Quality Standards

Quality Framework Initiative
For Youthreach & Senior Traveller Training Centres

Compiled and written by:

SHIVAUN O'BRIEN

Quality Framework Co-ordinator

Acknowledgements

Thanks to the following individuals and organisations who contributed to the development of the guidelines.

Contacts

SHIVAUN O'BRIEN

Quality Framework Co-Ordinator

c/o Co. Louth V.E.C.
King St
Drogheda
Co. Louth

Phone: 041-9839930
Fax: 041-9844349
E-Mail: shivaunobrien@eircom.net

GERRY GRIFFIN

**National Co-Ordinator for
Senior Traveller Training Centres**

Department of Education and Science
National Co-Ordination Unit
Quay House, Woodquay
Parnell St., Ennis
Co. Clare

Phone: 065-6828930
Fax: 065-6828919
E-Mail: gerard.griffin@sttc.ie

DERMOT STOKES

National Co-Ordinator, YOUTHREACH

Department of Education and Science
c/o Curriculum Development Unit
Sundrive Rd.
Dublin 12

Phone: 01-4535487
Fax: 01-4537659
E-Mail: dermot.stokes@cdu.cdvec.ie

Table of Contents

Abbreviations

AEO	Adult Education Officer
CDP	Centre Development Planning
CEO	Chief Executive Officer
DES	Department of Education and Science
EO	Education Officer
FETAC	Further Education and Training Awards Council
ICE	Internal Centre Evaluation
IT	Information Technology
IVEA	Irish Vocational Education Association
LCA	Leaving Certificate Applied
NALA	National Adult Literacy Agency
QFI	Quality Framework Initiative
STTC	Senior Traveller Training Centre
VEC	Vocational Education Committee

1

section one

**The Quality
Framework
Initiative**

BACKGROUND

The Quality Framework Initiative (QFI) for YOUTHREACH and Senior Traveller Training Centres (S.T.T.C.) was established in November 2000. The aim of the Initiative is to develop and implement a quality assurance model that would lead to continuous improvement in the service offered by centres and in a manner that meets the needs of learners, staff and management.

The quality assurance model that has been developed encourages partnership and collaboration between all stakeholder groups. It highlights the importance of developing systems for carrying out all the key activities within the centre as well as the need to develop policies and procedures in order to establish best practice and ensure consistently high standards of service.

The development of the Quality Framework was mainly influenced by the YOUTHREACH 2000 consultative process and the requirements of the Qualifications (Education and Training) Act 1999.

The development of the Quality Framework can be broken down into a number of distinct phases. The Exploratory Phase (Nov. '00- Jan '01) led to the Consultation Phase (May '01-April '02). This was followed by the Development Phase (May '02-July '03) during which a set of Quality Standards were developed and the component parts of the Quality Framework were agreed. These included the processes of Centre Development Planning (CDP), Internal Centre Evaluation (ICE) and External Centre Evaluation. Detailed guidelines were developed in relation to Centre Development Planning and Internal Centre Evaluation.

The Pilot Phase (September '03- July '04) involved the testing of the quality assurance processes and guidelines in 44 YOUTHREACH and Senior Traveller Training Centres. The findings from the Pilot Phase led to a number of changes being made to the Quality Standards and the processes for Internal Centre Evaluation and Centre Development Planning. The current set of Standards and Guidelines can be used by all YOUTHREACH and Senior Traveller Training Centres in the roll-out of the Quality Framework Initiative.

Phases of the Quality Framework Initiative	
PHASE	**DATE**
Exploratory Phase	Nov '00 - Jan '01
Consultation Phase	May '01 - April '02
Development Phase	May '02- July '03
Pilot Phase	Sept '03 - July '04
Reporting and Re-development Phase	Sept -04- Jan '05
Roll -Out Phase	Jan '05- Dec '06

THE QUALITY FRAMEWORK

The Quality Framework forms the basis of the quality assurance system. It comprises four interconnected building blocks (see diagram).

1. Quality Standards
2. Centre Development Planning
3. Internal Centre Evaluation
4. External Centre Evaluation

The Quality Framework:
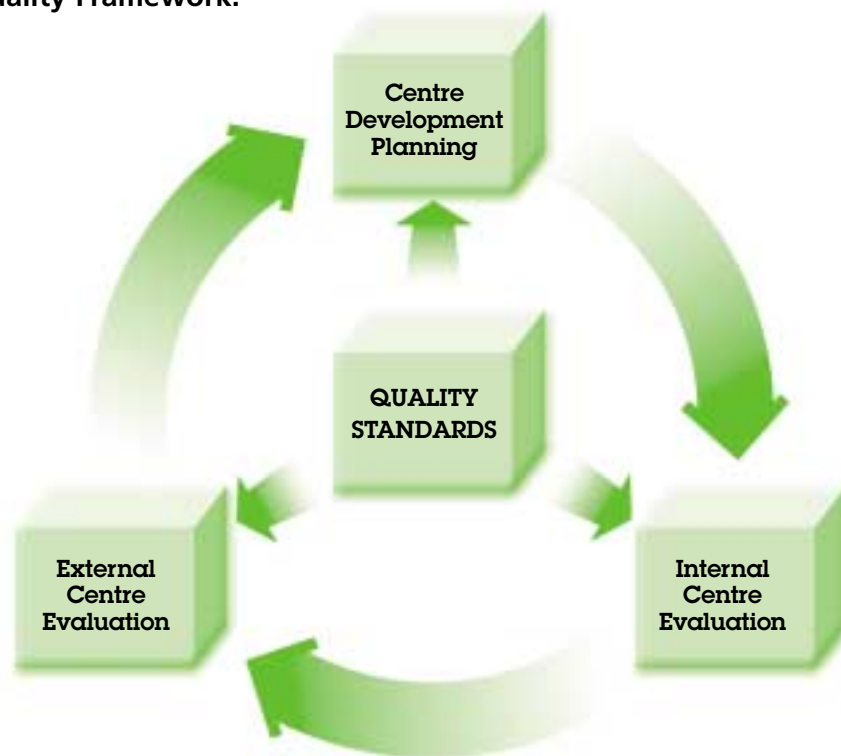
Quality Standards are at the core, as they inform the other key aspects of the framework. Stakeholders are encouraged to work towards continuous improvement through engagement in the processes of planning and evaluation. Centres should carry out an Internal Centre Evaluation annually and should engage in the Centre Development Planning process every 3-5 years where appropriate. External Centre Evaluation is to become an essential part of the overall approach to quality assurance. The Department of Education and Science Inspectorate has responsibility for the quality of education provided in Centres for Education under the 1998 Education Act and therefore will be responsible for the External Evaluation of centres.

THE QUALITY ASSURANCE PROCESS

Implementing a quality assurance system in a YOUTHREACH or Traveller Training Centre involves a process of continually working towards improvement in order to meet the needs of learners, staff and management. The Quality Standards clarify what should be in place in centres while allowing for local flexibility in the way stakeholders chose to achieve standards.

The centre development planning process provides stakeholders with an opportunity to review centre practice, identify gaps, highlight priorities and select areas for improvement. The plan is implemented over a period of three to five years and progress towards the achievement of goals is monitored and evaluated. The centre development planning process involves a focus on the key elements of the programme that are not yet in place, or the areas of work which require a high degree of redevelopment.

On an annual basis key aspects of the programme are evaluated. The Internal Evaluation Process involves the participation of various stakeholder groups. The quality standards outline 27 quality areas and the guidelines for centre evaluation recommend that a centre would evaluate 9-12 quality areas each year to include an evaluation of the implementation of the centre development plan. Annual centre evaluation should involve a two-day session where stakeholders compare centre performance against the quality standard using the evaluation criteria outlined in this document. Centre evaluation

provides an opportunity for stakeholders to examine the value of the work that takes place in centres and acknowledge the achievements of trainees, Co-Ordinator/ Director, staff and management. Areas for improvement are identified and actions are planned. Actions arising from the evaluation process are generally implemented in the short-term and some are referred for inclusion in the centre development plan. An important aspect of annual centre evaluation is the collation of evidence. The guidelines for centre evaluation outline the various forms of evidence that may be gathered in relation to each quality area.

External evaluation involves the evaluation of centre performance by the Department of Education and Science Inspectorate. This allows for an external and unbiased view to be expressed and provides an opportunity for the recognition and affirmation of good practice.

The cyclical process of planning, evaluation, implementation of actions and monitoring as informed by the quality standards form the basis of the quality assurance system in Senior Traveller Training and YOUTHREACH Centres.

THE BENEFITS OF IMPLEMENTING THE QUALITY FRAMEWORK

Learners

- There is an emphasis on the learners' right to a quality education provision.

- The importance of learner involvement in decision-making, problem solving and evaluation is encouraged.

- Learners will be facilitated to evaluate the programme and learner views will be fed into the quality assurance processes.

- Learners' entitlements and programme choices are clarified.

- The development of structured communication between staff and learners is encouraged.

- Programme development and delivery is based on the assessed needs of learners.

- Learners are encouraged to take responsibility for their own achievements through the development of individual learning plans and reviews in conjunction with staff.

- The need for a range of learner supports is highlighted.

Co-Ordinator/ Director and Staff

- The identification of Quality Standards provides staff with a structure for their overall approach to work within the programme.

- Specifically designed guidelines for centre development planning and centre evaluation provide a structure for these processes.

- The development of a safe, supportive and organised working environment is encouraged.

- Quality assurance processes provide opportunities for team building and staff development.

- The flexibility that has been recognised as a key feature of the programme is maintained and emphasised.

- The emphasis is on having systems and processes in place rather than measuring centres in terms of expected outcomes/results.

- Staff are encouraged to take the time required to evaluate and plan on an annual basis.

- The work carried out in centres can be recognised through the evaluation process.

- Staff teams evaluate their programmes based on what they believe to be important.

- Staff are encouraged to plan future work at a pace that suits the staff and with due consideration of other centre priorities.

- The quality framework encourages more shared responsibility with all stakeholders involved in goal setting and problem solving.

- The involvement and support of local management is encouraged.

Local Management (VECs/ Boards of Management)

- The important role that local management has to play in quality assurance is identified and encouraged.

- Quality standards clarify the various elements of the work that takes place in centres and inform local managements in relation to the supports that are required.

- Opportunities are provided for the participation of Chief Executive Officers, Education Officers, Adult Education Officers and other local management in centre evaluation and centre development planning.

- The importance of systematic communication and reporting structures is emphasised.

- Local management can make a positive contribution to the ongoing development of centres through participation in structured processes.

Programme at National Level

- Leads to improved consistency in the provision of the programme across the country while maintaining flexibility at local level.

- A single quality assurance system provides a greater sense of common identity across the programme.

- When centres operate a common quality assurance system national support and guidelines can easily be identified.

- The high degree of consultation and the process of piloting guidelines should lead to the development of quality framework that has the support of all stakeholder groups.

- Assists centres in meeting FETACs requirements for quality assurance.

- The Quality Framework Initiative progresses the recommendations set out in the reports *YOUTHREACH 2000 - A Consultative Process* and *A Consultative Report Designed to Contribute to the Future Development of Senior Traveller Training Centres.*

- The Quality Framework sets out a developmental agenda at national level that will include staff training and further supports.

WHERE TO START

There are a number of ways in which a staff team can begin to engage with the Quality Framework Initiative. The most obvious methods of engagement are through the processes of Internal Centre Evaluation and Centre Development Planning.

Staff teams can also become engaged by simply becoming familiar with the Quality Standards and building awareness within the staff team of the key quality processes. Building awareness is a vital aspect of the Initiative and it is important that a staff team together with local management would discuss the Initiative as well as any concerns that may arise in relation to it.

Once the key stakeholders are familiar with the Quality Standards and the Quality Framework the next question is whether the centre should first engage in Internal Centre Evaluation or Centre Development Planning. The table below outlines the key differences between the two processes and the diagrams on page 13-14 set out the steps that occur over a 5 year period when a centre opts for either Internal Centre Evaluation or Centre Development Planning.
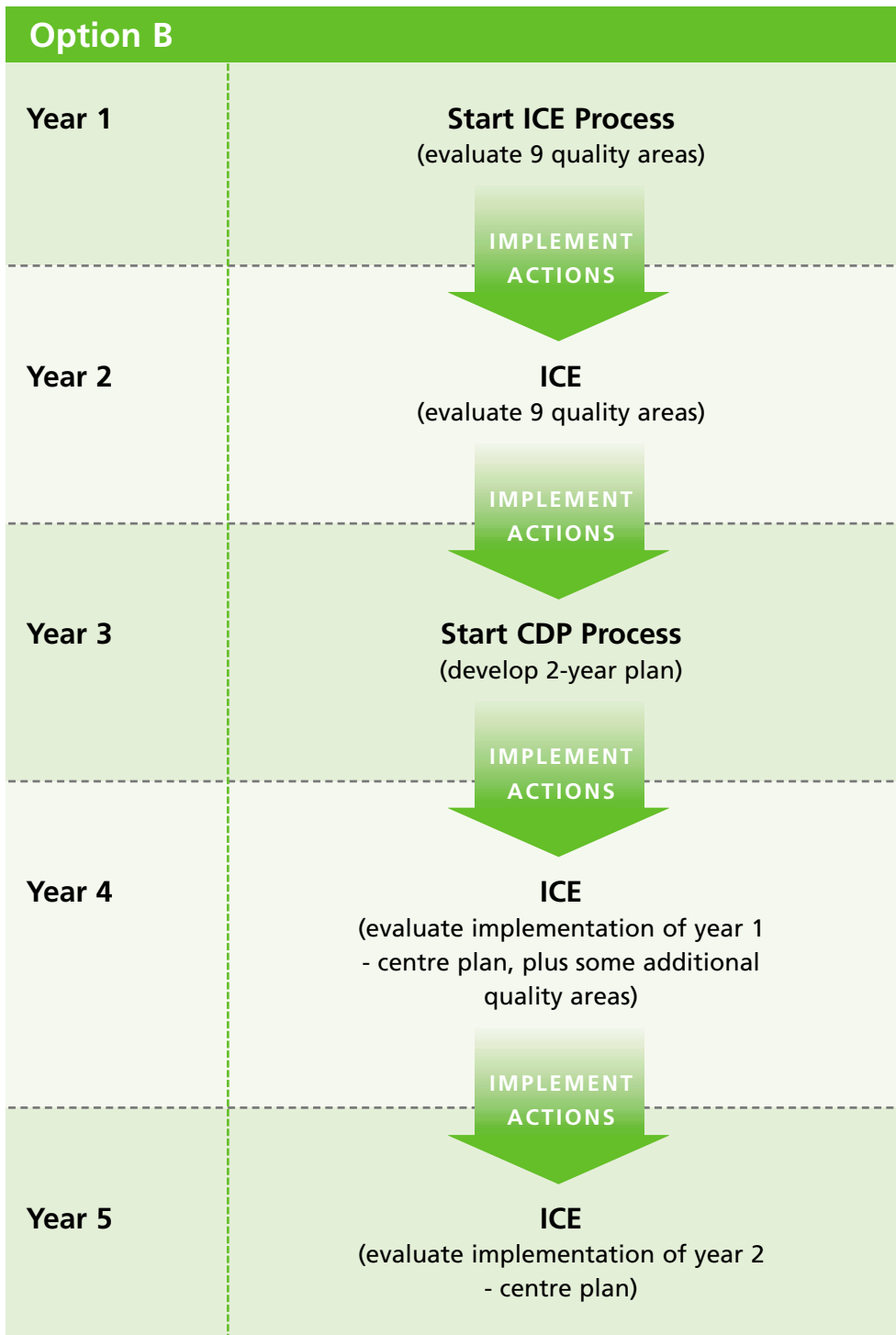
Comparing ICE and CDP		
	I C E	**C D P**
Definition	■ The process of examining centre's practice with regard to the Quality Standards, acknowledging success and identifying areas and specific actions for improvement.	■ The process of reviewing the centre's purpose and activities with a view to setting out a clear direction and concrete goals for the future.
Time-frame for Process	■ 2 consecutive facilitated days ■ Additional time for planning, gathering evidence, learner evaluation and producing annual evaluation report.	■ 5 facilitated days ■ Additional time for planning, gathering evidence, carrying out various reviews, collating and editing plan.
Time of Year During Which Process Occurs	■ Process takes place during May-July (to evaluate previous Sept- July) or alternatively January (to evaluate previous Jan- December).	■ Process takes place from September - April.
Number of Quality Areas Involved	■ Generally 9 Quality Areas are evaluated, this number increases with experience. ■ Where centres have completed a CDP, the number of areas for evaluation depends on the number of actions that were planned for implementation over the previous year.	■ All Quality Areas are reviewed as potential areas for inclusion in the plan.
Time-frame for Implementing Actions	■ Actions arising from ICE process are generally implemented over a 6-9 month period.	■ Actions arising from a CDP process are generally implemented over a 2-5 year period.

STARTING WITH CENTRE DEVELOPMENT PLANNING - OPTION A

Option A

Year 1	**Start CDP Process** (develop 3 year plan)
	IMPLEMENT ACTIONS ⬇
Year 2	**ICE** (evaluate implementation of year 1 - centre plan, plus some additional quality areas)
	IMPLEMENT ACTIONS ⬇
Year 3	**ICE** (evaluate implementation of year 2 - centre plan, plus some additional quality areas)
	IMPLEMENT ACTIONS ⬇
Year 4	**ICE** (evaluate implementation of year 3 - centre plan, plus some additional quality areas)
	IMPLEMENT ACTIONS ⬇ IMPLEMENT ACTIONS ⬇
Year 5	**Start New CDP Process** **ICE** (evaluate 9 quality areas)

STARTING WITH INTERNAL CENTRE EVALUATION - OPTION B

Option B	
Year 1	**Start ICE Process** (evaluate 9 quality areas)
	IMPLEMENT ACTIONS
Year 2	**ICE** (evaluate 9 quality areas)
	IMPLEMENT ACTIONS
Year 3	**Start CDP Process** (develop 2-year plan)
	IMPLEMENT ACTIONS
Year 4	**ICE** (evaluate implementation of year 1 - centre plan, plus some additional quality areas)
	IMPLEMENT ACTIONS
Year 5	**ICE** (evaluate implementation of year 2 - centre plan)

2 section two

Quality Standards

WHAT ARE QUALITY STANDARDS?

Quality Standards are statements outlining the key elements of a quality programme. They can also be described as elements of good practice. In this document the Quality Standards are outlined in table form.

THE DEVELOPMENT OF THE QUALITY STANDARDS

The Quality Standards contained in this document were developed following consultation with each of the key stakeholder groups. The first draft of the quality standards was outlined in the *Report on the Consultation Phase (April 2002).* Since then the quality standards were revised based on feedback received following the circulation of the report as well as the developments taking place within FETAC in relation to quality assurance.

In order to finalise the document a Quality Standards Group was formed in April 2003. Each of the key stakeholder associations was invited to nominate a representative/s to participate in the Redrafting and Finalisation Process. Following the Pilot Phase further amendments were made resulting in the current set of Standards.

FUNCTIONS OF THE QUALITY STANDARDS

Quality Standards are at the core of the Quality Framework. They outline the key elements of a quality YOUTHREACH or Senior Traveller Training Centre. The quality standards inform each of the following:

1. good practice
2. centre development planning
3. internal evaluation
2. external evaluation
3. the developmental agenda for the programme at national level

THE QUALITY STANDARDS - AN OVERVIEW

These outline the key elements of good practice for centres. They have been developed through consultation with various stakeholder groups and are also informed by the Further Education and Training Awards Council's (FETAC) Quality Assurance requirements as outlined in FETAC's document *Quality Assurance in Further Education and Training: Policy and Guidelines for Providers (v 1.1).* Appendix A outlines how the Quality Standards correspond with FETAC's requirements for quality assurance.

The Quality Standards are divided into four main sections and include 27 quality areas.

SECTION ONE: ORGANISATIONAL MANAGEMENT

1. Ethos
2. Planning
3. Evaluation
4. Communication and Links with the Community
5. Transparency, Accountability and Public Relations
6. Administration and Financial Management
7. Record Keeping
8. Health and Safety
9. Premises
10. Equipment

SECTION TWO: PERSONNEL AND DEVELOPMENT

11. Staff Team
12. Staff Recruitment and Induction
13. Staff Development and Training
14. Staff Support

SECTION THREE: LEARNING ENVIRONMENT

15. Social Environment
16. Code of Behaviour
17. Equality
18. Interculturalism

SECTION FOUR: PROGRAMME

19. Programme Development and Delivery
20. Recruitment of Learners and Admission
21. Initial Assessment, Induction and Review
22. Learning Assessment and Certification
23. Support Structures for Learners
24. Literacy and Numeracy
25. Social, Personal and Health Education
26. Work Experience
27. Transfer and Progression

Under each quality area a number of broad quality standards are outlined. Each quality standard is sub-divided into evaluation criteria. Evaluation criteria are statements of how quality standards are made operational. For the internal evaluation process, they will be used to assess whether the quality standards are being met. Centres may wish to add their own evaluation criteria to this list in order to reflect local systems and arrangements. The quality standards and the evaluation criteria are not prescriptive, leaving room for much flexibility at local level in terms of how standards are met.

Section One:
ORGANISATIONAL MANAGEMENT

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
1. Ethos	▪ The ethos reflects the values and goals of stakeholders and informs the work of the centre.	▪ A mission statement, aims and objectives are developed and documented in consultation with stakeholder groups. ▪ The mission statement, aims and objectives are displayed in the centre and also included in relevant centre documentation. ▪ Stakeholders are aware of and understand the ethos of the centre. ▪ The centre ethos informs programme operation and policy development. ▪ The mission statement, aims and objectives are reviewed every two years.
2. Planning	▪ Centres engage in a centre development planning process.	▪ The centre plan is based on the Quality Standards as well as the centre ethos. ▪ A centre plan is developed in collaboration with key stakeholders. ▪ The plan informs the work of the centre and its implementation is monitored and evaluated.
	▪ Short term planning occurs on a regular basis.	▪ Structured planning meetings occur throughout the year as required. ▪ An annual plan of work is outlined and submitted to management for approval on an annual basis.
3. Evaluation	▪ Internal Centre Evaluation occurs on an annual basis.	▪ Self evaluation policy and procedures are developed and documented. ▪ A system for monitoring the implementation and effectiveness of the policy and procedures is established. ▪ The evaluation process involves key stakeholder groups. ▪ The evaluation process and outcomes are documented in an annual report. ▪ Learners evaluate relevant aspects of the programme as part of the annual evaluation process. ▪ Areas for improvements are identified, actions are agreed and implemented.

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA

4. Communication and Links with the Community	■ Communication systems are in place between all stakeholders as appropriate.	■ A communications policy is developed and documented.
		■ Procedures for communication with learners, staff and other stakeholders are established and documented.
		■ A system for monitoring the implementation and effectiveness of the policy and procedures is established.
		■ Regular/ appropriate communication occurs between the following stakeholder groups:
		   ◆ Staff and learners
		   ◆ Co-Ordinator/ Director and staff
		   ◆ Staff and VEC Management
		   ◆ Staff and Board of Management
		   ◆ Staff and parents/ guardians
		   ◆ Staff and National Co-Ordinators
		   ◆ Staff and relevant individuals/ organisations in the community to include education, training, welfare, justice, health, youth and community sectors.
		   ◆ Other centres in the region

5. Transparency, Accountability and Public Relations	■ The centre conducts its activities in an open and transparent manner.	■ The centre operates in line with national guidelines. ■ Learners are informed of their entitlements and choices available within the programme. ■ Procedures for all key aspects of the programme are developed with approval from local management. ■ General information in relation to the programme is available to the public. ■ Signs on the premises, correspondence and other relevant documentation highlight sponsors of the programme. ■ A monthly and annual report is submitted to local management.
	■ The centre engages in public relations work as appropriate.	■ A public relations strategy is developed and documented. ■ Opportunities are maximised to promote the work of the centre in the community, and nationally, as appropriate. ■ Training in public relations is provided to staff as appropriate.

Section One:
ORGANISATIONAL MANAGEMENT

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
6. Administration and Financial Management	■ Administration arrangements meet the needs of all stakeholder groups.	■ The administration support is allocated as appropriate between the centre and the VEC Office. ■ The administration staff carry out the key administration functions relating to the programme. ■ Sufficient equipment and resources are provided in order to carry out all administration functions. ■ Clear procedures are in place in relation to all administration tasks.
	■ Finances are managed in a manner that meets the needs of the centre and is in compliance with national guidelines.	■ The Co-Ordinator / Director is provided with an approved budget for the programme. ■ Pay and non-pay budgets are effectively planned and managed by the Co-Ordinator/Director in conjunction with local management. ■ Supplies and services are ordered in accordance with the approved purchasing procedures of the VEC. ■ All necessary financial records are maintained. ■ Financial management systems are subject to external audit.
	■ Adequate insurance cover is in place to cover all activities of the programme.	■ Written confirmation of insurance cover is in place. ■ Additional insurance cover for any new programme activities is sought and received prior to engaging in new activities.
7. Record keeping	■ Records relating to key aspects of the programme are maintained according to national guidelines.	■ Individual learner files are maintained to include information on contact details, outside centre supports, recruitment, initial assessment, individual learning plan, attendance, completion rates, payment, assessment, certification and progression. ■ Records in relation to staff are maintained to include recruitment details, contracts, claim forms, annual leave, sick leave, programmes of work and evaluations. ■ Records in relation to financial management are maintained. ■ Due care is taken to protect confidential information.

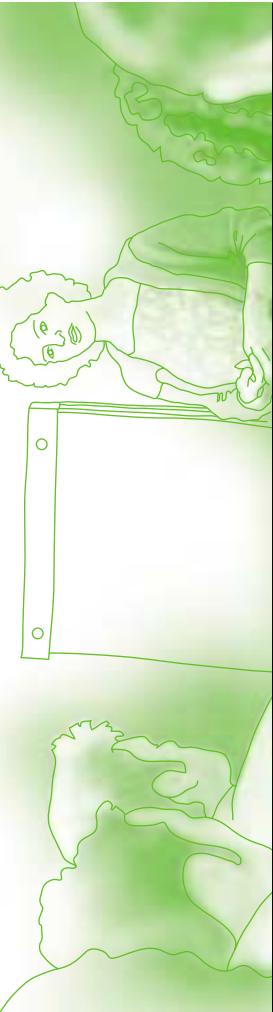| QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
8. Health and Safety	■ A safe and healthy environment exists in the centre.	■ A health and safety statement is developed and made available to all stakeholder groups. ■ Correct health and safety procedures are developed and documented in compliance with legislation. ■ A system for monitoring the implementation and effectiveness of procedures is established ■ Health and safety procedures are reviewed systematically.
9. Premises	■ The programme is located in an appropriate building/ accommodation.	■ The building provides a safe, clean, welcoming and comfortable learning environment. ■ Responsibility for the management of the premises is clearly allocated. ■ Systems are in place for the maintenance and repair of the building/ accommodation.
10. Equipment	■ Equipment and resources are provided in order to safely and effectively carry out all aspects of the programme.	■ Staff document the equipment required to deliver the various aspects of the programme. ■ The equipment required is in place. ■ Systems are in place for regular maintenance and updating of equipment. ■ Stock records are maintained.

Section Two:
PERSONNEL & DEVELOPMENT

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
11. Staff Team	▪ Staff work as a team.	▪ Staff adopts a teamwork approach. ▪ All members of the staff team share responsibility for the work of the centre as appropriate. ▪ The role and responsibility of each staff member is outlined. ▪ All staff members are provided with opportunities to contribute to the development of the centre through participation in staff meetings, training, planning and evaluation sessions as well as structured teambuilding exercises. ▪ The composition of the staff team is based on the operational needs of the centre.
12. Staff Recruitment and Induction	▪ Staff is recruited on the basis of personal suitability, appropriate experience and qualifications.	▪ A staff recruitment policy and procedures are developed and documented. ▪ A system for monitoring the implementation and effectiveness of the policy and procedures is established. ▪ The Co-Ordinator/ Director is involved in the recruitment process as appropriate.
	▪ A staff induction programme operates in the centre.	▪ The induction programme is developed and documented so as to ensure that staff are aware of expectations, internal organisation, procedures and good practice. ▪ All new staff are inducted in accordance with agreed induction programme.
	▪ Staff conduct is professional at all times.	▪ The code of conduct is developed and is based on national guidelines. ▪ All staff are informed of the code as part of their induction programme. ▪ All staff carry out their work in accordance with the code of conduct.

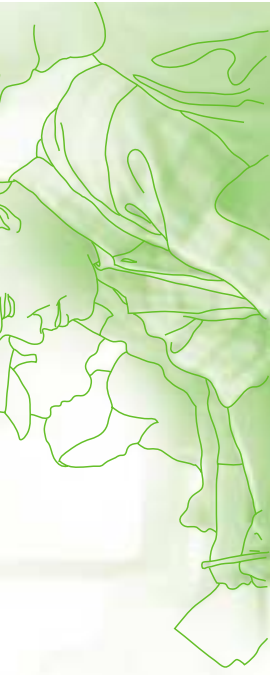| QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
13. Staff Development and Training	■ Staff are encouraged and supported to gain additional training/ qualifications appropriate to their role in the centre.	■ A staff development policy is developed and documented in consultation with staff and management. ■ Procedures are in place for staff to make recommendations and seek support for training and the achievement of additional qualifications as appropriate. ■ A system for monitoring the implementation and effectiveness of the policy and procedures is established. ■ Time and resources are allocated on an annual basis for staff development.
14. Staff Support	■ A staff support system is in place.	■ The staff support system has been developed in consultation with staff and local management. ■ The staff support occurs on a regular basis and in a structured format. ■ Staff feel the benefits of the staff support system.

Section Three:
LEARNING ENVIRONMENT

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
15. Social Environment	▪ A positive, encouraging, safe, challenging and caring environment is provided for staff and learners.	▪ The centre promotes mutual respect between staff and learners. ▪ The programmes delivered in the centre are interesting and challenging for learners. ▪ Appropriate teacher to learner ratio applies to all programme activities. ▪ The duration of the classes, learning day and annual attendance are in line with the learners' needs and abilities. ▪ A child protection policy is in place and is implemented. ▪ Information and training in relation to child protection are provided for relevant staff.
16. Code of Behaviour	▪ Learners are encouraged to behave in an appropriate manner.	▪ A code of behaviour is developed in conjunction with staff and learners. ▪ The code outlines learners' rights and responsibilities and a grievance procedure. ▪ The code outlines procedures for dealing with bullying. ▪ The code outlines procedures for dealing with the misuse of drugs. ▪ The code has the support of the staff and learners. ▪ The code is implemented in a fair and consistent manner. ▪ Clear records are maintained in relation to the implementation of the code of behaviour.

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
17. Equality	▪ There is a commitment to the provision of equal opportunities for learners and staff in compliance with relevant equality legislation.	▪ An equality policy and procedures are developed and documented. ▪ An equality action plan is developed and implemented as part of the Centre Development Planning Process. ▪ A system for monitoring the implementation and effectiveness of the policy and procedures is established. ▪ Information and training in relation to equality is provided for staff. ▪ Individuals or groups with particular needs are facilitated to participate in the programme through the provision of specific supports. ▪ Codes of practice for dealing with complaints of sexual harassment, and bullying and harassment, are in place and are implemented.
18. Interculturalism	▪ The programme values and reflects the cultural identity of all learners.	▪ Centre policies and procedures reflect an intercultural ethos and promote mutual respect, understanding and openness to individuals and groups from all cultures, ethnic, national and religious backgrounds. ▪ Programmes of learning reflect and validate the cultural backgrounds and learning styles of all learners. ▪ Staff are encouraged and facilitated to avail of training in the area of intercultural education in order to gain empathy and deliver intercultural learning experiences.

Section Four:
PROGRAMME

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
19. Programme Development and Delivery	The overall centre programme meets the needs of the learners.	▪ A policy and procedures for programme development, delivery and review are developed and documented. ▪ A system for monitoring the implementation and effectiveness of the policy and procedures is established. ▪ The programme is holistic in nature and designed to meet identified learners' needs. ▪ The needs of learners are identified through surveys/research as appropriate. ▪ The overall programme is developed, documented and evaluated at regular intervals. ▪ Flexible timetable and attendance options are available. ▪ The programme reflects the local environment and cultures. ▪ Structured one to one time is available for learners as appropriate to their needs. ▪ Developed programmes and modes of delivery are approved by local management prior to implementation. ▪ Procedures for the protection of learners, in the event of a programme ending unexpectedly, are developed and documented.
	Staff plan programmes of work for each module/ subject area on an annual basis.	▪ Programme plans prepared by staff include the content of the programme and how it is to be delivered in a given timeframe. ▪ Programmes are reviewed at regular intervals by the teachers involved, in conjunction with learners.
	Programmes are delivered in a manner that meets learners' needs and in accordance with centre policy.	▪ Procedures for the provision/ delivery of key aspects of the programme are agreed and documented. ▪ A variety of approaches to learning is used in order to ensure that learners are actively involved and take responsibility for their own learning. ▪ Staff share and apply a common understanding of the most appropriate methodologies in the delivery of the various aspects of the programme.

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
20. Recruitment of Learners and Admission	A local awareness raising campaign is implemented.	A range of awareness raising materials is developed and distributed to appropriate individuals and organisations within the community.
		The awareness raising material is documented in a format appropriate to prospective learners.
	The referral and admissions procedures operate in a fair and consistent manner.	An admissions policy and procedures are developed and documented.
		Arrangements for the recognition of prior learning is developed and documented.
		A system for monitoring the implementation and effectiveness of the policy and procedures is established.
		Referral systems are established with schools and other relevant agencies.
		Learners are provided with sufficient information at entry stage to make informed choices regarding the programme.
		Appropriate documentation and application procedures are in place.
		Individual interviews are carried out to assess learner's overall needs & suitability for the programme.
21. Initial Assessment Induction and Review	A welcoming and informative induction programme is provided for learners.	An induction programme is developed and documented in consultation with staff and learners.
		An induction booklet for learners is prepared.
		Induction occurs with each new group of learners and individuals where necessary.
		Learners are provided with an opportunity to evaluate the induction programme.
	A broad ranging initial assessment of each learner is carried out.	A policy and procedures for initial assessment are developed and documented.
		A system for monitoring the implementation and effectiveness of the policy and procedures is established.
		An interview is carried out with each learner.
		Interviews are carried out with relevant others, e.g. parents/ guardians, social workers, former teachers, J.L.O., probation officer as appropriate.
		Referral for specialist assessment is organised as required.
		Additional resources are sought where specific needs are highlighted.

Section Four:
PROGRAMME

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
continued…	■ An individual learning plan is developed for each learner.	■ A plan of learning is developed in conjunction with each learner, based on the outcomes of initial assessment. ■ The learning plan is implemented. ■ The learner's progress is evaluated and the learning plan is reviewed on a regular basis in co-operation with the learner.
22. Learning, Assessment and Certification	■ Systems are in place for the provision and implementation of a range of certification options as appropriate to learners' needs.	■ Learners are aware of the certification options available in the centre. ■ Responsibility for certification and assessment is clearly allocated.
	■ Assessment of learner achievement operates in a fair and consistent manner across the programme.	■ A policy and procedures on the assessment of learner achievement are developed and documented. ■ A system for monitoring the implementation and effectiveness of the policy and procedures is established. ■ Assessment of learner achievement is co-ordinated across all programmes. ■ Learners have access to the information necessary for them to participate in assessment, and access to feedback on their assessment ■ Assessment methodologies are adapted, as necessary and reasonable, to cater for learners with a disability or other persons covered by the nine grounds of the Equality legislation. ■ Assessment materials are securely stored. ■ An appeals procedure for learners is in place. ■ Procedures for internal and external verification are established. ■ A corrective action plan is in place to deal with errors, omissions and/ or deliberate acts by learners and staff which impact on the validity of the assessment process.

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
23. Support Structures for Learners	■ A range of supports is in place for learners which help to provide a more holistic response to their needs and maximise their ability to engage in the programme.	■ Clear procedures and protocols for the provision of the following supports are established and implemented: 　◆ Counselling support 　◆ Guidance support 　◆ Childcare support 　◆ Transport support ■ The support is available to learners within the centre. ■ The learners use the support.
	■ Arrangements are in place for regular meetings/ communication with parents/ guardians as appropriate and other relevant agencies, as a support to the learner.	■ Parents/ guardians/ relevant agencies are encouraged to support the participation of the learner in the centre. ■ Parents/ guardians are informed of the learner's progress within the centre.
24. Literacy and Numeracy	■ An integrated approach to literacy/numeracy provision is in place.	■ The literacy/ numeracy levels of learners are assessed. ■ A literacy plan for the centre is developed and implemented. ■ One to one support for literacy is available as required. ■ The induction programme for staff includes literacy awareness. ■ Literacy development is integrated into all aspects of the programme. ■ Literacy programmes are culturally and environmentally relevant.

Section Four:
PROGRAMME

QUALITY AREA	QUALITY STANDARDS	EVALUATION CRITERIA
25. Social, Personal and Health Education	▪ A broad ranging and integrated programme of social, personal and health education is provided.	▪ The overall social, personal and health education needs of learners are assessed. ▪ A programme of learning in the area of social, personal and health education is developed and delivered based on the needs of the learners. ▪ Health promotion is an integrated part of centre policy and practice. ▪ Learners have access to information and training on health related issues.
26. Work Experience	▪ Learners are provided with opportunities to participate in a work experience programme.	▪ Procedures for establishing and supervising work experience are developed and documented. ▪ Responsibility for work experience is clearly allocated. ▪ Insurance requirements are met. ▪ Links with employers are established. ▪ Learners are adequately supervised and supported during work experience. ▪ Appropriate records are maintained.
27. Transfer and Progression	▪ Learners are supported to transfer and progress to programmes within or external to the centre.	▪ A policy and procedures for transfer and progression of learners are developed and documented. ▪ Guidance/ counselling support is provided for learners during the initial stage of moving into a new programme. ▪ Learners are informed of the transfer and progression options that are open to them on completion of programmes. ▪ Learners' progression and transfer routes are documented. ▪ Links are established between employers/ centres of further education and training or other relevant agencies in order to develop transfer and progression routes.

appendix A

**Quality Standards:
Meeting FETAC's Quality
Assurance Requirements**

Under the Qualifications (Education and Training) Act 1999 providers of education and training are required to apply to FETAC for validation of any programme leading to an award. Approval by FETAC of a provider's quality assurance system is a requirement for completion of the validation process. Most of FETAC's quality assurance requirements were already contained within the draft quality standards that were identified as part of the consultation process. A small number of additions have also been incorporated into the current Quality Standards document in order to ensure that all FETAC requirements were included.

The table below sets out the Quality Standards for Senior Traveller Training and YOUTHREACH Centres and indicates where they may correspond with FETAC quality assurance requirements. Quality standards relating to FETAC's requirements are marked with an ✔ in the table below.

Please Note: The FETAC Quality Assurance Requirements set out in this table are based on the authors interpretation of information contained in the most recent version (Jan '05) of FETAC's document *Quality Assurance in Further Education & Training: Policy & Guidelines for Providers (v 1.1).*

SECTION ONE: ORGANISATIONAL MANAGEMENT

Quality Standards and Evaluation Criteria	FETAC Requirements
1. Ethos	
■ **The ethos reflects the values and goals of stakeholders and informs the work of the centre.**	
◆ A mission statement, aims and objectives are developed and documented in consultation with stakeholder groups.	✔
◆ The mission statement, aims and objectives are displayed in the centre and also included in relevant centre documentation.	
◆ Stakeholders are aware of and understand the ethos of the centre.	
◆ The centre ethos informs programme operation and policy development.	✔
◆ The mission statement, aims and objectives are reviewed every two years.	
2. Planning	
■ **Centres engage in a centre development planning process.**	
◆ The centre plan is based on the Quality Standards as well as the centre ethos.	
◆ A centre plan is developed in collaboration with key stakeholders.	
◆ The plan informs the work of the centre and its implementation is monitored and evaluated.	
■ **Short term planning occurs on a regular basis.**	
◆ Structured planning meetings occur throughout the year as required.	
◆ An annual plan of work is outlined and submitted to management for approval on an annual basis.	

Quality Standards and Evaluation Criteria	FETAC Requirements
3. Evaluation	
■ **Internal Centre Evaluation occurs on an annual basis.**	
◆ Self evaluation policy and procedures are developed and documented.	✔
◆ Responsibility for self evaluation is clearly outlined.	✔
◆ The evaluation process involves key stakeholder groups.	✔
◆ The evaluation process and outcomes are documented in an annual report.	✔
◆ Learners evaluate relevant aspects of programme as part of the annual evaluation process.	✔
◆ Areas for improvements are identified, actions are agreed and implemented.	✔
4. Communication and Links with the Community	
■ **Communication systems are in place between all stakeholders as appropriate.**	
◆ A communications policy is developed and documented.	✔
◆ Procedures for communication with learners, staff and other stakeholders are established and documented.	✔
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	✔
◆ Regular/ appropriate communication occurs between the following stakeholder groups: ■ Staff and learners ■ Co-Ordinator/ Director and staff ■ Staff and VEC Management ■ Staff and Board of Management ■ Staff and parents/ guardians ■ Staff and National Co-Ordinator/s ■ Staff and relevant individuals/ organisations in the community to include education, training, welfare, justice, health, youth and community sectors. ■ Other centres in the region.	✔
5. Transparency, Accountability and Public Relations	
■ **The centre conducts its activities in an open and transparent manner.**	
◆ The centre operates in line with national guidelines.	
◆ Learners are informed of their entitlements and choices available within the programme.	✔
◆ Procedures for all key aspects of the programme are developed with approval from local management.	
◆ General information in relation to the programme is available to the public.	
◆ Signs on the premises, correspondence and other relevant documentation highlight the sponsors of the programme.	
◆ A monthly and annual report is submitted to local management.	

Quality Standards and Evaluation Criteria	FETAC Requirements
■ **The centre engages in public relations work as appropriate.**	
◆ A public relations strategy is developed and documented.	
◆ Opportunities are maximised to promote the work of the centre in the community, and nationally, as appropriate.	✔
◆ Training in public relations is provided to staff as appropriate.	
6. Administration and Financial Management	
■ **Administration arrangements meet the needs of all stakeholder groups.**	
◆ The administration support is allocated as appropriate between the centre and VEC Office.	
◆ The administration staff carry out the key administration functions relating to the programme.	
◆ Sufficient equipment and resources are provided in order to carry out all administration functions.	
◆ Clear procedures are in place in relation to all administration tasks.	
■ **Finances are managed in a manner that meets the needs of the centre and is in compliance with national guidelines.**	
◆ The Co-Ordinator / Director is provided with an approved budget for the programme.	
◆ Pay and non-pay budgets are effectively planned and managed by the Co-Ordinator/ Director in conjunction with local management.	
◆ Supplies and services are ordered in accordance with the approved purchasing procedures of the VEC.	
◆ All necessary financial records are maintained.	
◆ Financial management systems are subject to external audit.	
■ **Adequate insurance cover is in place to cover all activities of the programme.**	
◆ Written confirmation of insurance cover is in place.	
◆ Additional insurance cover for any new programme activities is sought and received prior to engaging in new activities.	
7. Record keeping	
■ **Records relating to key aspects of the programme are maintained according to national guidelines.**	
◆ Individual learner files are maintained to include information on contact details, outside centre supports, recruitment, initial assessment, individual learning plan, attendance, completion rates, payment, assessment, certification and progression.	✔
◆ Records in relation to staff are maintained to include recruitment details, contracts, claim forms, annual leave, sick leave, programmes of work and evaluations.	
◆ Records in relation to financial management are maintained.	
◆ Due care is taken to protect confidential information.	

Quality Standards and Evaluation Criteria	FETAC Requirements
8. Health and Safety	
■ **A safe and healthy environment exists in the centre.**	
◆ A health and safety statement is developed and made available to all stakeholder groups.	✔
◆ Correct health and safety procedures are developed and documented in compliance with legislation.	✔
◆ A system for monitoring the implementation and effectiveness of procedures is established.	✔
◆ Health and safety procedures are reviewed systematically.	✔
9. Premises	
■ **The programme is located in an appropriate building/ accommodation.**	
◆ The building provides a safe, clean, welcoming and comfortable learning environment.	✔
◆ Responsibility for the management of the premises is clearly allocated.	
◆ Systems are in place for the maintenance and repair of the building/ accommodation.	✔
10. Equipment	
■ **Equipment and resources are provided in order to safely and effectively carry out all aspects of the programme.**	
◆ Staff document the equipment required to deliver the various aspects of the programme.	✔
◆ The equipment required is in place.	✔
◆ Systems are in place for regular maintenance and updating of equipment.	
◆ Stock records are maintained.	

SECTION TWO: PERSONNEL & DEVELOPMENT

Quality Standards and Evaluation Criteria	FETAC Requirements
11. Staff Team	
■ **Staff work as a team.**	
◆ Staff adopts a teamwork approach.	
◆ All members of the staff team share responsibility for the work of the centre as appropriate.	
◆ The role and responsibility of each staff member is outlined.	✔
◆ All staff members are provided with opportunities to contribute to the development of the centre through participation in staff meetings, training, planning and evaluation sessions as well as structured teambuilding exercises.	
◆ The composition of the staff team is based on the operational needs of the centre.	

Quality Standards and Evaluation Criteria	FETAC Requirements
12. Staff Recruitment and Induction	
■ **Staff is recruited on the basis of personal suitability, appropriate experience and qualifications.**	
◆ A staff recruitment policy and procedures are developed and documented.	✔
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	✔
◆ The Co-Ordinator/ Director is involved in the recruitment process as appropriate.	
■ **A staff induction programme operates in the centre.**	
◆ The induction programme is developed and documented so as to ensure that staff are aware of expectations, internal organisation, procedures and good practice.	✔
◆ All new staff are inducted in accordance with agreed induction programme.	✔
■ **Staff conduct is professional at all times.**	
◆ The code of conduct is developed and is based on national guidelines.	
◆ All staff are informed of the code as part of their induction programme.	
◆ All staff carry out their work in accordance with the code of conduct.	
13. Staff Development and Training	
■ **Staff are encouraged and supported to gain additional training/ qualifications appropriate to their role in the centre.**	
◆ A staff development policy is developed and documented in consultation with staff and management.	✔
◆ Procedures are in place for staff to make recommendations and seek support for training and the achievement of additional qualifications as appropriate.	✔
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	✔
◆ Time and resources are allocated on an annual basis for staff development.	
14. Staff Support	
■ **A staff support system is in place.**	
◆ The staff support system has been developed in consultation with staff and local management.	
◆ The staff support occurs on a regular basis and in a structured format.	
◆ Staff feel the benefits of the staff support system.	

SECTION THREE: LEARNING ENVIRONMENT

Quality Standards and Evaluation Criteria	FETAC Requirements
15. Social Environment	
■ **A positive, encouraging, safe, challenging and caring environment is provided for staff and learners.**	
◆ The centre promotes mutual respect between staff and learners.	
◆ Programmes delivered in the centre are interesting and challenging for learners.	
◆ Appropriate teacher to learner ratio applies to all programme activities.	
◆ The duration of the classes, learning day and annual attendance are in line with the learners' needs and abilities.	
◆ A child protection policy is in place and is implemented.	
◆ Information and training in relation to child protection are provided for relevant staff.	
16. Code of Behaviour	
■ **Learners are encouraged to behave in an appropriate manner.**	
◆ A code of behaviour is developed in conjunction with staff and learners.	
◆ The code outlines learners' rights and responsibilities and a grievance procedure.	
◆ The code outlines procedures for dealing with bullying.	
◆ The code outlines procedures for dealing with the misuse of drugs.	
◆ The code has the support of the staff and learners.	
◆ The code is implemented in a fair and consistent manner.	
◆ Clear records are maintained in relation to the implementation of the code of behaviour.	
17. Equality	
■ **There is a commitment to the provision of equal opportunities for learners and staff in compliance with relevant equality legislation.**	
◆ An equality policy and procedures are developed and documented.	✔
◆ An equality action plan is developed and implemented as part of the Centre Development Planning Process.	✔
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	✔
◆ Information and training in relation to equality is provided for staff.	✔
◆ Individuals or groups with particular needs are facilitated to participate in the programme through the provision of specific supports.	✔
◆ Codes of practice for dealing with complaints of sexual harassment, and bullying and harassment, are in place and are implemented.	

Quality Standards and Evaluation Criteria	FETAC Requirements
18. Interculturalism	
■ **The programme values and reflects the cultural identity of all learners.**	
◆ Centre policies and procedures reflect an intercultural ethos and promote mutual respect, understanding and openness to individuals and groups from all cultures, ethnic, national and religious backgrounds.	
◆ Programmes of learning reflect and validate the cultural backgrounds and learning styles of all learners.	
◆ Staff are encouraged and facilitated to avail of training in the area of intercultural education in order to gain empathy and deliver intercultural learning experiences.	

SECTION FOUR: PROGRAMME

Quality Standards and Evaluation Criteria	FETAC Requirements
19. Programme Development and Delivery	
■ **The overall centre programme meets the needs of the learners.**	
◆ A policy and procedures for programme development, delivery and review are developed and documented.	✔
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	✔
◆ The programme is holistic in nature and designed to meet identified learners' needs.	
◆ The needs of learners are identified through surveys/research as appropriate.	✔
◆ The overall programme is developed, documented and evaluated at regular intervals.	✔
◆ Programmes are timetabled and timetables are adhered to whenever possible.	✔
◆ The programme reflects the local environment and cultures.	
◆ Structured one to one time is available for learners as appropriate to their needs.	
◆ Developed programmes and modes of delivery are approved by local management prior to implementation.	✔
◆ Procedures for the protection of learners, in the event of a programme ending unexpectedly, are developed and documented.	
■ **Staff plan programmes of work for each module/ subject area on an annual basis**	
◆ Programme plans prepared by staff include the content of the programme and how it is to be delivered in a given timeframe.	✔
◆ Programmes reviewed at regular intervals by teachers, involved in conjunction with learners.	✔

| Quality Standards and Evaluation Criteria	FETAC Requirements
■ **Programmes are delivered in a manner that meets learners' needs and in accordance with centre policy.**	
◆ Procedures for provision/delivery of key aspects of programme are agreed and documented.	✔
◆ A variety of approaches to learning is used in order to ensure that learners are actively involved and take responsibility for their own learning.	✔
◆ Staff share and apply a common understanding of the most appropriate methodologies in the delivery of the various aspects of the programme.	✔
20. Recruitment of Learners and Admission	
■ **A local awareness raising campaign is implemented.**	
◆ A range of awareness raising materials is developed and distributed to appropriate individuals and organisations within the community.	✔
◆ The awareness raising material is documented in format appropriate to prospective learners.	✔
■ **The referral and admissions procedures operate in a fair and consistent manner.**	
◆ An admissions policy and procedures are developed and documented.	✔
◆ Arrangements for the recognition of prior learning is developed and documented.	✔
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	✔
◆ Referral systems are established with schools and other relevant agencies.	
◆ Learners are provided with sufficient information at entry stage to make informed choices regarding the programme.	✔
◆ Appropriate documentation and application procedures are in place.	✔
◆ Individual interviews are carried out to assess learner's overall needs and suitability for the programme.	✔
21. Initial Assessment Induction and Review	
■ **A welcoming and informative induction programme is provided for learners.**	
◆ An induction programme is developed & documented in consultation with staff & learners.	✔
◆ An induction booklet for learners is prepared.	✔
◆ Induction occurs with each new group of learners and individuals where necessary.	✔
◆ Learners are provided with an opportunity to evaluate the induction programme.	
■ **A broad ranging initial assessment of each learner is carried out.**	
◆ A policy and procedures for initial assessment are developed and documented.	
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	
◆ An interview is carried out with each learner.	
◆ Interviews are carried out with relevant others, e.g. parents/ guardians, social workers, former teachers, J.L.O., probation officer as appropriate.	

Quality Standards and Evaluation Criteria	FETAC Requirements
◆ Referral for specialist assessment is organised as required.	
◆ Additional resources are sought where specific needs are highlighted.	
■ **An individual learning plan is developed for each learner.**	
◆ A plan of learning is developed in conjunction with each learner, based on the outcomes of initial assessment.	
◆ The learning plan is implemented.	
◆ The learner's progress is evaluated and the learning plan is reviewed on a regular basis in co-operation with the learner.	
22. Learning Assessment and Certification	
■ **Systems are in place for the provision and implementation of a range of certification options as appropriate to learners' needs.**	
◆ Learners are aware of the certification options available in the centre.	✔
◆ Responsibility for certification and assessment is clearly allocated.	✔
■ **Assessment of learner achievement operates in a fair and consistent manner across the programme.**	
◆ A policy & procedures on assessment of learner achievement are developed & documented.	✔
◆ A system for monitoring the implementation and effectiveness of the policy and procedures is established.	✔
◆ Assessment of learner achievement is co-ordinated across all programmes.	✔
◆ Learners have access to the information necessary for them to participate in assessment, and access to feedback on their assessment	✔
◆ Assessment methodologies are adapted, as necessary and reasonable, to cater for learners with a disability or other persons covered by the nine grounds of the Equality legislation.	✔
◆ Assessment materials are securely stored.	✔
◆ An appeals procedure for learners is in place.	✔
◆ Procedures for internal and external verification are established.	✔
◆ A corrective action plan is in place to deal with errors, omissions and/ or deliberate acts by learners and staff which impact on the validity of the assessment process.	✔
23. Support Structures for learners	
■ **A range of supports is in place for learners which help to provide a more holistic response to their needs and maximise their ability to engage in the programme.**	
◆ Clear procedures and protocols for the provision of the following supports are established and implemented: ■ Counselling support ■ Guidance support ■ Childcare support ■ Transport support	

Quality Standards and Evaluation Criteria	FETAC Requirements
◆ The support is available to learners.	✔
◆ The learners use the support.	
■ **Arrangements are in place for regular meetings/ communication with parents/ guardians as appropriate and other relevant agencies, as a support to the learner.**	
◆ Parents/ guardians/ relevant agencies are encouraged to support the participation of the learner in the centre.	
◆ Parents/ guardians are informed of the learner's progress within the centre.	
24. Literacy and Numeracy	
■ **An integrated approach to literacy/ numeracy provision is in place.**	
◆ The literacy/ numeracy levels of learners are assessed.	
◆ A literacy plan for the centre is developed and implemented.	
◆ One to one support for literacy is available as required.	
◆ The induction programme for staff includes literacy awareness.	
◆ Literacy development is integrated into all aspects of the programme.	
◆ Literacy programmes are culturally and environmentally relevant.	
25. Social, Personal and Health Education	
■ **A broad ranging and integrated programme of social, personal and health education is provided.**	
◆ The overall social, personal and health education needs of learners are assessed.	
◆ A programme of learning in the area of social, personal and health education is developed and delivered based on the needs of the learners.	
◆ Health promotion is an integrated part of centre policy and practice.	
◆ Learners have access to information on health related issues.	
26. Work experience	
■ **Learners are provided with opportunities to participate in a work experience programme.**	
◆ Procedures for establishing and supervising work experience are developed and documented.	✔
◆ Responsibility for work experience is clearly allocated.	
◆ Insurance requirements are met.	
◆ Links with employers are established.	✔
◆ Learners are adequately supervised and supported during work experience.	
◆ Appropriate records are maintained.	

Quality Standards and Evaluation Criteria	FETAC Requirements
27. Transfer and Progression	
■ **Learners are supported to transfer and progress to programmes within or external to the centre.**	
◆ A policy and procedures for transfer and progression of learners are developed and documented.	✔
◆ Guidance/ counselling support is provided for learners during the initial stage of moving into a new programme.	✔
◆ Learners are informed of the transfer and progression options that are open to them on completion of programmes.	✔
◆ Learners' progression and transfer routes are documented.	✔
◆ Links are established between employers/ centres of further education and training or other relevant agencies in order to develop transfer and progression routes.	✔

appendix B

Glossary of Terms
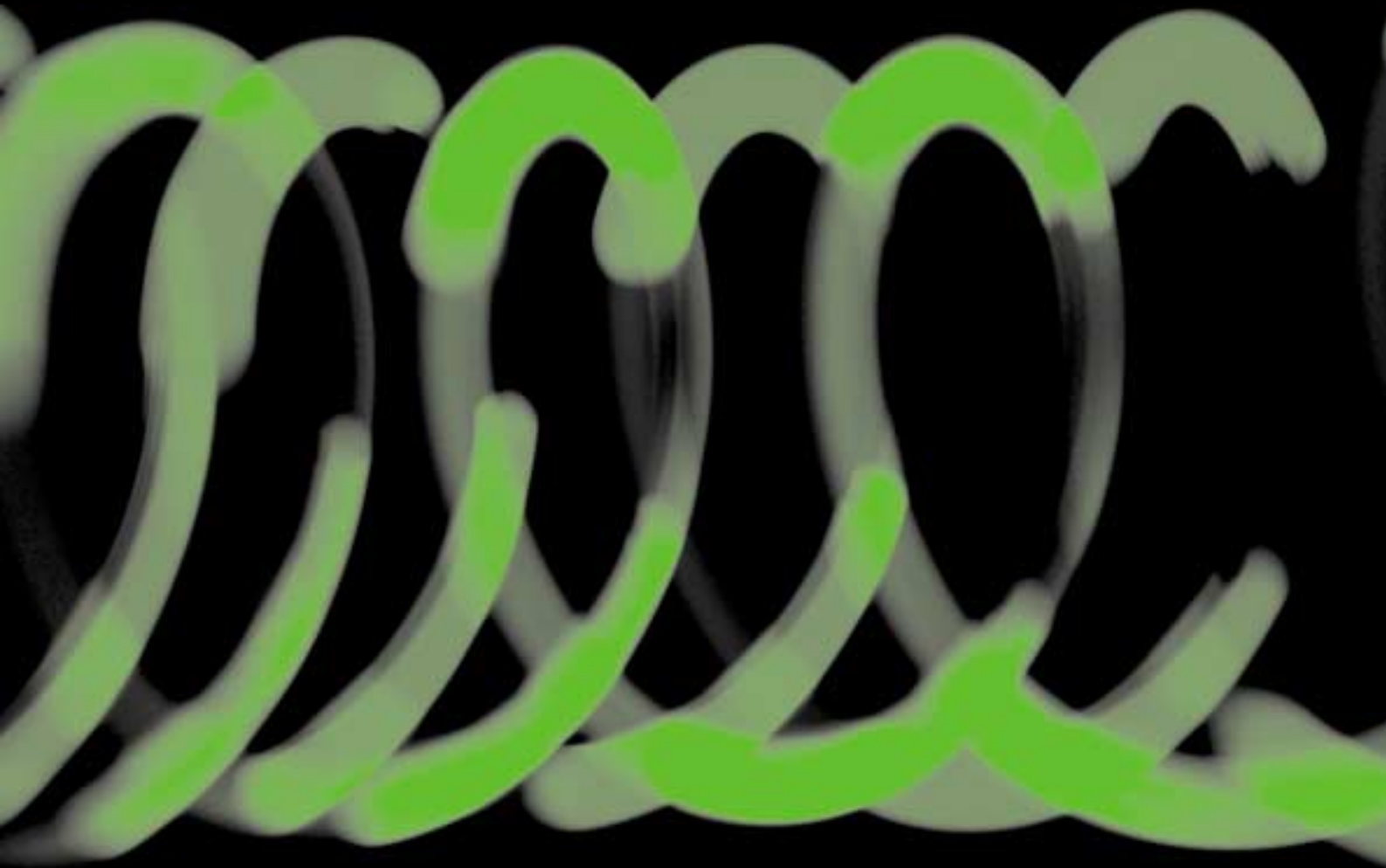
Accountability:
Obligation to account for one's actions or willingness to accept responsibility.

Admission:
The process of admitting a learner into the programme.

Assessment:
An exercise such as a written test, portfolio, or experiment that seeks to measure a learner's skills, knowledge or competencies.

Centre Development Planning (Strategic Planning):
The process of reviewing the centre's purpose and activities with a view to setting out a clear direction and concrete goals for the future.

Certification:
A formal written statement of standards achieved by an individual as part of an education or training programme.

Completion Rates:
The number of learners who complete a programme of education and training expressed as a percentage of the number of learners who commenced the programme concerned.

Ethos:
The fundamentals and distinctive character of a centre reflecting beliefs and principles that guide the work.

Evaluation:
The process of examining centre's practice with regard to the Quality Standards, acknowledging success and identifying areas and specific actions for improvement.

Evaluation Criteria:
Statements of how quality standards are made operational.

Individual Learning Plan:
A plan of learning tailored to the learner's specific needs and abilities, written by staff in conjunction with the learner, which sets out broad goals for the learner to reach.

Induction:
Formal information and training provided to a learner or member of staff during their initial period in the centre.

Initial Assessment:
A process undertaken with new learners that will determine their ability, interests and needs for the purpose of developing and implementing an individual learning plan. The process may involve collecting information from other individuals or organisations in order to create a more complete picture of the learner's situation.

Interculturalism:
A principle that underpins educational policy and requires that educational policy and practice be framed in the context of serving a diverse population as opposed to a uniform one.

Learning Environment:
All of the physical surroundings, psychological or emotional conditions and social or cultural influences affecting the growth and development of a learner.

Mission Statement:
This sets out the fundamental purpose of an organisation and what it hopes to achieve.

Monitoring:
A process of tracking and recording the implementation of quality standards, policies, procedures and centre plans.

Personnel:
The body of persons employed by the organisation. May include Director/ Co-Ordinator, teachers and other centre staff.

Quality Assurance:
The system(s) put in place to establish, maintain and improve the quality of all the key aspects of the work in centres.

Quality Standards:
Statements outlining the key elements of a quality programme.

Referral:

To direct towards a source of help, information or service.

Social Environment:

Social and cultural patterns and processes that influence the environment in the centre.

Staff Support:

A structured system of providing opportunities for staff to discuss problems relating to their work on an individual or group basis leading to problem solving and issue resolution.

Stakeholder:

Individuals or organisations that have a key interest in, and a responsibility for the success of the centre.

Transparency:

The quality of being clear and easy to understand.

Vocational Education Committee (VEC):

Regional management body responsible for YOUTHREACH and Senior Traveller Training Centres.