

3.3.5 Quality Improvement Planning (QIP)

Procedure code and title:	3.3.5 Quality Improvement Planning (QIP)
Policy area:	3.3 Monitoring and Evaluation
Version Number:	1
Reviewed by:	Quality Assurance Sub-Group
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Date of Implementation:	1 st January 2024
Review Date:	

Purpose

The purpose of this procedure is to detail how KWETB's monitoring and evaluation processes lead to the identification and development of Quality Improvement Plans.

Scope

This procedure applies to all FET Provision and FET Provision-Second Providers. There is an integrated single policy, with integrated procedures for FET Provision and FET Provision-Second Providers.

Preamble

Quality Improvement Plans are a response to issues arising or needs identified and are time bound. These responses may occur in a number of ways:

- In response to Internal Verification and External Authentication, a centre or a programme may be the subject of a Quality Improvement Plan
- In response to a student complaint or appeal
- In response to the outcome of a programme evaluation process
- In response to the outcome of a thematic review
- As recommendations following a self-evaluation
- In response to an external quality review

KWETB's Quality Governance Units (Quality Council, Quality Assurance Sub-group, Programme Governance Sub-group and Quality Team) can establish a QIP. A central annual QIP can be devised, tracked and can be added, subject to approval by the Quality Council throughout the year.



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The QIP should be representative of a cyclical approach to assuring quality within KWETB, and is actioned using the 'plan, do, check, act' (PDCA) process, or 'plan, do, study, act' (PDSA).

QIP actions should be implemented in a collaborative and collegiate way, ensuring that the improvements made have a significant impact on the quality of service to learners and the community.

Procedure – 3.3.5 Quality Improvement Planning

1	The designated Quality Team member with responsibility for QIP should devise a draft annual QIP in collaboration with the Quality Governance Sub-groups. This plan should contain specific, actionable, time bound tasks and projects devised based on a review of the outcomes of monitoring and evaluation.
2	The Quality Council should approve the Quality Improvement Plan.
3	The relevant Quality Governance Sub-group should monitor the implementation of the annual QIP and report on its progress to the Quality Council.
4	The relevant Quality Governance Sub-group should assign key responsibilities to the actions. Each action should have a particular lifecycle which should include planning, piloting, studying impact of piloting and implementation, proportionate to the scale of the desired change or improvement. Resources should be provided if necessary.
5	The nominated key personnel should be responsible for the action and for the monitoring of the implementation of the action.
6	The nominated key personnel with responsibility should report to the relevant Quality Governance Unit at appropriate intervals.
7	If necessary, through the Quality Governance Sub-Groups, the QIP can be updated, for example, if an action is identified during the year.
8	The designated Quality Team member with responsibility for QIP should carry out a review of the overall QIP at the end of the calendar year. This should inform the development of the subsequent plan, together with the outcomes of monitoring and evaluation.

Resources (outstanding)

Resources	<ul style="list-style-type: none">• Illustration A: Quality Cycle (Deming) (How to Use The Deming Cycle for Continuous Quality Improvement Process Street Checklist, Workflow and SOP Software – accessed July 1st, 2021)• Quality Improvement Plan Template
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