Notes of Guidance

Quality Improvement Plan
Introduction

Follow-up is an integral part of the QA process. The decisions on improvement that are made following self-evaluation and review provide a framework within which the faculty can upgrade its strategic plan and continue to work toward the goal of developing and fostering a quality culture.

Thus the final step for the faculty in the evaluation process is the preparation and implementation of an effective Quality Improvement Plan (QIP). The purpose of the plan is to enable the faculty to benefit from the self-reflection and hard work put into the Self-Evaluation Report and from the expert advice contained in the Peer Review Group Report. The preparation of the QIP should be a very positive exercise that focuses on quality improvement by identifying strategies for change, and by making a sustainable case for any additional resources required to implement the recommendations of the PRG Report.

The QIP should be completed within three months of receipt of the PRG report and submitted to the appropriate governance bodies for consideration and approval in the context of the faculty’s strategic planning and budgeting. AVEPRO and other appropriate entities should receive a copy of the plan.

The Quality Improvement Plan

1. The faculty should read and discuss the PRG report. The Dean should then set up, and chair, an Implementation Committee (IC) which is fully representative of the staff, and which will present the views of the faculty in all subsequent discussion on follow-up (e.g. with AVEPRO, the local Bishop, etc.).

2. The IC will draft the Quality Improvement Plan. This should include a brief introduction that gives the names of the IC and outlines the main findings of the PRG report (500 – 1,000 words). An appendix should give the composition of the Coordinating Committee and the PRG.

3. It is important that all recommendations in the PRG report be addressed. Some recommendations may have been explicitly stated, others may have occurred as suggestions, still others may be implied as a consequence of a stated concern e.g. “the department has not clearly stated its aims and objectives”. All of these, explicit or implied, should be included for consideration.

   There may be recommendations that the IC considers counterproductive; the Committee should give the reasons for such a conclusion and should, if possible, suggest alternative strategies for quality improvement.

4. Recommendations usually fall into three categories:
   • Matters which are completely under the control of the faculty involving: academic affairs related to programmes, pedagogy, research, scholarship; organisation; administration; other
• Shortcomings in services, procedures and facilities which are outside the control of the faculty
• Inadequate staffing, facilities and other resources that require capital or recurrent funding.

It is important to include recommendations that require extra funding even if there is no immediate prospect of such funding becoming available. This information will enable AVEPRO, over time, to build a database on needed resources across the sector.

In each of these categories the QIP should establish

(a) a list of prioritised goals that can be realistically achieved in the following year, with details of how this will be done, who will be responsible and where feasible, measurable outcomes
(b) a list of prioritised longer term goals that can be achieved over the coming three years, with details of how this will be done, who will be responsible and, where feasible, measurable outcomes.
(c) estimates of the capital and recurrent costs of resources required to implement recommendations.

5. The Quality Committee and the Director of Quality Assurance will monitor progress each year and report their findings to the Senate.

6. Quality improvements plans have an importance over and above their effect on the individual institutions. Over time they will enable AVEPRO to gain an overview and build a database on key areas that affect the quality of all ecclesiastical institutions. They will identify the strengths of the system and highlight common areas of concern with indications on how these may be confronted.