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Reengagement Panel Report

Assessment of Capacity and Approval of QA Procedures

Part 1 Details of provider

1.1 Applicant Provider

Registered Business/Trading Name:	<ol style="list-style-type: none">1. Catherine McAuley Special School2. Mid West School for the Deaf3. Our Lady of Fatima Special School4. Saint Augustine's Special School5. Scoil Chiaráin6. St. Anne's School (Ennis)7. St. Anne's Special School (The Curragh)8. St. Brigid's Special School (Dundalk)9. St. Brigid's Special School (Mullingar)10. St. Cecilia's School11. St. Francis Special School12. St. Hilda's Special School13. St. Ita's and St. Joseph's14. St. Ita's Special School15. St. Laserian's School16. St. Michael's (Castlerea)17. St. Michael's Special School (Dublin)18. St. Patrick's Special School19. St. Ultan's Special School20. Scoil Chormaic Special School
Address:	<ol style="list-style-type: none">1. Ashbourne Avenue, South Circular Road, Limerick2. Childer's Road, Rosbrien, Limerick3. Carrigeen Street, Wexford4. Obelisk Park, Carysfort Avenue, Blackrock, Co. Dublin5. St. Canice's Road, Glasnevin, Dublin 116. St. Senan's Road, Ennis, Co. Clare

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	<ol style="list-style-type: none">7. Ballymany Cross, The Curragh, Co. Kildare8. Ard Easmuinn, Dundalk, Co. Louth9. Harbour Street, Mullingar, Westmeath10. Cregg, Sligo11. Borris Road, Portlaoise, Co. Laois12. Grace Park Road, Athlone, Co. Westmeath13. Balloonagh, Tralee, Co. Kerry14. Crushrod Avenue, Drogheda, Co. Louth15. Dublin Road, Carlow16. Roselawn Drive, Castlerea, Co. Roscommon17. Holy Angels, Glenmaroon, Chapelizod, Dublin 2018. Drumgoold Enniscorthy19. Flowerhill, Navan, Co. Meath20. Golden Road, Cashel, Co. Tipperary
Date of application:	14 October 2023
Date of resubmission of application:	17 April 2024
Date of (virtual) site visit:	22 May 2023
Date of reconvene meeting:	26 February 2024 & 26 April 2024
Date of recommendation to the Programmes and Awards Executive Committee:	13 July 2023 and 12 June 2024

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1.2 Profile of provider

The 20 providers listed in Section 1.1 above are members of a network (hereafter 'The Co-operative') of Special Education Schools who have agreed to operate under a common quality assurance (QA) system for the purposes of reengagement with QQI. Each school (hereafter 'provider') is a legacy provider in its own right, having independent relationships with QQI (and formerly FETAC), and each provider will retain its individual approval status upon successful completion of reengagement. However, each provider, as a member of The Co-operative (established in September 2022), will be required to align itself with the agreed 'common' QA framework, policies, and procedures.

The Co-operative is coordinated through the National Association of Boards of Management in Special Education (NABMSE), a representative body for the Boards of Management of Special and mainstream schools that provide education to learners with special education needs in Department of Education schools, and the NABMSE secretariat acts as custodian for the QA Manual.

As part of this application, some of the providers are seeking an extension of their current scope of provision to include the delivery of programmes at higher / lower levels on the National Framework of Qualifications (NFQ).

Part 2 Panel Membership

Name	Role of Panel member	Organisation
Anne Higgins	Chair	Formerly of Galway and Roscommon Education and Training Board
Matthew Hurley	Report Writer and Active Panel Member	Independent Consultant
Martina Needham	Panel Member	Formerly of Donegal Education and Training Board
Rachel Tucker	Panel Member	Formerly of Community Training and Education Centre



Part 3 Findings of the Panel

3.1 Summary Findings

Following the Special Schools Co-operative's submission of its reengagement application and draft QA procedures, the Panel convened for an initial planning meeting on 08 May 2023 to exchange initial observations and identify areas requiring additional information and/or clarification. These areas were documented in a request for further information (RFI) which was responded to in a timely manner. Following receipt of this response, the Panel convened for a second planning meeting on 18 May 2023.

The site visit was held virtually and involved extensive discussions with Co-operative representatives regarding the breadth and depth of their application. Given the unique nature of the application, and recognising that each provider would retain individual approval status with QQI if the Co-operative's application was successful, the Panel was keen to explore the roles and responsibilities of the providers and the newly established governance structure for the Co-operative.

At this stage, the Panel would like to commend the open and receptive approach taken by Co-operative representatives to their engagement with the Panel during the site visit. The Panel would also like to commend the important work of the member providers and the dedicated staff working on the ground to support the learners.

Over the course of the Panel's evaluation, it became evident that although a significant amount of work had been done in establishing the Co-operative and developing a QA system, much work was still required in order to address issues relating to governance, documentation of policies and procedures, programme development and approval, learner access to QQI awards, the assessment framework and associated procedures, and public information and communication.

At the conclusion of the site visit, it was the view of the Panel that significant further work would be required in order for the Panel to consider the Co-operative's draft QA procedures appropriately robust and aligned with QQI's guidelines. In view of this, the Panel made a recommendation to QQI to refuse approval of the Special Schools Co-operative's draft QA procedures pending mandatory changes (set out in Section 7.1).

Following an interim period, the Panel reconvened on 26 February 2024 to evaluate the Co-operative's response to the mandatory changes. It was evident that much time and effort had been dedicated to implementing important revisions and structures to effect the required changes. Notwithstanding this, the Panel expressed continued concern relating to areas such as conflict resolution, programme development and review, and assessment processes. In order to give the Co-operative an opportunity to respond to these concerns, the Panel issued a request for additional information and clarification.



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Following another interim period of approximately six weeks, the Panel reconvened for a second time on 26 April 2024 to evaluate the Co-operative's response to the Panel's request. The Panel acknowledged the positive progress which had been made even in the short window of time since the last meeting. While the Panel's concerns had been mostly addressed, some outstanding matters remained. However, the Panel agreed that these could be resolved via conditions of QA approval.

In view of this, the Panel is pleased to make a revised recommendation to QQI to approve the Special Schools Co-operative's draft QA procedures with conditions.

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

3.2.1 With regard to the providers' applications for reengagement with their current scope of provision.

	Tick ✓ <u>one</u> as appropriate
Approve Catherine McAuley Special School's draft QA procedures	✓
Refuse approval of Catherine McAuley Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Catherine McAuley Special School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve Mid West School for the Deaf's draft QA procedures	✓
Refuse approval of Mid West School for the Deaf's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Mid West School for the Deaf's draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve Our Lady of Fatima Special School's draft QA procedures	✓
Refuse approval of Our Lady of Fatima Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Our Lady of Fatima Special School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve Saint Augustine's Special School's draft QA procedures	✓
Refuse approval of Saint Augustine's Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Saint Augustine's Special School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve Scoil Chiaráin's draft QA procedures	✓
Refuse approval of Scoil Chiaráin's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Scoil Chiaráin's draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve St. Anne's School (Ennis)'s draft QA procedures	✓
Refuse approval of St. Anne's School (Ennis)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Anne's School (Ennis)'s draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Anne's Special School (The Curragh)'s draft QA procedures	✓
Refuse approval of St. Anne's Special School (The Curragh)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Anne's Special School (The Curragh)'s draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Brigid's Special School (Dundalk)'s draft QA procedures	✓
Refuse approval of St. Brigid's Special School (Dundalk)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Brigid's Special School (Dundalk)'s draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve St. Brigid's Special School (Mullingar)'s draft QA procedures	✓
Refuse approval of St. Brigid's Special School (Mullingar)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Brigid's Special School (Mullingar)'s draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Cecilia's School's draft QA procedures	✓
Refuse approval of St. Cecilia's School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Cecilia's School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Francis Special School's draft QA procedures	✓
Refuse approval of St. Francis Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Francis Special School's draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve St. Hilda's Special School's draft QA procedures	✓
Refuse approval of St. Hilda's Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Hilda's Special School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Ita's and St. Joseph's draft QA procedures	✓
Refuse approval of St. Ita's and St. Joseph's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Ita's and St. Joseph's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Ita's Special School's draft QA procedures	✓
Refuse approval of St. Ita's Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Ita's Special School's draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve St. Laserian's School's draft QA procedures	✓
Refuse approval of St. Laserian's School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Laserian's School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Michael's (Castlerea)'s draft QA procedures	✓
Refuse approval of St. Michael's (Castlerea)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Michael's (Castlerea)'s draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Michael's Special School (Dublin)'s draft QA procedures	✓
Refuse approval of St. Michael's Special School (Dublin)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Michael's Special School (Dublin)'s draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve St. Patrick's Special School's draft QA procedures	✓
Refuse approval of St. Patrick's Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Patrick's Special School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Ultan's Special School's draft QA procedures	✓
Refuse approval of St. Ultan's Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Ultan's Special School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve Scoil Chormaic Special School's draft QA procedures	✓
Refuse approval of Scoil Chormaic Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Scoil Chormaic Special School's draft QA procedures	

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3.2.2 With regard to the providers' applications for an extension of scope to include delivery of programmes at higher / lower levels on the National Framework of Qualifications (NFQ).

	Tick ✓ <u>one</u> as appropriate
Approve Saint Augustine's Special School's draft QA procedures	✓
Refuse approval of Saint Augustine's Special School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Saint Augustine's Special School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve Scoil Chiaráin's draft QA procedures	✓
Refuse approval of Scoil Chiaráin's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve Scoil Chiaráin's draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve St. Anne's Special School (The Curragh)'s draft QA procedures	✓
Refuse approval of St. Anne's Special School (The Curragh)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Anne's Special School (The Curragh)'s draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Brigid's Special School (Dundalk)'s draft QA procedures	✓
Refuse approval of St. Brigid's Special School (Dundalk)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Brigid's Special School (Dundalk)'s draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Brigid's Special School (Mullingar)'s draft QA procedures	✓
Refuse approval of St. Brigid's Special School (Mullingar)'s draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Brigid's Special School (Mullingar)'s draft QA procedures	

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	Tick ✓ <u>one</u> as appropriate
Approve St. Cecilia's School's draft QA procedures	✓
Refuse approval of St. Cecilia's School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Cecilia's School's draft QA procedures	

	Tick ✓ <u>one</u> as appropriate
Approve St. Laserian's School's draft QA procedures	✓
Refuse approval of St. Laserian's School's draft QA procedures pending mandatory changes set out in Section 7.1 (If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)	
Refuse to approve St. Laserian's School's draft QA procedures	



Part 4 Evaluation of provider capacity

4.1 Legal and compliance requirements:

	Criteria	Yes/No/ Partially	Comments
4.1.1(a)	Criterion: <i>Is the applicant an established Legal Entity who has Education and/or Training as a Principal Function?</i>	Yes	Each of the providers in the Co-operative is a publicly funded school operating under Department of Education guidelines.
4.1.2(a)	Criterion: <i>Is the legal entity established in the European Union and does it have a substantial presence in Ireland?</i>	Yes	Each of the providers in the Co-operative is a legal Irish entity and is therefore established in the European Union.
4.1.3(a)	Criterion: <i>Are any dependencies, collaborations, obligations, parent organisations, and subsidiaries clearly specified?</i>	Yes	With the exception of St. Cecilia's Special School, which is a second provider in a collaborative arrangement with Mayo, Sligo and Leitrim Education and Training Board (MSLETB), none of the providers in the Co-operative are engaged in collaborative arrangements.
4.1.4(a)	Criterion: <i>Are any third-party relationships and partnerships compatible with the scope of access sought?</i>	Yes	As per 4.1.3(a), St. Cecilia's Special School is a second provider in a collaborative arrangement with Mayo, Sligo and Leitrim Education and Training Board (MSLETB). Additionally, each provider engages with the broader education and training community in its work.
4.1.5(a)	Criterion: <i>Are the applicable regulations and legislation complied with in all jurisdictions where it operates?</i>	Yes	Based on the available evidence, the Panel is satisfied that each of the providers in the Co-operative is in compliance with all relevant regulations and legislation in their areas of operation.
4.1.6(a)	Criterion: <i>Is the applicant in good standing in the qualifications systems and education and training systems in any countries where it operates (or where its parents</i>	Yes	Based on the available evidence and each provider's own track record of delivering QQI (and formerly FETAC) validated programmes, the Panel is satisfied that the providers in the Co-operative are in good standing in the

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	<i>or subsidiaries operate) or enrolls learners, or where it has arrangements with awarding bodies, quality assurance agencies, qualifications authorities, ministries of education and training, professional bodies and regulators.</i>		qualifications and education and training systems in their areas of operation.
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Findings

The Panel is satisfied that QQI's legal and compliance requirements, as set out in Section 4.1, have been addressed.



4.2 Resource, governance, and structural requirements:

	Criteria	Yes/No/ Partially	Comments
4.2.1(a)	Criterion: <i>Does the applicant have a sufficient resource base and is it stable and in good financial standing?</i>	Yes	Each of the providers in the Co-operative is a publicly funded school operating under Department of Education Guidelines. Financial and insurance documentation, as well as a tax clearance certificate, have been submitted for each provider.
4.2.2(a)	Criterion: <i>Does the applicant have a reasonable business case for sustainable provision?</i>	Yes	As above, each of the providers in the Co-operative is a publicly funded school operating under Department of Education Guidelines. A key benefit of the Co-operative is allowing providers access to the common QA model and QQI provision while retaining their independent approval status.
4.2.3(a)	Criterion: <i>Are fit-for-purpose governance, management, and decision-making structures in place?</i>	Yes	The Panel originally identified issues relating to the decision-making authority of the individual Boards of Management versus that of the Quality Board, and how differences of opinion would be resolved should they arise. Furthermore, the reporting responsibilities of groups/units required further articulation. Mandatory changes were identified in respect of these which were overall addressed between the Co-operative's response to the mandatory changes and in the response to the Panel's request for additional information and clarification. Notwithstanding this, some conditions of QA approval



			were identified in order to address some final, outstanding matters.
4.2.4(a)	Criterion: <i>Are there arrangements in place for providing required information to QQI?</i>	Yes	<p>The following personnel have been identified as the key point of contact between their provider and QQI:</p> <ol style="list-style-type: none"> 1. Catherine McAuley Special School — QQI Coordinator 2. Mid West School for the Deaf — QQI Coordinator 3. Our Lady of Fatima Special School — Principal 4. Saint Augustine's Special School — Principal 5. Scoil Chiaráin — Principal 6. St. Anne's School (Ennis) — Principal 7. St. Anne's Special School (The Curragh) — Principal 8. St. Brigid's Special School (Dundalk) — Deputy Principal 9. St. Brigid's Special School (Mullingar) — Principal 10. St. Cecilia's School — Deputy Principal 11. St. Francis Special School — Principal

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			12. St. Hilda's Special School — Principal / Deputy Principal
			13. St. Ita's and St. Joseph's — Assistant Principal
			14. St. Ita's Special School — Assistant Principal
			15. St. Laserian's School — Deputy Principal
			16. St. Michael's (Castlerea) — QQI Coordinator
			17. St. Michael's Special School (Dublin) — Deputy Principal
			18. St. Patrick's Special School — Principal
			19. St. Ultan's Special School — Teacher
			20. Scoil Chormaic Special School — Deputy Principal

Findings

In view of the revisions made to the QA documentation to address vulnerabilities in the Co-operative's governance and decision-making structures, particularly in relation to provider-level decision-making versus Co-operative-level decision-making, and the reporting responsibilities of groups/units to each other, the Panel is satisfied that QQI's resource, governance, and structural requirements have been addressed, although some conditions of QA approval have been identified as a matter of ongoing enhancement.



4.3 Programme development and provision requirements:

	Criteria	Yes/No/ Partially	Comments
4.3.1(a)	Criterion: <i>Does the applicant have experience and a track record in providing education and training programmes?</i>	Yes	Each of the providers in the network is a legacy provider, most of whom have a track record of providing QQI (and formerly FETAC)-validated programmes. Where a provider has not submitted any learners to QQI for certification, this does not detract from their wider status as an education and training provider.
4.3.2(a)	Criterion: <i>Does the applicant have a fit-for-purpose and stable complement of education and training staff?</i>	Yes	The Panel is satisfied that each provider has a sufficient complement of staff for its intended provision.
4.3.3(a)	Criterion: <i>Does the applicant have the capacity to comply with the standard conditions for validation specified in Section 45(3) of the Qualifications and Quality Assurance (Education and Training) Act (2012) (the Act)?</i>	Yes	Based on the available evidence, the Panel is satisfied that each provider in the Co-operative has the capacity to comply with the standard conditions for validation specified in Section 45(3) of the Education and Training Act (2012).
4.3.4(a)	Criterion: <i>Does the applicant have the fit-for-purpose premises, facilities and resources to meet the requirements of the provision proposed in place?</i>	Yes	The Panel is satisfied that each provider has the necessary resources and facilities for the effective delivery of its proposed QQI provision.
4.3.5(a)	Criterion: <i>Are there access, transfer and progression arrangements that meet QQI's criteria for approval in place?</i>	Yes	The Panel had originally identified a need for the Co-operative to: <ul style="list-style-type: none"> • Develop a policy and procedure for learner access to QQI awards which was relevant to each school.



			<ul style="list-style-type: none"> Articulate its understanding and application of recognition of prior learning (RPL). <p>Mandatory changes were identified in respect of these which were overall addressed in the revised documentation; however, the Panel identified one condition of QA approval relating to the use of the NCCA EAL toolkit to ensure that all staff undertaking an assessment using this toolkit are sufficiently trained to do so.</p>
4.3.6(a)	Criterion: <i>Are structures and resources to underpin fair and consistent assessment of learners in place?</i>	Yes	<p>The Panel had originally found the draft assessment framework and associated procedures to be significantly limited in scope and detail, with much further work required to comprehensively develop, for example, the external authentication and results approval process, feedback to learners, and reviews, rechecks and appeals.</p> <p>A mandatory change was identified in respect of this which led to a significant redevelopment of the Co-operative's assessment framework. However, the Panel found some of the information to be derived heavily from QQI's assessment guidelines and therefore lacked any real sense of provider ownership. It is thus a condition of QA approval that the</p>



			Special Schools Co-operative expand the detail in its assessment processes to include other areas addressed in QQI's guidelines, including assessment security, assessment malpractice, grading, certification, etc. in a way that is provider-owned and relevant to the unique context of the Co-operative.
4.3.7(a)	Criterion: <i>Are arrangements for the protection of enrolled learners to meet the statutory obligations in place (where applicable)?</i>	Yes	As each provider within the Co-operative is a recognised school, they are all exempt from having to put arrangements in place for the protection of enrolled learners.

Findings

In view of the revisions made to the QA documentation to address vulnerabilities in the Co-operative's access processes and assessment framework, the Panel is satisfied that QQI's programme development and provision requirements have been addressed, although some conditions of QA approval have been identified as a matter of ongoing enhancement.

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

The Panel was originally of the view that further work was required to strengthen the Co-operative's QA policies and procedures, particularly relating to its governance and decision-making structures, access policies and procedures, and assessment framework and processes, and to better align these with QQI's guidelines.

Mandatory changes were identified in respect of the Panel's issues which were subsequently overall addressed, both in the Co-operative's response to the mandatory changes and in the response to the Panel's request for additional information and clarification.

In view of these developments, the Panel has greater confidence in the Co-operative's capacity to provide sustainable education and training.

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Part 5 Evaluation of draft QA Procedures submitted by the Special Schools Sector

The following is the Panel's findings following evaluation of the Special Schools Sector's quality assurance procedures against QQI's Core Statutory Quality Assurance Guidelines (April 2016).

Sections 1-11 of the report follows the structure and referencing of the Core QA Guidelines.

1 GOVERNANCE AND MANAGEMENT OF QUALITY

Panel Findings:

Following a thorough evaluation of the original and revised QA documentation, including the response by the Special Schools Co-operative to the mandatory changes and request for clarification, the Panel is of the view that QQI's requirements under this guideline have been addressed.

Fundamental to any robust quality assurance system is the establishment of an appropriate governance structure "to oversee the education and training, research and related activity of the provider to ensure its quality" and which "enforces separation of responsibilities between those who produce/develop material and those who approve it" (Core Statutory Quality Assurance Guidelines (CSQAG), 2016, Section 1.1, p. 5).

Each of the providers in the Co-operative is accountable to its respective Board of Management, which has a legal and statutory function. With the establishment of the Co-operative, a Quality Board has been instituted as the primary decision-making and approval body within the Co-operative's governance structure to which all members will be accountable in the context of their QQI provision and associated QA procedures.

With the presence of two different decision-making bodies, the Board of Management and the Quality Board, and taking cognisance of the number of providers within the Co-operative, the Panel sought to understand:

- The decision-making authority of each body (the Board of Management and the Quality Board) in the context of a given provider's QQI provision and associated QA procedures. Although the original draft QA Manual included terms of reference for each, these did not sufficiently outline where ultimate decision-making authority lay or how the Co-operative would balance the designated authority of each body.
- How disagreements or conflict between an individual Board of Management and the Quality Board might be resolved (e.g., where a Board of Management was in opposition to an action of the Quality Board). Similarly, the Panel sought to understand how differences of opinion between members of what will be known as the 'Collaborative Hub' — where staff from different providers within the Co-operative can convene to conduct discuss effective practice, share feedback, and identify what has and hasn't worked well on a given programme — would be resolved.



Representatives for the Co-operative first noted that ultimate decision-making authority would have to rest with the individual Boards of Management, as they are the legally accountable bodies for the providers. However, each Board of Management has also signed a letter agreeing that their school will abide by the QA procedures of the Co-operative, recognising the value of the common QA model. Representatives further acknowledged the need to articulate how disagreements or conflict would be resolved, as this had not been fully considered.

The following mandatory changes were identified in respect of this:

Mandatory Change 1

The Special Schools Co-operative must articulate the decision-making authority of the individual Boards of Management versus that of the Quality Board and the application of this authority in relevant processes.

Mandatory Change 2

The Special Schools Co-operative must consider and articulate how it will resolve disagreements or conflict between an individual Board of Management and the Quality Board, or indeed among the members of the Collaborative Hub.

In an effort to address this, the QA Manual was amended to include information about conflict resolution. In the Co-operative's response, the Panel noted the inclusion of the following statement in the revised QA Manual (p. 80), "In the event of a disagreement between the Quality Board and one or more School Boards of Management, the matter will be referred to the NABMSE General Secretary for resolution."

However, the QA Manual did not provide any associated process for the resolution of conflicts or disagreements, nor was there any clear information on who would manage such processes or what the reporting structure would look like. Given the number of providers in the network, it was essential that this be addressed.

The Panel issued a request for additional information and clarification to the Co-operative relating to this; and though much of the matter was subsequently addressed, there remained a slight lack of clarity regarding who is responsible for drafting the report and who ultimately receives the report. The Panel agree that, as a matter of good practice, the Co-operate needed to prepare a report for QQI after a period of 12 months and in this report include confirmation that such reporting responsibilities had been clearly specified (please refer to the end of this section for the full condition of QA approval).

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In evaluating the original QA documentation, the Panel expressed some difficulty in understanding how the individual Boards of Management would be informed of the decisions and actions of the Co-operative. While representatives clarified during the site visit that the QQI Coordinators would be responsible for reporting back to their respective Board of Management (which was also reflected in the draft QA Manual), it was not entirely clear how this reporting would occur in practice (e.g., through a report, a meeting, an email, etc.).

The following mandatory change was identified in respect of this:

Mandatory Change 3

The quality assurance documentation must clearly articulate how different information is reported back to the individual Boards of Management.

This was subsequently addressed through amendment of the QA Manual to highlight the reporting role of school principals to their respective Boards of Management.

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In the context of Mandatory Change 2 above, reference is made to a 'Collaborative Hub' which the Co-operative views as an important forum for member providers to share feedback, findings, and effective practice. However, this Collaborative Hub was not specifically mentioned in the original draft QA Manual presented to the Panel. Rather, it was the Programme Development Team (which was mentioned and had terms of reference) which the Co-operative intended to transition into the Collaborative Hub, as it feels this title better reflects its purpose.

The Panel recognised why the Co-operative wished to make this change and highlighted the importance of updating this across the QA documentation. The Co-operative also needed to consider whether the Collaborative Hub, once changed, would have any additional functions. If so, these needed to be articulated.

The following mandatory change has been identified in respect of this:

Mandatory Change 4

The Special Schools Co-operative must ensure that the transition of the Programme Development Team to the Collaborative Hub is updated across all documentation and that all terminology must be consistent across all documentation.

Between the original site visit and the first reconvene meeting, the Quality Board decided to change the planned renaming from the Collaborative Hub to the Programme Development and Review Group (PDRG). Associated terms of reference for the group were included in the Co-operative's resubmission; however, the Panel found these underdeveloped, providing only limited information on the group's responsibilities relating to programme development and review. In combination with the



findings of mandatory change 5, the Panel issued the Co-operative with a request for additional information and clarification. While the matter was mostly addressed in the Co-operative's response, the below condition of QA approval contains a sub-condition relevant to this.

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Much of the first session of the site visit was spent exploring the functions of different groups and units at both school level and Co-operative level. The Panel had noted that the Programme Development Team (later renamed the Programme Development and Review Group) had assigned responsibility for the development of common policies, procedures and guidelines, while the Quality Board had responsibility for monitoring and amending the Co-operative's proposed policies and procedures, and approving any changes. The Panel queried the roles of each group in the context of policy development, with representatives clarifying that the PDRG would be discursive and would evaluate how policies and procedures are operating and make recommendations to the Quality Board for formal adoption. This would reflect the PDRG's status as part of the Quality Board, rather than a unit of governance in its own right.

Given the changes that were set to occur within the Co-operative over the coming months (such as the transition of the Programme Development Team to the PDRG, and the changes arising from the Panel's evaluation), the Panel highlighted the importance of ensuring that the documented roles and responsibilities, and reporting responsibilities, for all groups/units are correct and reflect practice.

The following mandatory change was identified in respect of this:

Mandatory Change 5

The Special Schools Co-operative must ensure that the roles and responsibilities, including reporting responsibilities, for all groups/units are relevant to their given function and documented accordingly.

In evaluating the revised documentation, the Panel found some discrepancies between the terms of reference of internal groups and their role in given processes. For example, a process may make reference to a particular group's involvement, but this role may not be reflected in that group's terms of reference. According to the programme development process, the Quality Board is responsible for accepting a programme for use in the schools, but this was not articulated in the Quality Board's terms of reference. Similarly, the terms of reference for the Programme Development and Review Group provided little to no detail on the group's responsibilities relating to programme development and review, only that the group would consider stakeholder feedback and submit any outcomes to the Quality Board (the receipt of which was, in turn, not articulated in the Quality Board's terms of reference).

In addressing this, the Panel was of the view that the terms of reference would benefit from a specific heading on reporting responsibilities. This would provide greater clarity on inter-organisational



communication and reporting structures. A request for additional information was issued to the Co-operative, in response to which reporting responsibilities were added to the terms of reference for each group.

While the Panel's concerns had been overall addressed, there was consensus that further clarity around decision-making and reporting timelines would be of importance, and that confirmation of this should be included in the Co-operative's report after 12 months.

The following condition of QA approval has been identified in respect of this and the context under mandatory changes 1 and 2 above:

Condition 1

After a period of 12 months, the Special Schools Co-operative must prepare a report for QQI detailing the implementation of its QA systems throughout its inaugural year. This report must include, but should not be limited to, information about the integration of the QA system across the providers in the Co-operative, the effectiveness of the QA system and its policies and procedures, what gaps have been identified in the QA system during this time, and how these gaps have or are intended to be addressed.

In addition to the above, the report must:

- confirm that reporting on conflict resolution (between a Board of Management and the Quality Board, facilitated by the NAMBSE General Secretary) is clearly articulated in the QA Manual, clearly specifying who drafts the report and who receives the report.
- confirm that **specific named roles** of those involved at decision-making junctions are clearly identified in the QA Manual.
- confirm that reporting timelines for all internal units/groups (including the QQI Team reporting to the Board of Management) are clearly articulated.
- Include appropriate evidence of the above.



2 DOCUMENTED APPROACH TO QUALITY ASSURANCE

Panel Findings:

Following a thorough evaluation of the original and revised QA documentation, including the response by the Special Schools Co-operative to the mandatory changes and request for clarification, the Panel is of the view that QQI's requirements under this guideline have been addressed.

A provider's quality assurance system must be fully documented in terms of "robust, documented policies and associated procedures for the assurance of the quality and standards of provision" (CSQAG, 2016, Section 2.1, p. 9).

The Panel recognises that the establishment of the Co-operative is a very new endeavour and will introduce important changes to the way each provider operates. The Panel also appreciates the challenges of coordinating such an operation. The foundations of the Co-operative are built upon shared agreement of a common QA model which is documented in the QA Manual. A comprehensive QA Manual will thus prove instrumental in the effective operation and management of the Co-operative as a whole.

However, the Panel was of the view that the original draft QA Manual and most of the policies and procedures within it were insufficiently detailed. For example:

- The programme development and approval process was primarily articulated through an inadequately detailed, and sometimes inconsistent, flowchart. There was no accompanying procedure which would guide (in a step-by-step manner) a provider through the process of developing a programme and having that programme approved by the relevant decision-making groups/units.
- The admissions policy was a single overarching set of bullet points with no accompanying procedures relevant to each school.
- The assessment framework was a single page in length, with virtually no usable policies or procedures for internal verification, external authentication, the security and integrity of the assessment process, results approval, or appeals.

The Panel emphasised that these were simply examples of a wider issue and that the QA Manual (and **all** associated policies and procedures) needed to be comprehensively documented and in a manner which reflects practice.

The following mandatory change was identified in respect of this:

Mandatory Change 6



The Special Schools Co-operative must conduct a comprehensive review of its quality assurance system and documentation to ensure that **all** processes are documented in terms of policies and associated procedures, reflect current practice, and are aligned with QQI's guidelines (particularly QQI's Core Statutory Quality Assurance Guidelines). Such procedures should provide a 'step-by-step' guide to a given process.

On the whole, the Panel is satisfied that the Co-operative has made good progress regarding this mandatory change, and many policies and procedures have either been developed or revised, including: programme development, admissions, transfer and progression, recognition of prior learning, staff development, and assessment.

However, at the first reconvene meeting, the Panel continued to identify shortcomings and limitations in some processes. Although some of these were subsequently addressed in response to the Panel's request for further information, gaps remain. It is therefore crucial for the Co-operative to carefully consider and implement the conditions of QA approval identified by the Panel at the conclusion of the second reconvene meeting,

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Due to the absence of information relating to results approval, the Panel spent some time during the site visit discussing this with representatives. The results approval process occurs at provider level and each Results Approval Panel (RAP) has reporting responsibilities to the Board of Management and the Quality Board.

The Panel suggested that Co-operative develop a report template for individual providers to report the deliberations of their Results Approval Panel to the Quality Board, as this would help embed a level of consistency across members providers which could be monitored by the Quality Board.

The following item of specific advice was identified in respect of this:

Specific Advice 1

The Panel recommends that the Special Schools Co-operative develop a report template for individual providers to report the deliberations of the Results Approval Panel to the Quality Board.

Although not mandatory, the Co-operative responded to this committing to the development of a report template.

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3 PROGRAMMES OF EDUCATION AND TRAINING

Panel Findings:

Following a thorough evaluation of the original and revised QA documentation, including the response by the Special Schools Co-operative to the mandatory changes and request for clarification, the Panel is of the view that QQI's requirements under this guideline have been addressed.

The development of new programmes should be conducted systematically, with sufficient time "allowed for the necessary internal and external consultations with stakeholders" and "an evaluation of new programmes by the appropriate internal decision-making structures..." (CSQAG, 2016, Section 3.1, p. 10).

The Co-operative's programme development and approval process was articulated almost entirely through a flowchart (Original draft QA Manual, Figure 2, p. 18) and presented a process in which an idea for a new programme (leading to a QQI award) would be brought in the first instance to the provider's own School QQI Team. This Team would identify the aims and learning outcomes of the programmes, as well as the resources required for its implementation. Following this, a proposal (presumably, though this was not specified) would be brought to the Programme Development Team (soon to become the Collaborative Hub) who would produce the programme material. Following this, the programme and materials would be brought to the Quality Board to review "all aspects of the proposed programme." The programme would be subsequently submitted back to the Programme Development Team/Collaborative Hub and School QQI Team in turn, before the programme is implemented.

The Panel first noted the lack of a documented procedure. While a flowchart or process map is always useful for illustrating the stages of a process, this should not replace a documented procedure altogether. Furthermore, certain stages of the process were not elaborated on in the chart (particularly the latter stages), leaving it unclear as to what would actually happen at those stages.

In addition to this, the Panel noted the apparent absence of the Boards of Management in the flowchart. Given the clarification earlier in the site visit that each provider's Board of Management is the unit of governance with ultimate decision-making authority, their role at the appropriate stages of programme approval should be clear. This is not to say that the Boards of Managements should replace, for example, the Quality Board. Rather, there needed to be separate approval functions given the different perspectives from which the Boards of Management and Quality Board would be reviewing a programme.

The following mandatory change was identified in respect of this:

Mandatory Change 7

The Special Schools Co-operative must review and revise its programme development and approval process to:



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|--|---|
| | <ul style="list-style-type: none">a. Document the various stages of development and approval in terms of step-by-step procedures.b. Clarify the approval role of the Boards of Management. |
|--|---|

Although the Co-operative responded to this change with a view to addressing 7(a) and 7(b), the Panel was of the view that the revised programme development process remained unclear in a number of areas. However, a discussion with provider representatives offered some welcome clarity.

Specifically, the Panel found that the process did not completely reflect the Co-operative's current and intended practice which focuses on the use and modification of pre-existing programmes rather than ground-up development and validation of completely new programmes. The documented process also omitted submission of the programme to QQI for validation, which further compounded the Panel's confusion.

Additionally, the Panel found the role of the PDRG ambiguous and potentially beyond the remit of a typical programme development team. This was due to a statement in Step 11 of the development process that "the PDRG accept the programme for use in the Co-operative school" (QA Manual, p. 26). However, following the discussion with provider representatives, the Panel was of the view that this could be resolved with consideration and clarification of the first issue.

In addressing this, the Panel was also of the view that the PDRG's development and review functions would benefit from being discretely articulated so as to emphasise the importance of each function and to avoid conflation/overlap of information.

In respect of this, the Panel issued a request for additional information and clarification, requiring the Co-operative to:

- a. Articulate its current practice as described to the panel at the reconvene meeting.
- b. Clarify the role of the PDRG in Step 11 of the development process.
- c. Delineate the programme development function **and** programme review function of the PDRG to highlight the importance of each respective function.
- d. Include reference to submission to QQI, so it is clear at what stage validation occurs.

In response to this, the Co-operative submitted additional information which aimed to clarify the role of the PDRG, articulate the programme review process, and include submission to QQI.

Notwithstanding this, the Panel found that despite the additional detail, the development and review processes could still be better delineated, particularly in view of the programmatic review due to take place after approximately 12 months.

The following condition of QA approval has been identified in respect of this:

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Condition 2

In order to highlight the importance of each respective function, the Special Schools Co-operative must more clearly delineate its processes for:

- i. programme review and approval
- ii. programme development and approval

This distinction and clarity will be important as the Special Schools Co-operative approaches its first programmatic review after a period of approximately 12 months.

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QQI guidelines stipulate that “Access policies, admission processes and criteria” must be “established and implemented consistently and in a transparent manner and in accordance with national policies and procedures for Access, transfer and progression (ATP)” (CSQAG, 2016, Section 3.2, p. 11).

Information relating to learner admissions in the original draft QA Manual was limited mainly to provider responsibilities in this area. However, given that each provider would retain individual approval with QQI upon a successful reengagement there was a notable absence of a discrete policy and procedure regarding learner access to QQI awards (as distinct from the general admissions policy to each school) which is relevant to each provider.

Additionally, due to the limited information around learner access and admission, there was no specific reference to learners’ understanding of the English language and how providers will ensure that learners have the capacity to succeed in the award level they intend to study.

The following mandatory change was identified in respect of this:

Mandatory Change 8

The Special Schools Co-operative must ensure that a policy and procedure for access to QQI awards, which is relevant to each provider, is documented in the Quality Assurance Manual.

- a. The Special Schools Co-operative must develop a policy and procedure that ensures that learners’ understanding of the English language reflects the demands and requirements of the award level they are undertaking.

In relation to mandatory change 8, the Panel is overall satisfied with the Co-operative's response, which includes additional information in the QA Manual to articulate access to QQI awards.



In relation to 8(a), the Panel noted the following line in the revised QA Manual (p. 35), "Previous test scores and records of work will indicate what level of English the student may have."

The Panel was of the view that this statement was quite vague in terms of how a learner's language level would be assessed (i.e. whether there is set criteria) and who would conduct the evaluation. In order to ensure fairness and consistency of such assessments, the specific process needed to be more clearly documented.

In response to this, the Co-operative noted that all schools will use the NCCA (National Council for Curriculum and Assessment) EAL (English as an Additional Language) toolkit. Though the Panel has no specific issue with this, it is important that any member of staff undertaking this assessment using the EAL toolkit is appropriately trained to do so.

The following item of specific advice has been identified in respect of this:

Specific Advice 4

As a matter of good practice, the Panel recommends that the Special Schools Co-operative ensure that any member of staff undertaking the EAL assessment using the NCCA toolkit is appropriately and suitably experienced to implement the toolkit as intended.

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The Co-operative's original draft QA Manual stated that "All learners are provided with the opportunity to discuss and identify entry pathways incorporating previous academic achievements in order to ensure recognition of prior certified learning" (Section 3.2, p. 19).

Despite this reference to recognition of prior learning (RPL), the context(s) in which providers would employ RPL were not clearly defined, nor was the Panel able to find any corresponding policy or procedure for the application of RPL. Were this to go unaddressed, it would create an information gap for providers who may find themselves in a position in the future in which they need detailed guidance around RPL. As such, it was important for the Co-operative to articulate how RPL is understood and operated at provider level.

The following mandatory change was identified in respect of this:

Mandatory Change 9

The Special Schools Co-operative must articulate its understanding of recognition of prior learning (RPL) and the application of this.

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In response to this, the QA Manual was updated to include additional detail regarding the Co-operative's approach to RPL. This was discussed with provider representatives at the first reconvene meeting who provided additional clarity that RPL is in fact only operated in relation to access. However, this was not adequately reflected in the QA Manual, with some revision needed to more accurately articulate RPL as it is practiced by the schools in the Co-operative.

A request for clarification was issued as a result of this which was subsequently satisfactorily responded to.

4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT

Panel

The Panel is satisfied that QQI's requirements under this guideline have been addressed.

The Boards of Management of each provider are the legal employers of provider staff and manage the recruitment process in accordance with Department of Education guidelines and circulars. New staff induction processes are similarly well-established and include set training, assignment of a mentor, and facilitating the Droichead programme for newly qualified teachers.

Wider staff communication is facilitated through channels such as meetings, shared digital platforms, newsletters, and noticeboards.

During the site visit, the Panel explored the opportunities available to staff in terms of continuing professional development (CPD). Representatives first noted that a budget is in place in each provider for staff development and that financing can be requested from the Board of Management where relevant development opportunities arise (e.g., sign language, wellbeing, subject-specific training). This is in addition to essential training identified by individual Boards of Management which all staff must undertake.

In line with mandatory change 6, the Panel advised the Co-operative to expand upon the 'Staff Development' section in the original draft QA Manual to include some of the good practice discussed during the site visit. This was subsequently addressed within the Co-operative's response to mandatory change 6.

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5 TEACHING AND LEARNING

Panel Findings:

The Panel is satisfied that QQI's requirements under this guideline have been addressed.

As noted under Staff Recruitment, Management and Development, opportunities for professional development in subject-specific areas (e.g., around teaching, learning and assessment) are available to staff in order to remain up to date with national and international effective practice. The draft QA Manual also notes that NABMSE "liaises with the primary and post-primary management bodies, with the DES (Department of Education), the NCSE (National Council for Special Education), the CSL (Centre for School Leadership), and with OIDE, to remain up to date with new developments in education and ensure that training is available for special schools" (Section 5.2, p. 25).

Two of the major benefits of establishing a Co-operative such as this are the opportunities around the sharing of practice and the consistency of standards. Both of these can be realised through communities of practice, which the Panel believes would fit in well as an extension of the Collaborative Hub.

The following item of specific advice was identified in respect of this:

Specific Advice 2

The Panel recommends that the Special Schools Co-operative establish communities of practice in order to share effective practice.

Although not mandatory, the Co-operative responded to this noting that "Development of a Learner Community/Community of Practice will be a core part of the work of the Co-operative" (Revised QA Manual, 10.1).

**6 ASSESSMENT OF LEARNERS****Panel Findings:**

Following a thorough evaluation of the original and revised QA documentation, including the response by the Special Schools Co-operative to the mandatory changes and request for clarification, the Panel is of the view that QQI's requirements under this guideline have been addressed.

A provider's assessment framework should establish "the provider's philosophy on, and approach to, the assessment of learners in both formal assessments (where it leads to certification) and in-house assessment" (CSQAG, 2016, Section 6.1, p. 15).

On evaluation of the Co-operative's assessment policies and procedures, the Panel found these to be significantly limited in scope and detail. Indeed, assessment of learners was only a single page in length in the original QA Manual, with areas such as results approval, feedback to learners, and reviews, rechecks and appeals being relegated to one or two summary sentences. Even external authentication, which was the most developed area on the page, was inadequately detailed.

Given the nature of assessment, robust procedures which are fair, consistent and transparent are essential. The Co-operative therefore needed to develop and implement comprehensive policies and procedures in relation to: the role of assessors, how schools and the Co-operative would maintain the security and integrity of the assessment process, the role of the internal verifier, the recruitment and selection process for External Authenticators (EAs) and the role of the EA in ensuring the fair and consistent assessment of learners, the results approval process and the reporting responsibilities of the Results Approval Panel (RAP), and the assessment appeals process. In addressing these areas, the Co-operative was advised to delineate assessment processes pertaining to levels 1 to 3 versus those pertaining to level 4, given the differences between these. The Co-operative was also advised to ensure it takes due consideration of QQI's Assessment and Standards (Revised 2013) and QQI's Quality Assuring Assessment Guidelines for Providers (Revised 2013, 2018).

The following mandatory change was identified in respect of this:

Mandatory Change 10

The Special Schools Co-operative must develop comprehensive assessment policies and procedures.

As part of these, the Special Schools Co-operative must articulate:

- a. The role of assessors.
- b. How it maintains the security and integrity of the assessment process.
- c. The role of the internal verifier.
- d. The recruitment and selection process for External Authenticators.



- e. The core function of the External Authenticator in ensuring the fair and consistent assessment of learners.
- f. The results approval process and the reporting responsibilities of the Results Approval Panel (RAP).
- g. Its assessment appeals process (for grades allocated at level 4 learners).

The Co-operative's response to this mandatory change demonstrated a significant development of its assessment framework from what it had originally presented. This work included information about assessor, internal verification, external authentication, results approval, and appeals. The Panel recognised the positive progress made in relation to assessment processes.

However, it was highlighted that these are not the only areas discussed in QQI's Quality Assuring Assessment Guidelines for Providers Revised 2013 (Version 2, Revised 2018). The Panel was of the view that the robustness of the Co-operative's assessment framework would be significantly enhanced with additional detail given to areas such as assessment security, academic integrity, grading, and certification. The Panel further advised that the Co-operative consult QQI's assessment guidelines for specific criteria to cover.

In response to this, the Co-operative included information related to the above areas among the assessment processes in its QA Manual. However, the Panel noted that these relied heavily on the descriptions documented in QQI's guidelines and therefore did not appear sufficiently provider owned. In view of this, the Panel has identified the following condition of QA approval requiring the Co-operative to revise and expand its assessment processes and ensure that these are relevant to the unique context of the Special Schools Co-operative:

Condition 3

The Special Schools Co-operative must expand the detail in its assessment processes to include other areas addressed in QQI's guidelines, including assessment security, assessment malpractice, grading, certification, etc.

Processes developed and updated in respect of this condition should be informed by QQI's guidelines but must be provider-owned and relevant to the unique context of the Special Schools Co-operative.

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Standard practice, up until the Panel's evaluation, was for each provider to engage its own External Authenticator(s). With the establishment of the Co-operative, however, the Panel was of the view that there may be significant benefit in the Co-operative establishing a pool of External Authenticators which would be accessible to all members. Furthermore, the Co-operative was advised

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to consider devising or sourcing its own training for External Authenticators as a means of ensuring consistency of the authentication process across providers.

The following items of specific advice was identified in respect of this:

Specific Advice 3

The Panel recommends that the Special Schools Co-operative establish a pool of External Authenticators (EAs) that is accessible to all members of the Co-operative.

- a. The Panel further recommends that the Co-operative considers devising/sourcing its own training for EAs as a means of ensuring consistency across providers.

Although not mandatory, the Co-operative responded to this advice noting that it has committed to compiling a list of EAs and that it will consider developing its own training for EAs.

7 SUPPORT FOR LEARNERS

Panel Findings:

The Panel is satisfied that QQI's requirements under this guideline have been addressed.

The Panel recognises the important work of the providers in the Co-operative and the dedication of staff to ensuring learners are supported wherever and however they may need. This extends from their academic goals to their social development and wellbeing. A team of Special Needs Assistants (SNAs) in each provider work directly with learners to provide in-classroom support and learners can also avail of assistive technology where they may require it. Social, Personal, Health Education (SPHE) and Relationships and Sexuality Education (RSE) are now mandated subjects by the Department of Education and are allocated set hours each week.

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8 INFORMATION AND DATA MANAGEMENT

Panel Findings:

Following a thorough evaluation of the original and revised QA documentation, including the response by the Special Schools Co-operative to the mandatory changes and request for clarification, the Panel is of the view that QQI's requirements under this guideline have been addressed.

Given the nature of their work, the providers in the Co-operative are required to have stringent policies in place around data protection which are aligned with relevant data protection legislation, including the General Data Protection Regulation (GDPR).

During the site visit, the Panel spent some time discussing the data retention practices of different providers, specifically in relation to assessment evidence. It was found that while some providers were similar in practice, others had their own standard operating procedures which involved holding onto assessment evidence longer than necessary. The Panel highlighted that assessment evidence is considered personal data and should therefore be returned to the learner or securely destroyed after the assessment process is complete. With the establishment of the Co-operative, the Panel advised that all providers take a consistent approach to such practice.

The following mandatory change was identified in respect of this:

Mandatory Change 11

The Special Schools Co-operative must ensure that all providers take a consistent approach to the retention of assessment evidence in line with current Data Protection legislation.

Although the Co-operative had indicated having addressed this in its Cover Memo, the Panel observed a statement in the retention schedule that the results of in-school tests and end of terms reports would be held "indefinitely" yet disposed of through confidential shredding.

Representatives for the Co-operative clarified that this was an error and that assessment data is disposed of following the assessment process. Accordingly, the Panel requested that this be reflected in the retention schedule.

This matter was subsequently addressed through revision of the retention schedule.

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9 PUBLIC INFORMATION AND COMMUNICATION

Panel Findings:

Following a thorough evaluation of the original and revised QA documentation, including the response by the Special Schools Co-operative to the mandatory changes and request for clarification, the Panel is of the view that QQI's requirements under this guideline have been addressed.

In accordance with QQI guidelines, it is important that "necessary information is available to staff and the public as required in usable formats" (CSQAG, 2016, Section 2.1, p. 9) and "It is clear how staff members are kept informed of issues relating to their programme areas" (CSQAG, 2016, Section 4.2, p. 13).

While the providers in the Co-operative had established procedures for staff communication (as outlined under Staff Recruitment, Management and Development), the Panel was unable to find specific details about how information relating to the Co-operative's QA system would be communicated to relevant staff. This connected to a wider issue observed by the Panel regarding communication and dissemination of information relating to the Co-operative (previously discussed in under Governance and Management of Quality, in the context of Mandatory Change 3).

The following mandatory change was identified in respect of this:

Mandatory Change 12

The Special Schools Co-operative must implement a system for the communication of information relating to the Co-operative's QA system (and updates thereof) to relevant staff.

This was subsequently addressed through an amendment to Section 9 of the QA Manual to describe how information will be shared with members of the Co-operative.

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In addition to communications to relevant staff, information to and for the public relating to the Co-operative must be quality assured for accuracy and consistency prior to publication, and this is a matter which is beyond the remit of any one provider to do alone. However, the Panel was unable to find a specific procedure for this in the original draft QA Manual, nor could the Panel identify which groups or personnel would be involved.

The following mandatory change was identified in respect of this:

Mandatory Change 13



The Special Schools Co-operative must develop a process for quality assuring information relating to the Co-operative before it is published.

In response to this, the providers included additional information in its QA Manual about the types of information which will be shared publicly. In evaluating the documented approach to quality assuring public information, the Panel found it unclear who would have final approval authority on information which is due to be published. For example, if a school in the Co-operative wished to update their website with certain information, who would have responsibility for quality assuring the accuracy of this information?

Further, all QQI-approved providers are required to publish their quality assurance procedures and information related to their QQI provision. For consistency within the Co-operative, the Panel was of the view that the providers' QA Manual should state the minimum information which all schools are required to publish in relation to their QQI provision.

The Panel issued the Co-operative with a request for additional information, specifically to clarify:

- Who has final approval of information which is due to be published; and
- the minimum information which all schools are required to publish in relation to their QQI provision.

Both were subsequently addressed via revisions to Section 9 of the QA Manual.

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Once information has been quality assured in accordance with established processes (which in turn would be aligned with QQI's guidelines), it will be important for each provider to publish information on their respective website, and this must be done in a manner that is consistent across the Co-operative so as to minimise any risk of conflicting or outdated information.

The following mandatory change was identified in respect of this:

Mandatory Change 14

The Special Schools Co-operative must ensure that all information relevant to each school's QQI provision is documented and confirm that, once approved, it will be published in a consistent manner on the providers' individual websites.

This was subsequently addressed through a confirmation statement that all relevant information would be published by each provider. As an extension of this, the Panel also suggests that the Co-operative publish the easy-read versions of its documents.

The following item of specific advice has been identified in respect of this:

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Specific Advice 5

The Panel recommends that the Special Schools Co-operative include the easy-read versions of its documents in its publicly available information.

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The Panel is satisfied that QQI's requirements under this guideline have been addressed.

As providers operating under Department of Education guidelines, each provider is engaged with the education community at large and in a way that best fits their own context.

Regarding provider engagement with External Authenticators, this was an area requiring further development in light of the issues identified in the context of Mandatory Change 10 (see Assessment of Learners) and which was later satisfactorily addressed.

It must also be noted that St. Cecilia's Special School is currently a second provider in a collaborative arrangement with Mayo, Sligo and Leitrim Education and Training Board (MSLETB).

11 SELF-EVALUATION, MONITORING AND REVIEW***Panel Findings:***

The Panel is satisfied that QQI's requirements under this guideline have been addressed.

The draft QA Manual outlines the general responsibilities of the Co-operative and the individual providers in relation to self-evaluation, monitoring and review. Broad information is also documented around how these processes are to be facilitated and what kinds of information will be drawn upon (e.g., feedback from stakeholders, programme and assessment data, meetings).

However, it the Co-operative needed to further develop the procedural elements of its self-evaluation, monitoring and review practices, in line with Mandatory Change 6, so that it is clear and instructive to each member provider. This was subsequently satisfactorily addressed in the revised documentation.

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Evaluation of draft QA Procedures - Overall Panel findings

At the conclusion of the original site visit, and following a thorough evaluation of the draft QA documentation, the Panel was of the view that further work was required in order to:

- Bring the Co-operative's QA procedures in line with QQI guidelines.
- Document and strengthen the quality of the QA policies and procedures which underpin the work of the Co-operative.
- Ensure a more robust system of governance is in place with clearly established reporting lines.
- Establish a more comprehensive assessment framework.
- Institute clear channels of communication to all staff and other relevant stakeholders.

The breadth and depth of the work which needed to be done was significant, but the Panel recognised the Co-operative as a source of strength for the individual providers. While many of the Panel's concerns were subsequently addressed in the revised documentation, some important issues remained unresolved. The Panel thus issued a request for additional information and clarification which helped address many of these issues. Although some matters still need further action, the Panel agreed that these could be resolved via conditions of QA approval.

In view of this, the Panel is pleased to make a revised recommendation to QQI to approve the Special Schools Co-operative's draft QA procedures with conditions.

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Part 6 Conditions of QA Approval

6.1 Conditions of QA Approval

With regard to the Special Schools Sector's applications for reengagement with their current scope of provision

1. After a period of 12 months, the Special Schools Co-operative must prepare a report for QQI detailing the implementation of its QA systems throughout its inaugural year. This report must include, but should not be limited to, information about the integration of the QA system across the providers in the Co-operative, the effectiveness of the QA system and its policies and procedures, what gaps have been identified in the QA system during this time, and how these gaps have or are intended to be addressed.

In addition to the above, the report must:

- confirm that reporting on conflict resolution (between a Board of Management and the Quality Board, facilitated by the NAMBSE General Secretary) is clearly articulated in the QA Manual, clearly specifying who drafts the report and who receives the report.
 - confirm that **specific named roles** of those involved at decision-making junctures are clearly identified in the QA Manual.
 - confirm that reporting timelines for all internal units/groups (including the QQI Team reporting to the Board of Management) are clearly articulated.
 - include appropriate evidence of the above.
2. In order to highlight the importance of each respective function, the Special Schools Co-operative must more clearly delineate its processes for:
 - i. programme review and approval
 - ii. programme development and approval

This distinction and clarity will be important as the Special Schools Co-operative approaches its first programmatic review after a period of approximately 12 months.

3. The Special Schools Co-operative must expand the detail in its assessment processes to include other areas addressed in QQI's guidelines, including assessment security, assessment malpractice, grading, certification, etc.

Processes developed and updated in respect of this condition should be informed by QQI's



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guidelines but must be provider-owned and relevant to the unique context of the Special Schools Co-operative.

With regard to the Special Schools Sector's applications for an extension of scope to include delivery of programmes at higher / lower levels on the National Framework of Qualifications (NFQ)

No conditions have been identified.

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Part 7 Mandatory Changes to QA Procedures and Specific Advice

7.1 Mandatory Changes

With regard to the Special Schools Sector's applications for reengagement with their current scope of provision

Governance and Management of Quality

1. The Special Schools Co-operative must articulate the decision-making authority of the individual Boards of Management versus that of the Quality Board and the application of this authority in relevant processes.
2. The Special Schools Co-operative must consider and articulate how it will resolve disagreements or conflicts between an individual Board of Management and the Quality Board, or indeed among the members of the Collaborative Hub.
3. The quality assurance documentation must clearly articulate how different information is reported back to the individual Boards of Management.
4. The Special Schools Co-operative must ensure that the transition of the Programme Development Team to the Collaborative Hub is updated across all documentation and that all terminology is consistent across all documentation.
5. The Special Schools Co-operative must ensure that the roles and responsibilities, including reporting responsibilities, for all groups/units are relevant to their given function and documented accordingly.

Documented Approach to Quality Assurance

6. The Special Schools Co-operative must conduct a comprehensive review of its quality assurance system and documentation to ensure that **all** processes are documented in terms of policies and associated procedures, reflect current practice, and are aligned with QQI's guidelines (particularly QQI's Core Statutory Quality Assurance Guidelines). Such procedures should provide a 'step-by-step' guide to a given process.

Programmes of Education and Training (including Access, Transfer and Progression)

7. The Special Schools Co-operative must review and revise its programme development and approval process to:



- a. document the various stages of development and approval in terms of step-by-step procedures.
 - b. Clarify the approval role of the Boards of Management.
8. The Special Schools Co-operative must ensure that a policy and procedure for access to QQI awards, which is relevant to each provider, is documented in the Quality Assurance Manual.
 - a. The Special Schools Co-operative must develop a policy and procedures that ensures that learners' understanding of the English language reflects the demands and requirements of the award level they are undertaking.
9. The Special Schools Co-operative must articulate its understanding of Recognition of Prior Learning (RPL) and the application of this.

Assessment of Learners

10. The Special Schools Co-operative must develop comprehensive assessment policies and procedures.

As part of these, the Special Schools Co-operative must articulate:

- a. The role of assessors.
- b. How it maintains the security and integrity of the assessment process.
- c. The role of the internal verifier.
- d. The recruitment and selection process for External Authenticators.
- e. The core function of the External Authenticator in ensuring the fair and consistent assessment of learners.
- f. The results approval process and the reporting responsibilities of the Results Approval Panel (RAP).
- g. Its assessment appeals process (for grades allocated at level 4 learners).

Information and Data Management

11. The Special Schools Co-operative must ensure that all schools take a consistent approach to the retention of assessment evidence in line with current Data Protection legislation.

Public Information and Communication

12. The Special Schools Co-operative must implement a system for the communication of information relating to the Co-operative's QA system (and updates thereof) to relevant staff.

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13. The Special Schools Co-operative must develop a process for quality assuring information relating to the Co-operative before it is published.

14. The Special Schools Co-operative must ensure that all information relevant to each provider's QQI provision is documented and confirmed that, once approved, it will be published in a consistent manner on the providers' individual websites.

With regard to the Special Schools Sector's applications for an extension of scope to include delivery of programmes at higher / lower levels on the National Framework of Qualifications (NFQ).
None.

7.2 Specific Advice

The following items of specific advice were identified at the conclusion of the original site visit:

1. The Panel recommends that the Special Schools Co-operative develop a report template for individual providers to report the deliberations of the Results Approval Panel to the Quality Board.
2. The Panel recommends that the Special Schools Co-operative establish communities of practice in order to share effective practice.
3. The Panel recommends that the Special Schools Co-operative establish a pool of External Authenticators (EAs) that is accessible to all members of the Co-operative.
 - a. The Panel further recommends that the Co-operative considers devising/sourcing its own training for EAs as a means of ensuring consistency across providers.

The following items of specific advice were identified at the conclusion of the Panel's reconvene meeting:

4. As a matter of good practice, the Panel recommends that the Special Schools Co-operative ensure that any member of staff undertaking the EAL assessment using the NCCA toolkit is appropriately and suitably experienced to implement the toolkit as intended.
5. The Panel recommends that the Special Schools Co-operative include the easy-read versions of its documents in its publicly available information.

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Provider	NFQ Level(s) – min and max	Award Class(es)	Discipline areas	Mode of Delivery
Catherine McAuley Special School	1 to 3	Major, Minor	Numeracy; Literacy; IT; Life Skills; Work Experience	Full-time, face-to-face only
Mid West School for the Deaf	3 to 4	Major	General Learning	Full-time, face-to-face only
Our Lady of Fatima Special School	3	Major, Minor	Personal Skills and Development; Arts and Humanities; Administration and Law	Full-time and part-time, face-to-face only
Saint Augustine's Special School	1 to 3	Major	Arts and Humanities	Full-time and part-time, face-to-face only
Scoil Chiaráin	2 to 3	Major, Minor	General Education	Full-time, face-to-face only
St. Anne's School (Ennis)	1 to 3	Minor	Art; Maths; Woodwork; Home Economics; English; Music	Full-time, face-to-face only
St. Anne's Special School (The Curragh)	1 to 2	Major, Minor	Personal Skills	Part-time, face-to-face only
St. Brigid's Special School (Dundalk)	2 to 3	Major	Arts and Humanities; Business, Administration and Law; Personal Skills and Development	Full-time, face-to-face only
St. Brigid's Special School (Mullingar)	1 to 3	Major, Minor	General Learning	Full-time, face-to-face only



St. Cecilia's School	1 to 2	Major, Minor	Communication; General Learning	Full-time, face-to-face only
St. Francis Special School	1 to 2	Major, Minor	General Learning; Communication; Personal and Interpersonal Skills; Computer Literacy	Full-time, face-to-face only
St. Hilda's Special School	1 to 3	Major Minor	Arts and Humanities; Personal Skills and Development	Full-time, face-to-face only
St. Ita's and St. Joseph's	1 to 3	Major	Literacy; Numeracy; Information Communication Technology (ICT); Daily Living Skills	Full-time, face-to-face only
St. Ita's Special School	1 to 3	Major, Minor	General Learning; Life Skills	Full-time, face-to-face only
St. Laserian's School	1 to 3	Major	Personal Skills; General Learning; Employability Skills	Full-time, face-to-face only
St. Michael's (Castlerea)	3	Major, Minor	Information Technology (IT); General Learning	Part-time, face-to-face only
St. Michael's Special School (Dublin)	3	Major	General Learning; Communication; Numeracy; Computer Literacy; Music Appreciation; Craft Ceramics; Art and Design; Personal Effectiveness; Health and Fitness; Craft Woodwork; Container Gardening;	Full-time, face-to-face only

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			Nutrition and Healthy Options	
St. Patrick's Special School	1	Major	General Learning	Full-time, face-to-face only
St. Ultan's Special School	2 to 3	Major	Arts & Humanities; Personal Skills and Development	Full-time, face-to-face only
Scoil Chormaic Special School	1 to 3	Major	General Learning; Communication	Full-time, face-to-face only



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Part 9 Approval by Chair of the Panel

This report of the Panel is approved and submitted to QQI for its decision on the approval of the draft Quality Assurance Procedures of the Special Schools Co-operative.

Name:

Date: 21.05.2024

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

Document

Application Forms
Cover Memos
Financial Documentation
Gap Analysis*
Insurance Documentation
Letters of Commitment (to adopt the common QA model)
Quality Assurance Manual*
Revised Documentation
Statutory Declarations
Tax Clearance Certification

* All documents except the Gap Analysis and QA Manual are individual to each provider. This is because each provider will retain an individual relationship with QQI upon successfully completing the reengagement process. However, as the QA system is an agreed 'common' model, there is only one Gap Analysis and QA Manual for the Co-operative.

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Name	Role/Position
Eileen O'Rourke	General Secretary, NABMSE
Rose-Marie Flanagan	QQI Coordinator, St. Anne's School (Ennis)
Aine Fingleton	QQI Coordinator, St. Anne's Special School (The Curragh)
Mary Maher	Specialist Subject Teacher, St. Anne's Special School (The Curragh)
Maria Allen	Principal, Mid West School for the Deaf
Roisin Mercier	QQI Coordinator, Mid West School for the Deaf
Greg Browne	Principal, Catherine McAuley Special School & NABMSE QQI Team
Trevor Delahunty	QQI Coordinator, Catherine McAuley Special School
Helena Sweeney	Deputy Principal, Scoil Chormaic
Alison O'Neill	QQI Coordinator, Scoil Chiaráin
Margaret O'Riordan	Deputy Principal, St. Michael's Special School (Dublin)
Éilis Dillon	Principal, St. Cecilia's Special School & NABMSE QQI Team
David O'Brien	Principal, St. Ultan's Special School
Judith Jennings	QQI Coordinator, St. Brigid's Special School (Mullingar)
John Moran	Principal, St. Francis Special School
Kevin Johnson	QQI Coordinator
Caroline Morrissey	Assistant Principal, St. Ita's and St. Joseph's
Brigid Dunphy	Deputy Principal, St. Laserian's School
Dr Rory O'Sullivan	External QA Advisor on Quality Board

Appendix: Provider response to the Reengagement Panel Report



NABMSE, Kildare Education Centre,
Friary Road, Kildare Town, Co. Kildare
Tel: 045 533753
Email: info@nabmse.ie
Web: www.nabmse.ie

Programme Awards and Executive Committee,
QQI
27th May 2024

Dear Sirs,

We write to confirm that NABMSE and its schools network listed below accept the Panel's recommendations and are willing to address the conditions of the QA approval within the timeframe agreed with QQI.

1. **Catherine McAuley Special School - Roll #18692I**
Ashbourne Avenue, South Circular Road, Limerick, V94 AW98
2. **Mid West School for the Deaf - Roll #19719H**
Childer's Road, Rossbrien, Limerick, V94 X7WE
3. **Our Lady of Fatima Special School – Roll #19266T**
Carrigeen Street, Wexford, Y35 HF83
4. **Saint Augustine's Special School – Roll #18499O**
Obelisk Park, Carysfort Avenue, Blackrock, Co. Dublin, A94 X8K7
5. **Scoil Chiaráin – Roll #19325J**
St. Canice's Road, Glasnevin, Dublin 11, D11 VK64
6. **St. Anne's School (Ennis) – Roll #19414I**
St. Senan's Road, Corrovorrin, Ennis, Co. Clare, V95 YY26
7. **St. Anne's Special School (The Curragh) – Roll #19277B**
Ballymany Cross, The Curragh, Co. Kildare, R56 VH67
8. **St. Brigid's Special School (Dundalk) – Roll #18772G**
Ard Easmuinn, Dundalk, Co. Louth, A91 YP20
9. **St. Brigid's Special School (Mullingar) – Roll #19792R**
Harbour Street, Mullingar, Westmeath, N91 V6R9
10. **St. Cecilia's School – Roll #19206B**
Cregg, Sligo, F91 WK22
11. **St. Francis Special School – Roll #19337Q**
Borris Road, Portlaoise, Co. Laois, R32 DN24
12. **St. Hilda's Special School – Roll #19261J**
Grace Park Road, Athlone, Co. Westmeath, N37 YR62

13. **St. Ita's and St. Joseph's – Roll #19376D**
Balloonagh, Tralee, Co. Kerry, V92 F685
14. **St. Ita's Special School – Roll #18936K**
Crushrod Avenue, Drogheda, Co. Louth, A92 VO22
15. **St. Laserian's School – Roll #19315G**
Dublin Road, Carlow, R93 N704
16. **St. Michael's NS (Castlerea) – Roll #19789F**
Roselawn Drive, Castlerea, Co. Roscommon, F45 TR63
17. **St. Michael's Holy Angels Special School - Roll #17971H**
Holy Angels, Glenmaroon, Chapelizod, Dublin 20, D20 A072
18. **St. Patrick's Special School – Roll #19240B**
Drumgoold, Enniscorthy, Co. Wexford, Y21 Y9W0
19. **St. Ultan's Special School – Roll #19216E**
Flowerhill, Navan, Co. Meath, C15 HX60
20. **Scoil Chormaic Special School – Roll #19230V**
Monastery House, Golden Road, Cashel, Co. Tipperary, E25 YW63

Yours sincerely,



Dr. Rory O'Sullivan
Independent Chair of NABMSE Quality Board



Patricia Harrington
Chairperson, NABMSE EC