Audit Report

PAA/VQ-SET

24 April 2018

Contents

1 Background

This was the thirteenth audit of PAA\VQ-SET since it was approved as an awarding body by SQA Accreditation in 1998.

PAA\VQ-SET is a nationally-recognised awarding body offering vocational qualifications covering a wide range of sectors including Chemical, Pharmaceutical and Petro-Chemical, Polymers and Composites, Process Manufacturing and Signmaking.

The awarding body operates to BS EN ISO 9001:2008 standard.

PAA\VQ-SET's headquarters are in Lichfield.

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.

This was a scoped audit of PAA\VQ-SET based upon, but not limited to, the areas identified within SQA Accreditation's awarding body audit and provider monitoring strategic plan for 2017 – 18. The audit included aspects of the awarding body's operational activities in respect of Regulatory Principles 1, 8, 11, 14 and 15.

In addition to the above, aspects of the awarding body's systems and procedures in respect of the review and maintenance of SQA accredited qualifications, covered by Regulatory Principle 9, were included within the scope.

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 PAA\VQ-SET 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 PAA\VQ-SET'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

PAA\VQ-SET: audit date:	24 April 2018
Audit Report approved by Accreditation Co-ordination Group on:	16 May 2018
Audit Report to be signed by PAA\VQ-SET:	27 June 2018
Action Plan to be e-mailed to regulation@sqa.org.uk by PAA\VQ-SET:	27 June 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 PAA\VQ-SET 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, no Issues have been recorded and five Recommendations have been noted.

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 3	PAA\VQ-SET may wish to actively review the status of centres that have not registered candidates for some time, whilst giving due consideration to applying dormancy status on a qualification or suite of qualification basis.
2. Principles 5 and 6	PAA\VQ-SET may wish to consider a review of documentation currently held on SharePoint and other locations, to ensure that it remains current and fully reflects the breadth of policies and procedures used by the awarding body in supporting SQA accredited provision.
3. Principle 12 and 13	PAA\VQ-SET may wish to consider reviewing some of the terminology contained in the *Complaints and Disputes Process Flow Chart, V4 –SQA April 2015,* as well as *Procedure 8.3 Corrective Action, Issue C – Rev 5 SQA, April 2015*, to avoid confusion around a stakeholder's ability to bring an appeal to the qualification regulator.
4. Principle 14	PAA\VQ-SET may wish to consider a review of the *Malpractice/Maladministration Policy*, *Final Version, April 2015*, the *Malpractice and Maladministration Process Flow Chart*, *V4 – SQA, April 2015*, as well as *Procedure 8.2 Control of a Nonconforming Product, Issue C – Rev 5 SQA, April 2015*, to ensure that the wording used is sufficiently precise in respect of the need to notify SQA Accreditation of suspected malpractice and/or maladministration at the point of discovery.

5. Principle 15	Whilst acknowledging that the awarding body promotes the availability of unit certificates, it may wish to upload a copy of its current unit certificate exemplar to SharePoint.

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 PAA\VQ-SET'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

No Issues have been identified as part of this audit.

2.2 Recommendations

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

A review of the current list of PAA\VQ-SET's approved centres, submitted in March 2018, identified centres that have not registered candidates for over 12 months for their respective portfolios of SQA accredited qualifications.

PAA\VQ-SET's *Guide for Centres (SQA), QP2.6/08/14 SQA*, revised August 2014, provides information on the requirements for centres to achieve and maintain approval status, but this does not appear to specifically address any requirements around the uptake of SQA accredited provision.

However, qualification uptake is referenced in PAA\VQ-SET's *Centre Portfolio*, *QP2.5/03/18 SQA*, revised March 2018, in the context of the awarding body's definition of approved centres:

- *Active – registering Learners and certificating during the year.*
- *Dormant – all Learners certificated, no further registrations planned; or registered learners but no assessment activity for various reasons.*

Furthermore, the document notes the following in respect of the withdrawal of a centre from offering a qualification:

Should a Centre wish to withdraw from offering PAA\VQ-SET qualifications and be placed in Dormancy status they should contact PAA\VQ-SET and request a Dormancy status confirmation letter.

If the Centre does not have any current learners Dormancy status will be confirmed on receipt of the signed letter.

If the Centre has current Learners, PAA\VQ-SET will require information about how the Centre will be taking all reasonable steps to protect the interests of these Learners. If insufficient information is provided, the Centre will be notified in writing and further information requested. Notification of a centre's intention to become dormant may also affect a centre's risk rating and sanctions may be issued, if appropriate, to protect the interests of learners and/or the integrity of PAA\VQ-SET's qualifications.

Centre Dormancy status will only be confirmed by PAA\VQ-SET once PAA\VQ-SET has been satisfied that as far as possible the interests of learners have been protected.

Given the above information and guidance, the inference appears to be that centres should consider dormancy status if there are no registrations or assessment activity within a given year for their full portfolio of approved qualifications. It also appears that the initial decisions around the need for dormancy status are made by the centre to a large extent, although subsequently confirmed by the awarding body.

The audit team is clear that the awarding body's intention with such guidance and information is to encourage dialogue around a centre's portfolio of qualifications and to have a mutually-agreed position regarding approval status and qualification availability. However, such a holistic approach to learner registrations in respect of the full portfolio of qualifications, allied to the inferred timescale around activity, gives scope for centres to retain qualification approval and, in the case of the centres noted in the current centre list, actual centre approval status, in qualification areas where there is no current or planned future activity.

Therefore, PAA\VQ-SET may wish to actively review the status of centres that have not registered candidates for some time, whilst giving due consideration to applying dormancy status on a qualification or suite of qualification basis.

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

Regulatory Principle 5. The awarding body shall provide clear information on its procedures, products and services and ensure that they are accurate and appropriate to SQA accredited qualifications.

And

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

On reviewing SharePoint, the audit team noted that a number of Regulatory Principles do not have any documentation, whilst there remains a range of what appears to be historical information available in respect of other Regulatory Principles.

During the audit, awarding body representatives did suggest that there had been some issues with documentation being 'lost' in the transition from Quickr, and this was acknowledged by the audit team.

A review of the available documentation on SharePoint, as well as that available on the awarding body website, indicated that a number of minor adjustments may be required. For example, the version of the awarding body's *Recognition of Prior Learning (RPL) Policy*, Final Version – January 2016, on the website does only makes reference to Ofqual's regulatory requirements.

Likewise, the awarding body's *Guide for Centres (SQA), QP2.6/08/14 SQA*, revised August 2014, requires a slight amendment to provide a correct link to the SQA Accreditation

website, as well as correctly identifying the regulatory principles document as *SQA Accreditation's Regulatory Principles (2014).*

Therefore, PAA\VQ-SET may wish to consider a review of documentation currently held on SharePoint and other locations, to ensure that it remains current and fully reflects the breadth of policies and procedures used by the awarding body in supporting SQA accredited provision.

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

Regulatory Principle 12. The awarding body and its providers shall have open and transparent systems to manage complaints.

And

Regulatory Principle 13. The awarding body and its providers shall have clear, fair and equitable procedures to manage appeals.

PAA\VQ-SET may wish to consider reviewing some of the terminology contained in the *Complaints and Disputes Process Flow Chart, V4 –SQA April 2015,* as well as *Procedure 8.3 Corrective Action, Issue C – Rev 5 SQA, April 2015*, to avoid confusion around a stakeholder's ability to bring an appeal to the qualification regulator.

Whilst accepting that these documents are for internal use only, the awarding body may wish to consider amending the terminology used in them to reflect the fact that any referral to SQA Accreditation must constitute a complaint.

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

Regulatory Principle 14. The awarding body and its providers shall ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.

A review of PAA\VQ-SET's *Malpractice/Maladministration Policy*, *Final Version, April 2015*, *Malpractice and Maladministration Process Flow Chart*, *V4 – SQA, April 2015*, as well as Procedure 8.2 Control of a Nonconforming Product, Issue C – Rev 5 SQA, April 2015, would suggest that the wording used may not be precise enough in respect of notifying the qualification regulator of suspected malpractice and/or maladministration at the point of discovery.

The current policy states that PAA\VQ-SET will 'conduct a full investigation of instances of alleged or suspected malpractice/maladministration' and will 'immediately advise the Regulatory Authorities of cases, or suspected cases, of malpractice/maladministration, as deemed appropriate to meet regulatory requirements'. The audit team would contend that the phrase 'as deemed appropriate' suggests a further element of decision-making by the awarding body that has the potential to lead to suspected cases of malpractice and/or maladministration not being notified to the qualification regulator.

In respect of the process flow chart, it would appear that SQA Accreditation is only notified of allegations of malpractice and/or maladministration upon the outcome of an investigation,

but only if deemed appropriate. Once again, there is a suggestion of an additional decision-making process at awarding body level that affects the process of reporting instances of maladministration and/or malpractice to SQA Accreditation.

Lastly, Procedure 8.2 states that 'if there are reasonable grounds for the allegation' PAA\VQ-SET will undertake an investigation to determine whether malpractice and/or maladministration has occurred, and again indicating a further decision-making process by concluding that 'SQA Accreditation will be advised, as appropriate'.

The audit team understand that no instances of malpractice and/or maladministration have occurred at PAA\VQ-SET since the previous audit in 2014, but believes that the lack of precision and consistency in language used across all three documents has the potential to lead to a failure to report future instances, should they arise.

Therefore, PAA\VQ-SET may wish to consider a review of its policy and procedures linked to malpractice and maladministration to ensure that the wording used is sufficiently precise in respect of the need to notify SQA Accreditation of suspected malpractice and/or maladministration at the point of discovery.

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

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

PAA\VQ-SET's *Centre Portfolio*, *QP2.5/03/18 SQA*, revised March 2018, notes the following in respect of unit credit accumulation:

PAA\VQ-SET offers certificates for units if required by Centres and Learners in addition to the full qualification, fees for these can be found in the PAA\VQ-SET fee structure which can be downloaded from the PAA\VQ-SET website.

Unit Credit allows Learners to plan and monitor their progress within the Scottish Credit and Qualifications Framework as well as providing opportunities to gain further accreditation in other qualifications containing the same units.

Whilst acknowledging that the awarding body promotes the availability of unit certificates, it may wish to upload a copy of its current unit certificate exemplar to SharePoint.

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

3 Acceptance of Audit Findings

For and on behalf of PAA\VQ-SET:	For and on behalf of SQA Accreditation:
Print name	**Print name**
.....	.....
Signature	**Signature**
.....	.....
Designation	**Designation**
.....	.....
Date	**Date**
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