

Quality Assurance & Improvement Process & Procedures

Vision: to deliver skills training to improve engineering and leadership in North Yorkshire.

Mission: to provide excellent training for the benefit of employers.

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| Re-approved | August 2024 |
| Review by | August 2025 |
| Authorised by | C Gavaghan (CEO) |

Purpose

Derwent Training Association (Derwent Training) is committed to continuous improvement of standards of delivery, outcomes for learners & employers and achievement rates. This commitment is set out in the organisation's Quality Improvement & Assurance Framework.

The purpose of Derwent Training's quality assurance process is therefore to:

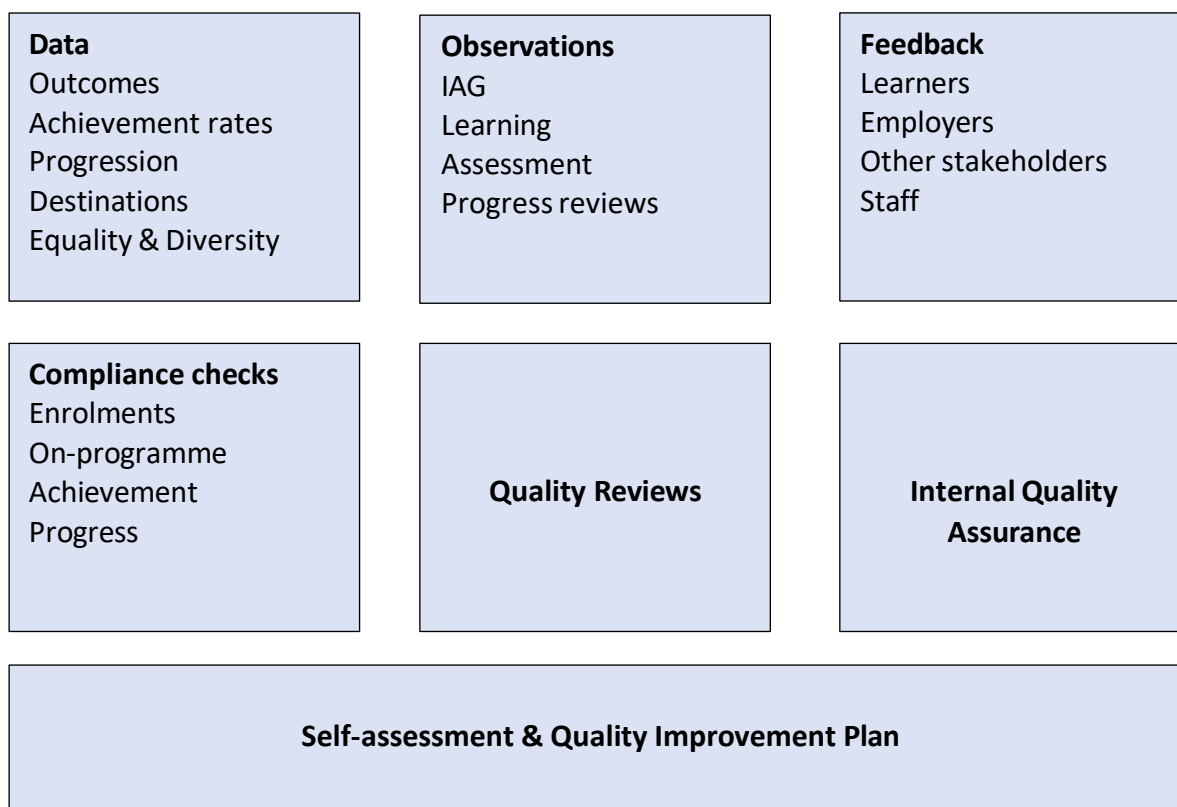
- establish and continually improve standards of teaching, learning and assessment, IAG, learner & employer satisfaction and outcomes for learners & employers
- ensure that teaching, learning and assessment methods and IAG inspire and challenge all learners and meets their different needs
- assist in identifying and supporting organisational development needs and the individual needs of trainers and business support staff
- measure progress and impact in order to identify the current position of teaching, learning and assessment, IAG and outcomes for learners for self-assessment.



The policies that should be read in detail are

- Quality Improvement and Assurance Framework
- Assessment Strategy & Processes
- Teaching and Learning Strategy

Methodologies



Procedures

Risk assessment and planning

The Quality Manager is responsible for planning a quality cycle calendar and improvement activities at the start of each academic year. Priorities and the frequency of activities will be planned based on risk, as identified from self-assessment, current data on performance and the outcomes of activities completed in the previous year. Programme and prime risk ratings are also used when planning quality assurance activities.

Quality assurance activities will be planned on the quality cycle calendar. The activities planned will include the following and are there to robustly assess Derwent Training's performance as an apprenticeship training provider:

- Observations of teaching, learning and assessment, review and IAG
- Collection of learner feedback
- Collection of employer feedback
- Collection of stakeholder feedback (e.g. partner, staff)
- Quality Reviews, by contract, programme and Prime
- Self-Assessment Report and report updates.

Activities planned for the next quarter should be reviewed as part of the SLT meetings

Contract, programme and partner risk ratings will be reviewed as part of the half-termly quality assurance process with SLT meetings and may be amended based performance, progress made with action plans and/or the outcome of a recent of Quality Review.

Data

The following data will be collected and analysed at least monthly and used to plan quality assurance activities or amend existing plans:

- Outcomes for learners – achievement rates, overall and timely achievement by programme and level
- Outcomes for learners – progressions
- Outcomes for learners – Functional Skills, including first time pass rates
- Outcomes for learners – by gender, BME group, age, learning difficulty or disability
- Outcomes for learners – by delivery team and by prime
- Learner satisfaction rates
- Employer satisfaction rates.

Data on contract performance, including against any Key Performance Indicators (KPIs), National Rates and Minimum Levels of Performance (MLP) should be reviewed as part of the SLT meetings.

Data packs will be reviewed as part of the SLT meetings. Risks identified through the data analysis will be used to inform the Quality Cycle Calendar.

Compliance

The Quality Manager is responsible for ensuring that routine compliance checks are completed and planning and carrying out internal audits in relation to each programme and contract.

Compliance checks will be completed on the following:

- New starters/enrolments
- On-programme/In-learning
- Achievement
- Progression.

Compliance checklists will be updated annually or prior to any new contracts or funding rules becoming effective. The criteria covered in the checklist will cover requirements relating to both quality and compliance.

Any errors and/or omissions identified in learner and/or employer records will be recorded on the compliance checklist. Errors or omissions identified must be rectified within 48 hours to ensure timely processing on funding claims.

Errors will also be recorded on the audit tracker and actions will be followed up. Overdue actions will be discussed at SLT meetings.

The performance management process will be implemented where individuals have an error rate above 5% or where they repeat errors after further training or with new learners.

Internal audits will also be planned and carried out as part of the quality review process. Audits will focus on delivery in relation to specific contracts, primes or individual staff. Audit findings will be included with the quality review reports, along with any actions or recommendations.

Observation scheme

Observation of staff performance is a key aspect of the organisation's quality assurance and quality improvement process, as observation provides direct contact with service users and an opportunity to evaluate staff performance and the learner & employer experience.

Observations will be planned on the Quality Cycle Calendar based on risk (e.g. where achievement rates are below the national rate, KPIs are not being consistently met, for new programmes or where issues with quality or consistency have been identified).

Observations of the following will be completed as part of the observation scheme:

- Teaching and learning
- Assessment
- Progress reviews
- Information, advice and guidance.

Observations will be completed as part of the Quality Reviews. Process based observations may also be completed across programmes and partners, to evaluate the effectiveness of a specific aspect of delivery such as IAG or Functional Skills delivery.

New trainers will be observed early on in their probationary period. They will be expected to demonstrate consistently effective performance before their position is made permanent.

Observations will be planned, carried out and recorded in accordance with the Teaching and Learning Strategy.

The observation is the start of the improvement process. An action plan should therefore be agreed within 5 days of an observation being carried out. Areas for improvement from observations will be recorded on an individual's Personal Development Plan.

The Quality Manager is responsible for tracking the completion of actions and for arranging follow up observations to evaluate progress and impact.

Good practice will be shared through the CPD sessions delivered to staff and partners on each programme.

Feedback

The Quality Manager is responsible collecting and analysing feedback from the following groups:

- Learners
- Employers
- Stakeholders e.g. partners
- Staff.

Feedback will be collected through the following methods:

- Interviews – as part of observations
- Forum/Focus Groups
- Internal surveys
- External surveys e.g. ESFA Learner Satisfaction Survey, Employer Satisfaction Survey.

Internal surveys should be planned on the Quality Cycle Calendar.

The learner interview questions should be used to interview individual learners, or small groups of learners, as part of the observation process. Strengths and any areas of improvement identified should be recorded in the QIP.

Learner forum focus groups will be used to consult learners on their views and to evaluate the impact of quality improvement actions that have been implemented.

Surveys will be circulated at least annually to:

- Identify learner/employer needs
- Gain feedback on key aspects of the service provided
- Measure progress with, and impact of, quality improvement actions
- Establish what learners/employers like and what they think could be improved.

Learner feedback and the actions taken to address any areas for improvement identified should be communicated to learners and employers through a 'You said we did' communication.

Self-Assessment Report

Derwent Training will complete a formal self-assessment exercise at least annually and will forward a Self-Assessment Report (SAR) to Ofsted, if required, and funders by the end of January each year.

Self-Assessment will involve a cross section of staff across the range of organisational functions, who will be asked to review the following evidence in order to identify the strengths, areas for improvement and grades to be included in the self-assessment report:

- Outcomes from learners – three-year trend data, outcomes by programme, level and group, first time pass rates, EPA pass rates and grades.
- Outcomes for learners - progression rates.
- Observations of teaching, learning and assessment – trends in strengths and areas for improvement identified through observation.
- Feedback – analysis of feedback from learners, employers and stakeholders, showing the strengths and areas for improvement identified.
- Quality Reviews – reports, QIP and progress with actions.
- Training, development and CPD records.
- Safeguarding and Prevent – DBS checks, management arrangements, incident logs
- External quality assurance reports e.g. awarding body, quality standards.
- Key business documents and plans e.g. strategic plans, operational plans, schemes of work, self-assessment reports and meeting minutes.

The Quality Manager should review the self-assessment evidence and reach agreement regarding the strengths, areas for improvement and grades to be included in the self-assessment report for the following:

- Effectiveness of leadership and management
- Quality of teaching, learning and assessment
- Personal development, behaviour and welfare
- Outcomes for learners
- Each type of provision.

The judgements and grades agreed as part of the self-assessment exercise will be used to draft the SAR. The Board of Directors validate the SAR prior to publication and circulation.

The QIP will be reviewed by the Board of Directors at each Board meeting.

Quality Improvement Plan

Sufficient actions to address the areas for improvement identified through self-assessment and quality assurance activities should be planned in a Quality Improvement Plan (QIP).

Actions included in the QIP should be SMART and be owned by the relevant member of the Senior Leadership Team.

Progress with the completion of actions and the impact should be monitored regularly.

New actions should be added to the QIP as issues with performance and/or quality are identified as part of the implementation of the quality assurance activities in the Quality Cycle Calendar.