

## Background

1. To support the Peer Learning Activity (PLA) on self-assessment, participants completed a short questionnaire. Answers to the following questions were received by the EQAVET secretariat in early May 2013:
  - how important is self-assessment within your quality assurance system;
  - to what extent does each VET provider use the same approach to self-assessment;
  - how much work is undertaken by your EQAVET National Reference Point in relation to self-assessment;
  - are the outcomes of self-assessment publically available or used as the basis for external evaluations/inspections;
  - is self-assessment equally important for initial and continuing VET providers in your system.
2. A second set of questions asked participants to set out their personal and professional interests in self-assessment, and the benefits they expected to gain from the PLA. Answers to these questions will be used by the EQAVET secretariat to review the PLA process – they are not included in this analysis. This short paper provides a summary of the contributions from 25 participants in relation to the first set of questions, sets out common issues that are present in many national or regional systems and analyses where there are significant differences.

## Introduction

3. The following analysis was completed by the independent advisor supporting the PLA in Budapest. It is not an official record of self-assessment practice. It was produced to support discussions during the PLA and provide a short overview of the range of approaches used in Europe.
4. There was a wide range of responses to all the questions – in many respects this was not a surprise as it reflects the diversity of quality assurance approaches used across Europe. Even though there was little consistency, a number of themes emerged in many responses, such as:
  - a clear expectation that those VET providers in receipt of public funds would use some form of self-monitoring or self-improvement;
  - assigning responsibility for self-assessment to individual VET providers (this was common but not universal as some Member States have limited expectations about self-assessment and others have a mandatory system which has to be used);
  - most Member States expect their National Reference Point to be fully involved in supporting or promoting self-assessment (though there are examples where the NRP is only recently formed, or not in place, and does not undertake this role);

- significant levels of confidence that self-assessment takes place in organisations that provide continuing or initial VET;
  - the outcomes of self-assessment are used in a wide range of ways e.g. for accreditation, to inform discussions with inspectors, to support peer review, to publicise performance to parents and learners, and to inform a national or regional reporting process.
5. Across all the responses, there is a clear indication that self-assessment is increasingly seen as important and measures are in place to support and enhance its use.

## Analysis

6. The following sections are based on responses from 25 participants - each section highlights the main issues identified in the responses. For simplicity and ease of understanding, a report on each country's system has not been included.

### How important is self-assessment within your quality assurance system?

7. Every system values self-assessment, and increasingly recognises it as an important component of quality assurance. In the majority of situations it is an internal process, undertaken by the individual VET provider. There are some exceptions where the self-assessment process is linked to an external perspective or is conducted as part of an accreditation process.
8. Often self-assessment is encouraged rather than being mandatory. And when it is encouraged, decisions on the approach is determined by the VET provider
9. The reasons for self-assessment vary significantly between Member States and include e.g.:
- it is seen as a key component of a national regulatory process or set of standards (e.g. AT, FI and DE);
  - part of a formal self-improvement process (e.g. EE, HU and FI);
  - part of a mandatory set of expectations (e.g. EE, HU, LV and DK);
  - part of a development process – often associated with a new project (e.g. FR)
  - part of an accreditation process (e.g. IT, PT and LV);
  - part of an inspection system (e.g. NL)
  - as part of a national or regional external evaluation process (e.g. LT).
10. The range of expectations vary significantly e.g. in LU self-assessment does not have an important role, yet in DK it is a mandatory requirement. It is also clear that a wide variety of self-assessment approaches are used, including those that have been developed to meet regional or local needs and international systems such as ISO and EQFM.

### To what extent does each VET provider use the same approach to self-assessment?

11. Again different approaches are used – and even when the same methodology and principles are used, individual VET providers can often select the topics or issues that are subject to self-assessment (e.g. AT and HU). This also applies in some systems where expectations are set by inspectorial process – and individual VET providers are able to select the most appropriate way of demonstrating the quality of their provision (e.g. DK and NL).

12. Other approaches also exist, including the use of a pre-determined way to self-assess (e.g. DE and LV). In some countries (e.g. EE) a degree of consistency is maintained through the use and reporting of a national set of indicators. In FI the encouragement of a peer review process can lead to individual VET providers establishing benchmarking in relation to the same issues/topics. There are also examples where Member States encourage (or permit) individual VET providers to choose whether to use self-assessment or not (e.g. FR and SE). In IT there is a consistent approach to self-assessment during the accreditation process as this is a national expectation - this is complemented by a more variable and autonomous approach following accreditation. And finally, some Member States combine a consistent approach when the information and data from self-assessment is used for external monitoring processes and a self-determined approach which meets individual VET providers' needs when it is an internal process (e.g. PT and LT).

How much work is undertaken by your EQAVET National Reference Point in relation to self-assessment?

13. There was more consistency in the responses to this question. Where the NRP was set up and operating, self-assessment was seen as an important aspect of quality assurance. In some contexts this includes establishing a national self-assessment system (e.g. EE), organising training for self-assessment/self-evaluation (e.g. AT), ensuring VET providers' have opportunities to share practice (e.g. HU, NL and IT), and developing and testing new processes (e.g. IT and LT)

Are the outcomes of self-assessment publically available or used as the basis for external evaluations/inspections?

14. Each Member State's approach is different – however everyone is clear about how the outcomes from self-assessment will be used. In all situations the information assists the management and leadership team, and is used to improve performance and inform internal review and reflection processes. In some situations the outcomes are also collected and analysed to prepare a national report on VET provision.
15. The range of approaches to using data includes the following:
- information from self-assessment is included in discussions between the VET provider and the inspection team (e.g. DK);
  - information from self-assessment is included in the management performance reviews undertaken by the VET provider and the school inspectors (e.g. AT);
  - information from self-assessment is seen as part of the overall performance of the VET provider and is published (e.g. DE and DK);
  - information on self-assessment is available on request (e.g. EE);
  - decisions on whether information on self-assessment is published are made by individual VET providers (e.g. FI and LT)
  - information is available to staff, parents and students (e.g. FR)
  - the information from self-assessment is included in external evaluations (e.g. HU and IT);
  - the information on self-assessment is publically available (e.g. LV and PT);
  - information is not available outside the VET provider (e.g. SE).

Is self-assessment equally important for initial and continuing VET providers in your system?

16. In many situations the initial VET providers also offer continuing VET. Where this happens the same approach is often used for quality assurance, however different criteria can apply to self-assessment. Where initial and continuing VET are offered by separate organisations, the approaches are more likely to differ – this reflects the different management and funding arrangements as well as the different philosophy that can underpin training.
17. In systems where individual VET providers are autonomous, their autonomy applies to both initial and continuing VET provision. As such it is difficult to judge whether self-assessment is equally important in initial and continuing VET as decisions are made in response to local circumstances and priorities. However in systems where there are more centrally-determined expectations or strong guidance, self-assessment is seen as equally important to the initial and continuing VET provision
18. When continuing VET also includes non-formal and informal learning (and the assessment of outcomes) decisions on self-assessment processes are usually the responsibility of the VET provider. Where companies are involved in commissioning continuing VET, they are often involved in the assessment of the VET providers' arrangements – and sometimes this can be seen as a form of self-assessment.

Final reflections

19. The responses from 25 participants in the PLA show there is a broad range of experiences and practice in self-assessment. This is a good basis for sharing and should provide a stimulating set of discussions in Hungary.
20. The range of approaches includes national expectations to situations where all the decisions are made at the local VET provider level. On balance the latter approach is more common for both initial and continuing VET.