

SECTION 4.9

Green Paper on Reviews

FOR CONSULTATION

QQI welcomes your views. If you have suggestions regarding any aspect of the content of this proposed Policy Document please use the *Questions and Comments* area which appears immediately after it.

> PLEASE NOTE: **13 SEPTEMBER 2013** CLOSING DATE FOR SUBMISSONS

SECTION 4.9 Green Paper on Reviews

4.9.1 Introduction

The paper explores the possibilities for drawing on the models and experience of institutional review developed for HET by the legacy bodies to serve statutory review functions of QQI.

4.9.2 Institutional Review

Institutional review has at its core an external evaluation of the effectiveness of the quality assurance procedures of providers considered at the level of the institution as a whole. Other specific elements may be incorporated in addition to this core.

4.9.3 Context and institutional review experience

The 2012 Act provides for a number of different kinds of QQI review: review of the effectiveness of provider QA procedures and their implementation (Section 34); quality reviews (Section 42); withdrawal of quality assurance (Section 36); review of the NUI's linked provider procedures (Section 40); review of validation (Section 46); review of delegated authority (Section 54); review of implementation of access, transfer and progression procedures (Section 57); and review of compliance with the International Educational Mark (IEM) Code of Practice (Section 63). Given the broad remit of QQI with regard to review functions across a range of areas, a QQI policy approach to review may be required.

Prior to amalgamation, institutional review practice across the former bodies was varied. QQI is currently finalising terms of reference for a comprehensive review of the legacy higher education institutional and quality assurance review models. It is referred to as the 'Review of Reviews'. The key purposes of this review are to evaluate the effectiveness of legacy higher education and training quality and institutional review models that have transferred to QQI; to consider the findings resulting from the outcomes of those reviews; and to provide institutions that underwent review with a further opportunity at an individual and collective level to provide feedback to QQI on the experience and the effectiveness of the processes. It is anticipated that the outcomes of this review will significantly inform the development of a QQI fit-for-purpose model or models of review for higher education and training institutions. It is the intention that further analysis of best practice internationally in the area of review will

supplement the outcomes of the 'Review of Reviews' and of this Green Paper consultation process in informing the development of an institutional review policy or policies for QQI. The options set out in this Green Paper are designed to stimulate thinking in parallel with this review process and how institutional review models might be extended outside of higher education and training.

European developments in quality assurance practice are discussed in Green Paper 4.10 on Quality Assurance Guidelines and also provide relevant context for the institutional review.

4.9.4 Range of reviews and their relationship to institutional review

When considering policy, QQI will be required to look beyond just the provisions set out in Sections 34 and 40 for the review of the effectiveness of QA procedures. The approach to the range of reviews indicated by the legislation also requires consideration. For example the relationship between the review of the effectiveness of quality assurance procedures and other reviews must be considered. If a provider's quality assurance procedures are well established and appropriate then the approach to all aspects of provision, including compliance with the IEM, access, transfer and progression procedures and the making of awards under delegation of authority is likely to stem from a single coherent system of QA procedures. It may be possible for the terms of reference for a review of the effectiveness of QA procedures to be expanded to incorporate these aspects. This would build on the experience of the HET Awards Council of incorporating access, transfer and progression, delegated authority review, and review of validation into institutional reviews. The objectives of the review would need to make specific reference to the incorporation of these aspects of review and the review outcomes would need to clearly indicate the position of the QA procedures in respect of these specific elements. Policy in relation to these areas (IEM, ATP and DA) would need to be established in such a way that a review of implementation and compliance could be conducted or 'packaged' within a wider review. At the same time, where there may be a significant gap (up to 7 years) between one review of the effectiveness of QA procedures and the next, the opportunity to review each of these policies discretely may also be retained. Policies, terms and conditions in relation to QA approval and the approval/agreement of each of these strands would have to indicate the implications for QA status if QA procedures in any one of these areas was found wanting.

4.9.5 Options for consideration when developing policy for institutional review

Key variables informing options

A number of general key variables that impact on the nature and scope of reviews that QQI may conduct have been identified below. Each variable is set out as a continuum and each review policy option can be situated at a particular point within each continuum. It may aid understanding of the key features and advantages/ disadvantages of the policy options set out in the following section if these variables are explained further. The variables are:

1. Single versus multiple purposes for review

A review may be focussed on a single purpose (i.e. to review the effectiveness of QA procedures) or additional purposes may be added or merged.

2. Narrow or broad scope of providers

Review models may encompass a range of provider types or may be targeted towards specific provider types.

3. Multiple review models versus a single model

There may be a single overarching model or approach to all reviews or there may be different approaches depending on different contexts.

4. Revolutionary models or evolutionary models

The proposed option may build on what has gone before (evolutionary) or it may propose an entirely new paradigm (revolutionary).

5. Workload distribution

The proposed option may be very resource intensive at the point of implementation (this is particularly true of very bespoke models or models where specific terms of reference need to be devised and negotiated for every review) or it may use resources in more generic ways, building experience into policy and frontloading workload to the policy development phase (for instance devising an approach that allows for standardisation and the use of templates).

6. Policy and process integration versus separation

The review option presented may be situated entirely separate to other QQI interactions or it may take into consideration the full range of QQI functions and engagements with providers, building on those engagements.

7. Provider Lifecycle of Engagements - review integration versus detachment A review model may be highly integrated with the Provider Lifecycle of Engagements, allowing for reviews which by their nature integrate well with the context of where providers are situated in the cycle. Alternatively, a review model may sit outside this model, offering a relatively independent and stable cycle of reviews.

8. Rapid implementation versus stages of implementation

A review model may be implementable on a relatively short-term basis or may take longer to fully implement, with stages required before full implementation can be achieved.

9. Accountability versus enhancement

Review models can be predicated on an assumption that QA systems are extant and effective with a predominant objective towards the enhancement or improvement of systems. Review models can also be predominantly focussed towards regulation and accountability with a focus on ensuring that QA systems are in place and effective. It is possible to incorporate both elements into a single model of review, but there will generally be a tendency towards accountability or enhancement.

Many examples of international practices versus few Review models may be more or less common when considering international practice.

OPTION 1: A single Institutional Review model building on existing practice rolled out as providers mature

The key concept behind this option is that the conduct of institutional review (under Section 34) would be restricted to a particular cohort of providers which would be identified as

'review ready'. Review readiness would be established based on the relative autonomy of the providers and evidence that a coherent QA system is in place, based on the outcomes of legacy reviews. As other providers mature in their relationship with QQI, they would be moved into the 'review ready' category.

QQI would implement the requirements of Section 34 (to review the effectiveness of QA procedures and their implementation) for providers that are not 'review ready' via other engagements, in particular programme validation and monitoring.

There would be a separate process for Section 42 quality reviews. Other review processes (IEM and ATP) could be integrated into the institutional review process (for 'review ready' providers), managed via other engagements, or reviewed separately.

The primary focus for institutional review would be the effectiveness of providers' own QA procedures, lending an externality to their own review, with a greater degree of focus on an enhancement agenda. This would allow for significant development of the review model prior to implementation, with objectives and criteria that could be set at the developmental stage. This option builds on existing models and engagements moving them towards an increasingly enhancement-focussed agenda.

Option 1 Profile							
		Very	Slightly	Neutral	Slightly	Very	
General Variables	•	,			-		_
Purpose	Multiple						Single
Scope of providers	Broad				J)		Specific
Number of models	Multiple- Bespoke						Single-Generic
Development	Revolutionary					V	Evolutionary
Workload distribution	Implementation						Development
Integration with other policies	Separate						Integrated

Integration with provider lifecycle	Detached		V	Integrated
Duration of implementation	Slow			Quick
Number of stages	Several		V	One
Qualitative focus	Regulation			Enhancement
International examples	Few			Many

Advantages of Option 1:

- This could be a simple, clear and easy to communicate policy
- Relatively rapid introduction would mean that a new cycle of reviews could commence soon
- Approach to reviews would be in line with international expectations and standards
- This is a low-resource option, allowing for focus at development instead of implementation phase and restricting expensive review processes to autonomous providers only
- There is a balance in workload across service sections in QQI
- This reduces the potential workload for providers who have a range of QQI engagements.

Disadvantages of Option 1:

- There may be a perceived inequality of treatment of providers in terms of process and cost
- There would be a need for reliable data on providers to contribute to a decision to move them into the 'review ready' category
- It could be argued that it does not fully address the requirement of the legislation to 'review' the QA procedures, where review is conducted via other engagements.

OPTION 2: A Single Broad Generic Review Model not aligned to any particular current approach

The key feature of this option is that review would become a significant activity for QQI, with a single broad flexible generic 'review' model suitable for all education and training activities (Section 34; Section 40; Section 42; Section 37 (3)) being adopted. Much of QQI engagement and activity with providers would be categorised as 'review'. This is a very high-level policy option and significant further consultation and negotiation would be required to work out review options.

QQI would be required to extrapolate existing processes (e.g. institutional review) to something more generic. More demanding engagement with providers would be required (establishing terms of reference etc.) at the implementation phase. QQI could only produce very broad guidelines but they would cross a range of scenarios. Hence, at a policy level this would be a very outline process.

There would be a need for bespoke terms of reference, objectives and criteria for every review - these could capture additional review items including IEM review and DA review but this might only be determined at the point of commencing a review.

Option 2 Profile							
		Very	Slightly	Neutral	Slightly	Very	
General Variables	1					1	
Purpose	Multiple						Single
Range of providers	Broad						Specific
Number of models	Multiple- Bespoke					V	Single-Generic
Development	Revolutionary	V					Evolutionary
Workload distribution	Implementation						Development

Integration with other policies	Separate			Integrated
Integration with provider lifecycle	Detached			Integrated
Duration of implementation	Slow			Fast
Number of stages	Several			One
Qualitative focus	Regulation			Enhancement
International examples	Few			Many

Advantages of option 2:

- Very broad based approach with equality of treatment for all providers
- Allows for a significant negotiation with sectors on the design of review
- Allows for bespoke options that may cater for unanticipated events (for example the redefined FET and HET landscapes)

Disadvantages of option 2:

- It could be argued that QQI is 'kicking down the road' policy decisions on review by presenting a very generic, anodyne option
- Very bespoke terms of reference could lead to inequality of treatment
- This may water-down the concept of review
- Providers who have significant other engagements with QQI could complain about the expense (cost and resource) of also having to undergo a review process
- This could create an artificial review appetite in providers, with the perception that review could be a means to enhanced provider status
- The potential for QQI to support a review regime of this nature, given current resources and other engagements, is questionable
- It may be more difficult to demonstrate compliance with international requirements as the criteria would only be determined in the implementation.

OPTION 3: Several Different Review Models

The key feature of this option is that QQI goes further than just having one model of review to meet the requirements of Section 34. There would be a suite of types of review depending on provider sector and/or situation in the Provider Lifecycle of Engagements. It would allow QQI to develop some tailor made solutions in the development phase without having *de novo* terms of reference and bespoke criteria for every review (i.e. we make some 'cuts' as to the kind of reviews that we want from the beginning).

This option would allow QQI to build on relationships and engagements with sectors to date aligning the review process to the level of development of the sector. It would be suitable for a wide range of providers and to the Provider Lifecycle of Engagements. For example:

- For review experienced providers it would move towards an enhancement focussed approach
- For providers who are more dependent/earlier in the Provider Lifecycle of Engagements a different approach/range of approaches to review of effectiveness (more monitoring/compliance oriented) would apply
- A specific approach to thematic and 'other' reviews (Section 42) could be designed
- A specific approach to review that could lead to withdrawal of QA approval could be designed.

The different review options could be rolled out over a period of time, giving QQI an opportunity to develop the models with the sectors when they are ready. The level of engagement for each review model would be tied to the level of other QQI engagements; interactions and provider status; and relative autonomy.

Option 3 Profile									
		Very	Slightly	Neutral	Slightly	Very			
General Variables	General Variables								
Purpose	Multiple		V				Single		
Range of providers	Broad						Specific		

Number of models	Multiple-			Single-Generic
	Bespoke	<u> </u>		
Development	Revolutionary	\checkmark		Evolutionary
Workload	Implementation			Development
distribution		<u> </u>		
Integration with	Separate			Integrated
other policies		<u> </u>		
Integration with	Detached			Integrated
provider lifecycle			<u> </u>	
Duration of	Slow			Fast
implementation		<u> </u>		
Number of stages	Several			One
Qualitative focus	Regulation			Enhancement
International	Few			Many
examples			-	

Advantages of Option 3:

- It broadens the concept of review in the spirit of the Act
- It allows for a balance between development-investment and implementationinvestment
- It allows for negotiation to develop appropriate review methodologies with sectors over time
- It allows for more frequent review engagement with providers
- It could be aligned to the Provider Lifecycle of Engagements, allowing for some flexibility for review options at intervals
- It provides QQI with a range of review options to implement (choice)
- It allows for the possibility for the review concept to be broadened beyond a peerreview process.

Disadvantages of Option 3:

- Again, it could be argued that this waters down the concept of review
- There is a risk that some reviews would meet international requirements while others may not
- This is a significantly resource-intensive approach

- Providers who have significant other engagements with QQI could complain about the expense (cost and resource) of also having to undergo a review process
- There is the potential for some providers to 'fall between stools' of review options. It may also be possible that the model of review required could alter as more evidence is uncovered over the course of a review
- There would be a need for very reliable data to inform the alignment of providers with appropriate review categories
- This could create an artificial review appetite in providers, with the perception that review could be a means to enhanced provider status.

Questions and Comments

SPECIFIC CONSULTATION QUESTIONS

Q4.9.A Are there other approaches to institutional review that have not been considered in this Green Paper?

Q4.9.B Does the institutional review approach as discussed in this paper meet the needs of sectors outside of higher education and training, or should further consideration be given to developing significantly different approaches to reviews outside of higher education and training?

Q4.9.c Should QQI encourage, where possible, the practice of incorporating other reviews provided for in the legislation (IEM; DA; ATP) into institutional review?

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Questions and Comments

GENERAL CONSULTATION QUESTIONS

Q4.9.D Do you have any preferences among the options set out?

Q4.9.E Are there advantages and disadvantages that have not been identified for each option identified in this Green Paper?

Q4.9.F Do you have any other comments on the issues raised in the Green Paper?

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