



## QUALITY IMPROVEMENT PLAN

FOR

JANUARY 2018 TO DECEMBER 2019

## Introduction

This Quality Assurance Improvement plan represents the outcomes and improvement activities identified for CMETB following the conduction of the Executive Self-Evaluation process. The plan is for the two year period January 2018 -December 2019.

The CMETB approach to the Quality Improvement Plan is the development of a progress monitoring system, where measurable performance indicators and key result areas, both qualitative and quantitative, are developed and monitored on an ongoing basis to manage performance against the delivery of strategic objectives. From the initial baseline assessment derived from the ESER, data will systematically be collected to ensure that outputs are in line with strategic objectives. This data will be reviewed on a quarterly basis against the five year strategic framework and the FET Strategic Plan.

This plan has been designed with due consideration of core statutory quality assurance guidelines and their requirement of enforced separation of responsibilities whilst ensuring sufficient oversight of education and training activities.

CMETB acknowledge that a successful Quality Assurance system will be “efficient, well communicated and integrated into the normal activities of the provider” (QQI Core Statutory Quality Assurance Guidelines, April 2016/QG1-V2, p2. These reference points will be considered in CMETB activity going forward.

In order to ensure we embed a quality culture with the CMETB Total Quality Management Framework, CMETB recognizes that the totality of the CMETB teaching and learning community must be working in a coherent and cohesive way towards implementing the quality agenda within a structure whereby quality is accepted as a responsibility for all to improve on.

The assignment of specific quality assurance responsibilities are based on the subsidiary principle i.e. that QA matters ought to be handled by the lowest or least centralized competent authority

Procedures will be developed and considered in line with quality assurance feedback and feed forward paths to maximise communications and transparency.

It is a recognised requirement that a balanced, holistic organization wide approach is taken to quality assurance where continuous improvement is key and where procedures are integrated into the normal activities of the ETB. These parameters will underpin the management and support the success of the QIP going forward.

## Process for Approving the Plan

The process employed for the development of the QIP was as follows:

- Following completion of the Executive Self-Evaluation Report (ESER) by the lead person responsible, a meeting was scheduled with members of the Quality Assurance, Active Inclusion and Reporting team to review the ESE, consider the recommendations and commence drafting the QIP.

- A draft QIP was finalised by the aforementioned working group and a meeting was scheduled with the FET Director, whereby the planned outcomes and actions were reviewed and approved.
- The final QIP is submitted through the FET Director for approval by Senior Management.
- Implementation of the plan is monitored by means of subsequent reporting through the teams identified in the plan, to the FET Director
- The QIP will be monitored on a quarterly basis and progress updates against the planned outcomes and activities will be provided by the FET Director to the Senior Management Team.

The five priority areas for focus identified through this plan are:

1. Review and enhancement of the FET QA governance structures
2. Improved use of management information tools
3. Development of integrated policies and procedures with a view to integrating all policies and procedures under a CMETB framework.
4. Integrated planning and management of CMETB programme related activities
5. Staff and Stakeholder consultation and communication to deliver quality, relevant curriculum.

These are aligned to FET Strategic Goals and Key Performance Indicators in the following tables with timelines, measurements and responsible persons attached to each key result area.

Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>1</sup> Status/Update
<b>Strategic Goal 1 – Skills for the Economy</b>					
<b>KPI 1</b> - Current FET Provision is in line with skills for the economy	<b>KRA 1:</b> Continue to monitor and ensure that CMETB FET Strategy is in line with FET National Strategy and reflects the overall CMETB Strategy	FET Director and FET Planning Committee	Quarterly	Assessment of CMETB activity against national and regional requirements on an annual basis	
<b>KPI 2</b> - FET Provision reflects employer based profile and industry standards	<b>KRA 2:</b> Continue a process of extensive internal and external consultation with regard to the development of ongoing strategy	CE FET Director Director of Organisational Supports	Quarter 4, 2019	The development of a new CMETB Strategic Plan 2021 – 2025 (including FET Strategy) which demonstrates wide internal and external consultation underpinning its Strategic Goals	
	<b>KRA 3:</b> Formulate a service wide plan to increase learner and employer involvement in programme development and delivery	FET Director FET Planning & Workforce Development sub group	Devise plan in Quarter 2, 2018 and implement from Quarter 3, 2018	Sharing of CMETB plan mapping learner and employer involvement in the development and delivery of programmes.	
	<b>KRA 4:</b> Disseminate learnings and best practice from engagement with stakeholders and collaborating partners	FET Director in association with FET Planning, Integration and Co-ordination	Reviewed Quarterly from Quarter 2	Live, up to date group on share point monitoring and sharing information on interactions at service level with businesses	

<sup>1</sup> This could be colour coded to indicate progress. i.e. **Green** on track, **Amber** in progress or **Red** at risk/not completed.

		Committee; Workforce Development Committee			
	<b>KRA 5:</b> Review processes and methods of sharing external and internal evaluation information at CMETB Level. Devise an action plan in relation to the findings of these evaluations	CE FET Director SMT	December 2018 and annually thereafter	Devise action plan for implementation and include a review of suitable communications media.	
<b>KPI 3</b> - Introduction of new programmes and associated QA procedures for the development of new apprenticeships	<b>KRA 6:</b> Development of new Apprenticeships for validation and associated QA Procedures: OEM HGV	CE FET Director Training Manager Director of QA CSG	2018 2019	Programmes validated and open for recruitment	OEM HGV
	<b>KRA 7:</b> Integration of learnings from Apprenticeship programmes and feedback from other work based learning into general programme development practices	CE FET Director Training Manager Director of QA QA, Active Inclusion and Reporting sub committee	Quarterly - Ongoing	Agenda item at training services meeting; Agenda item at Teaching, Learning & Assessment meetings No's of new programmes developed.	

Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>2</sup> Status/Update
<b>Strategic Goal 2 – Active inclusion, literacy and numeracy strategy</b>					
<b>KPI 1</b> – Review, develop and implement a QQI approved RPL system	<b>KRA 8:</b> Review ETBI co-ordinated RPL strategy with a view to adopting it, or a localised version, across CMETB	FET Director Director of QA Directors of Service NAIREC	Quarter 4, 2018	Review, adopt and implement ETBI developed RPL strategy in line with Goggin, O Leary and Sheridan Report, Sept 2017	
<b>KPI 2-</b> Support and enable staff through CPD	<b>KRA 9:</b> Development and roll out of CMETB CPD strategy	FET Director FET Co-ordinator Heads of Service	Quarter 1-ongoing	Published programme of CPD opportunities Numbers of staff availing of CPD reported on a Quarterly basis to Teaching, Learning & Assessment Committee	

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Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>3</sup> Status/Update
<b>Strategic Goal 3 – Quality Provision</b>					
<b>KPI 1</b> – Integration of existing 4 QA Agreements into one overarching agreement	<b>KRA 10:</b> Develop a process for the streamlining of QA agreements	Director of FET Engage outside consultant Director of QA	Commence Quarter 2, 2018	Integration of QA Agreements into 1 CMETB Total Quality Management Framework	
	<b>KRA 11:</b> Commence the integration of policies and procedures on a policy by policy basis across all services	FET Director External Consultant Director of QA Heads of Services	Commence Quarter 2. Complete by Quarter 3, 2019	All new policies and procedures applying to the CMETB Total Quality Assurance Framework developed and published on a public website.	
	<b>KRA 12:</b> Review QA procedures and policies with respect to Training Services	Training Manager QA Officer	Commence Quarter 1, 2018	New agreed CMETB Training Services Quality Framework and Plan	
	<b>KRA 13:</b> Ensure all non QQI certification delivered in FET Centres is mapped into CMETB Total Quality Assurance Framework	Heads of Centre QA Officer Director of QA QA, Active Inclusion and Reporting Committee	Commence Quarter 2, 2018	Identify all non QQI Quality Agreements Review and agree an integration plan	

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Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>4</sup> Status/Update
<b>Strategic Goal 3 – Quality Provision</b>					
<b>KPI 2-</b> Completion of an ESE Report and the development of A Quality Improvement Plan	<b>KRA 14:</b> Draw out QA specific risks in order to ensure they are considered and integrated into the CMETB agreed Quality Improvement Plan as it evolves	FET Director Heads of Services Director of QA	Quarter 2, 2018	Identification of QA related risks and their inclusion on CMETB FET risk register	
	<b>KRA 15:</b> Development and implementation of a TEL Strategy to support Quality Delivery	FET Co-ordinator Heads of Services Teaching, Learning & Assessment Committee	Quarter 4, 2018	CMETB TEL Strategy published Implementation plan devised and monitored quarterly thereafter	

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Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>5</sup> Status/Update
<b>Strategic Goal 4 – Integrated Planning, Management &amp; Funding</b>					
<b>KPI 1</b> – Revise overall FET provision and work towards eliminating duplication & overlap	<b>KRA 16:</b> Quantitative metrics to be used to inform Programme Proposal Committee decisions	Director of QA Heads of Services External Evaluators	Quarter 1, 2018	Quantitative Metrics on all programmes being sent to PPC for consideration; Data shared at QA Active Inclusion and Reporting sub-committee meetings	
	<b>KRA 17:</b> Review of evidence in support of PPC to include more external subject matter experts/employers endorsements	Heads of Services representing those making a proposal	Quarter 2, 2018	Evidence of employer/student engagement in proposals/presented at PPC meetings	
	<b>KRA 18:</b> Consolidation of findings from RAP meetings for review centrally	QA Officer Heads of Service	Quarter 2, 2018 and ongoing	CMETB common RAP template to be developed and used across all services.	
	<b>KRA 19:</b> Continued consolidation of findings from EA reports and the development of a process of shared learnings	QA Officer Heads of Services	Quarter 1, 2018	Consolidated finding to be shared at QA Active Inclusion and Reporting Committee meetings on a Quarterly basis	

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Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>6</sup> Status/Update
<b>Strategic Goal 4 – Integrated Planning, Management &amp; Funding</b>					
	<b>KRA 20:</b> Conduct a review of EA panels in conjunction with integrated ETBI processes	QA Officer Heads of Service	Quarter 3, 2018	Updated panel by subject Supplemented with additional expertise as appropriate	
	<b>KRA 21:</b> Continue to develop the process and grounds for appeal across CMETB	Directors of Services Director of QA TSO ETBI working group	Quarter 3 2018	Review Grounds of Appeal in conjunction with ETBI published guideline and work to implement in new academic year.	
	<b>KRA 22:</b> Review the key elements informing the learner experience. Identify three priorities and devise an integrated CMETB approach to same	FET Director Teaching, Learning and Assessment working group	Quarter 1, 2019	Top three priorities to be identified via survey monkey; Integrated approach to responding to top three priorities published and associated action plan agreed.	

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Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>7</sup> Status/Update
<b>Strategic Goal 4 – Integrated Planning, Management &amp; Funding</b>					
<b>KPI 2-</b> Manage data infrastructure to support programme provision, delivery, certification and communication	<b>KRA 23:</b> Conduct a review of how existing data sources may be effectively analysed to inform planning, monitoring, policy development etc.	FET Director Teaching, Learning & Assessment Working Group	Formation of sub-Group Quarter 2 and implementation plan Quarter 4.	Identify key members of staff with systems knowledge; FET planning group to devise terms of reference for this subgroup.	
	<b>KRA 24:</b> Upload common CMETB policies and documentation as they are developed	CMETB Board CE FET Director Heads of Services	Ongoing from Quarter 2, 2018	Policies available and published on CMETB website	
	<b>KRA 25:</b> Review and establish new procedures and guidelines regarding the retention and storage of learner records in line with national policy and funding requirements	FET Director Heads of Services ETBI	Ongoing Quarter 3, 2018	Adoption of procedures devised by ETBI once published and revised annually and version controlled in line with same	

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Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [how will you know it was achieved]	<sup>8</sup> Status/Update
<b>Strategic Goal 5 – Standing of FET</b>					
<b>KPI 1</b> –Assist with the integration of quality and governance processes across all FET service centres	<b>KRA 26:</b> Conduct a robust review of existing FET Governance structures and augment as appropriate	CE FET Director External Consultant	December 2018	Completed report with recommendations adopted as relevant.	
	<b>KRA 27:</b> Where changes are made – update Terms of Reference accordingly	Director of FET External Consultant	Plus one month from adoption of new structures	Terms of Reference in line with Best practice published for each committee. Working group or entity within CMETB	
	<b>KRA 28:</b> Identify clear lines of governance responsibility across all FET services	CE FET Director External Consultant	Quarter 1, 2019	Briefing delivered to all relevant staff on Governance and associated responsibility	
	<b>KRA 29:</b> Conduct a review of membership of working groups and committees to ensure appropriate separation of roles and responsibilities	CE FET Director in consultation with Centre Managers/Directors	Quarter 1, 2019	Membership reviewed and amended as required in line with recommended best practice.	

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Quality Improvement Objective/Desired Outcome	Key Result Areas as identified in ESER	Responsible Person(s)	Timeline	Measure/Benchmark [ <i>how will you know it was achieved</i> ]	9Status/Update
<b>Strategic Goal 5 – Standing of FET</b>					
	<b>KRA 30:</b> Develop integrated procedures for ETB level oversight, including non QQI certification	CE Director of FET External Consultant	Quarter 2, 2019	Set of procedures, developed, agreed and adopted.	

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