

HMIE Handbook for Inspection of Employability Programmes

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1 The purpose of inspection

The overall aim of inspection is provide an evaluation of the effectiveness of the provision of education, training and support to meet the employability needs of participants, and to contribute to the quality improvement of such provision.

The main purpose of inspection activity includes:

- providing participants and other stakeholders with information to help inform choice;
- helping bring about improvement through the identification of strengths, areas for improvement and excellence or sector-leading and innovative practice; and
- providing information that will give a full and independent picture of quality of provision to public bodies.

Inspection will lead to a report answering five key questions about the quality of provision, and give an evaluation with a specific grade on a six point scale on each of these key questions. The key questions are –

1. **Overall, how effective is the provision?**
2. **How well are participants progressing and achieving high quality outcomes?**
3. **How well is the provider enhancing the quality of its services?**
4. **How effective are the providers' learning, development and support processes?**
5. **How effective is leadership and management?**

2 Engagement with inspection

How should inspectors engage with providers?

HMIE will uphold the highest professional standards in its work and ensure that everyone is treated fairly and with respect. Inspectors are skilled and experienced in the evaluation process and adhere to a framework to help them plan, deliver and reflect upon the highest standard of service. This is called the PRAISE framework. This is outlined below.

Purpose – being clear about the overall purpose of the inspection and retaining this throughout. Creating a shared agenda with staff in the organisation and amongst members of the inspection team.

Relationships – building and maintaining constructive relationships throughout the process as the basis of a high quality inspection.

Awareness – maintaining a high level of awareness of the context in which staff are operating, of their feelings and reactions to the process and of the inspector’s own approach and its impact.

Information gathering – careful inquiry to gather and analyse evidence. Retaining an objective stance, testing assumptions and assimilating data before evaluating.

Sharing information – communicating thoroughly throughout the process to prepare and inform staff. Encouraging staff to be open in providing their perspective and providing appropriate feedback as the inspection/review progresses.

Enabling – treating people with respect, engaging them in professional dialogue, recognising their efforts and providing feedback in a constructive way to encourage ownership and learning to take place.

How should providers engage with inspectors?

To ensure that inspection is fair, comprehensive and accurate, it is important to establish a constructive professional working relationship between the provider and HMIE. With this in mind, HMIE would anticipate that providers:

- are courteous and professional;
- enable inspectors to conduct their visit in an open and constructive way;
- provide information which will enable inspectors to report accurately, fairly and reliably about providers’ activity;
- work with inspectors to minimise disruption, stress and bureaucracy;
- maintain a purposeful dialogue with inspectors and draw any concerns about the inspection process to the attention of inspectors promptly; and
- respect the fact that inspectors will need to observe practice and talk to staff and participants without the presence of a manager.

3 Types of activity undertaken in inspection

An inspection will involve a range of activities through which HMIE collects information and evidence. The main activities are: collection and use of data; observation; meetings with staff; meetings with participants; gathering feedback from participants, stakeholders and employers; and professional dialogue with managers and staff.

Statistical data on performance and outcomes will be collected in advance of inspection, and will help to provide evidence and to establish the priorities within an inspection week. Statistical information on, for example, success rates for participants finding employment will be collected from various sources such as the Department for Work and Pensions (DWP) records or providers’ own records. DWP data sets will be the prime source of data on participant success.

Observation will take place of learning, teaching/training or support given to individuals or groups. Observations are generally agreed and planned by the inspection team in advance, but some observations are unannounced. All staff and

participants should be aware that there is an inspection taking place and that an observation is a possibility. Following an observation, there will be a discussion of the observation with the member of staff as soon as practical. This will be brief in nature but should provide a basis for reflection. Individual observations will not be graded.

Meetings will take place with staff individually and, occasionally, in groups. These meetings will normally be pre-arranged and will aim to minimise disruption to normal working.

Feedback from participants will be collected in a wide range of ways prior to the inspection week. Pre-visit questionnaires will be made available to participants and employers, and participants will be given the opportunity of contacting HMIE by email or telephone. The reason for this is that some participants may not be on site during the inspection week and an opportunity should be given to them to share their views and experiences. Feedback from participants and employers will also be collected through group sessions, individual meetings, email, telephone or visits during the inspection week.

Professional dialogue with managers and staff provides an opportunity for inspectors to obtain a fuller picture of provision, including examples of good practice. This professional dialogue may occur within a formal meeting or session, but equally may arise from less formal discussions.

Before the inspection

4 How are providers chosen?

HMIE have been contracted for inspection of employability programmes for the DWP in Scotland since May 2009. All provision coming on stream from that time will be subject to inspection. Initially, this will involve Provider Led Pathways (PLP) and Flexible New Deal (FND) with other programmes to follow. All providers will initially be subject to standard, full inspections. As intelligence and a provider's track record are established, this information will contribute to the planning and priorities and help to determine the scope of future inspection activity.

Providers are selected as a result of the contract type and dates, as inspection is by contract rather than by provider. Within an inspection, the term 'provider' refers to the main contractor and any subcontractors or any partners. The prime contractor must ensure that all partners or subcontractors are fully involved in the inspection planning, preparation and implementation.

5 What information do inspectors use before inspection?

Inspectors need to gain an understanding of the provider's organisation and arrangements for delivery of the contract and plan for a suitable programme of activity before they begin their work on site. Inspectors will look for:

- statistical data on performance and outcomes;
- any previous quality reports on the provider, or external reports that the provider may have on their provision;
- the provider's self-evaluation or self-assessment ;
- the provider's development plan;
- information on the contract such as subcontractors used, locations, level of activity;
- information on planned activity during the inspection week such as timetabled activity with participants, staff activity, workplace/employer locations where participants are on site, and any issues of a sensitive nature that inspectors should be aware of;
- information on the activities of subcontractors or partners related to the contract being inspected;
- feedback the provider has collected from participants or stakeholders; and
- any additional information the provider wishes to bring to the attention of the inspection team.

6 How does the Managing Inspector plan the inspection?

The Managing Inspector (MI) will plan the inspection week to ensure that the maximum amount of relevant first hand information is collected and evaluated. A typical inspection team will involve five inspectors who will be on site for five days. The Managing Inspector will liaise with the provider to ensure access to a 'base room', which will be a room on site which gives the inspection team space to work privately and access to basic office facilities. Once provided with the timetables of activity for the inspection week, a sample of activity to be reviewed will be planned. The specific plan for any provider will vary, and will be influenced by the:

- pre-inspection information;
- number of sites;
- geographical locations used;
- modes of delivery and attendance; and
- nature of the participant group.

Inspectors will normally indicate the meetings they would want to set up and the group sessions they would want to be involved in. However, they reserve the right to change this in the light of developing evidence, and may cancel, change or add sessions if enough evidence is available or specific further evidence is needed.

7 How do providers prepare for their inspection?

The Managing Inspector will confirm the range of documents and information that will be required in advance of the inspection and which should be available during the inspection week. Inspection is built primarily on first hand evidence, so the aim is to keep documentation to a minimum. Prior to the inspection, two planning meetings will be set up to go over the arrangements and documentation needed, and for the inspectors to collect some of the documents needed. The planning meetings will be used to agree how the following documents will be made available to the inspection team:

- strategic and operational business plans;
- development plans and action plans aimed at improving quality;
- formal documentation on quality required by DWP such as the Quality Assessment Questionnaire and Self Assessment Report;
- details of staff qualifications, experience and staff development activity over the last two years;
- evidence of requirements to meet safeguarding arrangements, for example an up to date list of Disclosure Scotland checks;
- reports from any external bodies;
- records of observations of teaching/training, learning and assessment or information and advice sessions;
- timetables and schedules of activity involving participants (showing locations and staff);
- records or information on equality and diversity;
- complete and up to date data on participant numbers and participants' achievements;
- minutes from key meetings; and
- evidence of the effectiveness of participant support activities.

8 The role of the Nominee in inspection

Inspection is likely to have the greatest positive impact on quality if the provider understands the findings that have led to the judgements. For this reason, the provider will be invited to have a 'Nominee' member of staff join the inspection team. There will only be one Nominee, however, in exceptional circumstances, the Nominee can be supported by another member of staff subject to the Managing Inspector's agreement. Such circumstances would be an exceptionally large contract being inspected or provision over a very large geographical area. The Nominee is involved in discussions about the evidence collected during the inspection, and in this way is likely to fully understand the evidence and be able to ensure all evidence is fully considered. The Nominee does not contribute to the discussions or decisions on grades being awarded.

The provider is invited to nominate a senior member of staff as the Nominee. He/She will be the provider's main link with the inspection team. The Nominee should have:

- a detailed understanding of a provider's operations;
- sufficient authority to ensure the cooperation of staff at all levels before, during and after the inspection; and
- authority to carry out the role with autonomy.

The Managing Inspector will ensure the Nominee hears a summary of the evidence on which inspectors will base their judgements. The Nominee should raise any concerns about the evidence with the Managing Inspector as soon as those concerns become apparent. The Managing Inspector will keep the Nominee and the Chief Executive informed of the overall findings as the inspection progresses. The Nominee must respect the same conventions of confidentiality as all team members.

The Nominee's main responsibilities are:

- providing information to the inspection team to enable them to plan the inspection;
- briefing the provider's staff about the inspection arrangements;
- informing all participants, stakeholders and employers about the inspection;
- attending all inspection team meetings. However, the Nominee may not participate in discussions that are directly related to grading judgements;
- coordinating feedback arrangements both during and after inspection;
- liaising with the Managing Inspector regarding the team's use of the provider's facilities; and
- ensuring that staff are available for meetings as scheduled and that the necessary documents are made available for inspectors.

9 The planning meetings

To ensure the provider understands and is engaged in the inspection process, two planning meetings will take place in advance of the inspection week, an initial briefing meeting about five weeks before the inspection, and a final planning meeting about two weeks before inspection. The briefing meeting will normally involve the Nominee and the most senior members of staff from the provider. In almost all cases this meeting will be face to face, but in exceptional circumstances may be by telephone or video-conference. The key purpose of this meeting is to outline expectations and be clear on the process. The agenda for the briefing meeting should include:

- introductions;
- scope of the inspection and any operational issues;
- arrangements to inform participants and other stakeholders about the inspection, including the use of posters, letters or emails and any systems for communication already established by the provider;
- arrangements to collect views of participants and other stakeholders to provide feedback prior to the inspection;

- arrangements for the Managing Inspector to have information on numbers and location of participants, contact details for participants on placement, schedules/timetables of learning or information/advice sessions;
- arrangements for observing interviews, learning or teaching/training, assessment and information/advice sessions;
- arrangements to review participants' work;
- arrangements for pre-arranged meetings with key members of staff;
- consideration of data table (supplied by DWP) on success or outcome rates to support judgements on outcomes for participants;
- documentation to be made available during the inspection;
- team meetings and feedback meetings – times and locations;
- domestic arrangements such as base room, parking and refreshments;
- health & safety of inspectors;
- final feedback, evaluation and reporting arrangements; and
- date, time and location of final planning meeting.

At the briefing meeting, a date will be set for a final planning meeting. This final planning meeting will be used to check progress on and collect information from the provider and to finalise arrangements for inspection. This meeting will typically be about two weeks before the inspection. The planning meeting will normally go over the matters raised in the briefing meeting and cover:

- any update on recent developments by the provider;
- information and documentation to be provided for the inspection team;
- consideration of data table (supplied by DWP) on success or outcome rates to support judgements on outcomes for participants;
- information on safeguarding; and
- arrangements for accommodation and facilities for inspectors

Items raised at the briefing meeting will be followed through at the final planning meeting to ensure that all arrangements are clear. The briefing meeting will specify documents and information needed by HMIE, and it is anticipated that most of this will be supplied by the provider at the planning meeting.

Pre arranged meetings with participants and key staff and visits to participants at work or on external sites should be arranged as soon as practical. Meetings with staff, managers, stakeholders and participants will be set up by the Managing Inspector and the Nominee prior to the inspection week. An outline schedule of required meetings will be shared at the planning meeting to allow for detailed planning.

10 Collecting views of stakeholders before the inspection

The views of participants are central to the inspection process. As inspectors are unable to see all participants during an inspection week, it is important that mechanisms are in place to give all participants an opportunity to share their views and experiences. This also applies to employers and other key stakeholders. A questionnaire template will be provided to help collate the views of participants and a method of distribution will be agreed at the planning meeting. The template may be adapted by the provider to meet participants' specific needs. The provider will inform

all the participants of the inspection and how they may share their views with inspectors. Responses from participants should be returned to the inspection team in confidence within the identified timescale, usually a week before the start of the inspection.

Surveys of participant or stakeholder views carried out by the provider (or other parties) may provide additional evidence for the inspection team. Inspectors will take account of views expressed to them by participants, stakeholders, the Nominee and staff. Participants and staff will have the facility to speak in confidence with inspectors. Some participants will be selected in advance for meetings with inspectors. In addition there will normally be a wider invitation to open meetings.

During the inspection

11 Overview of the inspection process

The inspection process aims to evaluate outcomes for participants and to report publicly, based on a 'quality framework'. The quality framework specifies five key questions and specifies a number of 'quality indicators' used to help form an evaluation. There are 31 quality indicators in the employability framework which list in more detail the specific aspects of the work where inspectors will seek evidence. Under each key question, there is a numbered list of quality indicators that help to identify the important evidence to support evaluations. This is laid out as a diagram in appendix 1 of this handbook.

Each of the 31 quality indicators in the quality framework will be considered, and evidence collected against each one. The main evidence used for a judgement on a key question will come from the quality indicators listed below it in the framework, but at times evidence will come from other areas. Once the strengths and areas for development are clear for each of the key questions, the grade is determined for that key question.

The quality framework developed takes full account of the characteristics of employability programmes and the inspection work being conducted in England and Wales.

A typical inspection team will involve five inspectors, who will visit a range of sites and sample activity that reflects the contracted provision. The inspection team will work with subcontractors and partners where appropriate in the same way that they work with the main contractor.

Pre inspection activity will include liaison and planning with the provider and collection of information. The inspection activity will encompass a range of steps to collect further information, including meetings with staff, discussions with participants and other stakeholders, observation of support activities and a review of records of activity and support materials used. Meetings and some observations will generally be arranged in advance, but some observations are unannounced.

12 A typical inspection week

All contracts and providers are different. As such, inspection activities should be flexible and responsive. The information provided in advance is also significant in determining what will be covered in the week. The main focus of the week is for inspectors to get a first hand perspective on the participant experience, so most time during the inspection week will be on this aspect of the work rather than examining documentation. The following offers an outline of a typical inspection week, but in practice details may vary.

Day	Inspection activity	What the provider may need to consider.
Monday	<p>Team arrives at the provider's premises at 10.00. Initial meeting with provider's senior manager(s) at 10.30.</p> <p>Early afternoon – all five inspectors will be involved in inspection: observing interviews, observing training; meeting with staff and managers; reviewing documentation. Most manager/staff interviews will take place on Monday and Tuesday.</p> <p>At 4.30 approximately – inspection team will meet (or call in) for a general discussion of findings from the first day, this meeting will include the Nominee</p>	<ul style="list-style-type: none"> • Nominee availability. • Access to the base room. • Senior manager availability for initial meeting. • Manager/staff availability for interviews. • Nominee will be involved in end of day meeting. • 'Touching base' with Managing Inspector at the end of the day. • Inspection team may look for access to the base room beyond normal opening if required/possible.
Tuesday	<p>All five inspectors will be involved in inspection: observing interviews, observing training; meeting with staff and managers; reviewing documentation. Most manager/staff interviews will take place Monday or Tuesday. Inspectors are likely to be out on location or different sites.</p> <p>At 4.30 approximately – inspection team will meet (or call in) for a general discussion of findings so far. This meeting will include the Nominee. Adjustments will be made to planned programme depending upon the evidence being collected.</p>	<ul style="list-style-type: none"> • The provision of any further information or evidence coming from discussions on the first day. • Inspection team may look for access to the base room beyond normal opening. • 'Touching base' with Managing Inspector at the end of the day.

Wednesday	As Tuesday	As Tuesday
Thursday	<p>All five inspectors will be involved in inspection: observing interviews, observing training; meeting with staff and managers; reviewing documentation. Any final evidence needed will be collected and reviewed. Inspection activity on the Thursday morning will be limited, as inspectors will start to pull together available evidence at this point.</p> <p>Early p.m. - team meeting to discuss evidence and findings so far. Main findings are discussed and areas for main points for action. These are written up by the team from the evidence collected.</p> <p>Late p.m. – moderation meeting where final evaluations are discussed and provisional gradings agreed.</p>	<ul style="list-style-type: none"> • The provision of any further information or evidence. Inspection team may look for access to the base room beyond normal opening. • ‘Touching base’ with Managing Inspector at the end of the day.
Friday	<p>09.00 – Managing Inspector and Team Member 1 draft further information on grades and main points for action for presentation to the senior manager(s).</p> <p>12.00 approximately - feedback meeting where main findings are presented to senior manager(s).</p>	<ul style="list-style-type: none"> • Availability of senior manager(s) for feedback meeting. • Arrangements for sharing feedback with other staff.

13 The framework and indicators used

The framework used was developed with reference to the similar frameworks in use and tested over time relating to similar work. The specific characteristics of employability programmes, the frameworks used in England and Wales, and aspects of the work which might give useful feedback to providers and stakeholders were taken into account. To allow for easy use of the framework, it is set out in appendix 1 with the quality indicators laid out under each of the key questions. This 'interrogative' version using key questions has been found to be a clear and useful way to help users of the framework understand the areas of interest and the key issues to be examined.

14 Collecting and using evidence

In the course of inspection, the main focus will be collecting evidence around the quality indicators outlined in the framework. The planning of this process of collecting evidence will ensure the sampling of a spread of activity reflecting the work outlined in the contract under inspection. Some documentation and performance data will have been collected for the inspection team before the inspection week and the inspection team will have reflected upon key points from this preparatory work. Some documentation and material will be made available to the team during the inspection week. However, the main source of information on inspection will be first hand evidence, looking at interactions with, and support for, participants. The main focus will be observations, interviews with participants, individually or in groups, reviewing materials developed by participants and looking at records of activity. This will include looking at case studies of participants, including vulnerable learners. Inspectors will record evidence and the Managing Inspector will ensure that the range, quality and depth of evidence collected is sufficient to be confident that the judgements made are secure.

15 Observation of teaching/training, learning, assessment and support

Inspectors will observe as many sessions as is practical and appropriate. The number and range of observations will be balanced to reflect the range of activity, the geographical spread and the range of participants supported. All staff and participants should be advised that their work may be observed during the inspection week. If there are any planned sessions in the week that are potentially highly sensitive, inspectors should be advised in advance. Sessions observed may include introductory briefings, work focussed interviews, group training sessions, individual mentoring, individual interviews or on line tutoring or support.

Observations are planned and agreed in some cases, and in others they may be unannounced. They will typically last between 15 and 40 minutes, depending on the activity. In many cases this will only cover part of the session. The inspector will advise the member of staff that he/she is joining the session, and will briefly discuss where best to sit and how best to observe. In most sessions, depending upon the timing, the inspector will ask for some time to speak to the group or individual. This discussion will normally take place without the member of staff present. This discussion will focus upon the participant's experience in that session and in other sessions. When the inspector completes the work, he/she will arrange a time to have a brief discussion of findings with

the member of staff. This professional dialogue will include the member of staff's own reflections on the session, the inspector's observations and any relevant points of context. Individual observations are not graded.

Should a provider have an internal system for observation and feedback, inspectors may arrange a number of joint observations. Joint observations will be in addition to observations made by HMI, but may reduce the number of HMI observations undertaken. In a joint observation, the provider's observer will lead on giving feedback. The inspector, in these circumstances, will feedback to the observer on the observation, not to the member of staff on the observed session. Where a provider has a recorded process for observation and feedback, joint observations will be needed to give a confidence in the rigour and impact of that process.

16 How is self-assessment or self-evaluation used?

In judging quality, it is helpful to have any self assessment or evaluations from the provider and any development or improvement plans. These will be discussed formally at the planning meeting. Key documentation such as the formal Self Assessment Report will also be considered. It is also useful to discuss with staff and participants any involvement they have had in self-assessment or self -evaluation and any changes that have been made following this process. Reflecting upon this will allow inspectors to have a clear view on a provider's capacity to improve the quality of service. During an inspection, what inspectors find will be compared to a provider's own self-assessment or self-evaluation. Although the format of self assessment is not prescribed, it is expected that all providers will have a model of self-assessment or self-evaluation in place leading to action planning for improvement. A robust process, giving information consistent with inspection findings, is likely to lead to HMIE having a greater level of confidence in internal review, planning and improvement processes.

17 How is evidence recorded?

As the inspection progresses, inspectors will record evidence gathered. This will be shared daily with the team. Depending upon the evidence emerging, plans for the following day may be adjusted where sufficient evidence is already in place or further evidence is needed. The Nominee will have regular feedback on this process and will be able to direct the team to further evidence if this is needed. The Managing Inspector will coordinate the collection and recording of evidence. Although evidence is collected and collated as the week progresses, final evaluations are not fully considered until there is sufficient evidence, which is likely to be on the Thursday of the inspection week.

18 Grades used in inspection

In line with wider HMIE practice, grades are given on a six point scale. The descriptions of the six levels are outlined as appendix 2. In outline, these are as follows.

Excellent	<i>Outstanding and sector leading</i>
Very Good	<i>Major strengths</i>
Good	<i>Important strengths with some areas for improvement</i>
Satisfactory	<i>Strengths just outweigh weaknesses</i>
Weak	<i>Important weaknesses</i>
Unsatisfactory	<i>Major weaknesses</i>

The intention of providing graded evaluations is to enable:

- a clear view of a provider's strengths and areas for development;
- an informed judgement on priorities for improvement;
- identification of good practice;
- detail for benchmarking for comparison and improvement; and
- a brief and precise overview of the quality of provision.

Gradings are used to provide an overall picture of how well a provider performs in key areas, and these key areas are summarised as key questions. These five key questions will be evaluated and graded. Although evaluation of the provision is reported based on all aspects of the quality framework, grading is only applied to the five key questions. These key questions are -

1. **Overall, how effective is the provision?**
2. **How well are participants progressing and achieving high quality outcomes?**
3. **How well is the provider enhancing the quality of its services?**
4. **How effective are the providers learning, development and support processes?**
5. **How effective is leadership and management?**

The grades for key questions 2 – 5 will be derived from the evidence reviewed using each of the quality indicators associated with the question. The strengths and areas for development will be considered and evaluated in terms of impact, and a grade derived from that.

The grade for overall effectiveness is derived by using the evidence and judgements from all the quality indicators. However, this overall judgement will fully consider the importance of the judgements made in key areas of the provision. Central to this grading are the actual outcomes for participants. In addition, an overall grade will be strongly influenced by the evidence on safeguarding and on equality and diversity. Evidence in these areas of poorer performance will impact negatively on the grade for overall effectiveness.

A reinspection will be required if any grade is either weak or unsatisfactory. The reinspection process will be a limited inspection, and will look at the key questions where a grade of weak or unsatisfactory was awarded. Where a grade is less than satisfactory in an initial inspection, the implications of these grades will be explained at the feedback

meeting. The provider will be asked to develop an action plan for improvement within three months around the areas of weakness. The action plan will be reviewed by HMIE through liaison with the contract manager. A reinspection will happen typically within 12 – 18 months of the initial inspection.

19 How are judgements agreed?

The Managing Inspector will ensure that the evidence collected is sufficient and robust and will lead the process of coming to a decision on grades. The decision on grades is one for the inspection team, although the Nominee will not have an active part in these discussions. The evidence is evaluated, and the main strengths and areas for development considered. In this process, the importance and impact of the strengths and areas for development play a part in the overall judgement. The evidence collected for each quality indicator under each of the five key questions is considered. These are then compared to the grade level descriptors and a final grade given to each of the five key questions. The description of the six levels of grade used is within this handbook as appendix 2.

20 How is the quality of inspections assured?

All inspection team members are responsible for the quality of their work. The Managing Inspector will ensure that all team members are appropriately prepared and briefed, and that they work in a manner consistent with the PRAISE framework (see section 2). Senior staff from HMIE will visit or be involved in each inspection to monitor the quality of HMIE work during the inspection. Providers are also invited to give feedback on the inspection through a questionnaire and an opportunity for a follow up meeting with a member of HMIE senior staff.

After the inspection

21 What feedback is given to the provider?

Over the inspection week the provider will have had information on matters arising from the inspection. This will happen as a matter of course through discussions with the Managing Inspector or feedback provided through the Nominee.

Before leaving the provider the Managing Inspector will ensure the provider is clear:

- about the provisional grades awarded in each area;
- that grades are provisional and could be subject to change through moderation;
- that the text will reflect the main points of feedback given;
- what the main points for action are;
- about the process leading to publication of the report;
- about the complaints procedure; and
- where relevant, the implications of poorer grades.

The discussion of findings will normally happen with the senior staff of the provider in a formal feedback meeting on the Friday of the inspection week. This will be a formally convened meeting led by the Managing Inspector. At this meeting, the main findings, provisional grades and main points for action will be discussed. A note will be left of the provisional grades and main points for action; however, it is important that these are recognised as provisional.

22 What are the written outcomes of the inspection?

Following the inspection, the Managing Inspector will prepare a written report. It will be written in clear English, be jargon free and accessible to users. A summary will be provided at the front of the full report.

The full report will typically contain the following sections:

- introduction and information about the provider;
- summary, which will include gradings of the five key questions and main points for action; and
- main inspection findings, including outcomes for participants, capacity to improve, quality of provision for participants and leadership and management.

When the report is drafted, the Managing Inspector will give the provider an opportunity to check for factual accuracy. This will typically be a window of five working days approximately ten days before publication. Where no response is received, the report will go directly to publication. Evaluations in the report will not be changed unless factual errors or omissions have a significant bearing on them.

The report will normally be published on the HMIE website eight working weeks after the inspection week.

23 Glossary of terms used

Activity	One of the range of things that an inspector or a participant may be involved in, including taught sessions, training, assessments, reviews of progress, coaching, job search and work experience both on and off the provider's premises.
Grade	Each of the key questions is evaluated, and to allow for comparison, a 'grade' is determined. This grade is on a six point scale, with the grades being – excellent, very good, good, satisfactory, weak and unsatisfactory. Any provision graded as weak or unsatisfactory will require the provider to set out an action plan for improvement and will be subject to reinspection.
HMIE	Her Majesty's Inspector of Education.
Key question	There are five questions used to help understand how well a provider is performing. These key questions are used as headings in the report to allow a simple and clear description of performance. Each of the five key questions is given a grade on a six point scale to make it simpler to understand how strong the provision is.
Learning	Attainment of learning goals, including qualifications, development of skills' and gaining of knowledge and understanding, including information and advice on learning, development, job search and employment.
Managing Inspector	This is a member of the inspection team who will lead the planning of the inspection, be the key liaison person for HMIE, and will lead on the writing and publishing of the report.
Nominee	The Nominee is a senior member of staff from the provider who is the key link between the provider and the inspection team.
Participant	A person seeking information or advice and support on learning opportunities or employment, taking part in education, training and development programmes or activities. Similar terms used are trainee, student, apprentice, user, member, client and customer.
Professional dialogue	Discussion between an inspector and a provider's member of staff aimed at giving a full and clear understanding of issues which provides an evidence base for judgements. Professional dialogue is a more open approach than a structured interview, and invites a more balanced contribution of information.
Provider	Any organisation, including consortia or partnership, involved in providing information and advice services, education, training or development programmes or activities, including private companies, colleges, independent training providers, local authorities, voluntary organisations and employers.
Provision	The range and type of learning and support available.
Quality Indicator	An aspect of the provision where inspectors will seek to collect evidence. Each key question is underpinned by a list of quality indicators, and by collecting information on strengths and weaknesses about each quality indicator, evidence for a robust evaluation of the key question will be in place. There are 31 quality indicators used in the framework for employability programmes.
Stakeholders	The range of people who have an active professional or personal interest in the work of the provider, including users, members of the community and linked organisations.
Users	The wider group of people supported through a providers service including young people, adult participants, employers, parents and carers.

HMIE quality framework for the inspection of employability programmes

1 Overall, how effective is the provision?

2 How well are participants progressing and achieving relevant, high quality outcomes?

3 How well is the provider enhancing the quality of its services?

4 How effective are the provider's learning and development processes?

5 How effective is leadership and management?

1. Key performance outcomes

- 1.1 How well does the provider perform against its aims, objectives and targets?
- 1.2 How effective is the provider at achieving and maintaining high levels of retention and success for all participants?
- 1.3 How well does the provider fulfil its obligations with regard to safeguarding and equal opportunities?

2. Impact on users of provider services

- 2.1 How accessible, flexible and inclusive are provider programmes and services?
- 2.2 How well do participants make progress attain success and achieve more widely?

3. Impact on staff

- 3.1 How well does the provider motivate staff and secure their engagement in setting and achieving provider targets?
- 3.2 How well do staff reflect on, and participate in, professional discussion to enhance support, development and other services?
- 3.3 How well do staff work together in their own teams, and more widely?
- 3.4 How well does the provider sustain continuous improvement through self-evaluation and internal review activities?

4. Impact on communities and the economy

- 4.1 How well does the provider work with local and national employers?
- 4.2 How well does the provider work with its communities and external stakeholders?

5. Learning and development

- 5.1 How well does the provider develop and deliver programmes and services to meet the needs of participants from all backgrounds?
- 5.2 How well do participants learn and develop?
- 5.3 How well does support and the use of resources ensure effective personal development?
- 5.4 How effective is the assessment and planning for learning and development?
- 5.5 How well are potential and current participants provided with information, advice and support?

6. Providing direction and facilitating change

- 6.1 How effective are provider planning processes?
- 6.2 How effective is action to meet aims, objectives and targets of plans?
- 6.3 How well does the provider recognise and respond to changes in its environments?
- 6.4 How well does the provider plan for and manage change?

7. Management and support of staff

- 7.1 How relevant and current are staff qualifications, skills and experience?
- 7.2 How productive are the working relationships among staff, participants and external stakeholders?
- 7.3 How effective is the provider in recruiting, selecting, and retaining staff?
- 7.4 How effective is workforce planning?
- 7.5 How effective is the provider in developing its staff?

8. Partnerships and resources

- 8.1 How extensive and effective are provider partnerships with subcontractors, partners and other agencies?
- 8.2 How well does the provider manage and use its resources?

9. Leadership and direction

- 9.1 How appropriate and influential are the aims, objectives and targets of the provider?
- 9.2 How effective is the leadership for learning and development?
- 9.3 How effective is the leadership for services to support participants?
- 9.4 How well does the quality culture lead to quality improvement and enhancement?

Grades used in reporting

Summary

Excellent	<i>Outstanding and sector leading</i>
Very Good	<i>Major strengths</i>
Good	<i>Important strengths with some areas for improvement</i>
Satisfactory	<i>Strengths just outweigh weaknesses</i>
Weak	<i>Important weaknesses</i>
Unsatisfactory	<i>Major weaknesses</i>

- An evaluation of **excellent** applies to provision which is sector-leading. Participants' experiences and achievements are of a very high quality. An evaluation of *excellent* represents an outstanding standard of provision which exemplifies very best practice and is worth disseminating beyond the current provision. It implies that very high levels of performance are sustainable and will be maintained.
- An evaluation of **very good** applies to provision characterised by major strengths. There are very few areas for improvement and any that do exist do not significantly diminish participants' experiences. While an evaluation of *very good* represents a high standard of provision, it is a standard that should be achievable by all. It implies that it is fully appropriate to continue to make provision without significant adjustment. However, there is an expectation that the provider will take opportunities to improve and strive to raise performance to excellent.
- An evaluation of **good** applies to provision characterised by important strengths which, taken together, clearly outweigh any areas for improvement. An evaluation of *good* represents a standard of provision in which the strengths have a significant positive impact. However, the quality of participants' experiences is diminished in some way by aspects in which improvement is required. It implies that the provider should seek to improve further the areas of important strength, but take action to address the areas for improvement.
- An evaluation of **satisfactory** applies to provision characterised by strengths which just outweigh weaknesses. An evaluation of *satisfactory* indicates that participants have access to a basic level of provision. It represents a standard where the strengths have a positive impact on participants' experiences. However, while the weaknesses will not be important enough to have a substantially adverse impact, they do constrain the overall quality of participants' experiences. It implies that the provider should take action to address areas of weakness while building on its strengths.
- An evaluation of **weak** applies to provision which has some strengths, but where there are important weaknesses. In general, an evaluation of *weak* may be arrived at in a number of circumstances. While there may be some strengths, the important weaknesses will, either individually or collectively, be sufficient to diminish participants' experiences in substantial ways. It implies the need for prompt, structured and planned action on the part of the provider. Where a grading of weak is given, it will lead to a follow up inspection in this area typically one year later.
- An evaluation of **unsatisfactory** applies when there are major weaknesses in provision requiring immediate remedial action. participants' experience are at risk in significant respects. In almost all cases, staff responsible for provision evaluated as unsatisfactory will require support from senior managers in planning and carrying out the necessary actions to effect improvement. This may involve working alongside other staff or agencies in or beyond the immediate support given by the provider. Where a grading of weak is given, it will lead to a follow up inspection in this area typically one year later.