

Educational Governance and Quality Policy

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The Director responsible for monitoring and reviewing this policy is
Executive Director of People & Culture

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

EDUCATIONAL GOVERNANCE AND QUALITY POLICY

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SAMPLE ONLY

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| ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST |
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| EDUCATIONAL GOVERNANCE AND QUALITY POLICY |
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| Assurance Statement |
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| 1.0 INTRODUCTION |
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- 1.1 This policy commits Essex Partnerships University NHS Foundation Trust (EPUT) to maintain and develop the quality of its teaching and learning provision through continuous improvement and quality assurance processes. The Policy applies to all staff within the education and training team, students and other stakeholders. This policy will support the organisation by ensuring that we work to improve the quality of the student experience by monitoring, reviewing and continuously improving the education outcomes (quality of teaching). This Policy sets out how we will develop standards and targets and provide a variety of channels for feedback from all stakeholders.

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| 2.0 ENTITLEMENT |
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- 2.1 All staff within the organisation, including those who are enrolled on courses through partnership agreements, can expect to receive high quality education and training, and have their views considered by the education provider through appropriate feedback routes.

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| 3.0 DUTIES |
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- 3.1 It is the responsibility of senior leaders in Workforce Development and Training (WDT) and the Trust Executive Team to:
- identify the strategic priorities in response to internal and external drivers and initiatives
 - Continually assess education provision and contribute to developing the service
 - Set Key Performance Indicators as appropriate
 - Receive and action any reports from external regulatory bodies (e.g. Ofsted)
- 3.2 The Head of Workforce Development and Training with the Professional Training and Apprenticeship Manager to:
- Ensure all WDT staff undertake appropriate CPD as identified in their annual appraisal
 - Ensure that electronic records meet statutory and regulatory requirements and will include: student and course details; notes of meetings, course files, evaluations and feedback.

- Carry out sufficient and appropriate quality assurance processes including: lesson observations, evaluation and feedback reviews, preparation for internal and external verification and inspections, student committees.
- Maintain and review quality and standards of delivery and development to ensure we meet external and internal inspection requirements.
- Manage the quality improvement cycle
- Monitor awarding bodies reports and action plan when required
- Monitor and report on the complaints procedure, to ensure response targets are met
- Manage and report on student / employer surveys and action plan accordingly
- Manage and report on lesson observations and action recommended improvements
- Manage and report on internal inspection processes, ensuring recommendations are implemented.

3.3 Program leads to:

- Ensure standards meet the awarding bodies requirements for program delivery
- Review student retention, achievements, progression, destinations and act on any areas of concern
- Implement and review interview, acceptance and induction processes
- Review of teaching and learning resources and assessment methodology
- Review course programs the content and outcomes achieved
- Provide a summary cohort review at the end of each course
- Provide effective and appropriate teaching, training and support for learning
- Prepare for internal and external inspections
- Maintain current electronic course files including electronic minutes of meetings
- Undertake appropriate development and training
- Ensure individual learning plans are produced and courses maintain a focus on the needs of each learner

3.4 All staff in WDT to ensure they maintain subject or role credibility and competencies and maintain professional registration where required.

3.5 All staff are required to comply with quality assurance processes.

4.0 DEFINITIONS

External regulatory bodies
 Awarding bodies
 Learning Outcomes
 Individual learning plan

5.0 PRINCIPLES

5.1 This policy is linked to the following key principles:

- To provide effective governance of the education and training delivered under EPUT's Register of Approved Provider (RoATP) status
- To improve the quality of teaching, learning and assessment
- To improve student progression, employability and skills in order to enhance patient care
- To involve service areas in building a portfolio of skills in order to provide a diversity of placement opportunities
- To meet the priorities of the Education and Skills Funding Agency and Skills for Health whilst supporting local workforce priorities
- Meeting the standards set by national inspection processes (OFSTED) and the awarding body (Pearson)
- To address fairly and promptly any concerns or complaints.
- To enhance the learning environments
- To support students more effectively
- To improve the students' voice
- To develop effective partnerships

6.0 IMPLEMENTATION

6.1 All student will be informed of the relevant governance and quality processes via the students' hand book for the relevant program, these will also be identified as part of induction to the programs.

6.2 The processes by which our quality and governance process are implemented are:

- Progress meetings, will be held monthly to look at students' progression and the work of the program team. Initial consideration of feedback and quality outcomes will be considered including the outcome of any 1-2-1 meetings. Feedback from employers will be requested bi-monthly via the management feedback documentation and any concerns highlighted and addressed.
- Course Committees will be held four times a year. Students and experts by experience will be invited to attend. Student feedback will be discussed, KPIS and course development.
- Ongoing reviews will form part of the centre self-assessment exercise which will feed into the annual self-assessment reporting process for Ofsted.

- The quality of teaching and learning will be monitored through various methods. Lesson observations will be undertaken; areas for improvement and good practice shared, Outcomes will form part of the staff appraisal and development process and where required development opportunities identified and implemented.
- We are monitored through the internal and external verification requirements of the awarding body (Pearson) and feedback is provided and will be actioned accordingly
- Target setting is set within the overarching organisation as part of workforce planning process and the training needs analysis of individual areas. Targets and KPIS will be signed off by the Trust Executive Team This will enable monitoring and planning priorities in relation to spending.
- The Quality Improvement Plan will be reviewed regularly by managers and actions updated as progress is made.
- The annual submission of the SAR will identify improvement objectives drawn from the involvement of staff at all levels.
- There will be an annual review of all quality processes.
- Quality audits will be undertaken periodically with a minimum of an identified audit on a specific area once every 3 years.

7.0 MONITORING OF IMPLEMENTATION AND COMPLIANCE

- 7.1 The Policy will be monitored through the use of action plans and quality improvement plans
- 7.2 There will be on-going review of key performance indicators / targets against outcomes
- 7.3 Data will be collected and analysed against quality measures including quality measures set by Ofsted.
- 7.4 Regular reports will be created for the relevant committees, the Executive Team and trust Board as required.

8.0 POLICY REFERENCES / ASSOCIATED DOCUMENTATION

These will be added as we progress out internal education policies planned for 4th December

Staff and student code of conduct
 Centres self-assessment reports
 Trust associated policies and procedures
 Internal and external verification reports
 Student handbooks
 Lesson observation reports

9.0 REFERENCE TO OTHER TRUST POLICIES/PROCEDURES

Links to trust policies

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