to an event or incident that an urgent review is identified due to non-compliance of policy or identification that the policy is no longer fit for purpose.

- Governance and Management of Quality
- Documented Approach to Quality Assurance
- Programme of Education and Training
- Staff Recruitment, Management and Development
- Teaching and Learning
- Assessments of Learners
- Supports for Learners
- Information and Data Management
- Public Information and Communication
- Other Parties Involved in Education and Training
- Self-Evaluation, Monitoring and Review

Please note that as a result of amending one policy this could also have an implication on other procedures under different policies and as a result all changes or alterations will need to be tracked.

1.3 Monitoring of Policies

This is an integral part of HCT Learning's philosophy as it enables us to enhance the learners experience and promote confidence in standards of awards and services provided by the centre. As a result standards template will be used during the monitoring of policies with specific term of references that will need to be discussed throughout the evaluation of the monitoring of that policy, they include:

- Name of persons carrying out the monitoring of the policies
- Date of monitoring
- Policy overview
- Procedure under that policy
- Has there been any events or incidents under this current policy
- Evidence/activity of that procedure
- Score provided for its effectiveness

The centres template will require a response of the Academic Council in the form of a numerical value on the effectiveness of the procedures under that policy between 1 and 10. Where the Academic Council rates the procedure under the policy a 7 or under, an automatic amendment will be required to be completed. This will be done by:

- The Academic Council suggest improvement to the procedure collectively
- Identify if the changes to the procedure have any effect on any other procedure
- Decide on best improvement of the procedure
- Identify actions required to be completed
- Confirm people responsible and timelines for this to be achieved

After the meeting has been completed those required to take action will be formally communicated and the required actions for the successful implement of this alteration will be completed. Once completed the updates/amendments will be updated to our QA and any forms of this procedure to our learners, clients, trainers and staff will be revised and communication will then be brought forward for the monitoring of the new procedure.

- Monitoring date completed and outcome

Findings from the final monitoring of procedure will also be communicated to the next Academic Council for final closure of the procedure and will be made available on our website.

Details of information generated from each step of the review of our policies and procedures will be brought forward and presented for our self-evaluation plan.

Board Meeting: The Board will meet bi-annually with a view of discussing the previous period completed and planning for the next. As part of their agenda they will be required to complete monitoring on the company's development over that period. The company will be looked at as a whole in order to ensure that we are adhering to our mission while also remaining compliant. During this meeting new policies and procedures will be designed and established. All procedures will be reviewed and evaluative if they are compliant. This will ensure they are renewed where appropriate.

Below outlines in full the purpose of the meeting:

- Ensure the company's legal obligations are being maintained e.g. insurance, end of year accounts, health and safety, human resources, data protection(GDPR), learner protection
- Safeguard embedded quality assurance systems
- Review reports generated by the Academic Council, the Quality and Monitoring Committee and Programme Development and Review Committee
- Ensure the company is aligned to its mission and strategy
- Review progression of programmes on offer

- Monitor the company's financial status
- Budget for next biannual period

The Board will be required to investigate a range of areas regarding the company. As a result, the Board will be required to reflect, evaluate and report on company matters. In order to achieve this range of tasks listed above the Board will need to investigate and renew the following topics throughout their meeting:

- Plan deadlines required in order for renewal and completion of insurance and end of year accounts
- Monitor updates and amendments required on policies and procedures under data protection(GDPR) and health and safety, review events that occurred under these sections
- Review full time staffing requirements in order to meet quality provisions, update and plan where required, employment obligation e.g. appraisals, disciplinary, pensions, policies and procedures based on direction from Peninsula
- Review the description and duties of the councils, committees and management structure
- Identify the industry sector where our learners are originating from
- Analyse programmes delivered under the sector and level
- Acknowledge the order of programmes delivered, determining programmes that are thriving against programmes in decline
- Review programmes on offer to ensure they are still functional
- Evaluate the company's financial statuses
- Categorise county by most successful in relation to programmes delivered
- Review programmes booked by programme coordinators assigned to programmes booked
- Company budget renewed, adjusted and agreed

There are a number of documents and reports which are completed during company day to day activities in order to ensure all procedures carried out are compliant. The Board will need access to these in order to review them. Listed below are the documents and reports needed:

- Details of deadline dates for insurance and accounts for preparation required
- Legislative updates and or external data protection or Health and Safety Officer
- Access to Peninsula website which identifies timelines and actions required or representative from HR external department
- Actions and activities completed by councils, committees and management

- Summary of programmes
- Programme status report
- Course summary – persons/county
- Contact summary report
- Working sector report
- Scheme – learners – sector report
- Cancelled Programme Report
- Documentation updates for policy and produces updates
- Cost analysis report 2
- Cost analysis report 3: summary of cost analysis report 2, this report can be broken down into finish month, finish year, salesperson, its status (leads, provisional's, actual and complete) invoices amount and total
- Programme profit/loss report

1.4 Monitoring of Company

During the meeting the Board will be required to completed a template, please note that the questions asked may change or be adapted as part of the company's quality enhancement, the purpose of this template is to monitor the company's governance and strategic approaches to ensure the company continues the ability to provide a transparent quality approach in its policy, procedures and operation practices and to enhance quality improvement, to ensure learners academic services are being met. As a result the following questions will be monitored during the meeting:

- Name of persons carrying out the monitoring of the company
- Date of monitoring
- Legal obligation statues and renew dates/actions required in order to meet obligations
- Updates towards health and safety/data protection(GDPR)/learner protection
- Staffing requirements to meeting quality provisions/if new role identified, what is it and what are the actions required?
- Activities completed by councils, committees and management structure since last meeting. Have any of these activities had an implication on the company? Are they fulfilling their purpose?
- Breakdown of where our learners who are attending our programmes are working in/is this in line with our company's scope?

- Breakdown of programmes delivered, via the major award/has this changed since the last meeting?
- Top programmes/has this changed since our last meeting? Is there a reason for this?
- Least active programme/has this changed since our last meeting? Is there a reason for this? Is there still a need for this?
- What county have we delivered the most programmes in/is there a reason for this? What can be done to promote our services in other areas?
- How many programmes have been changed or altered since the last bi-annual meeting, has an ongoing issue been identified, if so what actions need to be put in place in order to rectify this concern?
- Programme Coordinator programmes booked, has this changed? Is there a reason for it?
- Total number of learners certified/has there been growth or decline?
- Financial report: total money invoiced, outgoing and profit/what was our most/least profitable programme – has this changed? Was there a reason why programmes have become less profitable? Is there anything that needs to be changed/adaptions that need to be considered going forward?
- Identify actions required to be completed
- Confirm people responsible and timelines for this to be achieved

1.5 Annual Monitoring on Programmes Report

The Academic Council will be required to meet at the end of each year in order to review the centres development in relation to its programmes offered. Relevant information will be compiled and presented that contributes to the programme planning, development, delivery and assessments of learners. A report will be compiled by them at the end and recommendations made for programmes to be reviewed. Outlined below are the different areas and reports in which the council will examine and report on:

Summary of programmes delivered for that year	Broken down into the specific programmes delivered, number of programmes delivered, number of learners that were booked, registered, attended last day, completion and dropout rates
Feedback Report - trainers	Broken into specific programmes delivered will

Annual Feedback Report	investigate the number of trainers involved in the delivery, grade analysis of learners, feedback received for trainer delivering the programme broken down into trainer, client and learner
Work Sector Report – Learners	Entry standards of our learners entering onto programmes in relation to qualification and educational qualification
Changes of learner group report	Investigate by specific programme the number of learners that sent in assessments late, that were granted extension due to extenuating circumstance, that appealed their result or failed and where required to repeat their assessment
Cancelled/Amended programme report	Can be accessed through calendar month or year, will investigate the number of programmes that were lost or had to be rescheduled within that given period, this report will include all potential, current and past programmes that were scheduled for that year taking into account all aspects, including date changed due to unforeseen weather, courses that were recruited however were not ran due to minimum numbers not being met etc
RRA Report	Investigate by specific programme and the number of reasonable accommodations granted with learners
Grades Analysis	Investigate by specific programme what grades learners are achieving
Programme profit/loss	Broken into specific programme sector delivered, this will look at the total cost associated with each programme
All reports generated from the Programme Monitoring for Submission Cycle Report	Including RAP Report, External Authenticator Reports along with centre owned reports

Red Flags	All red flags generated throughout the year and outcomes generated from the red flags
Summary of Programmes – Years Certified	Monitors numbers of learners booking, attending and finishing programmes. Searches by year and shows numbers of learners for each programme
Results achieved for all providers	This will be requested directly from QQI once a year. It will provide statistics on other QQI providers which will allow us benchmark ourselves against others to ensure we are meeting national standards
Whole Learner Progression Report	This report will record how many programmes at HCT Learning a learner has attended, allowing us to track progression. It will show for example, 1000 learners attended one programme, 200 attended two programmes and 100 learners attended three programmes

As a result of the Annual Monitoring Report the centre will be required to carry out where required a programme review.

1.6 Programme Review

HCT Learning will select programmes they are currently offering. Before starting the programme review the Academic Council will be required to implement the methodologies required in order to carry out the programme review. The Programme Development and Review Committee will be founded which will consist of centre staff associated with the programme/programme heads/trainers/learners and clients that have been involved are in the delivery of the programme will be asked to join the centre in completing a review of the programme as a whole with a view of updating information and improving the programme content. The Academic Council will be asked to select a programme that they believe may require review and sources for decision making will come from a range of methods which could include:

- Length of time the programme has been offered
- Number of programmes that have been delivered throughout the year

- Feedback received from clients, learners and trainers
- Number of red flags that have been identified as a result of programme delivery
- Programme monitoring completed as part of the submission cycle

The Academic Council will be required to develop the following and will be put in place before the programme review starts:

- People involved
- Methodologies required
- Job description and responsibilities confirmed
- Time frame agreed
- Reporting relationships agreed
- Fees to be paid to for their work completed

The purpose of this programme review is to devise an action plan which is aimed at improving the overall programme quality. Feedback forms from all programmes delivered within that year will also be used and analysed throughout the process which identify specific programmes delivered. Trainers will be asked for feedback on the overall content of the programme and asked to make suggestions on the overall improvement of the programme.

The overall areas that will be investigated are:

- Improve the learners experience
- Seek external advice from those that have been involved in the process or participation of the programme
- Programme design and content
- Programme delivery
- Assessment of learners
- Associated services and resourcing
- Attainment of programme objective
- Organisation of programme
- Physical facilities programmes are being offered in
- Overall benefit of the programme
- HCT team

A range of questions will be developed which will require a response in the form of a numerical value on the effectiveness of the area being spoke about between 1 and 10. Where a 7 or under has been identified in that section. The area identified will be automatically brought forward to our Programme Development and Review Committee for evaluation and where required, amendments made. The form will also include a section in order for notes and suggestions to be recorded.

Trainers: Trainers that have been involved in delivering that specific programme will be asked to join the Programme Development and Review Committee in order to reflect and improve the programme. The initial meeting will consist of a trainer’s forum where a list of developed questions will be asked to the trainers which will explore their experiences of delivering the programme.

Class Representatives: Learners that have attended a programme will be consulted in the overall feedback of their experiences and impacts gained. Learners will be invited to attend a panel meeting; an independent chair will be asked to attend this meeting and will be provided with specific questions that have been developed in order to collect honest and reliable feedback. Minutes of this meeting will be documented and provided back to the Programme Development and Review Committee for reflection and evaluation.

Clients: Those involved with the programme set up and information received will be asked to attend a forum in order to discuss their experiences of information provided from the centre in order to set up and deliver the programme. An independent chair will be asked to attend this meeting and will be provided with specific questions that have been developed in order to collect honest and reliable feedback. Minutes of this meeting will be documented and provided back to the Programme Development and Review Committee for reflection and evaluation.

Once all feedback has been received the Programme Development and Review Committee will be required to meet and purpose changes that could be considered as part of the research completed and make suggestions on possible improvements.

The Quality and Monitoring Committee will then be required to complete the following:

- Feasibility study
- Compatibility study
- Risk register

The Board will complete the following:

- Cost Analysis
- Statement of Programme Needs identified

The information will be provided to the Academic Council to reapprove changes and alterations.

Information that will be updated as part of this process if required:

- Programme information
- Programme pack content
- Support services
- Lesson plan
- Changes to question format on centre booklets provided
- Extra material or resources purchased
- Update in programme planning in order to improve programme standard
- Update in venue requirements and or programme instruments

If a situation arises where major modifications are identified, a programme will be required to be revalidated. As a result the HCT Learning will revert back to our Education and Training Policy and Procedures regarding programme validation.

Making information public – All relevant information and findings will be published on our website any required changes to programme outlines, learner admission, policies and procedures will be updated and made available on MyHCT for correspondence purposes and access also through our website.

1.7 Self-Evaluation

HCT Learning shall complete a self-evaluation process to ensure we remain compliant with QQI regulations as laid out in their document Provider Monitoring Policy & Procedures 2010. We shall evaluate and report on training and all services provided. This will identify any areas in need of improvement or immediate action. There will be several committees involved in the process. We shall also engage with an external evaluator to ensure quality assurance. Below will outline each procedure and the personnel involved. We will outline and explain any reporting systems we have in

place to help with this procedure, who will be responsible for reviewing the findings and the actions which shall be taken to correct or implement the findings.

HCT Learning is committed to the ongoing improvement of its training provision to ensure that our capacity to meet teaching, learning and service enhancements are achieved and to promote a quality culture of our learner's experience and impacts. Self-evaluation is seen as a critical component in seeking the views of and feedback from our stakeholders ensuring all quality assurance services and operational procedures are being applied and adhered to throughout the infrastructure of the company in order to enhance the learners learning environment and experiences. The purpose of the self-evaluation processes is to receive fair and accurate feedback in order to reflect on the effectiveness and seek improvements to our quality assurance processes and procedures. The self-evaluation will be conducted in line with the QQI Statutory Core Quality Assurance guidelines and will go towards our development and improvement plan.

The self-evaluation will attempt to take an overall picture of HCT Learning. It aims to:

- Review the efficiency in which it assures and enhances the quality of its teaching, learning and service
- Identify gaps or improvements within our quality assurance
- Improve the learners experience
- Promote quality enhancement
- Promote a quality culture
- Instil public confidence in the quality of the centre by promoting transparency and public awareness
- Use results to contribute towards improvement planning of governance and management systems within our quality assurance processes and procedures
- Achieve an effective and robust review of our quality assurance manual

HCT Learning will conduct a self-evaluation every 3 years. It is expected that the first self-evaluation event will be in 2021 and will be requested from the Board. The Academic Council will conduct an initial meeting to discuss the task of conducting a self-evaluation however it will be automatically triggered once all policies have been reviewed by the Academic Council. The purpose of the self-evaluation will be to:

- Review the learner experience from the point of view of the learner

- Seek external experts' calibrations to ensure academic standards are achieved
- Report on the quality of its own programmes and services
- To ensure that accurate and relevant information is being presented to learners
- Evaluate our ability to adapt to commercial and educational changes and development
- Identify deficiencies and developed enhancements
- Analyse the effectiveness of our quality assurance systems and strengthen the systematic processes
- Analyse, observe and record provider activities
- Revise centre quality documentation and practices

Once requested the Academic Council will be required to meet and prepare a plan of activities required in order to complete the self-evaluation. Decisions will be made in relation to timeframes, schedules, stakeholders involved, finances, and resources, provisional outlines of methodology will be developed ensures all aspects of the learners experiences are being accounted for including its teaching, learning and service, templates to be developed and external evaluator chosen.

The Quality and Monitoring Committee will be required to contact an external independent evaluator. The external evaluator will be a subject expert in quality systems within an academic setting and will be experienced with working within the quality assurance framework and will be capable of providing independent expert advice to enhance our operating QA systems. The person recruited to complete the activity will be:

- Highly qualified both academically and professionally in provisions of training and education
- Will have previous experience in consulting on self-evaluations, facilitating the design and development of provider QA systems
- Have experience of the National Framework of Qualifications
- Have no interest in the company's financial gain
- Willingness to comment and give advice on quality assurance practices and improvements

Once identified the centre will be required to meet with the external evaluator and agree to complete the following:

- Job description and responsibilities confirmed
- Time frame agreed
- Reporting relationships agreed
- Fees to be paid to committee for their work

- Conflict of interest declarations

The initial stage of the self-evaluation will be a meeting between the Academic Council and the self-evaluator chosen, with a view of agreeing methodology to be used and the documentation required to be completed as part of the process. HCT Learning will use a quantitative analysis which will allow a scoring system on the various QA areas on present performance with a room for improvement section.

Stakeholders involved will be asked to join forums which will be set up with trainers, clients, learners and all staff at HCT Learning. Learner's details will be accessible from our Programme Verification Booklets where learners have provided details to become a class representative. HCT will engage with a range of stakeholders to identify strengths, weaknesses and areas for improvement.

Trainers: Trainers that deliver programmes on behalf of HCT Learning are seen as an important part of the overall self-evaluation process HCT Learning work in partnership with their trainers in their support and delivery of our training programmes as a result they are an excellent source of feedback on their perspectives on the processes employed by HCT Learning. Trainers that have worked with HCT Learning as subcontractors will be asked to attend a forum in which they will be asked a range of specific questions that have been designed around the education and training provisions available to learners whilst in attendance of our programmes and support systems in place in order to support trainers in their delivery of a training programme.

Clients: Clients are often our initial point of contact when communicating possible programmes of interest, setting up programmes or be the main point of contact in order to facilitate learners on programmes as a result, they are a key member to seek feedback from to allow us to explore innovative and effective practices and procedures and to identify possible down falls. A group of recent clients will be asked to attend a forum in which they will be asked to discuss various topics on their general experience working with HCT Learning.

Learners: Learners are an integral part of our self-evaluation process as it allows us to conduct a fair and accurate reflection of our practices and services provided on our programmes and ensure that developed procedures that underpinning provision can provide learners with a well-supported learning experience and identify key improvements that will enhance the overall experience and impacts gained by learners that attend our programmes. A group of recent learners will be asked to

attend a forum in which they will be asked to discuss various topics on their general experience learning at HCT.

A nominated chair will be asked to attend these meeting who will manage and note the discussion, this chair will be independent of HCT Learning.

Questions will be designed surrounding the learners experiences however will have an impact on our quality assurance policies under the following headings:

- Governance and Management of Quality
- Documented Approach to Quality Assurance
- Programme of Education and Training
- Staff Recruitment, Management and Development
- Teaching and Learning
- Assessments of Learners
- Supports for Learners
- Information and Data Management
- Public Information and Communication
- Other Parties Involved in Education and Training
- Self-Evaluation, Monitoring and Review

Whilst these forums are taking place, the Quality and Monitoring Committee will be required to complete their internal review stage of the self-evaluation this will include the company's position in relation to its programmes and services that impact the learners over experiences, achievements and contributions and will be required to report to the Academic Council of its progression. The internal review stage will consist of evidence gathering and completion of a range of documents. During this period members of the Academic Council will be required to meet outside of the quarterly meeting in order to complete company related reports. The self-evaluation plan will include all information required to complete a conclusive, thorough review of the company from development, design, delivery and evaluation and will cover all QQI procedures and guidelines and best international practice. The internal review stage will consist of the following documentation:

- Company scope and range
- Company mission, ethos, aims and objectives
- Programmes delivered breakdown to include major and minor awards, and breakdown of learners certified within that area

- Company swot analysis
- Centres risk register
- Contingency plan of action for company
- Feedback received
- Programme reviews and corrective actions
- Monitoring of procedure reports completed
- Monitoring of policies reports completed
- Monitoring of company reports completed
- A critical review of the quality processes, QQI Statutory Core Quality Assurance

Once all the above forums have been completed and relevant information has been gathered the Quality and Monitoring Committee and the independent evaluator will be required to meet to evaluate all the information gathered. The centre will assist the external evaluator in every aspect of their research. The next review stage of our self-evaluation process will be a process where the external evaluator and the Quality and Monitoring Committee will be required to review and report on findings completed by the groups gathered for feedback. They will be required to identify lines of enquiries, conduct an evaluation with the Quality and Monitoring Committee on the centre against QQI requirements and core statutory guidelines, providing impartial judgement on centres practices and identify feedback to be implemented and considered.

On completion, the evaluator and the Quality and Monitoring Committee will be required to complete a self-evaluation plan which will require the presentation of finding of areas explored and criteria set from QQI for self-evaluation which will highlight possible shortcomings which will then allow the self-evaluation team to express emerging thoughts and recommendations and will set out their findings and will examine against QQI recommendations and National Framework of Qualifications. This report will be presented using clear and easy to understand language so that all stakeholders involved in the process can understand the findings.

Throughout the process of self-evaluation, we may need to engage in more forums in order to finalise information found, there will be regular communications with stakeholders for clarification and with the external evaluator for direction and guidance.

An improvement action plan is an integral part of the company's self-evaluation. The purpose of this plan is to act as a tool in facilitating improvements. The statistics gained through this process are vital in identifying areas which need to be reviewed and amended.

The improvement action plan will state how and when the provider will address the recommendations made in the self-evaluation plan. It will prioritise areas for programme/policy enhancement. It will detail the recommendations for improvements made and the current status of each recommendation. HCT Learning will then prioritise what action is required and who will be responsible for this.

This plan reiterates our key goals and objectives to enhance the learning experience and the success of learners on our programmes. We believe that it is crucial that learners experience a learning environment which supports them to reach their full potential. It helps us to continuously improve our programmes and quality of service to deliver the highest quality education and training services for learners. Each issue identified will be addressed with appropriate responses and actions for consideration.

Once the self-evaluation process has been completed and improvement action plans identified the application the external independent evaluator will be required to meet with the Academic Council and explain their findings. The Academic Council will be required to review and finalise the self-evaluation plan. The Academic Council then will be responsible for finalising appropriate responses and actions required in order to complete the process. A final report will be completed with the following headings:

- A report on their findings
- Suggestions on improvements required
- Key member responsibilities on implementing the improvements highlighted
- Timeframe for improvements
- Key review dates
- Monitoring plans in place

The Academic Council will communicate back to key personnel regarding all corrective action to be taken, by whom and when. They will be responsible for monitoring all corrective actions and will do so through reporting from the Quality and Monitoring Committee. The Quality and Monitoring Committee will be required to communicate to QQI their findings and proposed changes to the quality assurance documentation. The self-evaluation plan and improvement plan will be forwarded to QQI and published on our website. The Quality and Monitoring Committee will be required to

take actions based on findings and will be required to communicate our reviewed policies, processes and practices to relevant stakeholders.

Appendix

Self-Evaluation, Monitoring and Review	
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