



Audit Report

Associated Sports Qualifications (ASQ)

6 February 2018

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1 Background

This was the third audit of ASQ since it was approved as an awarding body by SQA Accreditation in July 2013.

ASQ is an awarding body which has been established to provide qualifications to service the national governing bodies of sports. Its headquarters are at the Belfry near Sutton Coldfield.

1.1 Scope

SQA Accreditation carries out quality assurance activity in line with its *Quality Assurance of Approved Awarding Bodies Policy*. This states the type and frequency of our quality assurance activities, describes our reporting procedures and indicates how the awarding body's Quality Enhancement Rating is calculated.

As this was a full audit of ASQ, all regulatory requirements were included within the scope of the audit. Our quality assurance activities are conducted on a sampling basis and, consequently, not all aspects of the awarding body's systems, procedures and performance have been considered in this report to the same depth.

SQA Accreditation audit reports are written by exception focusing only on those areas where corrective action is required or recommended. Consequently, this approach to audit reporting does not detail areas where compliance or good practice was found.

The audit was designed to ensure ASQ complies with SQA Accreditation's regulatory requirements namely:

- ◆ *SQA Accreditation's Regulatory Principles (2014)*
- ◆ *all Regulatory Principles Directives*
- ◆ the awarding body's Accreditation Licence

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

1.2 Audit Report and Action Plan Timescales

ASQ: audit date:	6 February 2018
Audit Report approved by Accreditation Co-ordination Group on:	14 March 2018
Audit Report to be signed by ASQ:	27 April 2018
Action Plan to be e-mailed to regulation@sqa.org.uk by ASQ:	27 April 2018

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

- ◆ The awarding body will be sent two signed copies of the Audit Report by post.
- ◆ The awarding body must sign both copies of the Audit Report and return one by post to SQA Accreditation in accordance with the timescale specified above.
- ◆ The awarding body will also be e-mailed a copy of the Audit Report (for information only) and an electronic copy of the Action Plan.
- ◆ The awarding body must complete and return the Action Plan in accordance with the timescale specified above and e-mail this in Microsoft Word format to 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 two signed copies of the approved Action Plan by post.
- ◆ The awarding body must sign both copies of the Action Plan and return one by post to SQA Accreditation.

The findings of this Audit 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 Audit 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 ASQ as a separate document to the Audit Report, and must be submitted to SQA Accreditation in accordance with the timescale specified in 1.2. As a result of the audit and post-audit activities, three Issues have been recorded and four Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 6	No centralised version control system is in place to monitor current versions of documents and review timescales.	Medium
2. Principle 9	Qualification design development policies as they currently stand are high level only and provide no details as to the process or procedures followed by the awarding body.	High
3. Principle 15	The awarding body utilises a third-party registration system for candidate records and certificates, but no service-level agreement exists between these two parties.	Medium

A Recommendation has been noted where SQA Accreditation considers there is potential for improvement. The awarding body is advised to address any Recommendations noted as good practice. 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 1	Conflict of interest (COI) declarations to be refreshed yearly.
2. Principle 1	Clarify the timescales in which the Operation Committee meets within the Terms of Reference (TOR), and include the yearly review of business objectives as part of the Strategic Board TOR.
3. Principles 3, 4	Clarify how the risk register scorings are derived, either by adding a note within the risk register or create a policy to address this absent information.
4. Principle 6	Review, and amend where appropriate, policies and procedures to neutralise the regulatory authority references and to amend references to 'SQA' to SQA Accreditation.

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 the audit will count towards ASQ'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 Detail of Audit Issues and Recommendations

The following sections detail Issues recorded and Recommendations noted against SQA Accreditation's regulatory requirements.

2.1 Issues

Regulatory Principle 6. The awarding body and its providers shall maintain accurate documents, records and data.

The Accreditation Auditors noted that there was a significant number of awarding body policies that appear to be either in review or obsolete, with differing versions of the same documents appearing either on SQA Info Centre, or having been provided to SQA Accreditation. It was established that the awarding body does not have a centralised version control system in place, although it does date and provide version numbers at the bottom of each policy. However, it is the oversight of these versions that is absent, and due to the number of the documents that the awarding body has, the various versions could potentially confuse and therefore pose a risk.

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

Regulatory Principle 9. The awarding body shall ensure that it has robust systems and processes for the identification, design, development, implementation and review of qualifications, which meet the needs of users.

The Accreditation Auditors reviewed, in detail, the awarding body qualification development and review policies that are currently in place, which consist of two main policies: '*Procedure for Developing & Reviewing Units and Qualifications – SQA, 28/11/2017RP V1*' and '*ASQ Strategy Guidance/Overview for Qualification and Assessment Material Developers – UK regulatory framework – Coaching qualifications*'. They discussed with the awarding body representatives that the information within both documents are high-level policies only, with no corresponding processes/procedures. The policies do not adequately reflect, in depth, the appropriate stages that should be carried out when developing and reviewing qualifications. There is a lack of detail to describe exactly how the awarding body develops and reviews qualifications; rationale for development and review; who precisely is involved; and the stages and the timeframes within which the various stages are completed.

Furthermore, the current policies refer to a review of qualifications that will be initiated at year three, unless prompted sooner. However, there is no acknowledgement to SQA Accreditation's zero uptake policy, which would necessitate a review before or up to two years after the qualification has been accredited if no candidates have been registered.

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

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

The awarding body representative outlined the procedures for both registering and certifying candidates. It was understood by the Accreditation Auditors that the awarding body relies on a third party to collect appropriate candidate data and register candidates onto specific courses. The third party is ASQ's only provider for this service. ASQ thereafter pull candidate data from the provider's CRM system to certificate candidates. However, it would appear that no contractual agreement exists between the two parties, where one would expect a Service Level Agreement (SLA) to exist. The Accreditation Auditors consider this to be a potential risk to the awarding body in case of loss of candidate data or any potential breaches of data protection for ASQ learners.

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

2.2 Recommendations

Regulatory Principle 1. The awarding body shall have clearly defined and effective governance arrangements.

The Accreditation Auditors reviewed the processes and procedures for conflicts of interest, as well as reviewing evidence supporting the process. The Accreditation auditors were able to see completed COI declarations, but noted that staff only sign these at the beginning of their employment and won't be asked to complete them again. It would be advisable for the awarding body to seek to refresh these COI declarations and continue to do so yearly, based on best practice.

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

The Accreditation Auditors reviewed the awarding body Terms of Reference (TOR) for the two key elements of governance: Operations Committee and Strategic Board. There were minor aspects requiring clarification, firstly in terms of the Operations committee. It is recommended that the TOR for this committee is amended to include the number of times it meets yearly and the context in which it meets, which according to awarding body representatives was always just before the Strategic Board meetings. Secondly, it is recommended that the TOR for the Strategic Board are amended to include, as a standing agenda item, a review of the business objectives.

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

Regulatory Principle 3. The awarding body shall have clearly defined business planning processes which show evidence of management commitment, decision making and ongoing review.

Regulatory Principle 4. The awarding body shall continually review the effectiveness of its business services, systems, policies and processes.

The Accreditation Auditors reviewed the awarding body risk register. It was noted that it was based on a probability impact scoring mechanism, which determined whether a risk was Low, Medium or High. However, there was no policy to confirm the scoring mechanism or how items are escalated to the risk register, or when review of the identified risks take place. Therefore it is recommended that a short policy is produced to provide such information.

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

Regulatory Principle 6. The awarding body and its providers shall maintain accurate documents, records and data.

The Accreditation Auditors noted during a review of awarding body documentation that there were many references to an alternative UK regulator where all UK regulators including SQA Accreditation were pertinent. Also, there were references to one particular set of regulations where SQA Accreditation Regulatory Requirements should also have been noted. Therefore, it is recommended, whilst conducting a main policy review, that such references are neutralised and that if any reference is made directly to SQA Accreditation, it should be noted as such as not just referenced as SQA.

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