



# **Audit Report**

**The Royal Environmental Health Institute of  
Scotland (REHIS)**

**7 October 2021**

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# 1 Background

This was the first audit of Royal Environmental Health Institute Scotland (REHIS) since it was approved as an awarding body by SQA Accreditation on 11 November 2020.

REHIS is an awarding body which has been established since 1983 following the merger of the Royal Sanitary Association of Scotland (founded 1875) and The Scottish Institute of Environmental Health (founded 1891). REHIS was established to benefit the community and to promote the advancement of Environmental Health. REHIS delivers qualifications in Food Hygiene, Food and Health, Hazard Analysis Critical Control Points (HACCP), Control of Infection, Occupational Health and Safety, First aid and Licensing. The qualifications accredited by SQA Accreditation are the Scottish Certificate for personal Licence Holders (SCLPH) and the Scottish Certificate for Personal Licence Holders (Refresher). REHIS headquarters are based in Torphichen Street, Edinburgh, however due to the ongoing pandemic the audit was conducted remotely.

## 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 REHIS, 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 REHIS 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 REHIS'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**

REHIS audit date:	7 October 2021
Audit Report approved by Accreditation Co-ordination Group on:	10 November 2021
Audit Report to be signed by REHIS:	23 December 2021
Action Plan to be emailed to <a href="mailto:regulation@sqa.org.uk">regulation@sqa.org.uk</a> by REHIS:	23 December 2021

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

- ◆ The awarding body will be sent a signed copy of the Audit Report by email.
- ◆ The awarding body must sign the copy of the Audit 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 copy of the Action Plan and return by email 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 emailed to REHIS 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 three Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 3	SQA Accreditation did not find evidence of an underpinning risk policy to support the risk register confirming how and when risks are identified, monitored, and reviewed.	Low
2. Principle 10	SQA Accreditation identified that there was no centralised recording of the quality assurance activities. This would provide REHIS with an oversight of all the ongoing quality assurance checks and the ability to identify any themes and timescales for next quality assurance activity.	Low
3. Principle 10	SQA Accreditation noted that there is no standardised quality assurance process or checks conducted by training advisers at centre quality assurance visits.	Low

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.

<b>Recommendation</b>	<b>Detail of Recommendation noted</b>
1. Principle 3	It is recommended that the awarding body creates a contingency plan, setting out a clear strategy in the event of potential disruption to the development, delivery and awarding of the awarding body's qualifications.
2.Principle 6	It is recommended that all policy and procedures are uploaded to SharePoint, as well as any relevant information which may help inform future audits.
3. Principle 3, 4 and 10	It is recommended that REHIS consider creating risk-based criteria and / or profiles in relation to their centres which will help assess / inform REHIS of any potential risks. It is also recommended that REHIS consider asking potential centres if they have ever had their approval status withdrawn or had any sanctions with any other awarding body and for this to be documented.

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

The SQA Accreditation Auditors reviewed the awarding body's risk register which clearly identifies that risks are categorised and documented. This is reviewed on an annual basis and is discussed at the Annual General Meetings. The risk register was clearly laid out and described the different types of risk, looking at the likelihood and the severity of the risk before and after mitigations. The risk register also categorises the risks onto a RAG risk score of Red, Amber and Green. However, there is no documented process or policy outlining how risk is identified, scored and how and when it is monitored and reviewed.

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

**Regulatory Principle 10. The awarding body shall ensure that it has the necessary arrangements and resources for the effective delivery, assessment and quality assurance of SQA accredited qualifications.**

The two REHIS training advisers conduct quality assurance checks on centres on an ongoing basis. After any new centres have submitted their application to deliver their qualifications, they will have their delivery observed by a training adviser as part of the process to become an approved training centre. REHIS have an Excel spreadsheet which details the courses and number of registrations, and there are random checks conducted if any suspicions are raised about malpractice or maladministration. This Excel spreadsheet does not go into detail on any Issues identified by the quality assurance and each training adviser schedules their own diary with key dates for any quality assurance activity. Therefore, the awarding body has no oversight of any Issues identified, whether there are any occurring themes across training centres, and have no details of the scheduling of any quality assurance activity.

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



**Regulatory Principle 10. The awarding body shall ensure that it has the necessary arrangements and resources for the effective delivery, assessment and quality assurance of SQA accredited qualifications.**

The Accreditation Auditors did not evidence a standardised approach in terms of the quality assurance processes or checks conducted at centre quality assurance visits. There was no sampling strategy developed or any guidance provided to the training advisers or the training centres as to sampling size and a rationale.

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

## **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.**

The Accreditation Auditors discussed the importance of a contingency plan in the event of any disruptions to the business. Although this was recognised as important in business planning, there was no contingency plan documented.

It is therefore recommended that the awarding body creates a contingency plan, setting out a clear strategy in the event of potential disruption to the development, delivery and awarding of the awarding body's qualifications.

This has been noted as **Recommendation 1**

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

It is recommended that all policy and procedures are uploaded onto SharePoint ensuring using version controls to monitor the correct versions along with any other relevant information to help inform future audits.

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.**

**Regulatory Principle 10. The awarding body shall ensure that it has the necessary arrangements and resources for the effective delivery, assessment and quality assurance of SQA accredited qualifications.**

The Accreditation Auditors discussed how the awarding body identified any risks within their centres, including new centres coming forward to deliver their qualifications. The discussion confirmed that it was taken on trust and the awarding body would recognise when things were not working well. It was thought to be best practice to consider creating risk-based criteria and / or profiles in relation to their centres which will help assess / inform REHIS of any potential risks. REHIS should consider asking potential centres if they have ever had their approval status withdrawn or had any sanctions with any other awarding body and for this to be documented.

This has been noted as **Recommendation 3**

### **3 Acceptance of Audit Findings**

For and on behalf of REHIS:

For and on behalf of SQA Accreditation: