

11 March 2021

Education QA model update and evaluation of first pilot cycle

Executive Summary

The purpose of this paper is to:

- Provide an update to the Committee on the progress in piloting and implementing the new Education QA model. A project status report is presented as appendix 1
- Present findings from the evaluation of pilot cycle 1 against project objectives, measures, and benefits

Previous consideration	<ul style="list-style-type: none">• ETC paper 11 June 2020 – Education quality assurance model and pilot proposals• ETC paper 12 November 2020 – Education QA model pilot update• A previous version of the update part of the paper was presented to SMT on 2 March 2021 as part of the Head of Education’s report• A draft of the evaluation report was taken through the project board for the Education-led project to deliver this change programme
Decision	The Committee is asked to discuss the evaluation report in appendix 2, focusing on the questions in section 2 of the cover paper
Next steps	<ul style="list-style-type: none">• Executive to act on decisions made by the Committee relating to progressing to pilot cycle 2, including any areas of focus defined• Update / evaluation paper to June 2021 ETC meeting
Strategic priority	<ul style="list-style-type: none">• Continuously improve and innovate• Promote high quality professional practice• Develop insight and exert influence
Financial and resource implications	Costs of development work included in 2020-21, and 2021-22 budgets.
Author	Jamie Hunt, Education Manager Jamie.Hunt@hcpc-uk.org

New QA model pilot – project update and defining further ETC involvement

1. Project status report

- 1.1. A project status report is presented as appendix 1. All project workstreams are complete, in progress or not yet started (as planned).
- 1.2. The Committee is asked to consider the report, ask any questions, and provide feedback on the report format and any further areas for inclusion.

2. Evaluation report

- 2.1. The evaluation report from pilot cycle 1 (Dec 2020-February 2021) is presented as appendix 2.
- 2.2. The intention of this report is to present findings from the evaluation of pilot cycle 1 against project objectives, measures, and benefits
- 2.3. The Committee is asked to consider the report, and discuss the following areas:
 - Provide insight into the areas evaluated, with particular focus on the areas where limited progress has been made
 - Does the Committee agree with the Executive's view that the pilot should continue into cycle 2?
 - Discuss the areas of focus in the next pilot cycle
 - Discuss what success looks like through evaluation at the end of pilot cycle 2

Appendix 1 - New Education QA model pilot: Project status report

Meeting	ETC – 11 March 2021		
Strategic objectives	<ol style="list-style-type: none"> 1. Embed flexibility within the QA model to enable bespoke, proportionate and effective regulatory engagement with education providers. 2. Embed organisation, profession and programme specific level engagement mechanisms which enhance our ability to assess the impact of risks and issues on HCPC standards. 3. Use data and intelligence within the QA model to enable more effective risk-based decision making. 		
Deliverables	All live deliverables are on track for overall project delivery:		
	Deliverable	Timing	Status
	Prepare for pilot phase by: *defining pilot methodology *operationalising the QA concept *creating supporting business process information and guidance	Jul-20 - Dec-20	Complete
	Deliver a programme of pilots with selected providers through new QA approach (approvals and AEP monitoring), using PDSA pilot methodology	Jan-21 - Aug-21	In progress, on track
	Refine and finalise QA model (including the use of data and intelligence, and the application of a risk framework), business processes and supporting guidance, ready for full implementation	Jan-21 - Aug-21	In progress, on track
	Ensure business systems requirements, in line with user journeys and expectations, support the pilot activity and the new QA model for full implementation	Aug-20 - Dec-21	In progress, on track
	Deliver internal and external supporting resources to support and enable the delivery of the pilot and new approach	Sep-20 - Dec-21	In progress, on track
	Prepare stakeholders for implementation by keeping them informed of progress, timelines, and future requirements	Sep-20 - Dec-21	In progress, on track
	Present implementation proposal to the ETC	Sep-21	Not started
	Scope, develop and implement a data sharing agreement with HESA which is suitable to support QA model on implementation.	Sep-20 - Aug-21	In progress, on track

Key milestones complete since last update	<ul style="list-style-type: none"> • Phase 1 (prepare for the pilot phase) complete in December, on time and with all deliverables met <ul style="list-style-type: none"> ○ Established business processes ○ Established data and intelligence strategy, and risk-based decision-making framework ○ Established pilot evaluation and continual development strategy and activities ○ Identified pilot providers ○ Defined use of standards • Within phase 2 (pilot phase) <ul style="list-style-type: none"> ○ Support delivery of Education System Transformation (MP203) - MVP delivery ○ Jan 2021 – E-learning for partners on the model for delivered ○ End of Feb 2021 – Cycle 1 pilot complete, and evaluated with stakeholders ○ Mar 2021 – Scale up activities within the Department. Further executives involved for pilot activities in cycle 2 	
Activities in progress	Activity	Milestones
	Support delivery of Education System Transformation (MP203)	<ul style="list-style-type: none"> • Three-weekly development and testing ‘sprints’ • Sep 2021 – MUP, inclusive of external provider portal and ability to collaborate with partners
	Develop guidance for pilot delivery and implementation	<ul style="list-style-type: none"> • Delivered on an iterative basis, specific guidance delivered prior to reaching process points
	Deliver capability to use data through the model, including data sharing agreement with HESA and new graduate survey	<ul style="list-style-type: none"> • March 2021 – scoping of internal ability to deliver new graduate survey • Jun-Jul 2021 – Delivery of HESA data • Sep 2021 – Use HESA data in model • Sep 2021 – Use new graduate survey data in model
	Pilot activity	<ul style="list-style-type: none"> • Mar-May 2021 – cycle 2 • Jun-Aug 2021 – cycle 3

	Evaluation and improvement of the model	<ul style="list-style-type: none"> • May-Jun 2021 - Evaluation of pilot 2 activities, followed by improvement embedding into the model • Aug-Sep 2021 - Evaluation of pilot 3 activities, followed by improvement embedding into the model • Sep 2021 – ETC decision point on implementation
	Development of governance arrangements	<ul style="list-style-type: none"> • March 2021 – public law advice due • Pre-June ETC – workshop with the Committee to discuss • June – options paper to June ETC
Activities commencing in project phase 2	Activity	Milestones
	Scale up activities	<ul style="list-style-type: none"> • Mar 2021 - Develop partner workload and fee modelling • Jun 2021 - Assess and develop Department roles and structure • Sep 2021 - ETC decision on moving to implementation • Sep-Dec 2021 - Scale up activities with education providers
	Initial full implementation	<ul style="list-style-type: none"> • January 2022
Stakeholder engagement - recent and upcoming activities	<ul style="list-style-type: none"> • Council of Deans of Health – Regular workshops with members. Next scheduled in March 2021 • PSA – continued engagement to ensure developments in the model mean it still aligns with their standards and intentions around regulatory reform. Meeting arranged for the summer, to enable results from pilot to be presented • Education provider stakeholders: <ul style="list-style-type: none"> ○ Evaluation workshops with pilot providers at the end of each phase (May, Aug) ○ Next update to sector in March Education Update (March-end) • Education and Training Committee (ETC): <ul style="list-style-type: none"> ○ Monthly catchups with ETC Chair ○ Workshop on 8 March focusing on the model (key features and process) and early results from the pilot ○ Progress update to June meeting • Professional body education leads: 	

	<ul style="list-style-type: none"> ○ Developing how we work together to share intelligence. Forum established with first meeting in March 2021 ● Education partner visitors: <ul style="list-style-type: none"> ○ Evaluation workshops with pilot visitors at the end of each phase (May, Aug) 			
Strategic risks and mitigations	Risk description	Probable consequences	Mitigations	Mitigation progress
	This project and the Education System Major project (MP203) not effectively integrated, meaning work packages and dependencies not understood and delivered upon	Lack of co-ordination leads to: 1. Delays to progress / delivery across project workstreams, resulting in delays to / non delivery of the projects 2. Impact on quality of products / deliverables to keep to delivery timeframes, which might impact on overall project delivery / quality	1. Set up effective governance for both projects, which focuses on information sharing between the two projects	In progress
			2. Clearly define areas of responsibility and deliverables for each project	Complete
			3. Definition of system requirements, including sequencing of deliverables	In progress
			4. Effective planning for both projects, including critical path analysis and intraproject dependencies	In progress
			5. Continual re-evaluation of deliverables and project plan, to focus on delivery of key workstreams	In progress
	Organisational conventions about external stakeholders' ability to access HCPC environments provide a barrier to user focused system interactions and	1. Stakeholder expectations linked to integrating with the HCPC not met 2. Delineation between existing model and new model undermined	1. Definition of requirements	In progress
2. Work with key roles and individuals within the organisation on developing conventions			In progress	

	document collaboration			
	Organisational data strategy is not positioned to incorporate the project's intentions for processing and management of external data	<ol style="list-style-type: none"> 1. Embedding of data at implementation seen as the finished product 2. Data function not able to support scaling up of further data requirements and integration 	<ol style="list-style-type: none"> 1. Embed understanding with key internal stakeholders (Policy data and intelligence lead, Executive Director of Digital Transformation, Chief Exec) 	In progress

New Education QA model pilot – cycle 1 evaluation report

This report evaluates progress against the strategic objectives for the new education quality assurance model, following completion of cycle 1 pilot activities. A summary of progress against the measures for meeting strategic objectives is provided in the last section of this report.

Contents

Background	1
Strategic aim and objectives of the model	1
Purpose of evaluation	1
Evaluation activities	2
Meeting our objectives – cycle 1 findings	2
Strategic objective 1	3
Strategic objective 2	7
Strategic objective 3	10
Summary and next steps.....	12
Appendix 1 – data from surveys.....	13
Education provider survey	13
Visitor survey	13

Background

Strategic aim and objectives of the model¹

Our aim is to position the HCPC’s Education function to be flexible, intelligent and data led in its risk based quality assurance of education providers.

To achieve this, the current programme of work will deliver improvements in the following areas:

- Achieving risk based outcomes which are proportionate and consistent
- Operating efficient and flexible quality assurance processes
- Using a range of data and intelligence sources to inform decision making

Purpose of evaluation

The benefits of the model have been defined and agreed upon. We are piloting whether the benefits can be delivered on in practice.

We are undertaking in-pilot improvement of the model via Plan Do Study Act methodology. This means we can be responsive to areas identified for improvement, and test these areas quickly via a series of pilot cycles. It also allows us to formally measure how we are meeting objectives on a regular basis, leading to a clear understanding of progress made, and progress required. Our aim is to maximise the delivery of the benefits of the model through the evaluation of pilot activities.

¹ The recently circulated project briefing document contains a detailed breakdown of aims and objectives, how the model is planned to work, and how it will be delivered.

Evaluation activities

The evaluation in this report was focused on activities undertaken in the first pilot cycle (December 2020-January 2021). We have undertaken the following evaluation activities:

- Desk based review of 15 cases:
 - Comparative data points
 - Qualitative and quantitative review of process point progression
- Stakeholder 'pulse' surveys focusing on the relevant measures of success for each stakeholder group
- Provider and partner workshop – measures explored, with a focus on:
 - Working with and visibility of service users in assessment
 - Understanding the provider / institution context (visitors)
 - Guidance for stakeholders – method of providing, content, and timing
 - Fee model (visitors)
 - Proportionality and burden of AEPM (providers)
 - Terminology – 'institution'

Meeting our objectives – cycle 1 findings

We have completed pilot cycle 1, with four education providers being taken through active assessment in this cycle. We have also prepared seven providers for assessment in pilot cycle 2. We have used data and information from both of these groups to give an evidence based picture of whether measures are met and benefits can be realised on implementation.

Key points:

- It is possible to demonstrably meet all measures and realise all benefits through future pilot cycles – data and information analysed shows no major concerns that meeting the measures is unachievable through the pilot exercise
- We need ensure that benefits realised for the small sample size are scalable – we have not noted any measures as fully met at this stage, rather preferring to further test all measures. This will ensure that benefits can be realised across all provider types, and in different situations
- Developmental feedback shows that the pilot process is adding value – we are realising benefits from our intention to 'co-produce'² the model with stakeholders, by using stakeholder evaluation to drive improvements

² We have defined 'co-production' as "consulting, including, and working together with stakeholders, to come together to find shared solutions."

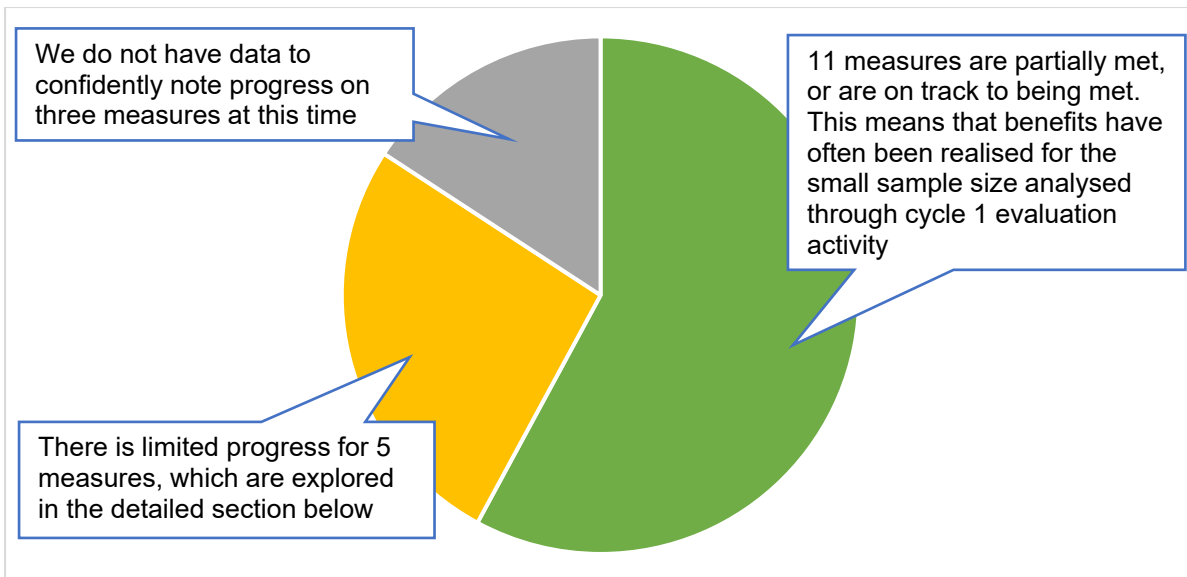


Figure 1 - overview of progress against meeting measures

In producing this report for several key audiences, the executive considered it appropriate to provide evidence and analysis broken down for each measure. This section can be read in full, or with focus on the summary of findings and key development points. The reader should be able to understand progress against measures and benefits without reading through the detail for each measure.

Strategic objective 1

Summary of findings	
<p>Objective: Achieving risk based outcomes which are proportionate and consistent</p> <ul style="list-style-type: none"> Stakeholder views were generally that proportionate assessments are undertaken, but outcomes data is not yet available to confirm this due to cases having not progressed to conclusion at this time The risk model developed through the pilot preparation phase of the project has been applied in specific case activities, and has added value in defining and considering risk to position visitor assessment We need to further develop supporting information and guidance for providers so they do not 'overwork' the process and are better able to contextualise their engagement within the key features of the model 	<p>A pie chart showing the progress for Strategic Objective 1. It is divided into two segments: a green segment representing 'On track, 5' and a yellow segment representing 'Limited progress, 3'.</p>

Key development points for pilot cycle 2		
Current guidance is not sufficient for providers to fully	Study	Providers are often 'overworking' certain process stages based on not understanding what is required and why

understand the model or their interactions, to gain the full benefits of the model	Action	Undertake structured work with providers to ensure guidance is concise, timely, provided in a format that is easy to access and understand, and focused on the process stage (while drawing through key features of the model)
--	---------------	--

Analysis of measures		
Progress	Findings	Focus for pilot cycle 2
Outcomes data shows that different types of regulatory engagement have been appropriately designed and successfully implemented through each QA process		
On track	<ul style="list-style-type: none"> The principles of the model have been applied as intended at each stage Stakeholders satisfied with approaches applied Design of QA activity based on the 'problem' realises the aim to deliver right touch regulation Benefit realised for small sample size, noting that process have not been concluded at the point of evaluation 	<ul style="list-style-type: none"> Analysis of final outcomes data Focused engagement with providers who have reached an outcome
Education providers are satisfied that the engagement undertaken was proportionate, meaningful and appropriate to achieve the regulatory outcome		
On track	<ul style="list-style-type: none"> General stakeholder view that this measure is met Some comments that regulatory burden is front-loaded (as intended), which can impact on the feeling of proportionality Design of QA activity based on the 'problem' realises the aim to deliver right touch regulation Benefits realised for small sample size, noting that process have not been concluded at the point of evaluation 	<ul style="list-style-type: none"> Analysis of final outcomes data Focused engagement with providers who have reached an outcome
Education providers perceive there to be a reduction in the administrative burden for them to engage with us through all processes, compared to the current model		
On track	<ul style="list-style-type: none"> Benefits realised through the approval process (60% reduction in the number of standards assessed for 7 cases) AEPM feels more burdensome during pilot engagement. Linked to the frontloading of burden through the process, which on completion will mean burden drops to almost nothing vs ongoing engagement in BAU HPCP is only one part of a quality picture, so us reducing burden may not have an impact overall if other organisations continue to require the same engagement as now 	<ul style="list-style-type: none"> Frame this measure around HPCP requirements, and the long term reduction in burden for those requirements Ensure engagement through AEPM

	<ul style="list-style-type: none"> Marked as on track as there has been demonstrable progress to achieving the benefit in the approval process, and the AEPM process is so far functioning as intended with frontloaded burden. 	<p>is framed as incentivising reduced burden longer term</p> <ul style="list-style-type: none"> Continue work with professional bodies on a joined up and proportionate approach
The visitors are able to perform their role effectively through the structure of engagement used in any QA process undertaken		
On track	<ul style="list-style-type: none"> Visitors generally agreed that this measure was met at this time Execs have been able to progress case activities as required, with visitors supported to develop their understanding of stage level input as processes progress This includes designing QA activity based on the 'problem', and focusing on standards at the right time, both realising the aim to deliver 'right touch regulation' 	<ul style="list-style-type: none"> More formally capture evaluation from others (particularly execs)
All parties were clear about our process requirements and the reasons for taking a particular engagement approach through any QA process undertaken		
On track	<ul style="list-style-type: none"> Stakeholders were given reasons why particular engagement was required Feedback suggests support and information for visitors gives them what they need for the measure to be met for this group At times, education providers have not understood requirements, usually providing more than they need to Feedback received from providers has underlined the importance of good stakeholder engagement and support prior to implementation and through the new model This shows that the benefit of engaging stakeholders flexibly and with clear rationale provided is partially delivered, but more work is required to embed this, particularly for providers 	<ul style="list-style-type: none"> Use feedback to design how we prepare providers for implementation, and to develop guidance Focus stakeholder engagement actions to facilitate a smooth transition to the new model
Internal and external stakeholders are satisfied that supporting information and guidance positions them to deliver and engage QA processes and activities.		
Limited progress	<ul style="list-style-type: none"> Visitor e-learning module was highly valued For visitors, feedback shows the measure is partially met, but more could be done to firm this up via future evaluation 	<ul style="list-style-type: none"> Continue as planned to develop more

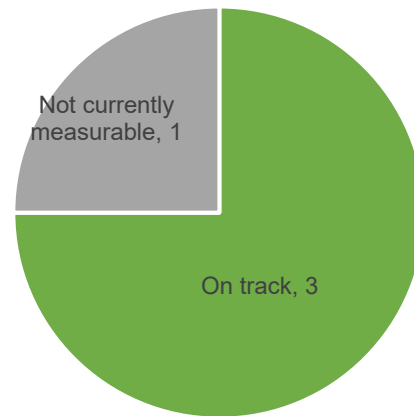
	<ul style="list-style-type: none"> • Provider feedback showed that more formal, structured, and consistent guidance and information at each process point was preferred, in addition to the current informal guidance from the executive (which was valued) • This shows that where some progress has been made to meet the measure, more effort is needed to realise the benefit to clearly position stakeholders 	<p>formal guidance for stakeholders</p> <ul style="list-style-type: none"> • Ensure inclusion of live case summary information / dashboard
Qualitative data shows that through each QA review, regulatory activity had a clear purpose and was applied in a proportionate way		
Limited progress	<ul style="list-style-type: none"> • Developed guidance on the application on various QA activities • Most cases have not yet reached this stage • For those that were, unclear whether decision about quality activity was reasonable for cases which have reached this point, as decisions were not reported • Design of reporting mechanisms for pilot activities have not allowed for insight data to be produced • Some progress has been made in meeting this measure, with relevant guidance developed, but this is currently unmeasurable due to gaps in reporting 	<ul style="list-style-type: none"> • Ensure reasoning captured on a case level, and reportable on an ongoing basis to give insight into application of model • Undertake full analysis in cycle
The model improves the institution / programme(s) assessed		
Limited progress	<ul style="list-style-type: none"> • Incremental improvement to institutions / programmes made within the context of meeting regulatory standards – providers may not see this as much ‘value add’ beyond satisfying our requirements • Due to the point in the process reached, have not set formal requirements for improvement via APP or AEPM, or identified best practice • Visitors generally agreed with this statement, but feedback from providers showed no insight data or information about this measure • Unable to say if benefit realised with current data 	<ul style="list-style-type: none"> • Include focused area for provider evaluation on conclusion of each process

Strategic objective 2

Summary of findings

Objective: Operating efficient and flexible quality assurance processes

- Stakeholder views and analysis shows that assessment activity is efficient and focused to the situation, and that requirements are designed appropriately for each assessment
- Due to the point reached in processes, we do not have outcomes data to confirm this benefits realisation at the conclusion of processes



Key development points for pilot cycle 2

Cultural shift to the new model may be challenging for providers	Study	<ul style="list-style-type: none"> • The sector generally understands the existing model and how that slots into other quality activity • There could be unintended consequences when implementing the new model, such as internal quality processes requiring regulatory 'sign off' of changes, but this level of sign off not being undertaken by us
	Action	Work with providers to understand unintended consequences, and to help them integrate requirements of the new model into their own practices
Applying standards at different stages, and understanding the institution context is work in progress for visitors	Study	Visitors are generally comfortable with the approach of the model, once they have developed their understanding through assessment activities
	Action	<ul style="list-style-type: none"> • Support visitors through more structured guidance and training to arrive at this understanding with less direct executive input • For executives through stage 2 pilot activities, to ensure visitors engaging with the model are supported to apply it within its intentions
Stakeholders want to shape method(s) of engagement through system solutions being designed to allow information sharing and collaboration	Study	Stakeholders saw the value in information sharing and document collaboration through a system solution, but noted this must work for their needs
	Action	Embed stakeholder-focused requirements and user acceptance testing into systems delivery major project. This means delivery timeframes

		need to allow for the ability to test and improve these solutions with stakeholders
The term 'institution' is imperfect to define a grouping together of programmes that meet standards in a consistent way	Study	<ul style="list-style-type: none"> Stakeholders understood this term to mean the whole provider Stakeholders considered it better to define a new term, rather than co-opt an existing one
	Action	Define a clearer term, using feedback from visitors and providers

Analysis of measures		
Progress	Findings	Focus for pilot cycle 2
Education providers are satisfied in the consistency of outcomes reached through any QA process undertaken		
Currently not measurable	<ul style="list-style-type: none"> Not reached final outcomes in any pilot activity Linked to earlier measures, there is consistency inherent in the model, with the approach to not re-assessing institution level standards through the approval process, and taking an institution-wide view through AEPM However, we cannot see results related to this measure at this time, due to processes not having concluded to date 	<ul style="list-style-type: none"> Analysis of final outcomes data Focused engagement with providers who have reached an outcome
Visitors are able to focus more effectively on the appropriate areas of the standards at the appropriate time through each process, in comparison to the current model		
On track	<ul style="list-style-type: none"> Visitors are generally clear on the standards split, and agree that this approach is right to focus assessment Visitors have quickly seen the value in approaching assessments in this way However, they are minded to broaden their focus across all standards rather than sharpen it to the ones being assessed at the relevant stage They consider that applying the model as intended is partially getting comfortable with the approach (ie getting out of old habits) Service users are positioned to form views on subject areas they are best placed to understand, and provide those views to visitors at appropriate times This is good progress to achieving the benefits of focusing processes, and assessing issues at the right time 	<ul style="list-style-type: none"> Guidance ensures approach and escalation mitigations are clear Provide visitors with existing provider completed documentation related to this area

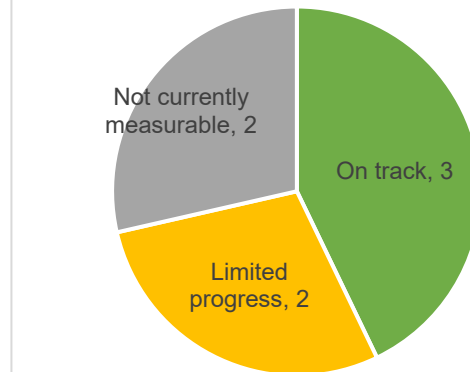
Visitors are satisfied they are positioned effectively to understand the wider organisation context in any decisions they reach		
On track	<ul style="list-style-type: none"> • The visitor survey showed that 20 per cent of respondents disagreed with this measure • When working this through in the workshop, visitors valued exec-drafted programme and organisation context information • They also commented that institution level approaches were sometimes difficult to see, but were normally comfortable to take assurances related to institution wide approaches as intended within the model • When guided, they showed ability to flex how they are used to working • This is good progress to achieving the benefits of focusing processes, and assessing issues at the right time 	<ul style="list-style-type: none"> • Focus on in visitor development • Draw out context more explicitly in the context document • Frame the proposal within the institution by supplying visitors with existing provider completed documentation
Outcomes data shows that issues were picked and dealt with at the appropriate time, leading to smoother progression through the QA processes.		
On track	<ul style="list-style-type: none"> • One APP case cancelled early in the process, so little effort undertaken – as a percentage, comparable to the existing model • Early indications are that we will not need to set conditions for two APP cases at this stage currently, as issues have been worked through with providers in an iterative way • No site visits (virtual or physical) were required in the two approval cases • For the small sample size, benefits of engaging providers flexibly and conducting site visits only when needed to assess standards are realised 	Analysis of final outcomes data

Strategic objective 3

Summary of findings

Objective: Using a range of data and intelligence sources to inform decision making

- Workstreams to embed HESA data and stakeholder intelligence into the model are on track for delivery at implementation, with key external stakeholders on board
- Insight to inform decision making gained from data and intelligence sources for pilot assessments, but we need to take assurances that this is scalable across higher numbers and all provider types



Key development points for pilot cycle 2

Positive contribution of sector relationships supports benefits realisation in this area	Study	<ul style="list-style-type: none"> • These relationships are integral to the model's success • Sector groups are supportive of becoming more actively involved through our work, to the benefit of quality assurance activities
	Action	Pilot specific engagement in cycle 2, and to develop structures based on further analysis and engagement to ensure these relationships are able to flourish
Risk model is working for the small number of low friction cases assessed to date	Study	The risk model was applied well for the assessments made, but that these were 'low friction' assessments
	Action	Ensure close analysis of scale up of risk model in cycle 2, with mitigations required if assessments continue to be 'low friction'

Analysis of measures

Progress	Findings	Focus for pilot cycle 2
Scoped the establishment of data sharing agreement with HESA which is suitable to support QA model		
On track	<ul style="list-style-type: none"> • HESA and internal Data and Insight Manager are confident this agreement can be reached • This means we are on track to realising the benefit of more effective risk assessment and profiling of institutions and programmes 	<ul style="list-style-type: none"> • Continued work with HESA and internal Data and Insight Manager
Sector based intelligence is used throughout each process where appropriate, which improves the quality of decision making		

On track	<ul style="list-style-type: none"> Professional bodies are committed to directly working with us to support and assure high quality education and training Providers welcomed HCPC and professional bodies engaging directly, on a case-by-case basis and more strategically Working on pilot approach with Health Education Improvement Wales (HEIW) to deliver proportionate quality assurance for newly commissioned AHP provision in Wales Linked to this measure, this shows that the intention to undertake more effective risk assessment and profiling of institutions and programmes is deliverable through the pilot 	<ul style="list-style-type: none"> Reflect on development of professional body and HEIW relationships, and impact on case level activities as case studies in future evaluation
All provider types are able to engage with and provide relevant information for the provider performance related data points required through QA processes		
On track	<ul style="list-style-type: none"> Data requirements can be met by all provider types If specific providers cannot satisfy certain data requirements, then they may be more inherently risky, and should be monitored as such Linked to this measure, this shows that the intention to undertake more effective risk assessment and profiling of institutions and programmes is deliverable through the pilot 	<ul style="list-style-type: none"> Continue to monitor, but ensure the model not designed for the exceptions
Education providers understand the risk model and assessment applied through the QA processes and perceive them to be objective and consistently applied		
Currently not measurable	<ul style="list-style-type: none"> Feedback from providers showed no insight data or information about this measure Not measurable at this time, due to a gap in reporting 	<ul style="list-style-type: none"> Include focused area for provider evaluation Workshop risk modelling exercise and points of application with providers
Visitors are supported and positioned to make risk-based decisions appropriately within the QA model		
Limited progress	<ul style="list-style-type: none"> The principles of the model have been applied as intended at each stage Visitors are satisfied that this measure is met In the assessments undertaken to date, the benefit of more effective risk assessment and profiling of institutions and programmes has been realised 	<ul style="list-style-type: none"> Develop and apply method of assessment to apply should live assessment work not allow risk model to be

	<ul style="list-style-type: none"> • However, assessments made to date have been relatively low friction, with no major issues or differences of opinion between visitors identified • Use of risk model adds most value in situations where potentially significant risks are identified. Therefore, testing of the model is required in these situations to be satisfied that this measure is met 	tested in a high risk situation
A risk model is delivered, which allows risks to be quantified effectively, with higher risk providers appropriately engaged in more intensive and timely regulatory interventions		
Limited progress	<ul style="list-style-type: none"> • Institution risk model developed, and applied in specific cases • In the assessments undertaken to date, the benefit of more effective risk assessment and profiling of institutions and programmes has been realised • However, have not concluded cases or undertaken a broader view across institutions to set focus for future monitoring • Therefore, require more live or test data to understand application of the model, to understand benefit realisation 	<ul style="list-style-type: none"> • Develop and apply method of assessment to apply should live assessment work not allow risk model to be tested
New QA model provides value for money in reaching more effective QA outcomes		
Currently not measurable	<ul style="list-style-type: none"> • Final outcomes not reached to this point, which means this is not measurable currently • Visitors fee model discussed with stakeholders, and recognition that this needs updating 	<ul style="list-style-type: none"> • Analysis of final outcomes data • Explore fee models, in line with the feedback given by visitors, and exec work on this to date

Summary and next steps

We are on track to meet the majority of the measures, and can see benefits realisation for the providers involved in the pilot. Evaluation has identified further areas of focus which will be integrated to the workstreams for this phase of the project.

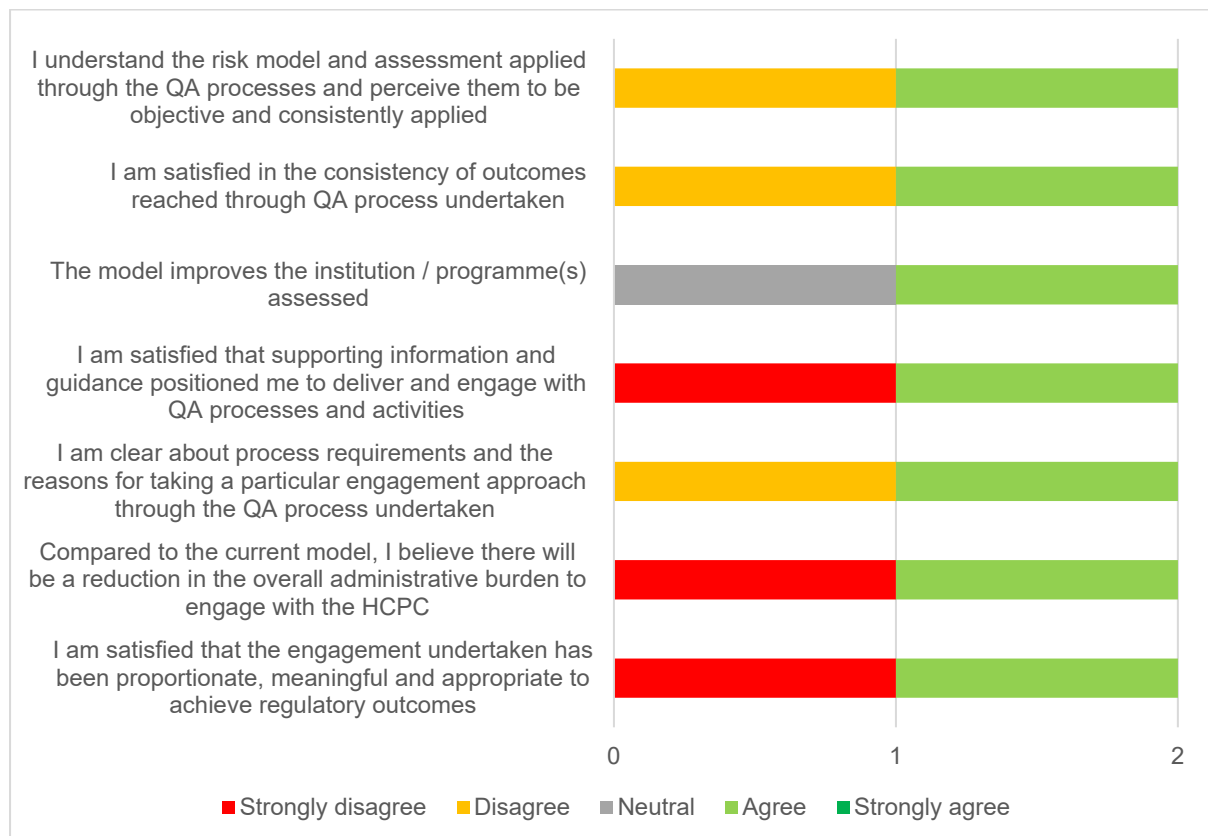
Next steps for formal evaluation:

- At the next evaluation point (end of May), all measures will be analysed again, including those measures with limited progress and for those which were not measurable in this cycle
- At the final evaluation point (end of August), it is our intention to be able to demonstrate that all measures are met, and that benefits are scalable for implementation

Appendix 1 – data from surveys

Education provider survey

The following data is from two respondents. Responses were split between one respondent agreeing with the statements, and the other generally disagreeing. On exploration, the negative responses were due to perception of increased burden, and a misunderstanding of what the pilot would entail.



Visitor survey

The following data is from five respondents. Responses were generally positive, with specific data point to note drawn out in the analysis through the report.

