Continuous Improvement in the Quality of Provision and Learners' Performance Post-16

A Guide for Providers on Self-assessment and Development Planning

Learning+Skills Council

Contents

Foreword

Post-16 education and training providers are expected to produce annual self-assessment reports and development plans. This is one of several publications designed to help providers to produce sound reports and effective plans. It is written primarily for those providers who have little previous experience of these activities, but it will be of some interest to those who have already started to produce them.

The Learning and Skills Council and its partners published general guidance on requirements for self-assessment and development planning in March 2001. The Employment Service, the Adult Learning Inspectorate and Office for Standards in Education have welcomed the production of this guide for providers. It has been prepared for the Learning and Skills Council by the Learning and Skills Development Agency. The guide gives providers helpful advice on how to organise and carry out self-assessment, how to evaluate and grade provision, and how to write reports and layout development plans. It includes useful appendices on the preparation of reports and the nature of the evidence that might be quoted in them.

Raising standards of learners' performance and continuous improvement in the quality of provision is a central concern of the Learning and Skills Council. The responsibility for making improvements rests with providers. Good self-assessment and development planning are important means by which providers can move towards higher standards and better quality. Through producing this guidance for providers, the Learning and Skills Council aims to strengthen providers' efforts to improve the quality of their provision and raise the standards attained by learners.

Thanks are due to Philip Cox and Rosemary Moorse for their help. We hope you will find the document useful.

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A Guide for Providers on Self-assessment and Development Planning

Section 1 – Introduction

Purpose of the Guide

1   New policy guidelines on self-assessment and development planning for post-16 providers were published in March 2001. This document offers further guidance to providers on their responsibilities for carrying out this work. More specifically the guide:

- identifies important shifts in policy and practice that have implications for all providers

- offers advice on self-assessment and development planning, together with examples linked to the requirements set out in the policy guidelines

- provides signposts to further sources of advice and guidance.

2   Supplementary guides will be issued to providers of adult and community learning and work-based training. These guides will include advice on how to set about self-assessment and development planning, for those with little experience of such activities.

Continuous improvement in the quality of provision and the performance of learners post-16: roles and responsibilities.

3   The Learning and Skills Council (LSC) and Employment Service (ES) will seek to develop an effective strategy for continuous improvement in all post-16 provision, consistent with the aims set out in 'Raising Standards in Post-16 Learning', which are:

- high levels of learner achievement

- excellence in teaching, training and other services

- learning represents value for money

- learning meets the needs of learners, employers, the local community and the economy.

4   Providers will have the primary responsibility for improving the quality and standards of provision and raising standards. For this purpose they will be contracted to:

- carry out an annual self-assessment of all aspects of their provision

- produce a self-assessment report which identifies strengths and weaknesses, and other aspects of provision in need of improvement

- agree with LSC and the ES a development plan aimed at bringing about improvements

- monitor and review the implementation of the development plan on a regular basis.

5   The LSC and the ES will use providers' self-assessment reports and development plans as key sources of evidence when making decisions about funding and contracts with the provider.

The ES will use the self-assessment and development plan to inform contract management and continuous improvement activities, as detailed in the ES Quality Framework and through the ES Contract Management Framework. Through regular monitoring visits and review exercises they will:

- make judgements about the quality and rigour of the provider's self-assessment process

- approve (or refer for further action) the provider's development plan, and agree targets and milestones

- offer support (or impose sanctions) where deficiencies are identified in the self-assessment report or development plan

- monitor and review progress against the approved plan.

6   The LSC and the ES will aim to bring about improvement through their own strategies for improving the quality of provision, by identifying strengths and weaknesses, by interventions where appropriate, and through spreading good practice.

7   The Office for Standards in Education (OFSTED) and the Adult Learning Inspectorate (ALI) will, through periodic inspections, offer an independent account of the quality of teaching and training, the effectiveness of learning, the standards achieved, and the efficiency and effectiveness with which resources are managed by providers. The LSC and the ES will make available to the inspectorates, copies of providers' self-assessment reports and development plans (together with other data it holds on providers') for use as part of the evidence base for inspection. College inspections will no longer focus on validating

self-assessments. The inspectorates will seek to bring about improvement by identifying strengths and weaknesses and disseminating good practice.

New arrangements for self-assessment and development planning

8   Many providers will be familiar with the principles and practice of self-assessment and development planning; others will not. The new arrangements apply to all providers. These are summarised below.

9   All post-16 providers will be expected to carry out self-assessment and development planning against the requirements set out in the national guidelines, published in March 2001. (Key requirements are listed in annex A and developed further in this document).

10   Providers' arrangements for self-assessment and development planning will be subject to continuous monitoring and review by the LSC and the ES and four-yearly inspection visits by OFSTED and/or the ALI. Providers will be required to develop quality improvement strategies in close liaison with LSC and the ES. These strategies must take account of inspection findings.

11   The new arrangements have been designed to ensure that the interests of learners come first and are of paramount importance. The intention is to place learners, their needs, experiences and achievements at the heart of these arrangements.

12   All provision for learners should be responsive to the needs of employers, the local community and the economy. To this end, providers will be expected to undertake their planning in concert with the LSC and the ES and other external agencies.

13   The emphasis in the new arrangements is on collaboration rather than competition. Providers should fully involve key partners in the process of self-assessment and development planning.

14   Providers will be expected to promote equality of opportunity in all aspects of provision. This will include adopting measures to widen participation, removing barriers to learning, and lessening inequalities in opportunities for employment.

15   All providers will be required to demonstrate financial probity and value for money as key elements of their self-assessments.

16   In making judgements about the quality of their provision, all providers will be subject to the same degree of rigor. The new arrangements, however, will be applied flexibly so as to take into account the particular aims of providers and the diverse needs of their learners.

17   The new arrangements will respect the fact that providers are at different starting points in their familiarity with self-assessment and development planning. Support will be offered to those providers with little experience in this area of work.

18   All providers will be expected to achieve continuous, year-on-year improvements in the quality of their provision and to raise standards. If standards are already very high, they should be maintained.

Section 2 – Self-assessment

Overview

1   Self-assessment should be a systematic process in which providers collect and analyse evidence in order to make judgements about their performance in relation to agreed goals. The main purpose of self-assessment is self-improvement. Effective self-assessment enables an organisation to identify its strengths and weaknesses, to compare its performance with that of other providers, to identify opportunities for improvement, to set objectives and targets, and to prioritise the actions required to achieve these. It also provides the means of identifying and responding to the needs of learners and their client groups.

2   In planning for self-assessment and presenting the self-assessment report providers should identify:

- why self-assessment is being carried out

- which areas/activities will be subject to self-assessment

- how the self-assessment will be carried out

- who will carry out the self-assessment

- when the stages in the process will be carried out.

3   This document offers guidance on how to address each of these questions (with worked examples) based on the policy guidelines on self-assessment and development planning. A checklist is presented in annex B.

Purposes of self-assessment

4   Self-assessment should underpin organisational development. It should therefore be undertaken as an integral part of strategic and operational planning, not as a bolt-on activity. It should also be integral to the provider's quality assurance arrangements, including any externally kitemarked quality assurance standards that the provider has achieved or is working towards (such as the European Foundation for Quality Management Excellence Model, Investors in People, ISO9000, or Charter Mark).

5   Self-assessment is an important means of demonstrating public accountability. The quality and rigor of the self-assessment process will be examined critically as part of the LSC and the ES procedures for monitoring and review. Self-assessment reports will continue to form an important part of the evidence base for inspections. With appropriate external safeguards and support, self-assessment provides the key to achieving continuous improvement in provision and performance post-16.

6   The purposes of self-assessment should be properly communicated to all staff, learners and others who use the provider's services. The benefits (and costs) of self-assessment should also be evaluated as part of the drive for continuous improvement.

Self-assessment framework and report

7   Each provider should seek to develop a form of self-assessment that is responsive to its own organisational needs and the needs of its client groups. There are four requirements relating to the self-assessment framework and report that all providers must satisfy.

Self-assessment should deal with all aspects of the organisation's activity, in particular the quality of learners' experiences and the standards learners achieve.

8   To meet this requirement, reports must address all the areas of learning that make up the provision. They should also include judgements on all the key services that contribute to the experience of learners. Some areas of work such as guidance and support for learners and equal opportunities, may need to be evaluated as part of areas of learning and as part of management. When making judgements on any aspect of provision and performance, the emphasis should be on outcomes and/or impact on learners and other customers rather than on policies and procedures.

Providers must address the quality statements in the Common Inspection Framework (CIF) and the LSC and the ES quality and financial probity requirements.

9   The LSC and the ES requirements are intended to complement the quality statements set out within the seven categories of the Common Inspection Framework (see section 38 of the policy guidelines on self-assessment and development planning, March 2001). The requirements should also be read in conjunction with the Council's new framework for assessing provider performance.

10   The ALI has published draft guidance for providers on how to interpret the CIF quality statements in the context of the different types of provision for which it has responsibility: work-based learning, New Deal 18-24, adult and community learning, and University for Industry learndirect provision. The Handbook for Inspectors, published by the ALI, and the Handbook for Inspecting Colleges,

published by OFSTED, also give further guidance on the new requirements.

11   It may not be possible or necessary to address each of the 60 quality statements in the CIF. However, self-assessment reports should make clear how these statements have informed the provider's judgements and how they have shaped the identification of key strengths and weaknesses.

Self-assessment should take account of the quality improvement strategies of the LSC and the Council's framework for provider performance review.

12   The LSC has published a three-year corporate plan addressing needs and priorities for learning and skills, and an operational plan covering target numbers for learners. Local LSCs will publish an annual plan on needs and priorities for the development of local provision. The plans will be based on reports from learning partnerships, national training organisations, regional development agencies and local authorities, and will need to be matched with providers' plans for meeting the needs of learners, employers and the community. Providers should take account of planning at all these levels when evaluating their self-assessments.

13   Providers' frameworks for self-assessment should also take account of the Council's key assessment categories for provider performance review. The key areas are:

- volume of provision agreed with the local LSC

- quality of education and training and the standards achieved by learners

- equality of opportunity

- health and safety

- quality of leadership and management

- continuous improvement

- quality of strategic planning

- financial assurance

- data management

- other priorities, including national initiatives such as the basic skills quality initiative.

The structure of reports should, as far as possible, be similar to that of published inspection reports.

14   The LSC and the ES have not prescribed an entirely standard format for the self-assessment report. Providers should seek, as far as possible, to produce reports that correspond to the common inspection framework and include sections on learning areas and on leadership and management.

15   A summary of the key information necessary to meet OFSTED and the ALI reporting requirements is given in annex C of this document.

16   For all but the smallest organizations, the self-assessment report will need to be constructed from a number of sub-reports. Providers should establish clear procedures for the way in which this is to be done. It is important that the final report should be concise and clearly expressed.

Self-assessment evidence and judgments

17   Providers are required to evaluate and grade provision using inspectorate grading scales. In order to carry out this task it is necessary for them to:

- make effective use of performance data, including benchmarks

- provide clear evidence to support judgements

- be evaluative rather than descriptive, clearly identifying strengths and weaknesses

- be honest and objective.

These matters are addressed further below.

Effective use of performance data, including benchmarks, and management information.

18   Providers should collect data relating to all of the key criteria used in the self-assessment framework and to all the activities/areas which are subject to assessment.

19   It is essential that self-assessment reports include data to support judgements about learners' achievements and performance, including retention, achievement of qualifications (part or whole) progress against individual learning goals, added value, attendance, punctuality and progression to other forms of education and training or employment. The draft guidance published by the ALI, *Guidance on Inspection for Providers,* gives advice on how to judge learners' achievements in the context of New Deal, work-based training, adult and community education and UfI/learndirect.

20   Evidence should also be presented to justify comments on the quality of teaching and training and the effectiveness of learning; for example, grades for lesson observation and information from questionnaires designed to measure learners' levels of satisfaction with their provision. Many FE colleges have developed effective arrangements for lesson observation, based on inspection protocols, as an integral part of their quality assurance procedures.

21   Data should also be collected for assessing the performance of providers' support services.

Many providers have developed internal and external quality standards to help measure the effectiveness of these services. Questionnaires designed to elicit staff and learners' views of the effectiveness of these services may also provide useful evidence. An example is given in annex D.

22   Year-on-year trends in providers' performance should be recorded to provide evidence of improvement. Performance should be set against agreed targets and should, where possible, be compared against that of other providers. Benchmarking data are important means of assessing performance and setting appropriate target improvements. Providers should seek to use nationally and locally derived data for these purposes (annexes D (2) and D (3)). It is recognised that in some areas of work, such as learndirect and adult and community learning, benchmarks are not yet available and will take time to develop.

23   Benchmarking is not just about comparing performance. This in itself will not drive change and lead to improved performance. Benchmarking is also about identifying, understanding and learning from the processes and practices that lead to superior performance in other organisations. It requires that providers ask such questions as: How good are we? How good can we be? How can we get better? How can we learn from others?

24   Other activities and techniques which may help in analysing and improving provider performance include:

- brainstorming – to generate ideas about the possible causes of problems and potential solutions

- cause and effect diagrams – to identify the root causes of a problem

- pareto analysis – to prioritise the 'vital few' causes of a problem from the 'trivial many'

- process mapping – to help understand and streamline the operation of any work process

- force field analysis – to identify the factors helping or hindering change

- solution effect analysis – to identify the effects of implementing a particular solution

- failure prevention analysis – to help anticipate problems before they occur.

Clear evidence to support judgements

25   The LSC and the ES, and the inspectorates, will wish to assess the quality and robustness of the evidence quoted in self-assessment reports and to decide whether it provides adequate justification for the strengths or weakness claimed. As a general guide, for evidence to be robust it should be:

- valid – evidence is appropriate and directly supports the strength or weakness identified

- quantifiable – internal and external performance measures are used, wherever possible

- sufficient – evidence is complete (selective or incomplete evidence can give a false picture)

- current – evidence is recent enough to give an accurate position at the time of writing

- accurate – evidence is attributed to named and verifiable sources.

An extract of a report that meets these criteria is given in annex D (4).

26   It is necessary always to distinguish the actual evidence presented in support of a judgement from the source of that evidence. The source of the evidence is in itself not sufficient. The example given in annex D (5) illustrates this important distinction. The internal and external sources from which the evidence is derived should, however, be stated clearly. Further information on possible sources of evidence for different types of providers is given in the ALI's draft *Guidance on Inspection for Providers*. Where possible, providers should base their judgements on more than one source of evidence.

27   Judgements should always reflect the volume and range of provision under review. It would not be acceptable, for example, to claim 'excellent retention' as a key strength if the area concerned involved only a small proportion of the learners.

Evaluative rather than descriptive statements

28   Providers should consider the following principles when addressing this requirement:

- always use appropriate evaluative adjectives when identifying strengths or weaknesses (eg, 'good examination results', not 'examination results')

- distinguish clearly between judgements and statements of fact

- avoid vague language. A judgement is an evaluation

- distinguish between 'strengths' and 'norms' (aspects of provision or performance are only a strength if they are above what is normally expected)

- seek to identify the most significant strengths and weaknesses. Note in particular those that have an impact on learning and learners' achievements.

Examples to illustrate each of these key principles are given in Annex E (1) – E (5).

29   Providers will be required to grade their provision, using the grade descriptors published by the inspectorates, and to record these grades in the self-assessment report. Providers are required to use the five-point numerical scale for everything other than lesson observation for which the seven-point scale should be used. In order to avoid confusion, the ALI now recommend the use of a five point scale for teaching observation undertaken as part of self-assessment. Grades should reflect the balance of strengths and weaknesses and take account of the relative importance of the issues under review. Poor levels of achievement on the part of the learners would, for example, outweigh other perceived strengths.

Honest and objective self assessment

30   This injunction is ultimately about developing a self-critical organisation that actively promotes feedback from staff, learners, employers and other interested parties, and is equally as confident about admitting weaknesses as claiming strengths. It also involves a provider's capacity to distinguish between real strengths and normal or standard practice (see above).

31   Providers should have established arrangements for moderating and validating self-assessment judgements and grades. Does a grade 3, for example, mean the same across different learning areas? Does it mean the same for a particular area of learning across a range of providers? Internal moderation can be carried out by internal auditors or by teams or committees charged with validating the self-assessment reports and training should be provided for this purpose. External validation is

important to ensure that standards are broadly consistent with those of other providers. It is also useful in strengthening the expertise of staff who are working in the area under review. Providers should consider establishing networks within which they can work with other providers to establish agreed standards and develop effective procedures for moderation and validation.

Responsibilities for self-assessment

Engagement of staff at all levels

32   In order to achieve continuous improvement, all staff should be encouraged to monitor and evaluate their own performance and to identify areas for improvement. They should also be given the time and training necessary to carry out this work. Many providers underestimate the time needed to complete an effective self-assessment, particularly the time required to gather the necessary evidence. Special consideration should be given to the needs of part-time/volunteer staff in this respect. In planning the self-assessment process, providers must also consider the part sub-contractors, key partners and employers will play.

33   Where possible, and for all larger organisations, teams should be established to carry out the assessment of their own areas of activity. Typically, the teams will be:

- course and/or programme teams linked to areas of learning

- functional teams for specialist services, such as student services or finance

- cross-functional teams offering services across departmental boundaries.

34   Teams should be trained in the techniques of self-assessment, particularly the skills of assessing evidence and making sound judgements. Each team should have a leader who will plan and manage the self-assessment process and take responsibility for writing the self-assessment report.

Involvement of learners

35   Providers should demonstrate that they have fully involved learners in the self-assessment process. They should develop effective methods of gathering feedback from learners, including questionnaires, interviews, focus groups, workshops and complaints procedures. Surveys should also include the needs of prospective learners and leavers' levels of satisfaction with their programmes. Providers should ensure that learners participate fully in self-assessment teams and learner-consultative committees and all learners should be properly briefed on the outcomes of the self- assessment process. These matters should be addressed in statements about learners' 'entitlements' and responsibilities.

Leadership and management

36   The self-assessment process must be effectively led and managed. Governors, boards of directors, trustees and senior managers should be committed to the aims of self-assessment and seek to promote a climate of trust in which individuals and groups feel able to be self-critical about their performance. They should actively participate in the self-assessment process, in a manner consistent with their responsibilities for raising standards and improving the overall effectiveness and efficiency of provision. They should also approve the final self-assessment report and evaluate the effectiveness of the self-assessment process.

37   An appropriate person should be assigned responsibility for co-ordinating the various aspects of the self-assessment process, for example, for planning, timetabling, advising, facilitating, monitoring, reviewing, validating, report writing, editing, disseminating best practice. Ideally this would be a senior manager with close access to the chief executive or principal. In the case of a large provider, a group should also be established to oversee the self-assessment process.

All participants

38   All participants should be aware of their responsibilities within the self-assessment process. They should also be properly briefed on the purposes of self-assessment, the scope of the self-assessment framework, how the self-assessment will be carried out, and the timescales for self-assessment.

Timescales for self-assessment

39   Providers will be expected to establish and sustain a commitment to, and involvement in, continuous improvement so that self-assessment becomes a regular part of the daily work of all staff and not an add-on extra or a one-off event. The aim should be to ensure that problems are solved at source and that ways of achieving excellence are shared throughout the organisation on a continuous basis. Self –assessment should also be integral to the normal planning cycles of the provider.

40   Providers will be required, as part of their contracts, to carry out self-assessment and development planning across all aspects of provision at least once a year and to submit reports and plans to the LSC and the ES.

41   Providers can carry out self-assessment at times which fit their strategic/operational planning cycles. An intended date for completion of the self-assessment report and development plan should be forwarded to the LSC and the ES so that appropriate arrangements can be made for provider monitoring and review.

42   Evidence from FEFC and TSC inspection visits suggests that the development of self-assessment as an annual process has encouraged many providers to integrate self-assessment into their planning cycles. There is some way to go before this is widely achieved, however. Many providers have underestimated the time taken to complete the self-assessment, including the time necessary to gather evidence.

43   Providers who have not been required to self-assess in the past will be required to submit self-assessment reports and development plans in the new format by March 2002 at the latest. In some cases providers may be encouraged to produce an updated self-assessment report in the new format prior to inspection. Providers are currently given 6 weeks notice of inspection and will want to take this into account when planning the process.

Procedures for agreement of self-assessment reports and development plans

44   Providers should send their self-assessment report and development plan to the executive director of the local Learning and Skills Council. The report and plan will be assessed against the criteria given in *Raising Standards in Post-16 Learning: Self-Assessment and Development Plans*.

45   Providers should be informed of the outcome of the assessment within four weeks of submission. Where the development plan is not approved by the local LSC and/or the local ES District Programmes Quality Management Team, discussions will take place with the provider. They will write to the provider indicating the weaknesses in the plan and setting out what action needs to be taken to improve the plan to an appropriate standard.

46   If the provider fails to produce an acceptable plan within agreed timescales and necessary improvements are not made, the LSC and the ES will consider whether the standards achieved by the provider are sufficient for the continued funding of their provision.

47   Implementation of the development plan will be monitored through routine visits by staff from local LSCs and the local Employment Service.

Section 3 – Development Planning

Overview

1   Self-assessment should not be an end in itself but a means of ensuring continuous improvement. It must be complemented by development planning to address weaknesses, build on strengths and implement other necessary changes identified through the self-assessment process. The planning and implementation of changes prompted by self-assessment need careful consideration. It is estimated that 80% of improvement initiatives fail because of poorly thought-out development plans. All key stakeholders should be involved in the planning process. It is also important that the interdependence of individual plans is properly understood and that all plans become integral to the corporate planning of the provider.

2   All providers will be required to produce an overall development plan in which proposed actions are explicitly linked to self-assessment findings. The plan should be submitted to the LSC and the ES for approval, together with the self-assessment report, within agreed timescales.

3   The LSC and the ES will discuss and agree targets and milestones as set out in the plan and may require amendments as a condition of approval. They will also monitor providers' progress against the activities and targets set out in the plans. Following inspections, providers must update their development plans to take account of inspectors' findings. The revised plan must be submitted not later than two months following the published report. Providers in scope for re-inspection will be required to produce a post-inspection plan,

again within two months of the published report.

4   The development plan and updates should be set out in tabular form and based on the criteria set out in the policy guidelines (see Annex A). In summary, the plan should specify actions and targets for improvement in specified areas, together with assigned responsibilities for carrying out the required actions within an agreed timescale. An example of a development plan that follows this format is presented in Annex F. (The text in italics at the top of the plan provides prompts for each column). Appropriate arrangements should be in place for monitoring the implementation of agreed actions, for evaluating outcomes and judging the effectiveness of the self-assessment and development planning process. These matters are addressed in the following sections.

Identifying and prioritising areas for improvement

5   Development plans must be manageable in terms of their scope. Self-assessment will generate many areas for improvement. Attempts to address every area may prove self-defeating and lead to a loss of staff morale. Priorities should therefore be set, focusing on those areas for improvement that:

- are paramount to learning and learners' achievements

- consolidate strengths and rectify weaknesses promptly

- offer opportunities for simple 'quick win' solutions

- offer major long-term benefits (but for which careful planning is essential)

- reflect national or local priorities (including those identified by the LSC and the ES).

Development plans should also continue to address actions not completed in previous planning cycles.

Defining objectives and targets for improvement

6 Providers will be expected to set clear objectives and targets for improvement, together with criteria for judging whether the agreed actions have been successful. Statements of broad intention or aspiration should be avoided. The objectives should be SMART; that is, they should be:

- specific – the objectives/targets should be clearly defined

- measurable – the objectives/targets should be capable of being measured

- achievable – there is at least a 50% chance of achieving the objective/target

- results-orientated – plans are aimed at achieving improvement, not increasing activity

- time-bound – specific dates and times are set for achieving targets.

7 Providers will be expected to carry out benchmarking activities when setting their targets. They will also be expected to maintain their high standards or, where necessary, improve them.

8 All providers will be expected to set targets for recruitment, retention, participation and achievement and to agree these with local LSC staff. It is anticipated that target-setting activity will be extended over time to include other measures, such as the levels of satisfaction of all those who use the provider's services, added value, equal opportunity, and value for money. Time will be needed to establish baseline performance data across post-16 provision. In the meantime, providers will be encouraged to develop performance targets for those activities that are important to measure, rather than easy to measure.

Specifying actions, responsibilities and timescales for achieving improvements

9 Development plans should provide a sound basis for bringing about improvement. For this purpose, they should specify all the activities and tasks necessary to achieve the proposed objectives and targets for improvement. Activities should be defined at a level of detail necessary for the effective implementation of the plan and should be ordered into a logical sequence. The boundaries of development plans should be carefully defined in order to assess their possible impact on other improvement initiatives. Care should also be taken to ensure that the proposed activities tackle the central issue. A key question to ask is, 'how is this activity going to make a difference?'

10 The activities defined in the development plans should be properly costed and resourced. For this purpose an estimate should be made of the number of staffing days and other resources required for each task. The total cost of the project should then be identified and a budget made available for the work to be undertaken.

11 Responsibilities for carrying out proposed actions should be recorded in the development plan. The person with overall responsibility should be identified and other team members appointed to carry forward the proposed changes. Responsibilities for monitoring the plan and evaluating outcomes should also be clearly defined. A 'task programme' should be

drawn up stating who does what and by when. Where necessary, appropriate training and development should be given to ensure that staff have the required knowledge and skills to carry out this work.

12   All of those directly affected by the proposed changes should be consulted on the proposed developments and, where appropriate, involved in their implementation. Any key partners involved in drawing up and reviewing the plan should also be identified.

Arrangements for monitoring and reporting on progress and outcomes

13   Providers will be required to set specific timescales for completion of each activity or task. Plans for undertaking activities on an 'ongoing' basis will not be acceptable. Where appropriate milestones should be set for assessing progress, to ensure that the plan stays on track so that it can be appropriately amended, where necessary.

14   The implementation of development plans should be carefully monitored to ensure that:

- staff are fully involved in the process

- actions taken conform to the plan

- the reasons for departure from the plan are understood and agreed

- where necessary, appropriate actions are taken to update or modify the plans.

15   Amendments to the approved plan should be properly recorded. Development plans will need to be updated in consultation with the LSC and the ES.

16   In evaluating and reporting on the outcomes of improvement initiatives providers should consider:

- the results achieved

- how far the results meet the targets set

- unintended outcomes (positive or negative)

- evidence of year-on-year improvements in performance

- strategies for rewarding improvements in performance

- opportunities for sharing findings, experiences and best practice.

17   As part of the review process, providers should also seek to evaluate the effectiveness of the self-assessment and development planning process; for example, through questionnaires or discussion groups. The ultimate test is whether the benefits arising from the self-assessment process outweigh the costs. Providers should also assess whether the capacity for self-assessment and improvement is enhanced by the process.

Annex A: LSC/ES Requirements for Self-assessment and Development Planning

Paragraph references to policy guidelines on Self Assessment and Development Planning (March 2001) given in brackets.

Self-assessment

Self-assessment process

The process should:

- encourage staff at all levels of the organisation to evaluate their performance (39/50)

- involve learners, employers and other customers (50)

- culminate in the approval of the report by chief executive, principal or director and the endorsement of the report by the governing body or board members where appropriate (50)

- be an integral part of strategic/operational planning and quality assurance arrangements. (51)

Self-assessment framework and report

The framework and report should:

- deal with all aspects of the organisation's activity, in particular the effectiveness of learning and the standard learners achieve (40, 50 & 53)

- address all the quality statements in the Common Inspection Framework and the LSC/ES quality and financial probity requirements (6, 36 & 37)

- as far as possible, follow a structure similar to that of published inspection reports. (51)

Evidence and judgements

The self-assessment should:

- make effective use of management information and performance data, including benchmarks (50)

- provide clear evidence for judgements (50 & 53)

- be evaluative rather than descriptive (53)

- be honest and objective. (50 & 53)

Development Plans

Structure of development plan (57)

The plan should be presented in tabular form (57):

- areas requiring improvement

- targets for improvement

- actions required to bring about improvements, including costings where appropriate

- clear statement of the expected outcomes of specific actions

- criteria for judging whether actions have been carried out successfully

- person(s) responsible for ensuring that actions are carried out

- priority given to each action

- timescales for the completion of actions, with milestones where appropriate

- arrangements for monitoring, evaluating and reporting on progress

- dates by which actions have to be completed and outcomes achieved

- involvement of key partners in drawing up the plan and the subsequent reviews.

Other requirements for development plans

Plans should:

- be manageable in scope (55 & 56)

- be linked explicitly to all actions identified in the self assessment report (57)

- take account of national and local priorities (58)

- identify and prioritise areas for improvement (55 & 57)

- be reviewed and updated regularly (61)

- provide a sound basis for bringing about improvement. (55)

Annex B: Preparing for Self-assessment and Development Planning – A checklist

Purposes of self-assessment

- are the purposes of self-assessment clearly defined?

- are these purposes properly communicated to and understood by all those involved?

- is self-assessment used as a vehicle for improvement rather than being an end in itself?

- are the costs and the benefits of the process properly understood?

Self-assessment framework and report

Does the self-assessment take account of:

- the needs of learners, employers, the community and the economy?

- the criteria set out in the common inspection framework?

- the additional criteria introduced by the LSC and the ES?

- the continuous improvement strategies and review processes of the LSC and the ES?

Responsibilities for self-assessment

- is top leadership actively committed to and involved in the process?

- are teams established for all areas to be assessed?

- are team leaders appointed to plan and manage the self-assessment process?

- are appropriate responsibilities assigned for the co-ordination of the process?

- are staff appropriately trained in self-assessment methods and procedures?

- do staff have reasonable time and resources to carry out the process?

- are learners actively involved in the process?

- are employers and others who use the provider's services involved in the process?

Timescales for self-assessment

- has an annual cycle of self-assessment been established and communicated to staff?

- has the provider established a planning cycle in which self-assessment, quality assurance and strategic/operational planning are integrated?

- has sufficient time been allowed to undertake the process, including the gathering of evidence?

Use of performance data to support self-assessment

- is performance data available for all curriculum/services areas and all learner groups?

- is performance measured against agreed targets?

- does the provider measure trends in its performance?

- is performance' benchmarked' against the performance of other providers?

- is the data easily accessible?

Analysis of information and data

- how does performance compare with targets?

- what are the trends in performance?

- how does performance compare against that of other providers?

- is current performance sustainable?

Judgements and grading

- are our strengths real strengths or do they simply reflect what is normally expected?

- how do these strengths enhance learning and achievement?

- are arrangements in place for the moderation and validation of judgements and grades?

- are self-assessment reports evaluative rather than descriptive?

Development plans

- do plans address all of the identified weaknesses?

- do the plans address actions not completed from previous cycles?

- are the objectives/targets for improvement SMART?

- do plans tackle the root causes of identified problem?

- are individual and team responsibilities for action clearly defined?

- are plans properly costed and resourced?

- are there clear timescales within which actions are to be completed, including milestones?

- are plans documented thoroughly?

- are plans integrated with the provider's strategic/operational plans?

Monitoring implementation of plans

- were the plans properly monitored?

- were the actions taken in line with the plan?

- where appropriate, was action taken to modify the plan?

Evaluating and reporting on outcomes

- what were the results of the actions taken under the plan?

- how did the results compare to the expected/desired results?

- were there unintended outcomes (positive or negative)?

- did the benefits of the process outweigh the costs?

Annex C: Self-assessment Report Based on Draft Format of Inspection Reports

Note that the structure for self-assessment reports recommended by the ALI appears on pages 11/12 of the Draft *Guidance on Inspection for Providers*. The OFSTED structure is presented as annex C of the Handbook for Inspecting Colleges. Both documents are available from the respective ALI/OFSTED websites.

Introduction or background section to the report

- the nature of the provider and its work

- main aims/purposes/mission of the provider

- location and any significant features that affect provision

- number and range of learners

- programmes offered and areas of learning

- provider's funding arrangements

- local/regional employment data and educational achievement data

- a description of the provider's self-assessment processes

- a table of grades which includes: a grade for leadership and management and grades for equality of opportunity

and for quality assurance; grades for learning areas

- an overall judgement on the adequacy of the provision.

Reports on learning provision

There should be a report on each programme or area of learning that includes:

- a brief overview of provision

- key strengths and weaknesses (including other areas for improvement)

- a table of observation grades (where appropriate)

- tables showing numbers and achievements for the past two or three years with national benchmarking data for the most recent year where available

- a grade for the provision.

These sections should give particular emphasis to questions 1-6 of the CIF but also address relevant aspects of key question 7. Where appropriate, and depending on the volume of provision, there might be a separate report with a contributory grade for specific programmes within each area of learning (work-based learning for adults and/or young people, New Deal, Adult and community learning, University for Industry learndirect

provision, ES provision, full-time 16-18 provision)

Report on leadership and management

This report should focus primarily on question 7 of the CIF and related LSC quality statements and make particular reference to the impact of provision on learner achievements. It should give an overall judgement on the quality of leadership and management, identifying key strengths, key weaknesses (and other areas for improvement), and record an overall grade. The report on leadership and management should include judgements about equal opportunities and quality assurance with a contributory grade for each.

It is likely that the self-assessment reports for larger providers will be built up from a number of sub-reports. Such providers may prefer to further sub-divide the contributory aspects of leadership and management, for example governance and value for money, or to include additional functional (departmental) reports.

Appendices

Appendices might include an organisational chart, staff statistics and performance data over a three-year period.

Annex D: Performance Indicators and Evidence – Some examples

D1 Use of performance indicators by learner support services

Weakness/Strength: Highly effective, comprehensive and accessible learning support

Evidence:

- All full-time students underwent initial screening
- Of those diagnosed as needing learning support, 98% were offered it within three weeks of the diagnosis
- Retention rates and achievement rates for those receiving support were on a par with or higher than for non-supported learners on comparable programmes
- Mean score of 4.25 (out of 5) for this item on learner survey (increase of 25% on last year)

Performance is judged against internal performance indicators relating to:

- the number of students screened
- extent to which learners' need are met
- retention and achievement rates for supported learners compared with non-supported learners

Learner survey data are used to judge users' satisfaction with service

D2 Use of benchmarking data to support judgements on teaching and learning

Strength: Highly effective, teaching and learning in construction

Evidence:

- Of 15 sessions observed in 1999/00 there were:
  – 3 x grade 1
  – 8 x grade 2
  – 4 x grade 3

- **57% were graded 1 or 2. This compares favourably with the national figure for 99/00. It also shows an improvement over our last year's figure of 50%**

- 9 out of 10 external verifier reports during the past year specifically highlighted effective teaching and learning

Bold type shows how benchmarking data have been used to make comparisons and give further support to the judgements

D3 Use of benchmarking data to support judgements on retention and achievement

Weakness/Strength	Evidence	
Poor retention and achievement on advanced GNVQ	Starters 25 Retention 51% Achievement 35%	**National data** **Retention 68%** **Achievement 43%**
High achievement and retention on short courses	Starters 98/99 105 Retention 97% Achievement 100% Starters 99/00 71 Retention 99% Achievement 100%	**National data** **Retention 65%** **Achievement 83%**

D4 Use of evidence which is valid, quantifiable, sufficient and current

Strength:	Highly effective teaching and learning in construction

Evidence:

- Of the 15 sessions observed in 1999/00, there were:
  – 3 x grade 1
  – 8 x grade 2
  – 4 x grade 3

- 95% of learners surveyed in 1999/00 rated the overall quality of teaching and learning very good or excellent (92% response rate from 205 learners)

- 9 out of 10 external validation reports during the past year specifically mentioned the quality of teaching and learning

Evidence is:

- valid - it directly supports the judgement

- quantified clearly and unambiguously using both figures and percentages

- sufficient - there are three separate sources of evidence from three different perspectives number of learners observed is significant in each case

- current - all the data relate to the most recent year

- accurate - the source is the 1999-00 learner survey

D5 Actual evidence or source of evidence?

Strength:	Good retention on level 3 programmes
Actual evidence:	Average of 89% retention on these programmes
Source of evidence:	Retention records

Annex E: Examples of Good Evaluative Statements

E1 Include an evaluative word or phrase that indicates why something is a strength or weakness

Strengths

- Prospective learners receive **comprehensive** information and advice before the start of their programme (contains evaluative words)

- The centre has **well-established** QA procedures that are used effectively **to bring about improvements** (includes evaluative word, refers to impact of procedures not simply their existence)

Weaknesses

- **In many** cases, teachers pay **insufficient** attention to the individual needs of students in planning their lessons and in teaching (includes evaluative words and clearly identifies the nature of the weakness)

- Additional support for **identified** learners is **not consistently available** (includes evaluative phrase. Includes reference to impact - students have identified needs that are not being met)

E2 Distinguish between evaluative judgements and statement of fact

Statement of fact:

- Work experience is included as part of the learning programme. (So what? Is it relevant? Do learners learn from it?)

Evaluative judgement:

- All learners have access to a **vocationally relevant** work placement that is **integral** to their programme and **contributes to the practical assessment of learners**

E3 Avoid vague or uncertain judgements

Vague judgements:

- Students **appear** not to understand the criteria for assessment (Do they or don't they?)

- **Some** of the students' social facilities **could be** improved (Which facilities? How serious is the problem? This is not a judgement of the situation as it is; it is a prediction.)

Evaluative judgements

- Many students do not understand the criteria for assessment

- Recreational facilities for students at the South campus are poor

E4 Distinguish between real strengths and norms

Norms:

- Staff are appropriately qualified/well qualified

- Staff are enthusiastic/well informed

- Staff are committed to their work

It would be surprising if these things were not the case. Only refer to them if they are weaknesses.

E5 Does the strength or weakness impact on the learner or other customer?

- Effective collaboration with other agencies has **led to an increase in the number of learners joining basic skills classes**

This is for a weakness identified in a self-assessment report and uses as an example poor retention of learners.

Weakness to be addressed: Poor retention

Objectives	Actions	Measurable outcomes	Timescales and milestones	Responsibility for action	Monitoring, responsibilities	Costing and additional resources
Raise retention rates	Use of range of actions as below:	Increase retention rates on all f/t courses by 3% and p/t by 2% to 87% and 85% respectively	June 2002	Head of school	Senior management team	
	Additional guidance provided before enrolment	New guidance leaflet produced and all learners receive copies	Aug 01	Course leader	Head of curriculum area checks guidance	£1000
	Additional requirements set for course enrolment	All learners recruited meet new requirements	Sept 01	Course leader	Course leader	
	Guidance interviews for all learners	All Learners have interviews	Sept 01	Admission tutor	Course leader monitors interviewing arrangements	£2000
	Close attendance monitoring	Clear records of attendance for all learning	Oct 01	Course attendance coordinators	Course leader receives weekly report from coordinators	£5000 p/t coordinators

Objectives	Actions	Measurable outcomes	Timescales and milestones	Responsibility for action	Monitoring, responsibilities	Costing and additional resources
	Criteria for learners at risk agreed and at risk learners identified	Criteria published	Aug 01	Course leader	Course leader	
		Attendance coordinators identify all learners missing consecutive lessons and alert personal tutor	Sept 01	Attendance coordinators	Report from coordinators	
		At risk learners seen twice for action planning				
	Increased tutorial time for at risk learners	All at risk learners attend weekly one to one above normal level of tutorial support	Oct 01	Personal tutors	Course leader receives monthly report from tutors	
	Retention rates monitored using weekly aggregate figures	Retention rate for course maintained at or above 85%	Nov 01 – Nov 02	Course leader	Head of curriculum area monitors rates and reports to senior manager	

Annex G: Further Sources of Information and Advice

Publications

Effective Self-assessment (FEFC 1999)
A survey of college self-assessment with pointers for good practice

Self-assessment in Practice (FEDA, now LSDA, 1998)
A practical guide and supporting video for colleges on how to self-assess

Self-assessment for Improvement (LSDA 1999) Case studies and research on colleges using self-assessment to improve practice

Good Practice Guide for Self-assessment and Development planning (draft title: ES/DFES forthcoming) A guide for training providers and those new to self-assessment

Self assessment for adult education providers (draft title: LSDA/NIACE September 2001) A practical guide for LEA adult education on self-assessment

Raising standards in post 16 learning: self-assessment and development planning (ALI /ES/LSC/ Ofsted 2001)

Useful websites and organisations

www.ali.gov.uk
Adult Learning Inspectorate
Site includes draft guidance for providers on what the CIF means to different providers

www.aoc.co.uk
Association of Colleges

Represents FE colleges; advice, networking, support

www.dfee.gov.uk/post16
Department for Education and Skills

Site for DfES post-16 policy and publications including Raising Standards in post-16 learning: self-assessment and development planning

www.fefc.ac.uk
Further Education Funding Council

Source for FEFC publications, inspection reports and information on the FE Sector

www.learning-providers.net
Association of Learning Providers

Represents training providers and voluntary organisations

www.LSagency.org.uk
Learning and Skills Development Agency

Research and development supporting the sector

www.lsc.gov.uk
The Learning and Skills Council

www.lscbrief.org.uk
Updates on LSC and links to Training and Enterprise Network, Association of Learning Providers and other sites

www.niace.org.uk
NIACE

The national organisation for adult learning

www.ofsted.gov.uk
Ofsted (Office for Standards in Education)

Includes the College Handbook on inspections

www.rqa.org.uk
Raising Quality and Achievement

LSDA/AOC programme supporting quality improvement