



# **Provider Monitoring Report**

**National Examination Board in Occupational Safety  
and Health (NEBOSH)**

**31 October 2022 to 28 November 2022**

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# 1 Background

Five providers were monitored remotely between 31 October 2022 and 28 November 2022.

## 1.1 Scope

SQA Accreditation carries out quality assurance activity in line with its *Quality Assurance of Approved Awarding Bodies Policy*. This involves monitoring a sample of the awarding body's approved providers or assessment sites. Provider monitoring visits will be conducted in a consistent manner within and between providers.

The aim of monitoring is to:

- ◆ ensure the awarding body's compliance with SQA Accreditation's regulatory requirements
- ◆ confirm that quality assurance arrangements are being conducted by the awarding body in accordance with its prescribed arrangements
- ◆ ensure that quality assurance arrangements are being conducted in a consistent manner, within and between providers
- ◆ ensure that providers are receiving the appropriate guidance, support and documentation from the awarding body in order to facilitate a high standard of qualification delivery
- ◆ inform future audit and monitoring activity for the awarding body

All Principles may be included within the scope of the provider monitoring activity.

Awarding body documentation considered for review includes all documents banked on the awarding body's SharePoint Place at the time of provider monitoring and information supplied by providers to support provider monitoring activity. Restricted or commercially sensitive information gathered during SQA Accreditation's quality assurance activities is treated in the strictest confidence.

SQA Accreditation provider monitoring reports are written by exception focusing only on those areas where corrective action is required or recommended.

## 1.2 Provider Monitoring Report Timescales

NEBOSH provider monitoring dates: 31 October 2022 – 28 November 2022

Provider Monitoring Report approved by Accreditation Co-ordination Group on: 11 January 2023

Provider Monitoring Report to be signed by NEBOSH: 22 February 2023  
Action Plan to be emailed to [regulation@sqa.org.uk](mailto:regulation@sqa.org.uk) by NEBOSH: 22 February 2023

The process will apply in relation to the timescales specified above:

- ◆ The awarding body will be sent a copy of the Provider Monitoring Report by email.
- ◆ The awarding body must sign the copy of the Provider Monitoring Report and return by email to SQA Accreditation in accordance with the timescale specified above.
- ◆ The awarding body will also be emailed a copy of the Action Plan.
- ◆ The awarding body must complete and return the Action Plan in accordance with the timescale specified above and email this in Microsoft Word format to [regulation@sqa.org.uk](mailto:regulation@sqa.org.uk).
- ◆ SQA Accreditation will confirm when the Action Plan is appropriate to address the Issues and present it to Accreditation Co-ordination Group (ACG) for approval.
- ◆ Following approval by ACG, the awarding body will be sent a signed copy of the approved Action Plan by email.
- ◆ The awarding body must sign the Action Plan and return by email to SQA Accreditation.

The findings of this Provider Monitoring Report and the associated Action Plan will be published on SQA Accreditation's website following signed agreement.

SQA Accreditation will continually monitor progress towards completion of the proposed actions identified in the Action Plan and update the awarding body's Quality Enhancement Rating as appropriate.

### 1.3 Summary of Provider Monitoring Issues and Recommendations

An Issue has been recorded where evidence shows that the awarding body is not compliant with SQA Accreditation's regulatory requirements. The awarding body must address the Issues and specify corrective and preventative measures to address them through its Action Plan.

The Action Plan is e-mailed to NEBOSH as a separate document to the Provider Monitoring Report and must be submitted to SQA Accreditation in accordance with the timescale specified in 1.2.

As a result of the provider monitoring activity, five Issues have been recorded and five Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 13	The relevant section on the closing interview record sheets sampled at provider 2 did not contain any notes on the learner's response, contravening NEBOSH instructions.	Medium
2. Principle 15	Discussion with staff at provider 4 revealed that the Learning Partner is registering all learners for Open Book Examinations (OBEs) as UK-based learners, even if they are based overseas, contravening NEBOSH requirements.	Medium
3. Principle 16	Complaints policies at providers 1, 3, 4 and 5 either did not state or were not clear that learners can escalate complaints to NEBOSH as the awarding body and to SQA Accreditation as the regulator.	Low
4. Principle 17	Appeals policies at providers 1 and 2 stated that learners must go to the providers in the first instance and must not go directly to NEBOSH, contravening NEBOSH policy.	Low
5. Principle 18	Provider 4 had no documented malpractice and maladministration procedures.  Additionally, malpractice and maladministration policies at providers 2, 3 and 5 either did not state or were not clear that all suspected and actual cases of malpractice and maladministration would be reported immediately to NEBOSH.	Medium

A Recommendation has been noted where SQA Accreditation considers there is potential for enhancement. The awarding body is advised to address any Recommendations in order to reinforce ongoing continuous improvement. However, measures to correct or prevent these are not mandatory and therefore do not form part of the Action Plan.

Recommendation	Detail of Recommendation noted
1. Principle 6	NEBOSH may wish to consider providing individual feedback to learners who are referred for OBEs, producing a general examiner report for each Open Book Examination (OBE) and supplementing the past papers available for OBEs with the marking criteria used.
2. Principle 10	During the next review of the NEBOSH Health and Safety Management for Construction (UK), NEBOSH may wish to consider referencing the <i>Health and Safety at Work Act (1974)</i> and the <i>Management of Health and Safety at Work Regulations (1999)</i> and including lead as a hazardous substance.
3. Principle 12	NEBOSH may wish to review the timescales between the assessments for the three Units within the NEBOSH National Diploma for Occupational Health and Safety Management Professionals.
4. Principle 12	<p>Providers 1, 2, 4 and 5 raised concerns about the standardisation of marking for the practical assessments between different NEBOSH examiners.</p> <p>The Accreditation Auditor is aware that SQA Accreditation has raised an Extraordinary Issue in respect of the marking of practical assessments; therefore, this is noted as a recommendation only in this report.</p>
5. Principle 13	NEBOSH may wish to review the closing interview process generally and the style of questioning specifically.

## 1.4 Risk Rating of Issues

SQA Accreditation assigns a rating to each Issue recorded depending on the impact on or risk to the awarding body's operations, its SQA accredited qualifications and/or the learner.

Issues recorded during provider monitoring will count towards NEBOSH's Quality Enhancement Rating which will, in turn, contribute towards future quality assurance activity. Further detail on how the Quality Enhancement Rating is calculated can be found on the [SQA Accreditation website](#).

## 2 Good Practice, Issues and Recommendations

The following sections detail:

- ◆ good practice noted by providers
- ◆ Issues recorded and Recommendations noted against SQA Accreditation's regulatory requirements

### 2.1 Good Practice

The following areas of good practice were noted by providers:

Provider 1 highlighted the:

- ◆ open and professional nature of NEBOSH
- ◆ accessible and supportive staff
- ◆ OBEs, which have made qualifications more accessible to learners who may have been discouraged by the traditional examination format
- ◆ accommodation of examination booking requests where learners have missed deadlines

Provider 2 highlighted the:

- ◆ professional nature of the awarding body
- ◆ well-received implementation of the OBEs
- ◆ release of past papers for OBEs
- ◆ events for Learning Partners
- ◆ smooth process for the registration of examinations

Provider 3 highlighted the:

- ◆ approachability and openness of the awarding body
- ◆ good relationship with the external quality assurer
- ◆ OBE process

Provider 4 highlighted the:

- ◆ OBEs, which are well organised
- ◆ closing interview process, which is very useful

Provider 5 highlighted the:

- ◆ regular updates
- ◆ OBEs, which are a much better assessment than traditional examinations as they test the application of knowledge rather than memory
- ◆ smooth process for OBEs from the viewpoints of a learner and Learning Partner
- ◆ examiner feedback on practical assessments for each learner



## 2.2 Issues

**Regulatory Principle 13. The awarding body and its providers must ensure that they have systems and processes which ensure the effective quality assurance of accredited qualifications.**

The Accreditation Auditor viewed a selection of closing interview record sheets for learners following their completion of the OBEs for the NEBOSH National General Certificate in Occupational Health and Safety at provider 2.

Section 4.2.4 on page 4 of the *NEBOSH Learning Partner Closing Interview Guide (March 2022)* states that interviewers must 'listen carefully to the learner's answers and note their responses on the Closing Interview Record Sheet'. Documenting the learner response is an important part of the process as it records the learner's answers to the interviewer's specific questions about their OBE. As well as providing an accurate record of the interview, documenting the learner response allows any internal member of staff in the Learning Partner or any external auditor from NEBOSH or SQA Accreditation to compare the OBE answer template and the closing interview record sheet for any learner to validate authenticity.

However, the relevant section on the record sheets at provider 2 simply stated that the interviewer was satisfied that the submission was the learner's own work; it did not contain any notes on the learner response, contravening NEBOSH instructions. The provider had not been subject to a NEBOSH external quality assurance visit since the implementation of the OBE process and the related closing interview process, but a visit had been scheduled at the time of provider monitoring.

This has been recorded as **Issue 1**.

**Regulatory Principle 15. The awarding body must have effective, reliable and secure systems for the registration and certification of learners.**

Discussion with staff at provider 4 revealed that the Learning Partner is registering all their learners for OBEs as UK-based learners, even if they are based overseas. The number of learners overseas is relatively low.

The Learning Partner has been registering learners in this way as the staff felt that the location was not relevant since all their learners were subject to the same delivery, assessment, and quality assurance. This would not have been the case before the implementation of OBEs, as examinations were taken in person in designated locations.

Additionally, provider staff felt that changes to the Institution of Occupational Safety and Health (IOSH) membership have put learners at a disadvantage, since any NEBOSH learner who takes or has taken their qualification assessment outside the UK cannot use their NEBOSH qualification towards an IOSH membership after 31 August 2022.

The Accreditation Auditor sought clarification with NEBOSH staff after the provider monitoring activity.

NEBOSH staff confirmed the status quo with no changes in certification due to the implementation of the OBE process. They also confirmed that information is available on the NEBOSH explaining that SQA Accreditation does not currently regulate NEBOSH qualifications outside of the UK and therefore does not permit use of its logo on parchment, where learners took their assessments elsewhere. NEBOSH has communicated this information in a variety of ways, including directly to Learning Partners, in weekly updates, in a public statement and in a news article in the Learning Partner secure area of the website.

NEBOSH staff commented that it is a business decision not to approach SQA Accreditation to regulate overseas provision where the Learning Partner is UK based, as this would lead to overseas learners receiving a different certificate depending on the location of the Learning Partner.

While there has been abundant information and communication about certification and related matters, the Accreditation Auditor considers that NEBOSH needs to provide specific information to UK-based Learning Partners about registering overseas learners; this would ensure that Learning Partners are aware that they must register the learner's location accurately. Additionally, the Accreditation Auditor considers that NEBOSH needs to conduct quality assurance checks to ensure that relevant Learning Partners are registering learners appropriately.

This has been recorded as **Issue 2**.

**Regulatory Principle 16. The awarding body and its providers must have open and transparent systems, policies and procedures to manage complaints.**

Complaints policies at providers 1, 3, 4 and 5 either did not state or were not clear that learners can escalate complaints to NEBOSH as the awarding body and to SQA Accreditation as the regulator.

The Accreditation Auditor noted that, in practice, a learner with provider 5 had submitted complaints to NEBOSH, and staff at provider 5 had submitted complaints to both NEBOSH and SQA Accreditation. However, providers did not document the complaints policies sufficiently.

This has been recorded as **Issue 3**.

**Regulatory Principle 17. The awarding body and its providers must have clear, fair and equitable systems, policies and procedures to manage appeals.**

Appeals policies at providers 1 and 2 concerning results of assessments stated that learners must go to the providers in the first instance and must not go directly to NEBOSH. However, section 4 of the *NEBOSH Enquiries About Results (EARs) policy and procedures Version 19 (September 2022)* states that learners can make direct enquiries about results to NEBOSH.

Discussion with the Learning Partners concerned revealed that some learners had actually progressed appeals to NEBOSH successfully without being deterred by the provider policies, but both providers understood the need to reword the policies for clarity and fairness.

This has been recorded as **Issue 4**.

**Regulatory Principle 18. The awarding body and its providers must ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.**

Provider 4 had no documented malpractice and maladministration procedures. Several incidences of malpractice at the provider had been reported directly to NEBOSH, but the provider did not document the process.

Additionally, malpractice and maladministration policies at providers 2, 3 and 5 either did not state or were not clear that all suspected and actual cases of malpractice and maladministration would be reported immediately to NEBOSH. None of these providers had experienced any incidences of malpractice or maladministration at the time of provider monitoring but policies were still not sufficient in this regard.

This has been recorded as **Issue 5**.

## 2.3 Recommendations

**Regulatory Principle 6. The awarding body must continually review the effectiveness of its services, systems, policies and processes.**

Providers generally felt that it would be useful if NEBOSH could provide individual feedback to learners who are referred for OBEs to give information about where they need to improve.

Providers also stated that they would like a general examiner report for each OBE to show trends in answers and results.

Providers further stated that it would be useful if NEBOSH could supplement the past papers available for OBEs with the marking criteria used.

NEBOSH may wish to consider providing individual feedback to learners who are referred for OBEs, producing a general examiner report for each OBE and supplementing the past papers available for OBEs with the marking criteria used.

This has been noted as **Recommendation 1**.

**Regulatory Principle 10. The awarding body must ensure that its systems and processes for the identification, design, development, implementation and review of qualifications and assessments are fit for purpose.**

Provider 5 felt that the NEBOSH Health and Safety Management for Construction (UK) was missing important elements, such as the *Health and Safety at Work Act (1974)*, the *Management of Health and Safety at Work Regulations (1999)* and the inclusion of lead as a hazardous substance.

NEBOSH may wish to consider these elements during the next review of the qualification.

This has been noted as **Recommendation 2**.

**Regulatory Principle 12. The awarding body and its providers must ensure that they have the necessary arrangements and resources required to manage and administer qualification delivery and assessment.**

Provider 5 felt that the timescales between the assessments for the three Units within the NEBOSH National Diploma for Occupational Health and Safety Management Professionals should be longer. Staff felt that more time between Units was necessary to allow for the delivery, assessment submission and professional discussion.

NEBOSH may wish to consider reviewing the timescales associated with assessments in relevant Diploma qualifications.

This has been noted as **Recommendation 3**.

**Regulatory Principle 12. The awarding body and its providers must ensure that they have the necessary arrangements and resources required to manage and administer qualification delivery and assessment.**

Providers 1, 2, 4 and 5 raised concerns about the standardisation of marking for the practical assessments between different NEBOSH examiners. Staff also commented that the marking criteria of 'met/not met' meant that some learners failed the practical assessments because of minor administrative errors, such as not ticking a box in one section of the assessment.

The Accreditation Auditor is aware that SQA Accreditation has raised an Extraordinary Issue in respect of the marking of practical assessments; therefore, this is noted as a recommendation only in this report.

This has been noted as **Recommendation 4**.

**Regulatory Principle 13. The awarding body and its providers must ensure that they have systems and processes which ensure the effective quality assurance of accredited qualifications.**

Providers 1 and 2 felt strongly that the closing interview process was quite onerous and costly. None of the providers reported that any malpractice or maladministration had been detected with their learners as a result of closing interviews. Staff at providers 1 and 2 felt that instead of conducting closing interviews for every learner, it may be sufficient to conduct interviews on a sample basis. They also felt that NEBOSH could consider an alternative method for checking the authenticity of learner submissions.

Additionally, provider 5 felt that the style of questioning in the closing interviews could be improved. Presently, one style of question involves the interviewer stating two things the learner wrote and asking them which is more important and/or effective. Provider 5 suggested that it would be better to ask the learner to recall what they wrote, explain it and perhaps choose the more important and/or effective; this would allow the learner to better demonstrate knowledge of their answers.

NEBOSH may wish to review the closing interview process generally and the style of questioning specifically.

This has been noted as **Recommendation 5**.

### **3 Acceptance of Provider Monitoring Findings**