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POLICY AND CRITERIA FOR PROVIDER APPROVAL



Dearbhú Cáilíochta agus Cáilíochtaí Éireann Quality and Qualifications Ireland

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1. INTRODUCTION AND LEGAL BASIS

This paper sets out QQI policy and criteria for the approval of a provider's capacity to submit programmes for validation within a specified range.

The policy is of relevance both to providers seeking their first programme validation and to providers who are seeking to extend the range of programmes within which they can apply for validation.

This document is focused on the policy and will not detail the associated processes as these are documented elsewhere. Definitions of italicised terms can be found in an accompanying <u>glossary</u>.

Sections 27 and 30 of the Qualifications and Quality Assurance Act (2012) oblige QQI to

- i. publish guidelines for providers to assist in the development of quality assurance procedures and
- ii. evaluate the potential effectiveness of those procedures.

Sections 28, 56 and 65 of the Act set out obligations for providers in respect of any programme which it seeks to have validated by QQI. These obligations relate to quality assurance, access transfer and progression and protection for enrolled learners.

Section 44 (7) states that a provider may not submit a programme for validation unless it has met the requirements of Sections 28, 56 and 65.

This is the legal basis under which QQI requires providers to have their quality assurance procedures and supporting structures approved by QQI before they can apply for validation.

It is important to note that approval of a provider's organisational capacity and quality assurance procedures does not assign any status to the provider other than allowing the provider to then apply for validation of a programme.

Section 30 (8) stipulates that a provider who falsely claims or represents that QQI has approved its quality assurance procedures commits an offence.

Sections 34 obliges QQI to review the effectiveness of a provider's approved quality assurance procedures.

Section 36 deals with withdrawal of approval of a provider's quality assurance procedures and the conditions under which this may be necessary. Note that such a withdrawal necessitates withdrawal of validation from that provider's programmes thereby ending its status as a relevant provider.

2. PURPOSE

The purpose of this QQI policy is to:

- establish the remit within which QQI can approve a provider's quality assurance and capacity to deliver programmes leading to QQI awards
- set out the criteria which underpin approval decisions
- explain the relationship between quality assurance approval and programme validation
- explain the meaning of 'approved scope of provision'
- describe the roles and responsibilities of actors in the QA Approval process
- Identify where further information can be found on how to access the various QA approval processes.

3. SCOPE

This policy applies to providers of education and training programmes seeking to apply to QQI to:

- validate a programme for the first time
- extend an already approved scope of provision.

4. POLICY

4.1 INTERPRETATIONS

The following interpretations of terms are particularly relevant to this policy.

Provider: A provider is a legal 'person' who provides, organises, or procures a programme. The 'person' will normally be a public or private organisation established to offer education and training but may have many different forms e.g. large colleges, distributed organisations, multi-party collaborations and small companies / voluntary bodies.

A provider using this policy will do so in one of two contexts:

- i. An **Applicant Provider** is an organisation which is seeking approval to submit its first programme for validation by QQI. Such a provider may have programmes accredited by other awarding bodies or may be offering non-accredited programmes. It is expected however that it will have experience of developing programmes based on learning outcomes and of assessing learners' achievement of those outcomes.
- ii. A **Relevant Provider** already has programme(s) validated by QQI but is seeking to extend the range of programmes which it can submit for validation.

Approved Scope of Provision: a provider's approved scope of provision is a statement of the limits to the range of programmes it can submit for validation. The limits are set by the following parameters:

NFQ Levels:	Lowest to highest	
NFQ Award Classes:	One or more of Major, Minor, Special Purpose, Supplemental	
Award Sectors:	Further Education and Training or Higher Education and Training	
Delivery Modalities:	One or more of: Onsite, Blended, Fully Online, Apprenticeship	
Discipline Areas:	Determined through validation.	
Collaborative provision:	Yes / No	
Transnational Provision:	Yes / No	

Example 1: a provider's approved scope of provision could allow it to submit programmes within the following range:

NFQ Levels:	6 to 9
NFQ Award Classes:	Major, Minor, Special Purpose
Award Sectors:	Higher Education and Training
Delivery Modalities:	Onsite, Blended
Discipline Areas:	Business, Information Technology
Collaborative provision:	No
Transnational Provision:	No

Example 2: a provider's approved scope of provision could allow it to submit programmes within the following range:

NFQ Levels:	4 to 6
NFQ Award Classes:	Major, Minor, Special Purpose
Award Sectors:	Further Education and Training
Delivery Modalities:	Onsite, Apprenticeship
Discipline Areas:	Health and Social Care, Retail
Collaborative provision:	Yes
Transnational Provision:	No

A provider applying for approval must set out its desired approved scope of provision and demonstrate that it has the capacity, resources, and quality assurance to merit that approval.

Programme: A programme of education and training is a process by which a learner acquires stated learning outcomes of knowledge, skill, or competence.

The programme will include assessment of the learner's achievement of those learning outcomes for the purpose of certification by QQI i.e. a programme will offer a QQI award to those learners who successfully complete it by achieving the programme's learning outcomes.

4.2 POLICY STATEMENT

Provider Approval is a regulatory process whereby QQI determines whether a provider's quality assurance, governance and resources are sufficient for a specified approved scope of provision.

Where a provider's application is approved, it may make applications to QQI for validation within the limits of that approved scope of provision.

Without subsequent programme validation, an organisation does not have relevant provider status.

5. CRITERIA FOR PROVIDER APPROVAL

Below are listed the core criteria for approving a provider as competent to submit programmes for validation. It is necessary that an application for provider approval demonstrates compliance with all the criteria.

These criteria are applied through an independent evaluation process resulting in a recommendation to QQI which alone has responsibility for deciding on approval.

	Criterion		
1	A provider must be an established legal entity, to be evidenced by compliance with ministerial regulations (SI.1TBC).		
2	A provider must demonstrate, through compliance with ministerial regulations (SI. TBC), sufficient resources as well as corporate, structural and internal quality assurance systems in place to sustainably provide education and training programmes that can be submitted for QQI validation.		
3	A provider must demonstrate ability to design, develop, provide, and review programmes.		
A provider must			
3.1	demonstrate experience and track record in providing education and training programmes.		
3.2	have a fit-for-purpose and stable complement of education and training staff.		
3.3	have premises, facilities, and resources appropriate to the scope of provision for which approval is sought.		
3.4	demonstrate understanding of and capacity to comply with statutory obligations relating to		
	Access, Transfer and Progression		
	Protection for Enrolled Learners		
	Cooperation with and Provision of Information to QQI		
	Fair and Consistent Assessment of Learners		
3.5	have procedures, systems and resources for quality assurance and academic governance which align with relevant QQI guidelines for providers.		

6. PROVIDER APPROVAL PROCESSES

6.1 PROCESS 1: INITIAL ACCESS TO VALIDATION (IAV)

A provider which does not have a programme validated by QQI, for these purposes termed an 'applicant provider', can apply to QQI under this process.

If successful in being approved against the listed criteria, the provider can then make an application to QQI for programme validation. If, and only if, the programme is validated, the provider can then state that it is a 'relevant provider' approved to offer QQI awards.

The provider approval process for IAV is detailed and comprehensive. Evaluation against Criteria 1 and 2, relating to the legal, financial and reputational standing of the provider and its principals, is carried out through the <u>Due Diligence</u> process. This evaluates an organisation's compliance with <u>ministerial regulations</u> around corporate fitness. Significant documentary evidence is required from the provider to demonstrate compliance with this criterion.

Criteria 3 tests the applicant's potential effectiveness as a provider of programmes leading to QQI awards within the scope of provision for which approval is sought. The evaluation against these criteria, described hereunder, will be carried out separately but in parallel with the Due Diligence process.

In its application, an applicant provider must demonstrate both an understanding of the obligations on a provider of QQI awards and its capacity to meet those obligations. In a self-evaluation report it should make clear its state of readiness and this should be supported by relevant documentation including:

- Application form provider details and scope of provision for which approval is sought.
- QA Manual setting out academic governance structures, QA policies and procedures, roles and responsibilities, terms of reference, etc.
- Mapping of QA procedures to the relevant QQI guidelines. A mapping tool is provided for this purpose.
- Description of available resources human, physical, technological, pedagogical, data management etc.

More detail is available in a process guide.

6.2 PROCESS 2: EXTENSION OF SCOPE OF PROVISION

A relevant provider, i.e. one which already has programmes validated, operates within an approved scope of provision as explained above.

Over time, relevant providers may see opportunities to offer programmes which, by one parameter or another, do not fit within the current approved scope. In such cases, they can seek approval to extend the scope. Examples of extensions are:

- different level of the NFQ where this implies a step change in academic governance. e.g. moving from FET to HET or vice versa, offering a Masters programme.
- use of blended or fully online modes
- significantly different discipline areas e.g. to offer healthcare programmes for the first time.
- devolved responsibility for managing programme evaluations (see validation policy).

A request to extend scope of provision will entail an evaluation focused on those aspects of

provider resourcing, governance, and quality assurance specific to the parameters of scope to be extended.

In its application, the provider must itself identify the implications arising from the proposed extension and identify the appropriate structures / resources / procedures required to address them. In a self-evaluation report it should make clear its state of readiness and this should be supported by relevant documentation evidencing that one or more of the following have been augmented:

- QA Manual updated to show new / amended academic governance structures, QA procedures, roles and responsibilities etc.
- Human, physical, technological, pedagogical resources, data management as appropriate.
- Mapping of additional / amended QA procedures to the relevant QQI guidelines.

More detail is available in a process guide.

6.3 FEES

The fees for all Provider Approval processes are included in the Schedule of Fees published by QQI.

7. EVALUATION PROCESS

The same evaluation model applies to both provider approval processes, the difference being that of scale, given that an applicant provider's application is broader based and the evaluation necessarily more detailed.

In both processes, an independent panel appointed by QQI will evaluate the provider's application with reference to relevant criteria and QQI's statutory QA Guidelines for Providers. The provider's application should show that it has already self-evaluated its systems and procedures and has evidence to show that it can meet the criteria.

The independent panel will evaluate the provider's application and will then arrange a meeting to discuss any issues arising. For applicant providers, this meeting will normally take place in the provider's premises so that its fitness for purpose can also be assessed.

The panel will agree a recommendation to QQI which will be one of:

- Approve.
- Refuse to Approve pending mandatory changes.
- Refuse to Approve.

The panel will document its findings and recommendation to QQI in a report to which the provider will have an opportunity to respond.

The independent panel report, and for applicant providers, the report of the outcome of the Due Diligence process, will be brought for decision to a QQI governance committee.

8. APPROVAL DECISIONS

A provider approval process will result in one of four decisions, each with its own implications as set out below.

Decision by QQI	Implication
Approve	The provider will be given an approved scope of provision, and it will be authorised to make an application for validation. For applicant providers, this authorisation is valid for six months from the approval date.
Approve with Conditions	The provider must, within a specified time period after approval, address some relatively minor issues identified by the panel. The provider will be given an approved scope of provision, and it will be authorised to make an application for validation within that scope.
	QQI will monitor to ensure the conditions are met within the specified time period. Where appropriate, QQI may request the panel to verify the adequacy of the provider's actions in respect of the condition.
Refuse to Approve pending Mandatory Changes	The provider must address significant issues identified through the Due Diligence and/or independent panel evaluations before approval.
	A resubmission of the application documentation demonstrating how the issues have been addressed will be required within a period of six months of the decision date.
	The resubmission will be evaluated, with the only possible decisions being to Approve or Refuse to Approve.
Refuse to Approve	Applicant Providers: The provider cannot proceed to validation and cannot reapply for approval for at least six months after the final decision date.
	Relevant Providers: The provider's scope of provision remains unchanged.
	In either case, the provider may appeal the decision to the <u>Appeals Panel.</u>

9. MONITORING AND REVIEW

9.1 PROVIDER MONITORING

Once approved, a provider is expected to apply its approved quality assurance procedures to all of its programmes and services. The academic governance structures are required to provide independent oversight of programmes, from initial proposal stage up to and including assessment for certification.

The provider's own monitoring and programme review procedures should supply information on an ongoing and periodic basis as to the quality of its programmes. These processes should involve primary stakeholders, particularly learners and staff.

9.2 QQI MONITORING

QQI will also monitor approved providers on an ongoing basis. The primary tools for QQI monitoring are programme validation, review, and certification activities. All of these processes involve QQI systems, and the quality of provider inputs will be evaluated.

The quantitative data generated by these outputs of processes is reported for monitoring purposes. QQI reports are made available to providers for their own monitoring and review processes.

QQI can also conduct thematic monitoring of a more qualitative nature using independent evaluation reports arising from validation and programme review processes.

9.3 FOCUSED REVIEW BY QQI

QQI may conduct a focused review of a provider's QA procedures from time to time, as it considers appropriate, or in response to concerns that have come to its attention in relation to the implementation and effectiveness of a provider's quality assurance procedures.

As the name implies, a focused review is a review of a particular area of interest rather than a general review of effectiveness. In such a situation, specific terms of reference will be developed and the report arising from the review will be published.

9.4 INSTITUTIONAL REVIEW

One of QQI's most important responsibilities is ensuring that an education provider's quality assurance procedures are effective.

The main way this is done is through the <u>institutional review process</u>, the aim of which is to provide an independent review of the effectiveness and implementation of a provider's internal quality assurance procedures.

10. WITHDRAWAL OF APPROVAL

Section 36 of the 2012 Act authorises QQI to withdraw approval of the quality assurance procedures of a provider with a validated programme.

This is possible where QQI considers that:

A. directions issued by QQI to the provider following a review have not been complied with

or

B. a review has shown that there are serious deficiencies in the implementation of the provider's quality assurance procedures.

Where a provider's quality assurance is withdrawn, the validation of all programmes of that provider is also withdrawn. The essential implication is that the provider can no longer offer QQI awards.

A decision to withdraw approval from a provider can only happen following an external review process which is subject to strict governance and is ultimately open to appeal by the provider.

11. ROLES AND RESPONSIBILITIES IN PROVIDER APPROVAL PROCESSES

The primary actors in a provider approval process are:

- Provider
- QQI Executive
- Independent panel
- QQI Governance Committees
 - Approvals and Review Committee (ARC) for Initial Access to Validation, Focused Reviews and Institutional Reviews
 - Programmes and Awards Executive Committee (PAEC) for Extension of Scope
- Appeals Panel

The roles and responsibilities of each are summarised below:

Provider:

The provider will

- 1. Using relevant QQI guidelines, develop and document quality assurance policies and procedures and governance systems appropriate to the organisation's context and to the scope of provision sought.
- 2. Self-evaluate the quality assurance system, using internal and / or independent expertise, with reference to this and related QQI policy and QA guidelines.
- 3. Make an application to QQI, including documented QA policies and procedures and selfevaluation report.
- 4. Pay the relevant fee.
- 5. Respond to any requests for clarification or amendment from the QQI Executive during screening of the application.
- 6. Participate in the independent evaluation process.
- 7. Respond to the findings of the independent evaluation process. This may involve amendment of the QA procedures and structures.
- 8. Implement the approved quality assurance procedures to programmes and services within the approved scope of provision.
- 9. Monitor the effectiveness of the approved quality procedures and adjust as necessary.
- 10. Participate in any focused or external review organised by QQI.
- 11. Implement any actions as directed by QQI following a focused or external review.

QQI Executive:

The QQI Executive will:

- 1. Explain the processes whereby new or relevant providers can be approved for a specified scope of provision.
- 2. Screen applications for approval made by providers.
- 3. Ensure that the application is independently evaluated against the criteria set out in this policy.
- 4. Present the findings of the independent panel to the relevant governance committee (ARC or PAEC) for decision.
- 5. Publish independent evaluation reports (IERs)
- 6. Following an approval decision, establish provider's approved scope of provision.
- 7. Where appropriate, provide all information required by Appeals Panel to facilitate it operations.

Independent Panel

The independent panel will:

- 1. comprise expertise in academic quality assurance and governance.
- 2. include perspective of a peer of the provider whose programme is being evaluated.
- 3. include learner perspective where appropriate.²
- 4. be transparent in its composition and motivation. Potential panel members will sign declarations on confidentiality and conflict of interest. Before a panel is confirmed and given access to programme documentation, a provider may raise concerns about its composition.

Approvals and Reviews Committee (ARC):

The \underline{ARC} will:

- 1. Review an application made under this policy together with the IER and the provider's response to same.
- 2. Make a determination on approval.

Programmes and Awards Executive Committee (PAEC):

The <u>PAEC</u> will:

- 1. Review an application made under this policy together with the IER and the provider's response to same.
- 2. Make a determination on validation.

Appeals Panel:

The <u>Appeals Panel</u> will:

- 1. Review any request by a provider who wishes to appeal a decision made by PAEC and confirmed by PAOC.
- 2. In each case, the Panel may confirm the original decision or quash the decision and direct the PAEC to reconsider.

See summary flowchart in Appendix 1. This demonstrates the interaction between these actors in the Initial Access to Validation process. Further details are available at <u>Link to Process Guide</u>

Mandatory on all higher education panels.

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APPENDIX 1: INITIAL ACCESS TO VALIDATION PROCESS

