

Annual Monitoring Report 2008



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FETAC

Annual Monitoring Report 2008

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Annual Monitoring Report 2008

1. Purpose

The purpose of this first annual report is to analyse and evaluate the implementation of monitoring of providers by FETAC during 2008, to identify issues arising and to set out plans for 2009.

2. Context

The functions of FETAC include making awards, determining standards, agreeing provider's quality assurance, validating provider's programmes and monitoring and evaluating the quality of programmes. The monitoring and evaluation function is undertaken through the external monitoring of provider's quality assurance.

To date over 700 providers have agreed their quality assurance policies and procedures and are currently registered with FETAC offering programmes leading to awards in a wide range of disciplines. The purpose of external monitoring is to ensure the credibility and integrity of these awards.

Monitoring evaluates the effectiveness of all aspects of the quality assurance system of providers. This includes their policies and procedures for developing programmes, assessment, protection for learners, recognition of prior learning, their programme approval agreements and their validated programmes to ensure consistency and the attainment of national standards.

Monitoring also evaluates the effectiveness of providers in the context of new developments in the sector which may impact on providers and FETAC awards. This included the introduction of new assessment requirements by providers from July 2008 and the introduction of new awards at levels 1 and 2. Further areas for monitoring include private providers who have recently registered with FETAC and minor awards offered in new fields.

3. Policy

In 2006, following consultation with stakeholders FETAC published its Monitoring Policy. The policy aims to ensure the credibility of FETAC awards through the monitoring of providers and their validated programmes, thereby ensuring the integrity of the awarding process and the attainment of national standards.

The monitoring process aims to assure learners, Council and others of the overall quality of provision in the sector and to ensure providers effectively implement their own quality systems.

FETAC recognises provider's quality assurance as the main engine of quality improvement and monitors its effectiveness in maintaining and improving the quality of programmes.

4. Process

The monitoring process facilitates a systematic review of the effectiveness of the provider's quality system. Monitoring involves the gathering of information on provider's programmes, services and the quality assurance systems which support them and evaluates their effectiveness.

Monitoring evaluates the effectiveness of the 'provider' which is registered with FETAC. The provider's centres, which are included in the provider's agreement with FETAC, will be monitored as part of the process.

The process includes the following stages:

- (i) **Planning**
- (ii) **Desk monitoring and analysis**
- (iii) **Site visits**
- (iv) **Preparing reports**
- (v) **Follow up and**
- (vi) **Publication of the Monitoring Report.**

A Project Manager plans and oversees the monitoring of providers in accordance with an agreed plan. The Project Manager has a team of 4 Monitors. The role of the Monitor is to undertake desk monitoring, plan and undertake site visits, prepare reports and follow up with providers.

Providers identified for monitoring are assigned to a specific Monitor who reviews and analyses all relevant documentation pertaining to the provider. This desk monitoring includes a review of provider data and an analysis of emerging trends in local and national standards. A desk monitoring report is prepared by the Monitor detailing the findings from this activity. A report is sent to the provider and additional information or clarification may be requested from the provider e.g. specific policies or procedures. Following this 'desk monitoring' a site visit may be required to the provider to review the provider's quality system on site.

After a site visit a monitoring report identifying good practice and areas for improvement is prepared and a draft sent to the provider. The monitoring process is concluded when the provider has sent feedback and agreed the accuracy of the report. The completed report will be published on the FETAC website. The Monitor is also responsible for follow up with the provider to ensure that areas for improvement, identified in the report, are addressed in the time specified.

During 2007 FETAC devised Tools and Guidelines for Monitoring to ensure a consistent quality approach. These include Monitoring Report Templates, Guidelines on Monitoring, meeting agendas and a Site Visit Checklist. These Tools and Guidelines were tested in a pilot where 10 providers were monitored by FETAC in late 2007/8. An independent evaluation of the pilot was undertaken to review the experience and evaluate the effectiveness of the tools and guidelines after which they were further refined.

The outcomes of the monitoring of this group of providers are also included in this Annual Report. This material is now available in the form of a Handbook for Monitors. A Monitors Code of Practice was also prepared which is set out in Appendix 2.

5. Implementation 2008

Monitoring of providers commenced in 2008.

5.1 Recruitment of Monitors

The first task of the new process was the recruitment of a panel of Monitors whose role is to monitor the effectiveness of quality assurance at provider and centre level.

A job specification for the Monitor role was drawn up and in January 2008 FETAC placed national advertisements for the position of Monitor.

In May 2008 FETAC engaged 4 full-time regionally based Monitors operating from Cork, Dublin, Galway and Limerick.

5.2 Induction Phase

An induction training programme was developed by the Project Manager; the objectives of which were to ensure the development of the on the job skills and competences of the monitors and to further refine the monitoring process.

Three of the four Monitors commenced their employment with FETAC in May 2008. The fourth has not yet taken up their role and is currently working on QA activities.

On completion of the two week training programme 21 providers were identified and agreed to partake in an on the job training exercise to facilitate the initiation of Monitors into the role. This phase of monitoring took place from June to the end of August 2008. Each of the three Monitors was assigned 7 providers.

The providers in question were selected on the bases of the date of their registration (2005/6) and their general availability during the summer period.

The on the job training exercise included:

- Desk monitoring including a review of provider quality assurance applications, self evaluation reports, quality assurance verification reports and certification data
- Preparing for and undertaking site visits and
- Report writing and follow up with providers.

During July and August 2008 all 21 providers were desk monitored and site visits were made to 14 centres. Monitoring reports were completed for the 14 providers who had site visits. Desk Monitoring reports were prepared for the 7 providers who were desk monitored only.

Regular briefing and review meetings were held by the Project Manager to ensure consistency and to review issues arising during this stage.

5.3. Review of Induction

Following completion of the induction phase in September 2008 a review of the on the job training exercise was undertaken by the Project Manager.

The findings of this review were presented to the Policies Committee in November 2008. Recommendations made included further refining the desk monitoring process, arranging for the publication of completed monitoring reports on the website and the preparation of more detailed Monitoring Guidelines for Providers. These recommendations are in the process of being implemented.

5.4. Management and Administration

An annual budget of €35,000 (excluding salaries) was allocated for the implementation of monitoring for 2008. The budget was provided to cover travel and subsistence, induction training and set up costs for remote working arrangements.

By the end of 2008 the expenditure for monitoring was €28,500.

This expenditure includes €21,000 for travel and subsistence incurred by the Monitors when traveling to provider locations and to FETAC for meetings. Additional capital and non capital costs of €7,500 relating to e-working were also incurred.

6. Monitoring Plan 2008/9

The policy on monitoring set out that an annual monitoring plan would be drawn up by FETAC to ensure systematic and planned monitoring. The Monitoring plan agreed for 2008/9 (to December 2009) identified the priorities for monitoring in terms of provider types, award areas and programme types.

6.1 Targets

Targets identified in the plan were as follows:

1. Number of providers

The overall target was to monitor 25% (160) of the total number of registered providers (641 as of end of April 2008) over a period of 18 months.

2. Awards and Programmes

Within the 160 providers it was planned that there would be a particular focus on a number of specific provider types including:

- Providers registered in 2005 and 2006
- New private providers
- Providers offering awards in specific sectors such as language, health and safety, security, healthcare, building energy regulation. These awards are generally achieved by learners as a result of a short programme
- A proportional sample of all providers offering small, medium and large volumes of certification to learners
- Providers identified by FETAC or referred to FETAC during the year. These included providers with recurring assessment and certification issues, and/or substantiated issues raised by learners or stakeholders.

6.2 Progress to date 2008/09

1. Number of providers monitored

A total of 49 providers were monitored by FETAC commencing in late 2007 and finishing in December 2008. This amounts to 7.5% of the total number of 641 providers registered at the time (April 2008) of the agreement of the plan. Table 1 below classifies the monitoring activity by phase and type of focus. Further details of each provider are contained in Appendix 1.

Table 1 below shows the number of providers monitored 2008:

Monitoring Activity	No. of Providers
Pilot Phase	10
Induction Phase	21
New Assessment Arrangements	9
Recognition of Prior Learning	3
Level 1 and 2	1
Providers identified by/referred to FETAC	5
Total	49

2. Awards and programmes

- Providers registered in 2005 and 2006

Three quarters or 37 of the 49 providers selected for monitored in 2008 were drawn from the registered listing for 2005 and 2006. The balance was registered in 2007. The latter were selected on the basis of having applied the new assessment arrangements, offered programmes leading to awards at levels 1 and 2, offered awards on the basis of RPL or where identified by or referred to FETAC.

- Type of provider monitored

New private providers accounted for more than half of the total number monitored. The awards they offered included security, building energy regulation, language and healthcare. In the main, they offered one or more minor awards.

Larger providers from the VEC, community/voluntary, former awarding bodies and workplace were also monitored during the year ensuring representation across all sectors. Within the workplace providers monitored included a trade union, a Skillnet, an employer sector representative body and health care institutions.

Table 2 below illustrates the type of provider monitored:

Type of provider monitored	No.
VEC/College of FE	4
Community/social provider	5
Former awarding body	1
Healthcare Public	6
Private provider	29
Sector body	1
Trade Union	2
Skillnet	1
Total	49

- Awards and programmes of providers monitored

The awards offered by providers monitored were spread over a wide range of major and minor awards from levels 1 to level 6 on the national framework of qualifications. These are:

Building Energy Regulation
Business Awards
Childcare
General Learning (levels 1 and 2)
Healthcare
Hospitality
Health and Safety
Information Technology
Language
Level 4 awards
Maintenance Skills
Occupational First Aid
Retail
Security
Supervisory management
Train the Trainer

- New programmes leading to the Building Energy Regulation award at level 6 and General Learning at levels 1 and 2 were also specifically included. Towards the end of 2008 FETAC commenced monitoring providers who offered validated programmes leading to awards at level 1 and 2. One of these providers was monitored by year end with the monitoring of two additional providers to be completed in early 2009.

3. Providers identified by FETAC

During 2008 FETAC monitored 5 providers identified as a result of specific issues arising from certification processes, learner feedback, Protection for Learners and issues identified at provider verification at registration. FETAC monitored these providers to ensure the providers were taking actions regarding these issues in the context of their agreed quality system.

A sample of providers who participated in the 'new assessment processes' were also monitored to determine compliance of providers in respect of the new requirements. A sample of 9 providers was monitored from a total of 31 providers who submitted learners for certification using the new processes in August 2008.

6.3 Key learning points

The monitoring of the effectiveness of providers quality systems undertaken has been a major learning and developmental experience.

A number of key learning points have been identified as a result of FETAC's experience of monitoring of providers.

1. Planning

The planning and scheduling of monitoring in accordance with the Monitoring Plan has proved to be an effective tool in the organisation of monitoring. However more effective planning is required which will increase the annual monitoring rate from 7.5% (2008) to 20% (2009).

The Former Awarding Bodies are also to be included in the Monitoring Plan for 2009.

2. Desk monitoring

More effective use of desk monitoring is recommended. This is particularly required to ensure compliance with the new assessment requirements. Desk monitoring of provider assessment reports, self evaluation reports and other provider documentation with the provision of direct feedback to providers and follow up by monitors through site visits are recommended.

Greater economies of scale are also suggested with more effective sampling of collective groupings of providers in conjunction with their funding agencies. Providers such as the Trade Union Congress Network of Centres, Nurse Education Centres, and the Skillnet provider's network are examples of this type of collective provider. FETAC will select a range of centres within such provider types for monitoring.

3. Guidelines for providers

It was noted by the providers and Monitors that detailed Guidelines on Monitoring are essential to inform providers about the monitoring process and to clarify the respective roles of FETAC and the provider. These Guidelines are due to be published on the FETAC website shortly.

4. Publication of Reports

A key stage of the monitoring process is the publication by FETAC of completed Monitoring Reports. The real impact of monitoring will become evident when a significant volume of providers have been monitored and when Monitoring Reports are published on the FETAC website. (fetac.ie)

Arrangements are currently being made for the publication on the website of the monitoring reports completed in 2008.

5. Monitoring Outcomes

The effectiveness of each provider's quality system is determined by the Monitor in a standard outcome statement which ranges from:

- (1) Quality Assurance effective in maintaining and improving the quality of programmes and services;
- (2) Quality Assurance effective in maintaining and improving the quality of programmes and services subject to provider addressing recommendations as identified in the Monitoring Report;
- (3) Quality Assurance moderately effective in maintaining the quality of programmes and services with a number of essential remedial recommendations requiring addressing and
- (4) Quality assurance system not effective.

To date the bulk of providers monitored were assigned Outcomes 2 and 3. These outcomes indicate that the provider's quality assurance system was not fully effective and there were both developmental and essential areas for improvement to be addressed by the provider and followed up by FETAC. These areas for improvement are described in section 6.4.2. below.

6.4 Findings

During the monitoring process Monitors documented their findings through the identification of (a) Good Practice and (b) Areas for Improvement. The findings of the 2008 monitoring activity are outlined in the two sub-sections below:

6.4.1. Good practice in providers quality assurance systems

Evidence of good practices of providers identified by the Monitors includes:

Provider Commitment

Monitors observed evidence of providers taking a high level of corporate responsibility for delivering quality programmes and services. Two key pieces of evidence identified during the site visits in support of strong provider commitment to QA included the assigning of specific responsibility for quality to an individual within the organisation and the practice of regular all staff briefings on quality matters. Effective self evaluations conducted by the provider and sent to FETAC on a regular basis were also identified as important indicators evidence of provider commitment to quality implementation and improvement.

Communications

It was found that the majority of the providers monitored had identified mechanisms for effective communications such as comprehensive programme brochures, effective utilization of staff and learner feedback sheets, consultation with stakeholders and preparation of end of programme reports for submission to stakeholders/funders. The use of learner handbooks, email and website as media for communicating with learners were effective in provider's quality systems.

Staff Recruitment and Development

In most cases providers retained files for Staff Recruitment and Development which contained relevant information i.e. Sample advertisements, Job Descriptions, Staff Qualification Details, Staff Training Needs Analysis, Staff training records.

Access Transfer and Progression

It was observed that good practice included the provision of Information to Learners on entry requirements for the programme, details of the awards and the framework level the programme leads to, and programme duration details. Learner supports were also evident particularly in relation to low level literacy skills. The majority of the information provided was contained in programme brochures and learner handbooks. Monitors noted that the community and voluntary sector were particularly strong with regard to demonstrating evidence of good access, transfer and progression arrangements.

Programme Development Delivery and Review

All providers monitored demonstrated good practice with regard to this element of quality. Provider strengths lie very clearly in programme development delivery and review. In all cases Monitors observed clear evidence of good practice in this area. Facilities observed were appropriate and generally fit for purpose and the providers were fully implementing their own quality assurance procedures in this area.

Good practices included the availability of programme descriptors/schemes of work/ programme specifications, clear programme aims and objectives linked to assessment. Training programmes in many cases were linked closely to industry needs as many programme participants were already employed in the industry which the training related to. This was evident particularly for private providers. There was good evidence also of learner attendance records. Feedback from learners was positive in respect of programmes and their delivery.

Fair and Consistent Assessment of Learners

Evidence of good practice in assessment planning was observed although all practices/ procedures were not always documented. Monitors observed that providers had reviewed FETAC's assessment guidelines and in most cases had developed their own assessor guidelines. Marking systems and sampling strategies were evident as were secure assessment storage facilities. Learners received assessment information and were also provided with feedback.

Providers with dedicated IT systems for managing the assessment records of learners were also observed to be effective.

Four providers from the sample of 9 monitored from the August 2008 assessment period were observed to have made the progression to the new assessment procedures without any difficulty. These included a centre for nurse education, two private providers, and one community based provider.

6.4.2. Areas for Improvement

Monitors identified a number of areas for improvement to be addressed by the provider. These included:

Provider Commitment to quality

Monitors found that many providers who agreed their quality assurance back in 2005 and 2006 have not kept their quality systems up to date. Staff changes and reorganisation of roles of the provider were some of the possible reasons for this situation. A key recommendation of the Monitors was for the provider policy and procedures to be brought up to date for all components of their quality systems and staff and learners kept informed about the services and programmes of the provider.

Communications

Internal communications with staff (full and part-time) were observed to be an issue for a number of providers. While the quality system is being implemented it did not extend to all personnel. In these cases the Monitors made recommendations for more regular all staff briefings on quality matters.

Equality

A shortage of material on good practice in Equality has led to a weakness in procedures in this component of quality. Most providers have Equality Statements but the Equality Action Plans were not developed by all providers.

Fair and Consistent Assessment of Learners

Monitors evaluated the effectiveness of 9 providers in the context of new assessment requirements introduced in July 2008. It was observed that the new procedures to underpin Internal Verification, External Authentication and Results Approval as required by FETAC were not always in place when site visits took place. 5 of the 9 providers monitored did not have adequate procedures underpinning these new processes and the quality of the reports varied. This essential requirement was identified as a critical area for improvement by the Monitor for immediate addressing by the provider.

It was noted that there was a lack of understanding amongst these providers in respect of the new assessment requirements.

Monitors observed a lack of 'ownership' of providers in respect of assessment requirements. Monitors views were that providers were complying with FETAC in terms of paperwork only and did not have the procedures embedded in the organisation as part of an effective quality system.

Staff recruitment and development

There was some evidence of inadequate procedures regarding staff recruitment. This was mainly in the case of private providers who often use 'short term' arrangements with trainers. Where Monitors observed inadequate contractual arrangements they recommended that these be addressed.

There were issues with a small number of providers in respect of subcontracting and in relation to arrangements between first and second providers. In these cases Monitors advised that clear transparent arrangements be put in place to ensure clear lines of communication and appropriate guidelines on roles and responsibility for provision.

The need for a procedure to facilitate contingency planning when a tutor was not available was also an area for improvement.

Similarly staff development arrangements was an issue to be addressed by some providers to ensure staff are trained as required to deliver FETAC awards.

Protection for Learners

The updating of the procedure for the protection of learners was also an area for improvement identified with one provider. The Monitor in question made recommendations for the renewal and reestablishment of the necessary agreements with alternative providers. The Monitor also requested the provider to provide an update on this matter within an agreed timeframe.

Provision of information to learners on Protection for Learners is also an area for improvement identified across a range of providers.

The need for ongoing review by FETAC of the implementation of Protection for Learners policies of those providers required to comply also became evident as a result of monitoring.

Self evaluation of programmes and services

A lack of rigour has been observed in self- evaluation of programmes and services. There is evidence that some providers are going through the motions of completing FETAC checklists and evaluation template to meet FETAC requirements and that there is no real understanding of the merits and benefits of self evaluation for the provider.

A key recommendation made by Monitors to providers was for a self evaluation to be undertaken by the provider within a timeframe of 6 months after monitoring in order to provide FETAC with solid evidence of progress in relation to effectiveness of the provider's quality assurance.

7. Conclusions

The findings from FETAC's monitoring as outlined above demonstrate a range of good practice and areas for improvement amongst the 49 providers who participated in the process to date.

Monitoring has had a direct impact on these providers resulting in both acknowledgement of their good practices and identification of areas for improvement in the context of the effectiveness of their quality assurance systems.

Good practices in the quality assurance system of providers in Communications, Programme development delivery and review and other areas are to be highly commended.

To date monitoring has identified a number of common critical areas for improvement within the quality systems of providers which need to be addressed immediately by providers and followed up by FETAC. In cases where compliance is not achieved FETAC will be required to take steps to suspend providers until such time as they are addressed.

The areas for improvement such as new Assessment arrangements, Self Evaluation, and Protection for Learners need to be more fully implemented by providers. Already it has been indicated by Monitors who have followed up those providers monitored to date that appropriate actions have been taken by providers.

Furthermore FETAC will take action in respect of providers who do not comply with requirements and who do not address the areas for improvement identified as a result of monitoring. This involves the suspension of the provider from accessing certification until such time as evidence of addressing the issues identified is provided. Monitors will follow up with providers within appropriate time lines as set out in the monitoring reports. Where compliance is not achieved the process to formally deregister a provider will be instigated.

The Monitors noted that when on site, they were requested to provide 'support' to providers in a range of areas including assessment, standards and quality.

8. Next Steps

Based on the monitoring findings for 2008, FETAC plans to do the following:

I. Review of the Monitoring Plan for 2009

The Monitoring Plan for 2009 will be reviewed. While the existing targets and priorities remain, further attention needs to be given to the monitoring of the implementation of the providers assessment procedures and their self evaluation procedures.

2. Desk monitor new assessment procedures of providers

To ensure the credibility of FETAC awards it is essential the new assessment procedures are being implemented effectively. To ensure that the providers who are operating the new assessment arrangements are effective, FETAC plans to request the providers to send copies of their procedures and their internal verification, external authentication and results approval reports to FETAC for evaluation. FETAC will evaluate this documentation and disseminate findings to providers.

3. Publish Guidelines on Monitoring for Providers

The Guidelines on Monitoring for providers will be published by FETAC in the coming months. These guidelines will clearly set out the process of monitoring, the roles and responsibilities of FETAC and of the provider. The guidelines will be an important resource for providers to understand their role and to prepare for monitoring.

4. Publish Provider Monitoring reports

Following a final edit completed monitoring reports of providers will be published on the website by FETAC. This will ensure the wider dissemination of provider's good practice and the raising of awareness in respect of common areas for quality improvement.

5. Statistic and Metrics

The management of monitoring data needs further attention to ensure more effective internal reporting mechanisms, statistics and metrics on the outcomes and findings of monitoring. Data collected from the monitoring process will be used to inform FETAC for its next annual monitoring report and will assist with the identification of trends and issues emerging in the sector.

6. Monitors

Three of the four Monitors recruited are currently carrying out their roles. The fourth Monitor is currently engaged as a FETAC Development Officer. Therefore, FETAC must review the number of Monitors required and resource accordingly.

7. Support

The ongoing issue of 'provider capacity building' needs to be further explored with the Department of Education and Science and the Department of Enterprise, Trade and Employment.

Appendix I A

List of providers - Pilot Phase (2007/2008)

The objective of the Pilot Phase was to test the Monitoring documentation and process for the first time with a number of providers who volunteered to participate. Findings from the process were positive with many examples of good practice and some areas for improvement. A key aspect of this phase was the follow up evaluation by FETAC to identify issues relevant to the process and documentation. Amendments were made to these following the gathering of feedback from the evaluation.

	Centre	Type of Monitoring	Outcome
1	Abbey College Ltd.	Pilot site visit	Report prepared - site visit undertaken
2	B and B Nursing	Pilot site visit	Site visits undertaken - further review required
3	CDVEC Ballyfermot College of Further Education	Pilot site visit	Report prepared following site visit
4	City of Limerick VEC	Pilot site visit	Report prepared following site visit
5	Co Donegal VEC - Adult Education Service	Pilot site visit	Report prepared following site visit
6	City of Cork VEC - Cork College of Commerce	Pilot site visit	Report prepared following site visit
7	Daralinn Health and Safety Consultants	Pilot site visit	Report prepared following site visit
8	Dublin Business and Language College Ltd. (DBL)	Pilot site visit	Report prepared following site visit
9	Faite Ireland Training - Limerick Centre	Pilot site visit	Report prepared following site visit
10	Midland School of Childcare Ltd.	Pilot site visit	Report prepared following site visit
11	Security Institute of Ireland	Pilot site visit	Report prepared following site visit

Appendix I B

List of providers - Induction Phase

	Provider	Type of Monitoring	Outcome
1	Nifast	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; both essential and developmental recommendations noted. • Report agreed with provider. • Follow up undertaken to monitor progress.
2	HSI - Limerick Business School	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; both essential and developmental recommendations noted. • Report agreed with provider. • Follow up undertaken to monitor progress.
3	MDA Consult Ireland	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.
4	Soilse	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.
5	Stewarts Hospital Services Ltd.	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations noted. • Report agreed with provider. • Monitoring visit in 2 years.
6	Dorset College	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.

7	Lismullen Hospitality Services Centre	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.
8	Construction Industry Federation	Desk Monitoring	<ul style="list-style-type: none"> • Desk monitoring report prepared • Short site visit to be undertaken to review QA. • Full monitoring visit April 09.
9	Portobello Institute	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified and developmental recommendations noted. • Report to be agreed with provider. Some follow up issues • Monitoring visit in 2 years.
10	Doorway to Life (Abode)	Desk monitoring	<ul style="list-style-type: none"> • Desk monitoring only 6 learners in 2008. • Site visit deferred to 2009.
11	Tara Training	Site visit and desk monitoring	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.
12	Abacus Business Coaching	Desk monitoring	<ul style="list-style-type: none"> • Desk top monitoring. • Site visit deferred to 2009.
13	National Counselling Institute of Ireland	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.
14	North West Computers	Desk monitoring	<ul style="list-style-type: none"> • Desk monitoring - low level of activity 7 learners. • Site visit deferred 2009.
15	Bayford Training Centre	Desk monitoring	<ul style="list-style-type: none"> • Desk top report - site visit scheduled 2009.
16	Safety Solutions Swift Ltd.	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.

17	Professional Development Ltd	Desk monitoring	<ul style="list-style-type: none"> • Desk monitored - site visit deferred.
18	Genesis Business College	Site visit and desk monitoring	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; both essential and developmental recommendations noted. • Report agreed with provider. • Monitoring visit in 2 years.
19	St Joseph's Training Centre Galway	Desk monitoring	<ul style="list-style-type: none"> • Desk monitoring only - site visit deferred 4 learners.
20	Youth Training and Development Centre	Desk monitoring and site visit	<ul style="list-style-type: none"> • Full report prepared. • Areas for improvement identified; developmental recommendations only noted. • Report agreed with provider. • Monitoring visit in 2 years.
21	Eastern Vocational Enterprises	Desk monitoring	<ul style="list-style-type: none"> • Desk monitoring only. • Monitoring deferred to 2009.

Appendix I C

List of providers - New Assessment Arrangements

	Centre	Type of Monitoring	Outcome
1	Bourke College	New assessment	Report prepared areas for improvement identified under consideration by Monitor and provider.
2	Chevron Training and Development Ltd.	New assessment	Site visits undertaken - report prepared and agreed with provider. Areas for improvement and further follow up required.
3	College of Career Advancement	New assessment	Report prepared and agreed with provider. Some minor issues. Monitor again in 2009.
4	EMS and Associates	New assessment	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor.

5	Heartbeat Safety	New assessment	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor:
6	Midlands Energy Training and Assessment Centre Ltd. (METAC)	New assessment	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor:
7	Spafield Family and Resource centre	New assessment	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor:
8	St Vincent's University Hospital - Nurse Education Centre	New assessment	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor:
9	Neil Dawn Associates	New assessment	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor:

Appendix I D

List of providers - RPL

Centre	Type of Monitoring	Outcome
1 Empower Learning Ltd.	RPL and quality assurance focus	Desk monitoring and site visit undertaken. Report prepared. Areas for improvement to be agreed with provider and addressed with follow up by Monitor:
2 CTEC – Community Training and Education Centre	RPL and quality assurance focus	Site visits undertaken – full report prepared – ready for publication.
3 IBEC Retail SKillnet	RPL and quality assurance focus	Site visit scheduled and sent to provider. Areas for improvement to be addressed by the provider with follow up by Monitor:

Appendix I E

List of providers - Levels 1 and 2

	Centre	Type of Monitoring	Outcome
1	St Joseph's Foundation	Level 1 and 2	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider (2008).
2	NALA – National Adult Literacy Agency	Level 1 and 2	Site visit scheduled – desk monitoring and further review required (2009).
3	COPE Foundation	Level 1 and 2	Preparatory stage.

Appendix I F

List of providers - Identified/Referred

	Centre	Type of Monitoring	Outcome
1	Education, Training and Organisational Services (ETOS)	Issues relating to assessment	Report prepared and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor.
2	New Media and Technology Centre	Learner feedback	Site visits undertaken – and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor further review required.
3	South Meath TIDE (Trim Initiative for Development and Enterprise)	Learner feedback	Report prepared and follows up visits undertaken and agreed with provider. Areas for improvement to be addressed by the provider with follow up by Monitor in 6 months.
4	Irish International Hotel and Catering School (IIHCS)	Issues regarding new premises	Report prepared and sent to provider. Areas for improvement to be addressed by the provider with follow up by Monitor.
5	Daybreak School	Issues regarding new premises and Protection for Learners	Report prepared and agreed with provider. Areas for improvement including PFL to be addressed by the provider with follow up by Monitor.

Appendix 2

Monitors Code of practice

The role of the FETAC Monitor is to undertake external monitoring of providers as directed by the Further Education and Training Awards Council in accordance with FETAC's monitoring policy and procedures.

This code of practice identifies the key areas of the role and the standards or professionalism which Monitors are expected by FETAC to maintain. Monitors must undertake to work within this code of practice.

The Monitor will undertake to:

- exercise their role with utmost integrity and professionalism when undertaking monitoring of a provider
- comply with FETAC's policies and procedures specifically in relation to Monitoring of providers
- inform FETAC of any potential conflict of interest which may compromise their role
- communicate appropriately with the provider and inform them of planned site visits and information required
- compile monitoring reports on time and based on an independent evaluation of the process and procedures
- provide constructive feedback to the FETAC, providers and stakeholders as directed by FETAC.



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