**Initial Access to Validation by QQI**

**Provider Capacity and QA Procedures –**

**Gap Analysis Tool and Action Plan**

**For Provider Use**

**Part 1 Provider Details**

|  |
| --- |
| **1.1 Provider** |
| Name: |  |
| Person completing this gap analysis:(Name and job title) |  |
| Contact phone: |  |
| Contact email address: |  |
| Date: |  |

**Gap Analysis – why?**

*When starting this exercise, it is important to remember the purpose of the process: i.e.*

*QQI is keen to ensure that the provider has*

1. *done a genuine assessment of its own situation based on its expertise and experience, which has identified any potential areas of vulnerability – institutional or programmatic, which could impact on the quality of provision.*
2. *considered its resource base relative to its scope of provision and made a genuine assessment of the sustainability of the current scope of provision.*
3. *with reference to QQI guidelines, amended its QA policies and procedures to address any identified vulnerabilities and to disseminate good practice*

*When evaluating the provider’s application, QQI will be looking to see that the quality assurance procedures demonstrate:*

* ***Good governance*** *– oversight for all areas of significant decision making. This should include informed externality / independence/ devil’s advocate view to bring fresh thinking and to prevent group think.*
* ***Clear terms of reference*** *for the various roles and committees which operate governance*
* ***Separation of commercial and academic*** *decision making*
* ***Clarity*** *(ideally depicted graphically) of how the various QA committees and roles and activities connect and interact*
* ***QA methodology*** *to know*
	+ *What learners think of programmes and services across the range of levels and various modes of delivery*
	+ *What other stakeholders (employers, next providers, awarding bodies, external examiners / authenticators) think of programmes and outcomes*
	+ *How comparable programmes compare and contrast (benchmarking)*
	+ *What’s working and what isn’t – institutional and programmatic*
	+ *if resources, human, financial and physical, are adequate for the scope of provision*
* ***Clarity and accessibility*** *in policy and procedure*
	+ *For staff*
	+ *For learners*

*An honest and meaningful self-assessment is an indicator of a well-functioning quality assurance system. You are encouraged to engage in this gap analysis exercise, not for compiance with a QQI requirement, but with the aim of emerging with an improved quality assurance system, capable of supporting your programmes and services in the years ahead.*

*To have up to date programme and award information, please request reports from QQI Quality Assurance Directorate.*

**Gap Analysis – what?**

*You are being asked to do a gap analysis on two broad areas:*

1. *Organisational capacity with reference to QQI criteria (Part 2 below)*
2. *Quality Assurance procedures with reference to relevant QQI core, sectoral and topic guidelines for quality assurance. (Part 3 below)*

**Part 2 Gap Analysis against criteria relating to the capacity of your organisation to provide quality education and training to learners**

*The criteria to be applied by QQI when evaluating your organisational capacity are listed in related groups below. You will see that each criterion is stated as a question, the answer to which should ultimately be available to you or to an independent panel in the application documentation.*

*Your self-check against the criteria is to help you to*

1. *Identify any gaps in your system and what work needs to be done before you apply to QQI for QA approval*
2. *Improve your governance and quality assurance systems to last well beyond the approval process.*

*You may need to do this gap analysis a number of times. Each time, check that the information supplied in your application addresses the criteria. The panel may use these or similar questions for the same purpose.*

*The questions are not exhaustive and are not meant to replace the capacity criteria. They are intended to prompt consideration of what the criteria will mean in practice.*

**2.1 Legal and compliance criteria:**

* *Is the provider an established Legal Entity established in the European Union with a substantial presence in Ireland and with Education and/or Training as a principal function?*
* *Are provider’s collaborations, obligations, parent organisations, and subsidiaries clearly specified?*
* *Are any third-party relationships and partnerships in which the provider is engaged compatible with the scope of provision specified?*
* *Is the provider in good standing in the qualifications systems and education and training systems in any countries where it operates or where it has arrangements with awarding bodies, quality assurance agencies, qualifications authorities, ministries of education and training, professional bodies and regulators.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Gap-analysis question*** | ***Evidence available? If so, where?*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| 1. *Is the legal status of the provider fully clear?*
 |  |  |  |  |
| 1. *Is it clear where ultimate responsibility for decision making lies in the organisation in respect of programmes of education and training?*
 |  |  |  |  |
| 1. *Are all collaborations / partnership arrangements currently in place, fully known and subject to governance?*
 |  |  |  |  |
| 1. *Is it clear in all cases what are the legal obligations arising from participation in a collaborative arrangement – e.g. health & safety, child protection, information, GDPR etc.*
 |  |  |  |  |
| 1. *Are there opportunities to integrate quality assurance best practices used for the various awarding bodies into a single system?*
 |  |  |  |  |

**2.2 Resource, governance and structural criteria:**

* *Does the provider have a sufficient resource base and is it stable and in good financial standing?*
* *Does the applicant have a reasonable business case for sustainable provision?*
* *Does the provider have fit-for-purpose governance, management and decision-making structures?*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Gap-analysis question*** | ***Process already in place? summarise*** | ***Action Required? Describe***  | ***Who Responsible*** | ***By When*** |
| 1. *Where is the adequacy of resources for current education and training provision considered and managed within the organisation?*
 |  |  |  |  |
| 1. *Where is risk considered and managed within the organisation? Is there a risk register?*
 |  |  |  |  |
| 1. *Is the rationale for providing QQI validated programmes, with the financial, time and human costs associated, clear and fully understood?*
 |  |  |  |  |
| 1. *How are corporate and academic governance issues kept separate when deciding on resource and other financially impactful issues relating to validated or new programmes?*
 |  |  |  |  |
| 1. *Can you explain how you would demonstrate that a current programme is financially viable? Are the information sources available to do this analysis? Who monitors income and expenditure on programmes and where does it get reported?*
 |  |  |  |  |
| 1. *Where is a decision taken on whether to propose a new programme for validation?*

*Where is cost / benefit analysis considered in the process?* |  |  |  |  |
| 1. *What legislation and regulations applies to your organisation as a provider of education and training?*
 |  |  |  |  |
| 1. *How do you know that the organisation complies with all relevant legislation and regulations?*
 |  |  |  |  |

**2.3 Programme development and provision criteria:**

* *Does the provider have a fit-for-purpose and stable complement of education and training staff?*
* *Are there access, transfer and progression arrangements that meet QQI’s criteria for approval in place?*
* *Are arrangements for the protection of enrolled learners to meet the statutory obligations in place (where applicable)?*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| 1. *If asked, how would you demonstrate that the organisation meets a provider’s legal obligations relating to access, transfer and progression?*
 |  |  |  |  |
| 1. *If relevant, do you have confidence in your current arrangements for Protection for Enrolled Learners, if such arrangements were called on?*
 |  |  |  |  |
| 1. *Have the implications for your programme development process arising from the* [*QQI Policies and Criteria for Validation of Programmes 2016*](https://public.qqi.ie/Publications/Publications/Initial_Validation_policy_7_10_13.pdf) *been addressed in your quality assurance procedures?*
 |  |  |  |  |
| 1. *Is staffing an agenda item at any governance or review group?*
 |  |  |  |  |
| 1. *If you use contract staff, have you taken steps to ensure their availability when needed? Do you have contingency measures to cater for situations where a tutor is not available?*
 |  |  |  |  |
| 1. *Where and how is the adequacy of premises, facilities and resources for education and training provision considered?*
 |  |  |  |  |
| 1. *Have the QQI Guidelines for Blended Learning been incorporated into your programme development and governance processes, if relevant?*
 |  |  |  |  |

**Part 3 Gap Analysis between current / draft QA Procedures and QQI Guidelines**

***What Guidelines?:*** *QQI’s* [*Core Quality Assurance Guidelines*](http://www.qqi.ie/Downloads/Core%20Statutory%20Quality%20Assurance%20Guidelines.pdf) *and* [*Sector-Specific Guidelines for Independent / Private Providers*](http://www.qqi.ie/Downloads/Sector%20Specific%20Quality%20Assurance%20Guidelines%20V2.pdf) *are for all voluntary providers.*

*Topic Specific Guidelines are also for any providers who currently use or plan to use the relevant learning methodologies for some or all programmes i.e.*

[*Blended Learning*](http://www.qqi.ie/Publications/Publications/Statutory%20QA%20Guidelines%20for%20Blended%20Learning%20Programmes.pdf)

[*Apprenticeships*](http://www.qqi.ie/Publications/Publications/Apprenticeship%20Programmes%20QAG%20Topic-Specific.pdf)

[*Research Degree Programmes*](http://www.qqi.ie/Publications/Publications/Research%20Degree%20Programmes%20QA%20Guidelines.pdf)

*Providers are required to ‘have regard’ to these guidelines when writing their own procedures for quality assuring their programmes of education and training. However, the guidelines are not intended*

* *to prescribe how providers are to carry out their work or run their organisations.*
* *as a ‘how to’ manual for providers on the establishment of QA procedures.*

*Rather, it is up to providers to establish an internal quality system appropriate to their individual context which incorporates both operational procedures and a system of review to monitor the effectiveness of those procedures.*

*This is important to keep in mind when doing a self-assessment of your quality assurance procedures before applying for approval of those procedures from QQI.*

*A panel acting on behalf of QQI will evaluate a provider’s draft procedures using the guidelines as a reference but not as criteria. It is important that the panel will be able to see that the guidelines have been used and applied in a manner appropriate to the specific context of the applicant provider.*

*When conducting a gap analysis between your current or draft QA procedures and the relevant QA Guidelines, you should use the questions set out below for each of the main guideline sections. The answers should help you identify your state of readiness and also what work needs to be done before you can submit your QA Procedures for approval*

*The QA policies and procedures themselves* ***should be written to be used by your organisation*** *if and when they are approved and not just for the purpose of getting approval from QQI. Hence your system should be structured and documented in the manner that best suits your organisation. It does not have to follow the QQI Guidelines naming or sequence, but it should be possible to do a mapping and identify the same purposes in your procedures as in the Guidelines.*

*You should use this gap analysis to check that the procedures to be submitted to QQI for approval are not only documented but are fit for purpose. When you are asked ‘****Is it clear how****..’ a particular aspect of the provider’s role is to be carried out and quality assured, you should read your QA policies and procedures as if in the role of a new staff member charged with carrying out quality assurance or in the role of an external panel member and judge whether or not the documents are sufficiently clear and comprehensive to be understood and implemented.*

*The following broad questions should remain as a benchmark all the time you are reviewing your QA documentation:*

*Do your quality assurance policies clarify the following?*

* *Your organisation’s understandings of its obligations as a provider of publicly recognised education and training programmes.*
* *The commitments your organisation makes to learners, to QQI and to other stakeholders and how they will be met.*
* *What learners can expect of your organisation.*

*Does your quality assurance procedures make clear?*

* *How your organisation’s policies can be implemented?*
* *What are the various actors, timelines, information flows, forms, records and evidence arising related to each procedure?*
* *How your organisation will monitor and review the quality of its programmes and services?*
* *How the information gained from monitoring and review will be made available for decision making and governance*
* *The various roles, responsibilities and inter-relationships of individuals and groups making up your quality assurance and governance systems?*
* *The information flows within your quality assurance system.*

*Note: the sections below are from the QQI* ***Core*** *Quality Assurance Guidelines. Where appropriate, references to sector or topic-specific guidelines will be indicated.*

**Core Guidelines 1 GOVERNANCE AND MANAGEMENT OF QUALITY**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Have you prepared a graphic summary of how your operational and governance structures and processes interrelate? e.g. does it show the process of programme development from original idea to final approval prior to submission for validation?*
 |  |  |  |  |
| 1. *Are there clear terms of reference / role descriptions for all committees / individuals represented on the graphic?*
 |  |  |  |  |
| 1. *Are the resources given to governance / quality assurance proportionate to the details set out in terms of reference and responsibilities?*
 |  |  |  |  |
| 1. *Do the terms of reference include regular consideration of reports on programme quality: - e.g. enrolment, learner feedback, staff feedback, outcomes, resources, development etc*
 |  |  |  |  |
| 1. *Where your organisation’s scale is such that it cannot support internal committees for governance, are there alternative arrangements in place to provide (i) informed, independent oversight of significant decisions and (ii) constructive analysis of information gained through internal and external monitoring and review?*
 |  |  |  |  |
| 1. *Is it clear where responsibility for the quality assurance system within the organisation lies? Does this role have clear support from senior management / owners of the organisation? e.g. is there a budget or specific job specs for QA activities?*
 |  |  |  |  |
| 1. *How are decisions affecting the conduct of programmes and services recorded and communicated to those who need to implement them?*
 |  |  |  |  |
| 1. *Where are risks identified and addressed?*
 |  |  |  |  |
| 1. *Do you know of situations where commercial and academic considerations may conflict? How do you ensure that decisions on education and training matters are made independently of commercial considerations?*
 |  |  |  |  |
| 1. *Is there systematic oversight of assessment outcomes and trends in the provider? How would this result in change where it is deemed necessary?*
 |  |  |  |  |
| 1. *If blended learning is current or planned for your organisation, is there an organisational level strategy and plan for same? (Ref 3.1 BLGs)*
 |  |  |  |  |
| 1. *Are the expertise and resources available necessary to delivered blended learning programmes in a quality assured manner? (Sections 4 BLGs)*
 |  |  |  |  |
| 1. *If you have current or planned apprenticeship programmes, are the necessary governance structures in place to manage the collaborative arrangements? Ref Sections 3 and 4 Apprenticeship Guidelines (AGs)*
 |  |  |  |  |
| 1. *Is it clear in the documentation how ongoing monitoring of processes will be carried out i.e. by whom, how often, what method, what indicators would be sought, how recorded?*
 |  |  |  |  |
| 1. *Is it clear in the documentation how internal evaluations / reviews of programme validation or effectiveness of QA will be carried out i.e. by whom, how often, what method, what indicators would be sought, how recorded?*
 |  |  |  |  |
| 1. *Is it clear how the findings of monitoring and reviews will be reported to governance and how acted on where required?*
 |  |  |  |  |
| 1. *Is it clear how staff are made aware of the provider’s quality assurance system and of their role and responsibilities within it?*
 |  |  |  |  |
| 1. *Is it clear how learners are made aware of the provider’s quality assurance system and of their responsibilities and entitlements within it?*
 |  |  |  |  |

**Core Guidelines 2 DOCUMENTED APPROACH TO QUALITY ASSURANCE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| 1. *Where/how can your documented quality assurance system be accessed? Is it available to all who need to access it in a manner appropriate to their needs? E.g. how does a learner know how to make a grade appeal? How does a staff member know how to process a grade appeal?*
 |  |  |  |  |
| 1. *Do learner and staff handbooks provide or point to the policies and procedures with most relevance to these audiences?*
 |  |  |  |  |
| 1. *Have the quality assurance procedures been updated to reflect all relevant QQI Guidelines? e.g. if you have a blended learning programme, have you updated your procedures with reference to the Blended Learning Guidelines?*
 |  |  |  |  |
| 1. *Does the QA system address the additional responsibilities for oversight of contracted or collaborative provision?*
 |  |  |  |  |
| 1. *Has senior management agreed that your organisation’s quality assurance procedures, one approved by QQI, will be published on your website?*
 |  |  |  |  |
| 1. *Is it clear how QA procedures and processes can be amended to reflect experience and changing contexts? Who has responsibility and oversight of this?*
 |  |  |  |  |
| 1. *Does your quality assurance system for QQI validated programmes of education and training integrate with the management of other quality / legislative / regulatory responsibilities you have e.g. Health & Safety, Employment, Child Protection, Finance, Human Resources, other awarding or accrediting bodies?*
 |  |  |  |  |

**Core Guidelines 3 PROGRAMMES OF EDUCATION AND TRAINING**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Are the obligations arising from QQI’s* [*Policies and Criteria for Validation of Programmes*](https://public.qqi.ie/Publications/Publications/Initial_Validation_policy_7_10_13.pdf) *into your procedures for programme development, approval and review?*
 |  |  |  |  |
| 1. *Do the procedures make clear that your programmes will:*
* *be written using learning outcomes*
* *be developed based on evidenced need*
* *align with the relevant award standards*
* *be subject to internal evaluation and approval prior to submission for validation*
* *comply with requirements of* [*Access, Transfer & Progression*](http://www.qqi.ie/Publications/Publications/Access%20Transfer%20and%20Progression%20-%20QQI%20Policy%20Restatement%202015.pdf)
* *be subject to ongoing monitoring and periodic review*
 |  |  |  |  |
| 1. *If your programmes will incorporate blended learning, have you incorporated the relevant quality assurance guidelines relating to programme design, structure, assessment etc. (Ref. Section 4, BLGs)?*
 |  |  |  |  |
| 1. *If your learners enrolled on any of your programmes will spend a significant amount of time on work placement, is the selection, monitoring and support of workplace provision and assessment covered by your procedures?*
 |  |  |  |  |
| 1. *Are statistics on learner enrolments, retention, completion and progression monitored and reported on? How is this information captured and stored?*
 |  |  |  |  |
| 1. *Are the resources required for programmes – human, financial, physical, ICT etc - regularly monitored and reported on?*
 |  |  |  |  |
| 1. *What are the qualitative and quantitative indicators of quality used for your programmes i.e. in reviewing the programme, what measures do you use to evaluate its success or otherwise?*
 |  |  |  |  |
| 1. *Do you benchmark programme indicators against comparable providers?*
 |  |  |  |  |
| 1. *Is the process for amending programmes based on monitoring / review clear and documented?*
 |  |  |  |  |
| 1. *Is information about programmes subject to internal approval prior to publication?*
 |  |  |  |  |
| 1. *Is recognition of prior non-certified learning (RPL) offered to learners? If so, is this process documented and monitored for consistency?*
 |  |  |  |  |
| 1. *How does your assessment strategy inform programme development?*
 |  |  |  |  |

**Core Guidelines 4 STAFF RECRUITMENT, MANAGEMENT AND DEVELOPMENT**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Are there clear selection criteria and development processes in place to ensure that new and current staff will have the experience, qualifications and expertise appropriate to the scope of provision?*
 |  |  |  |  |
| 1. *Is it clear how programme needs are incorporated into recruitment processes?*
 |  |  |  |  |
| 1. *Is it clear how staff development needs are identified and addressed?*
 |  |  |  |  |
| 1. *Do staff have structured and clear mechanisms to give feedback and suggestions for programme improvements?*
 |  |  |  |  |
| 1. *Where using self-employed tutors who may also work with other providers, what arrangements / contingencies are in place to ensure:*
* *availability of tutors when needed*
* *involvement of tutors in programme team meetings and in programme development and review processes?*
* *tutors are informed of issues relating to their programme areas*
* *staff development issues are addressed*
 |  |  |  |  |
| 1. *For blended learning programmes, are staff properly inducted and trained for the role(s) in on line learning?*
 |  |  |  |  |
| 1. *Is it clear how the staff management and development is quality assured where the staff are employees of collaborating providers or second providers?*
 |  |  |  |  |
| 1. *Are staff facilitated to engage with a community of practice in their field(s) of learning?*
 |  |  |  |  |

**Core Guidelines 5 TEACHING AND LEARNING**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Is there an approach to effective teaching and learning, appropriate to your programmes, which underpins programme development and delivery? Is there a policy on Teaching and Learning which communicates this?*
 |  |  |  |  |
| 1. *Is the quality of the learning experience monitored on an on-going basis?*

*How are learner feedback questionnaires designed to provide useful information?**How is the information gained from this monitoring used in subsequent programme development and improvement?* |  |  |  |  |
| 1. *How do you recognise good quality learning experiences?*
 |  |  |  |  |
| 1. *Are blended learning materials and media developed with a view to support effective teaching, learning and assessment? Is this monitored? (Ref 4.1, 4.2 BLGs)*
 |  |  |  |  |
| 1. *Are Work Placements and Work Based Learning monitored to ensure that effective teaching and learning can take place?*
 |  |  |  |  |
| 1. *Are the diverse needs of learners identified and facilitated? Give examples of diversity that you can and cannot facilitate.*
 |  |  |  |  |
| 1. *How are staff supported to improve their teaching and assessment skills?*
 |  |  |  |  |
| 1. *Are there criteria for checking the suitability of potential venues as effective teaching and learning environments?*
 |  |  |  |  |
| 1. *How will learners know how to make a complaint should they need to? Is the procedure for handling complaints documented and approved?*
 |  |  |  |  |

**Core Guidelines 6 ASSESSMENT OF LEARNERS**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Are the areas of potential vulnerability in your quality assurance of assessment known in the organisation?*
 |  |  |  |  |
| 1. *Are the systems to promote security in assessment – materials, processes, learner work and records, in place and monitored for effectiveness?*
 |  |  |  |  |
| 1. *Are there policies in place for informing and governing the conduct of assessment – from programme development to learner appeals?*
 |  |  |  |  |
| 1. *Are the outcomes of assessment, formative and summative, used to inform learners’ progress?*
 |  |  |  |  |
| 1. *How do you know how your award outcomes and other programme data compare with those of other providers operating in the same area, nationally or internationally?*
 |  |  |  |  |
| 1. *How is the learning from results approval panel / exam board meetings used to inform and improve future practice?*
 |  |  |  |  |
| 1. *How does your assessment strategy inform programme development?*
 |  |  |  |  |
| 1. *Are there approval processes for new assessment instruments?*
 |  |  |  |  |
| 1. *How is assessment of skills quality assured when carried out in an ‘on the job’ setting?*
 |  |  |  |  |
| 1. *What are the primary issues to consider when quality assuring assessment in a blended learning programme?*
 |  |  |  |  |
| 1. *How would you deal with cases of plagiarism, alleged or admitted?*
 |  |  |  |  |
| 1. *Is there a policy on handling disagreements between external examiners / authenticators and lecturers / tutors?*
 |  |  |  |  |

**Core Guidelines 7 SUPPORTS FOR LEARNERS**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Is it clear what supports are available to learners and how they are accessed? (Ref 7.1. Core Guidelines, 5.1 Blended Learning Guidelines, Section 5 Apprenticeship Guidelines)*
 |  |  |  |  |
| 1. *Are particular supports made available to international learners?*
 |  |  |  |  |
| 1. *Are particular supports made available to learners with disabilities?*
 |  |  |  |  |
| 1. *Is there a role with overall responsibility for coordinating the various learner supports and monitoring their effectiveness?*
 |  |  |  |  |
| 1. *Are learner representatives encouraged / facilitated to be involved in quality assurance processes?*
 |  |  |  |  |
| 1. *Are questions regarding the availability and adequacy of supports included in learner satisfaction surveys?*
 |  |  |  |  |

**Core Guidelines 8 INFORMATION AND DATA MANAGEMENT**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Does your information management system provide reports relevant to programme review and evaluation and for external monitoring by QQI?*
 |  |  |  |  |
| 1. *Do the terms of reference of the governance committees at various levels specify what information / reports / indicators need to be supplied for review?*
 |  |  |  |  |
| 1. *Are there support arrangements in place to ensure the security and sustainability of information systems?*
 |  |  |  |  |
| 1. *Are there data protection procedures in place to ensure that data is managed securely and that data relating to learner assessment is accurate and complete.*
 |  |  |  |  |
| 1. *How do information systems support the ongoing operation of quality assurance and monitoring? Are there tracking systems? Who has access?*
 |  |  |  |  |

**Core Guidelines 9 PUBLIC INFORMATION AND COMMUNICATION**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Is there a policy governing what information is published about validated programmes? (Ref Section 9.1, 9.2 CGLs)*
 |  |  |  |  |
| 1. *Is programme information approved for accuracy prior to publication in hard copy or on websites?*
 |  |  |  |  |
| 1. *Is there a commitment to publish quality assurance evaluation reports which the provider has carried out?*
 |  |  |  |  |
| 1. *If you are collaborating in any way with another provider in the delivery of a programme, does all programme information make clear which provider has the validated programme and, therefore, responsibility for quality assurance?*
 |  |  |  |  |

**Core Guidelines 10 OTHER PARTIES INVOLVED IN EDUCATION AND TRAINING**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *If you are collaborating in any way with another provider in the delivery of a programme, is it clear which provider has the validated programme and, therefore, responsibility for quality assurance?*
 |  |  |  |  |
| 1. *Where you the owner of a validated programme which requires the collaboration of another provider, are there documented agreements in place setting out respective responsibilities in respect of delivery, assessment and quality assurance?*
 |  |  |  |  |
| 1. *Are there arrangements in place for consultation with employers in respect of programme outcomes and content during programme development?*
 |  |  |  |  |
| 1. *Are there arrangements in place for consultation with other providers in respect of transfer and progression options during programme development?*
 |  |  |  |  |
| 1. *Have you established criteria and process for appointing persons of appropriate expertise to act in the role of independent authenticator / evaluator / evaluator as required?*
 |  |  |  |  |

**Core Guidelines 11 SELF-EVALUATION, MONITORING AND REVIEW**

| ***Gap-analysis question*** | ***Process already in place? Summarise*** | ***Action Required? Describe*** | ***Who Responsible*** | ***By When*** |
| --- | --- | --- | --- | --- |
| 1. *Are the purpose(s), responsibilities, processes, outcomes and oversight of monitoring documented and communicated?*
 |  |  |  |  |
| 1. *Is it clear how the results of monitoring are used to maintain and improve quality of programmes and services?*
 |  |  |  |  |
| 1. *How has self-evaluation been incorporated as an essential part of all QQI related quality assurance activities? Is there a documented process for self-evaluations?*
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| 1. *Are you satisfied that your evaluation processes can be genuinely critical and improvement focused?*
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