# Peer Learning Activity on Strengthening the evaluation and review phase of the EQAVET cycle

18-19 November 2020
Online meeting

**General Report**

## 1. Policy context

The 2009 EQAVET Recommendation established a European Quality Assurance Reference Framework for Vocational Education and Training (EQAVET) to underpin quality improvement. It invited Member States to develop their VET systems, to increase trust, transparency and mobility, at national and EU levels, by using a quality assurance improvement cycle based on planning, implementation, evaluation and review.

EQAVET can be applied both at VET-system and VET-provider level, and is supported by quality criteria, indicative descriptors and indicators. The systematic approach to quality assurance provided by the EQAVET framework underlines the need to develop appropriate evaluation and review mechanisms (internal and external, at system and provider levels), **to ensure continuous quality improvement and to enhance accountability**.

Other EU policies in VET development reinforce the importance of closing the quality cycle, by using evaluation and review data for accountability and improvement purposes. In particular, the 2015 Riga Conclusions on a New Set of Medium-Term Deliverables in the Field of VET for the Period 2015-2020, underlined the need to further develop quality assurance mechanisms in VET in line with the EQAVET recommendation and, as part of quality assurance systems, establish continuous information and feedback loops in I-VET and C-VET systems based on learning outcomes.

This reinforces other recent EU reports and Council Recommendations on subjects related to VET systems and skills, such as the Joint Report of the Council and the Commission on the implementation of the strategic framework for European cooperation in education and training (ET 2020) "New priorities for European cooperation in education and training" (from 2015), the Council Recommendation on Tracking Graduates (2017), the new Recommendation on the European Qualifications Framework for lifelong learning (EQF), from 2017, the European Skills Agenda for sustainable competitiveness, social fairness and resilience (2020) which all underpin the need to enhance the capacity to use strong, evidence-based, quality assurance and policy-making mechanisms, including the evaluation and assessment of VET systems by **effective feedback loops that enable the timely adaptation of VET systems and VET provision to evolving labour market and societal needs**.

On the other hand, the EQAVET Secretariat Surveys (the last one from 2018) indicate that these very important phases of the quality cycle are **less developed,** more so at provider level than system level; and more so in CVET than in IVET.

The EQAVET network has responded to these needs to collect data for evaluation and review through several peer-learning activities (PLAs) and working groups in the last few years. For instance, the working group in 2016 set out to develop quality descriptors which complement EQAVET Recommendation and the working group in 2017 examined how to strengthen EQAVET's contribution to the quality assurance (QA) of VET systems. The Lisbon PLA, on supporting training providers to identify areas and implement actions for improvement in line with EQAVET, made some recommendations regarding designing and updating the QA systems and procedures for the evaluation and review stages of the model.

This PLA continues these efforts to learn, from each other, **how to devise the best methods to collect relevant data** (at system and provider levels) and **how to use them for accountability purposes, but also to improve the relevance of provision by ensuring the review of data informs the planning phase** of the EQAVET framework and creates, as intended, a spiral of continuous improvement of quality.

## 2. Objectives and content of the PLA

The participants at the PLA were representative of the variety of the VET systems found within the EU: they came from large and small systems, from centralized but also from decentralized systems, from Northern and Southern, from Eastern and Western Europe.

To prompt discussions, some of the members of the National Reference Points (NRPs) of the EQAVET Network (from HU, IE, MT, NL, RO, SE), were asked to present their experiences, good practices and challenges in relation to one or more of the three sets of questions (corresponding to the three work sessions).

The discussions during the PLA had, as their main purposes, to analyse the challenges and success factors:

1. To strengthen the REVIEW phase, by using data collected about current and former learners (students and graduates) either by providers or national authorities and evaluation methods in the EVALUATION phase.
2. To feed the analysis of data and evaluation results into the PLANNING phase to make improvements and changes at system and provider levels.

The summaries below draw on the presentations and the discussions in simultaneous workshops.

### A. Challenges and success factors of different methods of data collection and use at system level

**What methods are in play at national/system level (surveys, administrative data matching, evaluation studies)?**

Participants were generally familiar with and understand the practical use of several of the measures (national surveys of students and graduates, student databases of results and employability outcomes/destinations). Most use more than one of the measures. While these do not exist in all countries across the entire system, they are generally prevalent, more universally for IVET than CVET being part of school leaving data collection on results and destinations. This very much continues to reflect recent surveys. Participants rarely mentioned evaluation methods and methods for CVET.

In particular:

- At a national/systems level most countries used a mix of methods (e.g. surveys, administrative data matching) and both quantitative (statistical) and qualitative data (collected, for instance, by inspection or from interviews and focus groups with students and graduates).
- **Administrative data** is collected on **participation** (funding, student characteristics (e.g. gender, education attainment of parents, place of birth, enrolment etc), **the learning programme** (teachers and trainers, material resources, curriculum, choice of programme etc.) and **student outcomes/destinations** (final grades, achievement and placement rates, type of employment etc.).
- **Surveys** are widely used to collect quantitative data as well as qualitative data to analyse the impact of VET provision (e.g. the usefulness of competencies, satisfaction at employers and graduates etc.).
- **Evaluation studies,** when used, mainly focus on policies and specific training programmes. They generally bring together both administrative data and survey results.
- Measures at system level are commonly developed by **combining different databases**, which is owned by different stakeholders from different sectors. It is combined by matching a unique personal ID, which is used on a range of data sources such as the population register, social security register, register on education achievements, employment / unemployment register, tax and revenue register etc.

**How are these methods used for the evaluation and review of VET?**

Participants described how the data collected and analysed often feeds into the review of course/qualification numbers of students and places, assessments of the relevance of courses (from employability data and feedback), quality assurance systems managed by state organisations or government

departments (e.g. LV), benchmarking tools for provider self-evaluation (e.g. LV), and student choice data on course outcomes (e.g. CZ).

In particular:

- Data collected is used on a regular basis to **review and to report on the implementation of reform policies in VET** – for instance to review new training programmes and curricula, to review and establish programmes for providing buildings, such as a health check on the VET system, and equipment, and revising the training programmes for initial teacher training and teachers' CPD etc.
- Data collected is used in some cases to evaluate annually to assess the **effectiveness of the VET system**, commonly through the produce a range of annual statistical reports. This includes reports on topics such as tracking students and graduates through education, training and employment, and assessing the achievement of learning outcomes.
- The main processes for data collection and review are often built into systems for **provider self-evaluation and external evaluation** (inspection, control etc.). These data are aggregated, usually, in national reports issued periodically and (usually) published and/or made accessible for the main stakeholders. In some cases, they are used for benchmarking and assessing progress in improvement. These reports may focus on specific topics – e.g. on graduation exams, students with disabilities.
- Used by some providers to evidence their strengths to **inform their negotiations with national and local authorities** on funding and growth.

**How could the methods be improved to be more useful for evaluation and review?**

Most participants felt there were areas where the data collected nationally could be better used. Although many reported that substantial data was available, some stated that coordination and collection by data owners, ministers, government agencies and providers could be improved to better ensure that the data collected was of a high quality and could be used for a wider range of purposes.

In particular:

- Several countries report having poor destination data either because it is not followed up with surveys or the response is low which reduces its value for review.
- Some countries reported there is a **tendency towards focusing on statistics / hard data** and neglecting qualitative data. At a process level this made it difficult to understand students views on quality and relevance of training. There is a need to balance quantitative data with qualitative information (e.g. on curriculum delivery, teaching practices, cultural aspects).
- A few countries also reported issues with the comparability between different administrative datasets - metrics, definitions of data subjects and data fields etc. This was as a result of the administrative databases are produced independently. It required a lot of time and effort is required to match data and provide it in a form useful for the purposes here.
- Some countries also reported the need for better coordination between the system level and sub-system/provider levels over establishing common data variables in surveys and over survey content and methods. This would help with validity and benchmarking at system level. This was however reported to require substantial effort from system level management
- Some countries also suggested a need for greater coordination among national stakeholders in the design of data collection processes. The starting point for this needs to be 'what will the information be used for'. It was also reported to be good practice to engage data users in these discussions.

**Case study: Sweden**

At national level in Sweden the Statistics Authority has well-established data collection systems for graduate tracking of all school leavers based on the linkage of administrative data on their education (IVET, HE, CVET) with data on their employment, income and welfare support. This uses a personal ID. The data collection is

realised at 1, 3 and 5 years after graduation and combines context data (including gender, national background, parents' educational level, programme and specific line of study etc.) with data on their pay, progression, sector of employment etc. This enables considerable sub-group analysis such as at course level and for specific personal characteristics such as disability. What it lacks is qualitative information from students and employers to provide a wider perspective.

## B. Challenges and success factors of different methods of data collection and use at provider level

**What data do VET providers collect for evaluation and review?**

Participants were generally familiar with several measures (surveys of students and graduates, student databases of results and employability outcomes/destinations). However, in some countries they were not in place for all providers, and it was overall more common among IVET providers rather than CVET, as it was commonly part of school leaving data collections of results and destinations.

Some of the key features of the data were:

- At provider level there are **commonly a wider range of data collected** than at system level**.** Additional data collected by providers includes background information on students and qualitative data on student perceptions of learning and teaching processes, such as the adaptation of pedagogical approaches to the individual students' needs, the quality of teaching from structured observations of learning activities, and assessment data.
- Data on students is often collected to provide information to system level education databases. They are frequently combined with system level data.
- Providers are often expected to implement quality systems involving periodical **self-assessment** (as a main process for quality assessment and improvement) and the production of self-assessment reports. These are expected to draw on data collected for evaluation and review.
- Providers commonly collect student (and other stakeholder) **feedback** through surveys These are undertaken by individual VET providers or by networks or 'consortia' at regional or sector levels.
- The use of data at provider level is very much dependent on the **'quality culture'** in the institution – i.e. if the teachers, trainers and managers value evidence-based quality improvement.
- Usually, self-assessment informs the development of plans, such as course offers and quality improvement plans which are used to develop actions for the next planning cycle.
- Barriers to collecting and using data for evaluation and review include: cost issues for providers (they need a quality coordinator to handle all of this) and leaders who do not always recognise the benefits and therefore are unwilling to collect the data unless it is mandatory, which it is in several countries.

**What methods of coordination are there between national system data and providers?**

In some countries, data collected at provider level is collated to create national databases which are used for evaluation and review. This includes administrative data (student databases) as well as survey data. In these cases, there is very specific coordination and control. To ensure data is consistent many countries establish mandatory quality assurance and planning systems for providers that set out administrative arrangements specified by government departments and agencies involved in the processes.

In particular:

- Self-assessment is commonly combined with a form of external- evaluation, such as inspection, based on the same data. Here the internal evaluation processes provide data for external evaluation.
- In some cases, planning systems for VET provision are set by regional or national authorities so that providers have to meet requirements for plans periodically and for plans to be reviewed annually. These are specified in terms of formats and data to be used
- In countries where VET providers have a higher degree of autonomy, national authorities publish guidance on quantitative and qualitative data collection. In some of these countries there are advanced, standardised toolkits for quality improvement which are broadly adopted by providers. In

a few, providers are encouraged to adopt either approaches based on EQAVET or relevant ISO quality standards.

**Case study: Hungary**

In Hungary, the link between provider level and system level evaluation and review processes is regulated at system level by the Ministry. The process at provider level is realised by combining providers' self-evaluation reports (2 yearly cycle and yearly reporting on main indicators) with teachers' / trainers' teaching quality evaluation (every 3 years) and with external evaluation (every 4 years). All these elements inform the quality improvement plan (objectives, actions and review) which is mandatory at provider level.

In order to build capacity at provider level to implement these systems, there is system level support to providers which includes training in quality matters, guidelines and other methodological support to undertake evaluation and review.

## C. Challenges and success factors regarding the establishment of systemic links between data collection and the review and planning phases

**What are the links (procedures and mechanisms) between the review and planning phases at system level?**

Participants described a range of links between the review and planning phase. This included periodic external inspection (LV); planning and funding cycles which require plans and their review/revision every three years (CZ), and annual arrangements for setting budgets and place numbers. They tend to be stronger when there is more central control over systems and where government support providers to focus on labour market related training interventions. It is less common in countries with more autonomy to providers (SE) and expectations that they act to reflect labour market and social needs in their area.

In particular:

- Data collection and subsequent analysis of course provision and take up together with estimates of demand, supply, shortages of skills and labour market impacts inform the planning at national level of training requirements to be met by providers e.g. no of apprenticeships, number of financed enrolments per sector, providers' budgets.
- The review of data (on labour market destinations and stakeholders' satisfaction surveys) is used for updating occupational / training standards and for curriculum development as well as for the professional development of teachers / instructors (with earmarked funding allocated based on all data collected).

**Where they exist, why and how do they work well? How could they be improved? What barriers prevent them being in place/working effectively?**

Participants reported that systems work well when they are well-specified and coordinated at system level, supported with resources and include mandatory requirements for providers (such as to conduct self-evaluation and to follow inspection/peer review requirements).

In particular:

- System level coordination in-line with mandatory requirements for quality assurance, inspection and resourcing VET ensure that the data collected and analysed has a purpose at system level and often for providers too.
- National data collection can be slow and analysis is not always carried out annually to feed into planning at system level. At provider level, the cycle of qualitative and quantitative data collection and its use for review and planning is faster and, sometimes, is useful for a specific context of a provider.
- One important challenge is the lack of capacity for using evaluation and review for planning and policy development, at both system and provider level. This is not always due to lack of capability but rather having staff with the time and resources. QA systems encourage providers to establish roles for this work.

- Support that is valued by providers include training in quality assurance, guidelines and methodological training.
- Where there is little mandatory drive to create and maintain systems, bottom-up compliance is variable.

**Case study: The Netherlands**

Closing the quality cycle and using data for planning is realised in largely autonomous VET providers in the Netherlands by a planning system which has the following ingredients:

- Formalised agreements between the Ministry and the VET providers, based on three national priorities, and the expectation of a quality culture embedded in VET providers.
- VET providers analyse the current situation and, based on this analysis they define their own goals and working plans.
- A national committee evaluates the quality of the working plans developed by the VET providers and determines if extra funds can be allocated for implementing the quality plan.
- Data is collected in response to the plan (to evaluate effects of changes implemented) and for planning changes (to assess changes in needs).

## 3. Discussion and reflection

### A. Challenges and success factors of different methods of data collection and use at system level

It is evident from the discussions at the PLA that successful methods of using data collected in the evaluation phase at the system level require qualitative as well as quantitative data. This has to come from qualitative questions in surveys and systematic approaches to engaging in dialogue with representatives of employers, learners, providers, trade unions and other bodies. By using only 'hard' data, we do not know the quality of the education process itself, including 'soft' aspects such as:

- How well informed is the IVET-provider of the need for skills at local level; for example, sometimes, data collected has not the required 'granularity' to be relevant at provider level about employers' satisfaction regarding the VET provision.
- How well are WBL and school-based VET education in tune with each other – for instance if they are at the same skill or if they aim at the same sub-set of competencies.
- Providing the student voice regarding the relevance and the usefulness of the training received and the quality of teaching, facilities and resources.
- Providing the teachers' voice on the relevance of the continuous professional development they receive and the qualifications they teach and the resources they have for teaching.
- The added value generated by the teaching and learning processes.
- The reasons for individuals' personal choice and their experiences – generally, aspects related to the process, guidance, organisational systems and communications.
- The definition of a "good" result (as the basis for quality judgement) - often culturally influenced

For 'soft' data collection, the student survey (existing students and graduates) emerged as one of the most used and effective methods. Such surveys can also find out more about the use of acquired skills and the distance between expectations and reality which is necessary to test the relevance of training provided. They can help to meet the high demand for data about 'success' in the transition to employment and social inclusion (post-graduation). This can establish destinations after training and progression in further learning or work. In the absence of administrative data on the employment situation of individuals after training, only a survey can expect to capture this for some of the graduates.

- Success factors relating to capturing qualitative and quantitative information through surveys include: Having up to date and accurate student databases so that responses can be linked to personal

characteristics and their preceding education at school and during their VET training. This also helps to assess whether responses are representative of the population of students/graduates.

- Having up to date and accurate information on students' whereabouts and means of contact so that a survey can reach them.
- Providing incentives to respond, enabling response through smartphones as well as laptops and several reminders in order to have a high response rate.
- Limiting the survey to gathering information which is not held already so that it is not over lengthy or felt to be repetitive.
- Having one or two follow-up surveys at intervals to graduates post-graduation at say two years and five years to capture progress and reflection on the relevance of their learning.
- Establishing the capacity at system level to manage the survey and interpret data.

Matching administrative data about students' education to other administrative datasets on their employment, tax payments and welfare benefits makes it is easier to establish graduates' destinations, pay, work relevance in relation to VET training and to repeat this at different intervals after graduation. At system level it is then possible to measure economic and social impacts.

Success factors relating to establishing and using administrative individual data matching include:

- Ensuring continuity (from each level of education and training to another) in data collection, through different databases by using a personal identification number – and, of course, securing individual data protection and the use of this data from individuals on enrolment.
- Having the capacity at system level to interpret data needs to be in place and analysis is timed to feed into decision making.
- Ensuring context data (in education databases) is linked to have a better more nuanced analysis of results, such as distinguishing between disadvantaged groups and others in terms of outcomes.
- Overcoming confidentiality requirements to enable analysis of smaller subgroups (usually through anonymisation)
- Disaggregating data analysis generated at system level so that it can be used by providers for their purposes.

## B. Challenges and success factors of different methods of data collection and use at provider level

As emerging from the discussions at the PLA, the key challenges for providers are:

- Having sufficient resources and skills to collect data, quality assure it and analyse it. These are often skills they do not have in their administrative staff.
- Establishing common systems where there is often a need to comply with different requirements for quality assurance across different types of provider (e.g. between public / private providers, between initial / continuous VET providers – often regulated differently and treated differently.

Success factors include:

- VET providers collecting survey data that conforms to a standard applied across all providers. This ensures data can be shared and providers can use the data for comparative purposes.
- Having mandatory data to be collected at provider level and included in national databases
- Encouraging non-mandatory data, collected by VET providers upon their own initiative and use which provides evidence for quality assurance frameworks and processes–
- Creating capacity at provider level to collect and use data for quality improvement through having a quality coordinator or other specialist staff to support data collection through surveys and databases.
- Reducing the burden of data collection and analysis at provider level through investment and development of appropriate instruments at system level may help.

### C. Challenges and success factors regarding the establishment of systemic links between data collection, review and planning

Based on the discussion at the PLA, key challenges include:

- Establishing systems which draw review phase data analysis into the planning phase for funding, delivery, quality improvement…
- Using data on a regular basis to inform decisions.

Success factors appear to be related to the implementation of some of the following factors:

- Closing the quality cycle by making comparative data available to providers and producing tailored comparative reports based on national data.
- Establishing key performance indicators and specific targets for VET sub-sectors and reflecting these in indicators for VET providers.
- Establishing systems and organisations to publish performance data on providers and to use the data to inform action on improving performance and informing stakeholders including prospective students and their parents.
- Establishing systems and organisations or formal partnerships (e.g. sectoral / regional stakeholders grouped) to review providers' quality plans or periodic delivery plans which must set out, for example, proposed resource uses, delivery targets and quality improvements against performance.
- Establishing systems to approve course provision in the context of national or regional estimates of need and affordability.
- Providing regional or national technical support for VET providers, to tackle data analysis and use for improvement.
- Investing in support (non-punitive) mechanisms to enhance the quality culture.
- Improving knowledge brokerage mechanisms by making the statistical and research data more 'user friendly' for practitioners and decision makers. In this regard, publicising data and adding specific messages for different stakeholders may help them understand their actions for improvement.
- Requiring negotiation and agreements between system level decision making and VET providers through timetables for determining allocations and resources in which systems for collecting data from providers feed into and influence their own process for resource allocation and planning.

## 4. Lessons learned

This section summarises a few takeaway points in view of the objectives of the PLA.

**What would strengthen the evaluation phase to inform the review phase at system and provider levels?**

There is a need to enhance capacity, at both levels – system and provider, for:

- Data analysis and evidence-based policy development – including data handling capacity (including new systems) for quicker data processing and analysis both to use data at system and provider levels and to reduce the burden at provider level.
- Developing monitoring and data collection systems at central level, to support VET providers – e.g. technical assistance in data collection and use, training in quality matters, guidelines and other methodological and system support.

Both of these require more resources and coordination though providers can support this process through dedicated quality assurance managers.

It is also evident that improvement at system level cannot be achieved without improving what happens in all providers. Thus, there is an obligation for all VET providers to implement a quality system (including data collection and its use) which follows a common framework and external standard setting. However, it is

recognised that this can be 'window dressing' producing lots of paper without meaning and acting upon their findings, 'doing the things right without doing the right things'.

Beyond this, it is clear that there is more to be done to improve what data is collected and how and what analysis is done to inform review. In particular

- There is a tendency for focusing on statistics / hard data and neglecting soft / qualitative data (mainly at process level) which may affect interpretation of the results. Much more needs to be done to engage stakeholders in qualitive data collection especially at provider level.
- The results of VET outcomes need to be contextualised in terms of the characteristics of the learners participating in the training (certainly before they are compared to other groups or other providers).
- More accurate data on students is needed to meet data protection requirements but also to enable data collection and the analysis of matched administrative datasets.
- At the individual level personal identifiers which are used throughout the education system can ensure the linkage of administrative data on an individual's education and background to their entry into employment and early years in the labour market. This also provides data 'anonymisation'.
- Common systems (arrangements, questionnaires, analyses of data variables) for surveys would provide more coherence and opportunities to share and benchmark data.
- Evaluation of the implementation of changes both of their processes and effects are seldom found. This would both make the case for maintaining any change or improvement and understand its added value.

Where there is a clear purpose for providers and/or national agencies to collect data and use it this becomes much more embedded in systems and processes.

**What would strengthen the relationship between the review and the planning phases?**

One important challenge with the link between evaluation and review is the lack of capacity for using analysis for planning and policy development, at both levels (system and provider). This can be enhanced where there are planning systems, quality assurance systems and resource allocation systems in place which build in the need for analysis and reporting within their periodic (annual or otherwise) activities and decision making.

There are often policy drivers for these which can include financial pressures and growing or declining needs for VET as well as the drivers for maintaining a VET system which is relevant in the eyes of all stakeholders and cost effective.

Beyond this, it is clear that there is more to be done to improve what would enable data which can be analysed to be used in the planning of VET. In particular

- Data collected at system level could be better disaggregated and published/made available to providers so that it can be used for benchmarking and planning purposes.
- Evaluation techniques could be better used to take back to policy makers what the benefits of changes and improvements have been and what further improvement should be taken into consideration at the planning phase.