



**QQI**

Quality and Qualifications Ireland  
Dearbhú Cáilíochta agus Cáilíochtaí Éireann

## Reengagement Panel Report

### Assessment of Capacity and Approval of QA Procedures

#### Part 1 Details of provider

##### 1.1 Applicant Provider

Registered Business/Trading Name:	SQT Training Ltd
Address:	Callan Centre, National Technology Park, Limerick
Date of Application:	
Date of resubmission of application:	
Date of evaluation:	
Date of site visit (if applicable):	May 24 <sup>th</sup> 2019
Date of recommendation to the Programmes and Awards Executive Committee:	Sept 12 <sup>th</sup> 2019



## 1.2 Profile of provider

SQT, based in Limerick, was founded in 1989, and has to date delivered training programmes to over 70,000 learners. In 2018 6,191 learners were registered on SQT programmes, and of these 671 (11%) were registered on QQI validated programmes.

SQT gained QA approval from FETAC in 2007, and HETAC in 2008. The provider serves both the public and private sectors, and delivers all its programmes off-site, to adult learners, many of whom are in full-time employment. The focus of SQT's learners is typically career advancement or development as opposed to job seeking. In many cases the learners are sponsored by their employers, and learning activities will involve solving issues specific to their industry or business. Programmes open to the public are typically delivered in hotel venues, while in-house programme delivery typically utilizes a company's own training location and facilities.

SQT offers training (accredited and non-accredited) that stretches across 12 subject areas. Within this, the current scope of provision for its QQI validated programmes (Minor and Special Purpose awards from levels 5 to 8) is as follows:

1. Lean Six Sigma (4 HET Special Purpose awards)
2. Food Safety (3 FET Special Purpose awards)
3. Leadership & Personal Development (1 Minor and 2 Special Purpose awards)

SQT's programmes are typically short in duration and delivered on demand. The provider has a constant intake; in 2018 6,129 learners were distributed across 542 learner cohorts. Class sizes are small and this enables the provider to operate a flexible delivery model, and facilitate individual mentoring practices as an aspect of learning and teaching. The mix of courses offered by the provider can vary from one year to another; these are often responsive to changes in regulation or legislation that could prompt an increase or decrease in demand for individual programmes.



## Part 2 Panel Membership

Name	Role of panel member	Organisation
Michael Hall	Chair	Department of Health and Leisure Studies, Institute of Technology
Maria Kyne	Panel Member	Head of Faculty of Applied Science, Engineering and Technology, Limerick Institute of Technology
David McCarthy	Panel Member	Quality Officer, National College of Ireland
Evelyn Cafferty	Managing Director	About Hygiene, Further Education Provider
Catherine Peck	Report Writer	Education Consultant



## Part 3 Findings of the Panel

### 3.1 Summary Findings

The panel acknowledges the track record and good standing of SQT in the sector, and makes a number of commendations to the provider.

1. The panel commends the openness and collegiate approach of the SQT team in their dealings with the panel throughout the reengagement process.
2. The panel commends the dedication and commitment of the team at SQT to the mission and vision of the organisation.
3. The panel commends the high level of commitment, understanding and ownership among all staff of SQT's QA documentation and processes.
4. The panel commends the appropriateness of the QA to the specific context and mode of operation of SQT. It was clear to the panel that the system is custom-designed to specifically suit SQT programmes, staff and learners.
5. The panel commends the systematic, structured approach to QA as presented by the Director of Quality and Academic Affairs.
6. The panel commends the accessible and clear structure of the QA documentation.

At the conclusion of the site visit, the panel had concerns pertaining to areas of SQT's QA perceived to be readily amendable. These are outlined in detail in section 6.1 of this report and were identified as *proposed mandatory changes*.

However, given that these issues were discrete, and in the panel's view could be addressed quickly by the provider, SQT was granted 6 weeks in which to submit evidence to the panel that the changes identified were satisfactorily addressed.

The panel reconvened on July 12<sup>th</sup>, 2019 to undertake a desk review of the evidence subsequently submitted by SQT. It is the panel's view that SQT has satisfactorily addressed the proposed mandatory changes. The panel consequently recommends that QQI approve SQT's QA procedures.



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

**6 Week Pause in Progress at Time of Report Submission**

	Tick <u>one</u> as appropriate
Approve SQT draft QA procedures	X
Refuse approval of SQT draft QA procedures with mandatory changes set out in Section 6.1 <small>(If this recommendation is accepted by QQI, the provider may make a revised application within six months of the decision)</small>	
Refuse to approve SQT draft QA procedures	



## Part 4 Evaluation of provider capacity

### 4.1 Legal and compliance requirements:

	<b>Criteria</b>	<b>Yes/No/ Partially</b>	<b>Comments</b>
<b>4.1.1(a)</b>	<b>Criterion:</b> <i>Is the applicant an established Legal Entity who has Education and/or Training as a Principal Function?</i>	Yes	SQT is a Private Limited Company, registered in Ireland. The CRO is provided (Application form, p.2).
<b>4.1.2(a)</b>	<b>Criterion:</b> <i>Is the legal entity established in the European Union and does it have a substantial presence in Ireland?</i>	Yes	SQT delivers its programmes within Ireland, and has an established presence here. Since 1989 it has registered over 70,000 learners; over 6,000 learners were registered in 2018.
<b>4.1.3(a)</b>	<b>Criterion:</b> <i>Are any dependencies, collaborations, obligations, parent organisations, and subsidiaries clearly specified?</i>	Yes	The panel is satisfied that the provider's application includes sufficient information with regard to the company structure. The provider is not involved in collaborative provision (Application Form, p. 20).
<b>4.1.4(a)</b>	<b>Criterion:</b> <i>Are any third-party relationships and partnerships compatible with the scope of access sought?</i>	Yes	SQT currently has third-party relationships with partners who are subject matter experts (referred to as Training Partners in the provider's application documentation). The provider's application form specifies three Training Partners involved in the delivery of QQI accredited programmes (p. 4). Legal agreements with those partners have been developed in consultation with QQI, and a Pro forma agreement is provided in Appendix J of the provider's documentation. The partnership model is documented in the provider's QA documentation (QAP1-2, p.18).
<b>4.1.5(a)</b>	<b>Criterion:</b> <i>Are the applicable regulations and legislation complied with in all jurisdictions where it operates?</i>	Yes	The provider has submitted documentation reflective of compliance with relevant regulation and legislation, and signed a statutory



			declaration confirming this documentation to be true and complete (Application form, p.16)
<b>4.1.6(a)</b>	<b>Criterion:</b> <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 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>	Yes	SQT has a history of good standing within the qualifications, education and training systems in Ireland. Following incorporation in 2001 the provider attained NEBOSH accreditation in 2005. SQT gained accreditation with FETAC in 2007, and HETAC in 2008. The provider undertook programmatic review in 2011 and institutional review in 2012. SQT currently delivers a range of QQI validated programmes.

### Findings

The panel notes that SQT has been operating with an established relationship with FETAC since 2007 and HETAC since 2008. The provider has an established QA audit process, and states in its application that all policies and procedures have been audited against relevant legislation as part of the re-engagement process (p. 24). Further, SQT has submitted comprehensive documentation with its application form for QQI re-engagement. This documentation is indicative of legal and compliance requirements being met.

During the site visit, the panel's inquiries sought further detail relevant to criterion 4.1.4(a); the provider's relationship with the three Training Partners involved in the delivery of QQI accredited programmes. Specifically, the panel explored how the legal agreements (developed in consultation with QQI) between SQT and its Training Partners are realized in practice. These legal agreements devolve authority to SQT to monitor and control Training Partner personnel in connection with the provision of QQI validated programmes. Representatives of Training Partner organisations were in attendance alongside the provider's own staff. Both SQT and the Training Partner representatives in attendance responded directly and with clarity to the panel's inquiries.

Aspects of the relationship between SQT and its Training Partners that are relevant to particular dimensions of QA outlined in QQI's 2016 Core and Sector Specific (Independent/Private) Statutory Quality Assurance Guidelines are discussed in more detail in section 5.4 of this report.

**4.2 Resource, governance and structural requirements:**

	<b>Criteria</b>	<b>Yes/No/ Partially</b>	<b>Comments</b>
4.2.1(a)	<b>Criterion:</b> <i>Does the applicant have a sufficient resource base and is it stable and in good financial standing?</i>	Yes	Adequate information was provided within the provider's application documentation to support the provider's case. This documentation included abridged accounts for 2017 (Application Form, Appendix F).
4.2.2(a)	<b>Criterion:</b> <i>Does the applicant have a reasonable business case for sustainable provision?</i>	Yes	The provider's policy pertaining to risk management and its strategic planning framework are included in SQT's Draft QA (QAP-1-3 & QAP-1-4). The provider's business model (as outlined in the application documents and further elaborated on during the panel site visit) enables SQT to act responsively to changing market demands for its programmes. The provider's scope of provision for an off-site delivery model (located at customer sites and rented space as required) is also conducive to flexibility. Learner numbers are indicative of SQT programmes meeting a clear demand in the market.
4.2.3(a)	<b>Criterion:</b> <i>Are fit-for-purpose governance, management and decision making structures in place?</i>	Yes	The panel notes that some discussion regarding membership of the Academic Council took place during the site visit. However, the panel is satisfied that SQT's governance, enhanced in 2013 following 2012 institutional review, is largely fit-for-purpose. This is discussed further in section 5.1 of this report.
4.2.4(a)	<b>Criterion:</b> <i>Are there arrangements in place for providing required information to QQI?</i>	Yes	SQT has sufficient administrative support in place, and employs a full-time Director of Quality Assurance & Academic Affairs.

**Findings**

The panel is satisfied that SQT's resource base, governance and structures meet criteria 4.2. SQT has a 30 year track record of successful provision in the sector. The provider has expanded and matured during that period, gaining accreditation and systematically documenting and embedding QA across the organisation's operations. SQT has leveraged the re-engagement process with QQI and associated gap analysis to develop additional policies and procedures which will further strengthen the organisation.

**4.3 Programme development and provision requirements:**

	<b>Criteria</b>	<b>Yes/No/ Partially</b>	<b>Comments</b>
<b>4.3.1(a)</b>	<b>Criterion:</b> <i>Does the applicant have experience and a track record in providing education and training programmes?</i>	<b>Yes</b>	SQT are an established provider with a 30 year track record in provision of both accredited and non-accredited programmes.
<b>4.3.2(a)</b>	<b>Criterion:</b> <i>Does the applicant have a fit-for-purpose and stable complement of education and training staff?</i>	<b>Yes</b>	SQT have 39 approved tutors. These tutors are employed by its Training Partners. However, under the terms of SQT's legal agreement with its Training Partners, SQT monitors and controls the quality of teaching by those personnel in connection with the provision of QQI validated programmes. A register of approved tutors was submitted with the provider's application form (Appendix C).
<b>4.3.3(a)</b>	<b>Criterion:</b> <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>	<b>Yes</b>	The panel is satisfied that SQT's track record of certification, and its approach to the re-engagement process reflects its capacity to co-operate with and assist QQI and provide QQI with information as specified in Section 45(3) of the 2012 Qualifications and Quality Assurance (Education and Training) Act.
<b>4.3.4(a)</b>	<b>Criterion:</b> <i>Does the applicant have the fit-for-purpose premises, facilities and resources to meet the requirements of the provision proposed in place?</i>	<b>Yes</b>	SQT delivers all of its programmes off-site, utilizing rented spaces as required (typically hotel facilities) for publicly available programmes. In-house provision for companies or organisations is typically facilitated on the company site. The provider's policy for approval and monitoring of programme venues is included in its Draft QA (QAP7-1).



<b>4.3.5(a)</b>	<b>Criterion:</b> <i>Are there access, transfer and progression arrangements that meet QQI's criteria for approval in place?</i>	Yes	Following the panel site visit, SQT has been issued with two points of specific advice in regard to this criterion which are outlined in section 6.2 of this report (6.2.4 and 6.2.6). Otherwise, the panel is satisfied that appropriate arrangements are in place that meet QQI's criteria for approval.
<b>4.3.6(a)</b>	<b>Criterion:</b> <i>Are structures and resources to underpin fair and consistent assessment of learners in place?</i>	Yes	The panel is satisfied that SQT's assessment procedures are appropriate to the fair and consistent assessment of enrolled learners; policies relating to these are included in the provider's draft QA (QAP6-1).
<b>4.3.7(a)</b>	<b>Criterion:</b> <i>Are arrangements for the protection of enrolled learners to meet the statutory obligations in place (where applicable)?</i>	Yes	The panel is satisfied that the provider's arrangements for the protection of enrolled learners are in place; the policy for Protection of Enrolled Learners is included in its Draft QA (QAP7-4).

**Findings**

The panel is satisfied that SQT's programme development and provision requirements meet criteria 4.3. The provider has a track record of certification, a complement of approved tutors who are appropriately qualified (the relationship between SQT, Training Partners and Tutors is discussed further in section 5.4 of this report). The provider has policies in place, submitted to QQI and the panel as part of the re-engagement process, that pertain to off-site provision, fair and consistent assessment and the protection of enrolled learners.



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

The panel is satisfied that SQT has the capacity to provide sustainable education and training within its current scope of provision.

Appropriate evidence submitted as part of the provider's application for re-engagement is indicative of SQT having a sufficient resource base, and strong financial management is considered a strategic priority by SQT. Further, the provider's delivery model of utilizing hotels and off-site locations and working with approved Training Partners affords it a significant degree of flexibility to respond to fluctuations and changes in market demand for its programmes. The provider's administrative staff is lean, and staff are therefore cross-trained to ensure capacity across key functions. Processes are documented down to the level of detailed work instructions to reduce risks associated with the absence or departure of key staff members.

The provider actively manages risk, and accounts for vulnerabilities in strategic planning. SQT acknowledges the constant challenge inherent in keeping pace with the changing requirements of industry and changing legislation. Further, the provider's senior management are cognisant of shifting expectations with regard to traditional face to face delivery and the alternatives made possible through digital technologies and Virtual Learning Environments (VLEs). While the current scope of provision does not encompass Blended Learning for its QQI programmes, SQT has been active in integrating technology to support and enhance its face to face delivery.



## Part 5 Evaluation of draft QA Procedures submitted by SQT

*The following is the panel's findings following evaluation of SQT 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:**

#### **Governance - Separation of Academic & Commercial**

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT. The panel notes the significant work undertaken by the provider to strengthen its governance structures following a 2012 Institutional Review, and that a comprehensive system of governance is now in place. The provider's policies for Governance and Management of Quality assurance are provided in its Draft QA (QAP1-1 – 1-4). The membership, roles and responsibilities, tenure, meeting frequency and quorum of the various units of governance are detailed within these.

During the site visit, the provider overviewed a number of outcomes and positive impacts of the Institutional review process. These included its appointment of an independent chair to both the Board of Directors and the Academic Council to bring externality to decision making processes within both corporate and academic domains. The provider additionally appointed a Director of Quality and Academic Affairs, and following consultation with QQI implemented a legal agreement with its Training Partners (discussed further in section 5.4 of this report), as this was an area closely scrutinized during the Institutional Review process.

With regard to the Academic Council, further externality is being sought, and is planned for appointment by the end of 2019. The panel notes that increasing the representation of academic (tutoring) staff on the Academic council could also ensure a sense of academic ownership.

From January 2019 a Risk Management policy and procedures have been established and documented. The Senior Management Team is responsible for the development and maintenance of SQT's risk register, a live document. Changes to the provider's risk profile are reviewed by the Operations Management Team; the Board of Directors take overall responsibility for ensuring risk is within acceptable limits.

The panel notes that SQT is an active member of the Higher Education Colleges Association (HECA).



## 2 DOCUMENTED APPROACH TO QUALITY ASSURANCE

### **Panel Findings:**

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT, and commends SQT for presenting a comprehensive and clear re-engagement application and Draft QA.

During the site visit, the provider's representatives outlined the organisation's journey from an initially very operationally determined QA in the early years of the provider's operations to a more formal and finally embedded QA as the organisation has matured, and as an outcome of engagement with FETAC, HETAC, Programmatic review and Institutional Review. SQT states in its application documents that it has now embedded QA across the organisation, spanning both corporate and academic domains. Procedures and policies have been developed with reference to the Qualifications and Quality Assurance (Education and Training) Act 2012, the Employment Equality Acts 1998 – 2015, the Disability Act 2005 and the Data Protection Act 2018. A 2018 revision of the institution's guidelines have aligned it with QQI's 2016 Core Statutory Quality Assurance Guidelines and the 2016 Sector Specific Independent/Private Statutory Quality Assurance Guidelines.

The provider's QA framework breaks down into five stages; strategy, implementation, monitoring & self-evaluation, continuous improvement and publication of findings/outcomes. The Director of Quality and Academic Affairs takes ultimate responsibility for policy monitoring and document control (the latter is approved by the Academic Council). The panel sought to illuminate areas of responsibility in relation to QA, and how staff and Training partner personnel interacted with the existing policies and procedures. The provider undertakes internal QA audits on an annual basis, with audit teams assigned to areas other than their own to approach impartiality. The outcomes of those audits are considered at a Quality Committee which meets four times per year. The independent chair of the Academic Council attends quality committee meetings to review outcomes and bring an element of externality to the process.

SQT representatives discussed the significant work undertaken to create a single integrated QA system, aligning systems that had been differentiated according to the requirements of different accreditation bodies, and also aligning FET and HE in so far as is practicable. Currently, this integrated QA encompasses 30 policies and procedures, using a common template which includes graphic elements as appropriate. The provider describes this system as a framework that is fit for purpose, and allows it to deliver its programs to the highest standard while meeting statutory obligations and adhering to statutory guidelines. The provider's live QA documentation is published. The panel notes that integration of QA for FET and HE is challenging, and suggests review after a one year QA cycle within the organisation.

A *proposed mandatory change* (see Section 6.1.3) to the provider emerging from this dimension of QA was noted by the panel. This pertained to the responsibilities and resourcing of QA within the organisation, and the representation of this in SQT's documentation. The panel advised that where responsibilities for monitoring and maintaining QA were designated or delegated to staff other than the Director of Quality & Academic Affairs and the Accreditation & Systems Manager, this should be reflected in the provider's QA Manual. It is necessary that all staff who are delegated and/or designated monitoring



responsibilities regarding quality assurance are identified in QAP 1-2 (Section 6.1) and the particular responsibilities clearly outlined. When the panel reconvened on July 12<sup>th</sup>, 2019 to undertake a desk review of the evidence subsequently submitted by SQT, the panel was satisfied that SQT has addressed this discrete issue.

### **3 PROGRAMMES OF EDUCATION AND TRAINING**

#### ***Panel Findings:***

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

The provider's policies pertaining programmes of education and training are included in its Draft QA. Specifically, these include the Development & Validation of Programmes (QAP3-1), Updating Programmes and Course Material (QAP3-2), Access, Transfer and Progression (QAP3-3) and Recognition of Prior Learning (QAP3-4).

New programme proposals at SQT can emerge from multiple avenues. The provider engages with stakeholders and industry to identify potential gaps and opportunities, and leverages a feedback loop with the companies it services to identify demand for training they are not delivering. The Board of Directors grants approval for investment in new programmes, following which the proposal is brought to the Academic Council for ultimate approval. The roles and responsibilities of SQT staff which are specific to programme development for QQI validated programmes is discussed in QAP3-1.

The panel also discussed aspects of learner admission, progression and recognition with the provider's representatives. With regard to applications, SQT may deal directly with learners or with company representatives. However, for Level 6 programmes or programmes where entry requirements are in place SQT ensure they have documented evidence of this.

As the provider typically offers short programmes, transfer is not an option. Depending on the programme, SQT may be able to assist a learner in terms of changing programmes or exiting one programme with a lower level of award if they are unable to complete an assessment through no fault of their own.

Opportunities to progress are typically explained to learners in relation to additional levels of qualification they may be able to undertake if desired.

A *proposed mandatory change* to the provider emerging from this dimension of QA was noted by the panel. The panel advised that with regard to learners who could not complete their current course of study, the options for learners should be clarified (see Section 6.1.4). When the panel reconvened on July 12<sup>th</sup>, 2019 to undertake a desk review of the evidence subsequently submitted by SQT, the panel was satisfied that SQT has addressed this discrete issue.



#### 4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT

##### **Panel Findings:**

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

During the site visit, the panel explored this aspect of the provider's QA in depth. In particular, the panel focused on the capacity for SQT management to ensure appropriate recruitment and development of tutoring staff not employed directly by the provider. The provider's application outlined existing legal agreements between SQT and its Training Partners, which devolve authority to SQT to monitor and control Training Partner personnel and the quality of output/teaching personnel in connection with the provision of QQI validated programmes. Discussion during the site visit with both SQT representatives and Training Partners was directed toward making clear how this was realized in practice.

The provider's policy on Recruitment and Induction of Teaching Staff is provided in its documentation (QAP4-1). With regard to recruitment of tutoring staff, SQT have a minimum pre-requisite that tutors hold a third level degree in a relevant discipline and ten years of relevant industry experience. Additional specific academic or professional qualifications required by accreditation bodies must also be adhered to. Additionally, tutors who do not possess a formal teaching or training qualification must complete one within one year of being approved as a tutor. SQT's Training Partners share responsibility with the provider for ensuring this qualification is attained, and both SQT and Training Partner representatives affirmed this to the panel during the site visit.

With regard to staff development needs, SQT's policy on the Professional Development of Teaching Staff is provided in its documentation (QAP4-4). The policy requires tutors to participate in Continuing Professional Development activity for a minimum of 3 days per year, to include technical as well as pedagogical skills. CPD activity is logged and reviewed annually. Responsibility for CPD planning rests with the tutors and Training Partners, with oversight from SQT. SQT additionally supports tutor's development of pedagogical skill through an annual tutor training day, and tutor webinars using Zoom for remote access. During the site visit the panel had an opportunity to interview tutoring staff involved in delivery of QQI validated programs in all of the educational domains relevant to the provider's re-engagement application. Tutors noted that they found the annual training days useful, and that the focus areas of these were determined in response to needs they had identified. An example of this was training specific to the use of technology to enhance classroom learning. Staff found the input relevant to their needs and several noted that they now regularly incorporated the use of particular tools demonstrated (such as *kahoot!*) to their own training session delivery.

SQT's procedure for Monitoring the Effectiveness of Teaching Staff (including a procedure for supporting poorly performing teaching staff) is provided in its documentation (QAP4-3). Administrative staff development was also discussed. This is addressed through annual performance reviews by the provider, and development opportunities include cross-training in various roles within the organisation.



Two *proposed mandatory changes* (see Section 6.1) to the provider emerging from this dimension of QA were noted by the panel.

The first (6.1.1) pertained to the provider's complaints procedure. The procedure lacked comprehensiveness, in that it was unidirectional, accounting for learner complaints in relation to staff. The panel noted that SQT's duty of care to its Training Partners and staff means that a complaints procedure should also account for the possibility of, for example, staff complaints about other staff or staff complaints about students.

The second (6.1.2) pertained to the provider's peer observation framework. This was outlined in the provider's policy on Peer Review of Teaching Staff (QAP4-2). The policy was developed with input from current tutoring staff. During the site visit, discussion of peer review indicated that it is mandatory for new tutors, and otherwise voluntary. However, peer review may also be a response to poor performance by a tutor. The panel advised that this should be documented with regard to reporting lines, who has oversight of this process and its potential outcomes. Specifically the provider needed to consider and document the implications and limits of a negative peer review.

When the panel reconvened on July 12<sup>th</sup>, 2019 to undertake a desk review of the evidence subsequently submitted by SQT, the panel was satisfied that SQT has addressed both of these discrete issues.

**5 TEACHING AND LEARNING*****Panel Findings:***

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

During the site visit, the panel invited tutoring staff in attendance to describe their pedagogical approaches, and also how they developed their own effectiveness as teachers.

Tutoring staff discussed the learner-centred philosophy guiding their practices, and demonstrated sensitivity to the needs of the three distinct learner cohorts within the different educational domains of the QQI programmes. The tutors consistently emphasized the importance of utilizing approaches to learning, teaching and assessment that maintained a close alignment between these and the work contexts and authentic workplace challenges.

In addition to drawing upon experience and currency within their domains, tutors cited formal staff development supported by SQT, including tutor training days and the allocation of three days for CPD as contributing to their confidence and development as teachers. Participation in a remote Community of Practice for tutors, facilitated using Zoom technology, is also available to SQT's tutors, and future plans include inviting tutors to facilitate these sessions in areas specific to their expertise.

SQT established a Teaching and Learning working group in September 2018. The working group is comprised of a number of Programme Directors and Tutors, and led by the Director of Quality and Academic Affairs. Internal discussions at the provider are reviewing the option of formalizing this group further, in order for it to make input to new Teaching and Learning Policy and Strategy.

Moodle is utilized by learners and tutors at SQT as a repository for programme information and learning resources. The platform is additionally used for messaging and as a portal for submission of some assessment pieces (and provision of feedback on these). Some technology enhanced learning tools are also used by some tutors during face to face program delivery. However, these are supplementary and augment, as opposed to alter, the delivery mode of the provider's programmes. The provider's approaches to Teaching and Learning therefore do not fall within the domain of Blended Learning, nor is Blended Learning within the approved scope of provision sought by SQT.

The panel is satisfied that the teaching and learning approaches utilized in programme delivery have been developed in alignment with learner profile and needs. Adjustments, innovations and interpretations of the curriculum are made by the tutors, but this occurs within the framework of the programme Learning Outcomes, and doubts in this regard are appropriately referred to the Director of Quality and Academic Affairs.

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

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

The provider's policies for Assessment of Learners (QAP6-1) are comprehensive and detailed.

During the site visit the panel explored the provider's practices in relation to communication of results surrounding SQT's cycle of exam boards (three times per year each for FET and HE respectively). Learners receive provisional results (clearly stated as provisional) which are released before examination board, but final result is released after examination board. Academic council then occurs at least 6 weeks after the Exam board to allow time for the appeals process. In the event that a learner submits an assessment late due to mitigating circumstances, then their result will be delayed to the following exam board.

The panel also discussed the QA of assessment with tutoring staff. Tutors affirmed that they were actively involved in the development of assessment instruments as well as the integration of QA procedures to assessment practices. Learners are provided with information pertaining to assessment when they sign up for a course, which includes the nature of the assessment.

Due to the frequently commercial in confidence nature of student assessments (which are set within actual industry contexts) samples of assessment were not submitted within the provider's documentation, but were presented to the panel by three programme directors during the site visit. The panel was satisfied that the examples of assessment reflected good practice, and would enable learners to appropriately demonstrate learning achievement.

The panel discussed practices surrounding rechecks, reviews and appeals. These are only available for final, ratified results in the period between the exam board and Academic Council meeting, and procedures are in place to guide this.

Security of assessment was also discussed. SQT outlined that for examinations, assessment briefs are sealed in an envelope and stay that way until opened at the exam. Some assessments can be submitted via moodle. If assessment pieces are posted in there is a tracking procedure (date stamp). After processing they are held securely in a locked filing cabinet until time for them to be assessed. Measures taken to remove personal information from assessment pieces before they go out for marking. The projects are designed in a manner that they are individualized so the sharing of assessment briefs does not endanger the assessment. Tutors confirmed during the site visit that information is also provided to learners with regard to plagiarism and academic integrity. This can be found in the learner handbook and is also made explicit in a declaration learners are required to sign at the time of submission.

**7 SUPPORT FOR LEARNERS****Panel Findings:**

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

The provider's policies for Approval and Monitoring of Programme Venues (QAP7-1), Supports for Reasonable Accommodation (QAP7-2), Personal Mitigating Circumstances (QAP7-3), Protection of Enrolled Learners (QAP7-4), Learner Complaints (QAP7-5) and Supports for Learners (QAP7-6) are provided in its Draft QA.

During the site visit, some discussion was focused on the issue of learner representation. The panel acknowledges that a learner representative model of Higher Education is not practical in the SQT context. However the provider notes that in some areas of its QQI programmes learners do consistently volunteer to act as representatives, which may involve, for example, participating in interviews prior to programme board or Academic Council meetings.

Given the off-site nature of SQT's provision, the panel discussed the provider's processes for approving programme venues (also discussed in QAP7-1). The provider's representatives outlined the high specifications in place for training rooms, and their ability to specify details such as table layout and arrangements of space. The provider notes that feedback on training facilities from learners is captured alongside other feedback.

The panel also explored the provider's practices with regard to supporting learners with disabilities. The provider noted that while requests for accommodations have not been frequent, these have been effectively met in the past, for example, moving venues to better accommodate physical disabilities. The panel notes that having an appropriate process in place (for example, an invitation to a meeting to discuss needs) would be desirable.

A *proposed mandatory change* to the provider emerging from this dimension of QA has been noted by the panel. The panel advises that the provider should consider simplifying the description of students with disability with regard to student supports (see Section 6.1.6). In relation to this, SQT could consider consulting with HE providers with experience in this regard to approach best practice, as opposed to minimum legislative requirements. When the panel reconvened on July 12<sup>th</sup>, 2019 to undertake a desk review of the evidence subsequently submitted by SQT, the panel was satisfied that SQT has addressed this discrete issue.

**8 INFORMATION AND DATA MANAGEMENT*****Panel Findings:***

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

The provider's Information Management Policy (QAP8-1), Data Protection Policy (QAP8-2), Management of Data Breaches Policy (QAP8-3) and Subject Access Requests Policy (QAP8-4) are included in its Draft QA procedures.

During the site visit, SQT reported that it is moving toward a new management information system, and that this is on track to be operational in 2 – 3 months from the date of the site visit. The system will support improved reporting, and enhanced tracking of learners. It will also ensure a robust and secure repository for learner and programme data.

A documented procedure for disposing of data exists at the provider. This includes secure shredding for destruction of hard copy assessments. During the marking period it is the responsibility of the tutor to ensure that any hard copies and marks are securely and appropriately stored, and protocols exist for this (for example, student assessments cannot be marked on public transportation). Where practicable assessed work is submitted via SQT's moodle.

Responsibility for GDPR data breaches rests with the provider's Managing Director. SQT has a data processing agreement with an external, reputable IT company which manages its IT infrastructure and associated services. Data resides within the EU (the company's servers sit in Dublin). Learner records and other data are retained using a bespoke system which has evolved to meet the needs of the provider in dealing with multiple accreditation bodies.

**9 PUBLIC INFORMATION AND COMMUNICATION*****Panel Findings:***

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

The provider's Public Information and Communication policy (QAP9-1) is provided in the Draft QA, and is comprehensive. The policy outlines publication of provider information, publication of programme specific information, mandatory information for all programmes and the publication of QA documentation. The accompanying procedure specified protocols to be observed with respect to the publication and communication of public information as well as the ongoing review and update of public information.

**10 OTHER PARTIES INVOLVED IN EDUCATION AND TRAINING (incl. Apprenticeships)*****Panel Findings:***

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

The provider's policy on Other Parties Involved in Education and Training (QAP10-1) is included in its Draft QA. This covers SQT's peer and external stakeholder relationships and its principles for selecting external expertise in the form of expert panellists, examiners and authenticators.

As discussed in response to criterion 4.4.1(a) of this report, and further referenced in Sections 5.1 and 5.4, SQT has legal arrangements in place with its Training Partners that have been implemented in consultation with QQI following an Institutional Review process in 2012.

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

The panel is satisfied overall that QQI's QA guidelines within this dimension of QA have been met by SQT.

The provider's policy for Ongoing Monitoring of Programmes and QA Framework (QAP11-1), Periodic Programme Review and Revalidation of QQI Programmes (QAP11-2) and External Cyclical Review (QAP11-3) are contained in its Draft QA.

A summary of programme monitoring procedures within QAP11-1 includes both learner and tutor course evaluation forms, programme board meetings, informal correspondence between learners and tutors, examination board meetings, external examiner reports, company course organisers and management meetings.

During the site visit, SQT also described a new system it had implemented which involved documentation of corrective action for operational issues through use of Potential for Improvement Notices (PINs). Live programme improvement plans allow tutors to note improvements they feel are needed at the conclusion of a programme; use of this system generates automatic emails received by both the QA director and the programme director, as well as an entry on a backend file. The provider also presented to the panel the mechanism it uses for tracking actions within the strategic action plan. This captures Actions, Nature of the Plan, Goals, Priority Level, Responsibility, Where Monitored and Status.

A *proposed mandatory change* (see Section 6.1.5) to the provider emerging from this dimension of QA was noted by the panel. The panel suggested that a process for closing the feedback loop to employers, learners and other stakeholders should be formalized. This could be done effectively within the form of an annual report, as discussed during the site visit. When the panel reconvened on July 12<sup>th</sup>, 2019 to undertake a desk review of the evidence subsequently submitted by SQT, the panel was satisfied that SQT has addressed this discrete issue.

**Evaluation of draft QA Procedures - Overall panel findings**

Following a 6 Week Pause in the reengagement process, the panel is satisfied that SQT have met QQI's QA guidelines. The 6 Week Pause enables the provider to address the panel's *proposed mandatory changes* as listed in section 6.1 of this report. The panel have issued a number of commendations to SQT with regard to its engagement with the panel throughout the reengagement process, its commitment to and understanding of QA, and the accessibility of its documentation. These are listed in Section 3.1 of this report.



## **Part 6 Mandatory Changes to QA Procedures and Specific Advice**

### **6.1 Proposed Mandatory Changes (To be addressed by SQT during a 6 Week Pause on the Reengagement Process)**

The following proposed mandatory changes were identified at the conclusion of the site visit on May 24<sup>th</sup>, 2019. The panel availed of the option to defer its decision to allow SQT an opportunity to address these issues within a six-week period. The panel requested that these amendments to the existing Draft QA be implemented, and approved by the provider's Academic Council. Upon receipt of the Academic Council minutes (or relevant extract thereof) the panel would be pleased to approve the provider's application. The Panel reconvened on 12<sup>th</sup> July, 2019 to evaluate evidence submitted by SQT in support of the proposed changes. Following an evaluation of the evidence submitted, the panel is satisfied that SQT has adequately addressed the issues set out below.

6.1.1. The current complaints procedure needs to be broadened to include and account for other relationships within the organisation, for example, staff complaints about other staff, staff complaints about students, or company complaints about the provider.

6.1.2. The policy pertaining to proposed peer review of teaching practice should be reviewed in light of human resources and industrial relations considerations, as well as oversight of procedure. The policy should account for potential outcomes and actions of the process.

6.1.3. The delegation of responsibilities beyond the Director of QA & Academic Affairs and the Accreditation & Systems Manager should be clarified within the QA Manual. This is noted within role descriptions, but should also appear in the QA Manual.

6.1.4. With regard to learners who cannot complete their current course of study, the options for learners should be clarified.

6.1.5. A process for closing the feedback loop to employers, learners and other stakeholders should be formalized. This could be done effectively within the form of an annual report, as discussed during the site visit.

### **6.2 Specific Advice**

The provider should consider simplifying the description of students with disability with regard to student supports. In relation to this item of specific advice, SQT could consider consulting with HE providers with experience in this regard to approach best practice, as opposed to minimum legislative requirements.



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## Part 7 Proposed Approved Scope of Provision for this provider

NFQ Level(s) – min and max	Award Class(es)	Discipline areas
5 - 8	SPA, Minor	Engineering, Food Safety, Personal and Professional Development, Training and Education, Management



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## **Part 8      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 SQT Training Ltd.

Name:                    Michael Hall

Date:                    12 June 2019



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

Document	Related to
SQT Re-Engagement Panel Review Session 1: presentation in hard copy	Overall QA
List of Corrections	Application Form Pages 4 & 50 and Appendix I

## Annexe 2: Provider staff met in the course of the Evaluation

Name	Role/Position
Lorraine Halpin	Director of Quality & Academic Affairs
Siobhan Cunningham	Executive Director
Dave Williams	Managing Director
Prof. Tom Kennedy	Independent Non-Executive Director
Jean Hastings	Programme Administration Manager (Lean Six Sigma)
Eilish Carter	Accreditation and Systems Manager
Maura Murphy	Programme Director & Training Partner (Leadership & Personal Development)
Gina Ryan	Programme Director (Leadership & Personal Development)
John Ryan	Programme Director & Training Partner Manager (Lean Six Sigma)
Eamon O Bearra	Programme Director (Lean Six Sigma)
Ashling Keogh	Tutor (Lean Six Sigma)
Karen O'Shea	Programme Administration Manager (In-house)
Bernie Madigan	Programme Administration Manager (Public)



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Denis Kiely	Programme Director & Training Partner Manager (Food Safety)
Edel Jones	Tutor (Food Safety)
Joan Brien	Tutor (Food Safety)

# SQT Training

## Response to Re-engagement Panel Report – August 2019

SQT welcomes the report of the independent panel dated August 19<sup>th</sup> 2019 and its recommendation to approve its draft QA procedures. The re-engagement process has provided external validation of the organisations QA Framework which is evidenced by the six commendations received. Over the past two years, the re-engagement exercise has represented a significant body of work for the organisation. SQT adopted a rigorous approach to the process which was undertaken in an enthusiastic manner by all staff involved. Re-engagement has driven a systematic review and critical evaluation of the entire organisation which has resulted in enhancement across all areas. The process has ultimately led to the development of a revised QA Framework and associated QA procedures, which together underpin the achievement of a holistic, embedded and fit-for-purpose QA system.

In response to the panel report, SQT would firstly like to express sincere gratitude to the panel for their professionalism, collegial approach and constructive dialogue during the site visit. We wish to thank each panel member for taking the time to review the documentation submitted and the other materials made available during the site visit. This was reflected in the panel's thorough understanding of the application and their consideration of the organisational and learner profile. SQT management and all staff involved found the site visit and contributions of the panel to be extremely valuable.

### Commendations

The panel made 6 commendations as follows:

1. The panel commends the **openness and collegiate approach of the SQT team** in their dealings with the panel throughout the reengagement process.
2. The panel commends the **dedication and commitment of the team** at SQT to the mission and vision of the organisation.
3. The panel commends the **high level of commitment, understanding and ownership among all staff of SQT's QA documentation and processes**.
4. The panel commends the **appropriateness of the QA** to the specific context and mode of operation of SQT. It was clear to the panel that the system is custom-designed to specifically suit SQT programmes, staff and learners.
5. The panel commends the **systematic, structured approach to QA** as presented by the Director of Quality and Academic Affairs.
6. The panel commends the **accessible and clear structure of the QA documentation**.

In addition the panel commended SQT for presenting a comprehensive and clear re-engagement application and Draft set of QA policies and procedures.

## **Mandatory Changes**

The panel proposed 5 mandatory changes which were all considered to be discrete and readily amendable. These were outlined to the Senior Management Team at the conclusion of site visit and are outlined in Table 1 below. SQT welcomed these proposed changes and considered each to be capable of further enhancing its suite of policies and procedures. Consequently, all changes were implemented in the week subsequent to the site visit and were approved by SQT's Academic Council and Board of Directors, which convened on 7<sup>th</sup> and 13<sup>th</sup> June respectively. The mandatory changes and SQT's response to each are set out in Table 1 below.

## **Specific Advice**

The panel also proposed one item as specific advice which is set out in Table 2 below.

Proposed Mandatory Change	Action Taken
<p>1. The current <b>complaints procedure needs to be broadened</b> to include and account for other relationships within the organisation, for example, staff complaints about other staff, staff complaints about students, or company complaints about the provider.</p>	<p>The Complaints Policy (QAP7-5) was broadened to account for complaints made by other external parties (in addition to learners) and was renamed from 'Learner Complaints' to 'Complaints'.</p>
<p>2. The <b>policy pertaining to proposed peer review of teaching practice should be reviewed in light of human resources and industrial relations considerations</b>, as well as oversight of procedure. The policy should account for potential outcomes and actions of the process.</p>	<p>The Peer Review of Teaching policy (QAP4-2) was amended to include a 'responsibility' section which shows clear oversight of the process. An Outcomes of the Process (Section 6) was also added to:</p> <ul style="list-style-type: none"> <li>- ensure appropriate record keeping</li> <li>- ensure that specific developmental requirements are converted into appropriate staff developmental plans as per QAP4-4 Professional Development of Teaching Staff</li> </ul>
<p>3. The <b>delegation of responsibilities beyond the Director of QA &amp; Academic Affairs and the Accreditation &amp; Systems Manager should be clarified within the QA Manual</b>. This is noted within role descriptions, but should also appear in the QA Manual.</p>	<p>Minor updates were made to the following policies to ensure that an individual is responsible for specific tasks / actions rather than a specific Board or Committee.</p> <ul style="list-style-type: none"> <li>- QAP1-1: Quality Policy</li> <li>- QAP1-3: Risk Management</li> <li>- QAP1-4: Strategic Planning</li> <li>- QAP4-1: Recruitment and Induction of Teaching Staff</li> <li>- QAP7-1: Approval and Management of Venues</li> </ul>
<p>4. <b>With regard to learners who cannot complete their current course of study, the options for learners should be clarified.</b></p>	<p>A new 'Non-Standard Course Completion' policy has been developed QAP7-7 to clarify options for learners with regard to learners who cannot complete their current course of study.</p>
<p>5. A <b>process for closing the feedback loop to employers, learners and other stakeholders should be formalized</b>. This could be done effectively within the form of an annual report, as discussed during the site visit.</p>	<p>Annual Programme Improvement Reports have been introduced and added to Stage 5 of the QA Framework within QAP1-1 Quality Policy.</p>

*Table 1: Proposed Mandatory Changes*

Specific Advice	Action Taken
<p>1. The provider should consider <b>simplifying the description of students with disability</b> with regard to student supports. In relation to this item of specific advice, SQT could consider consulting with HE providers with experience in this regard to approach best practice, as opposed to minimum legislative requirements.</p>	<p>The definition /description of disability has been simplified in QAP7-2 Reasonable Accommodation. The original definition had been adapted from the legislation.</p> <p>As proposed by the panel, SQT is committed to consulting with a HE provider to consider suitable approaches to best practice in this regard.</p>

*Table 2: Specific Advice*