

Audit Report

Royal Environmental Health Institute of Scotland (REHIS)

08 October 2024

Contents

1 B	ackground	1
1.1	Scope	1
1.2	Audit Report and Action Plan Timescales	2
1.3	Summary of Audit Issues and Recommendations	3
1.4	Risk Rating of Issues	5
2 D	etail of Audit Issues and Recommendations	6
2.1	Issues	6
2.2	Recommendations	7
3 A	cceptance of Audit Findings	7

1 Background

This was the second audit of the Royal Environmental Health Institute of 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 neadquarters are based in Torphichen Street, Edinburgh.

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 remote 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 Regulatory Principles (2021)
- all Regulatory Principle 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:	08 October 2024
Audit Report approved by Accreditation Co-ordination Group on:	23 October 2024
Audit Report to be signed by REHIS:	06 December 2024
Action Plan to be emailed to regulation@sqa.org.uk by REHIS:	06 December 2024

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.
- 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, one Issue has been recorded and three Recommendation have been noted.

Issue	Detail of Issue recorded	Risk rating
1.Regulatory Principle 15 and Regulatory Principle Directive RPDIR - 3	REHIS must update the title of qualifications R656 04 and R657 04 to the format agreed at the time of accreditation.	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.

Recommendation	Detail of Recommendation noted
1. Principle 7	It is recommended that <i>Director of Training, Job Description CX/013:27/04/21</i> , is updated to include the Accountable Officer responsibilities.
2. Principle 18	It is recommended that <i>Regulations, Version 4: July 2023, 13.3</i> is amended to advise any centre and or learner with knowledge about suspected/actual incidences or malpractice or maladministration must report without delay in the first instance to REHIS who will then notify SQA Accreditation.
3. Principle 12	It is recommended that <i>Quality Assurance/Audit Visit,</i> <i>SW/SCPLHQA checklist/Amended September 2024</i> be updated to include the requirements of <i>Supplement Number: 6, 01 May</i> <i>2020.</i> This will allow REHIS to test compliance with the requirements.

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 <u>SQA Accreditation</u> 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 15. The awarding body must have effective, reliable and secure systems for the registration and certification of learners.

Regulatory Principles Directive RPDIR — 3. Logos and certificate requirements for SQA accredited qualifications

In preparation for the audit, SQA Accreditation Auditors reviewed REHIS's current certificates for both the Scottish Certificate for Personal Licence Holders at SCQF Level 6, F656 04 and Scottish Certificate for Personal Licence Holders (Refresher) at SCQF Level 6, R657 04. It was noted that within the title of each qualification additional wording had been added as shown below.

- Scottish Certificate for Personal Licence Holders (SCPLH) qualification at SCQF Level
 6
- Scottish Certificate for Personal Licence Holders (Refresher) (SCPLH) qualification at SCQF Level 6

Although these qualifications are widely known as SCPLH qualifications, as per RPDIR -3 the certificate must be in the agreed format at the time of accreditation.

This has been recorded as Issue 1.

2.2 Recommendations

Regulatory Principle 7. The awarding body must have an effective approach for communicating with its staff, stakeholders and SQA Accreditation.

On review of the *Director of Training, Job Description, CX/013:27/04/21* it was noted that this does not include the responsibility of the Accountable Officer. SQA Accreditation Auditors recommend the job description is updated to include the Accountable Officers responsibilities.

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

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

On reviewing *Regulations, Version 4: July 2023,* it was noted that paragraph 13.3 currently states 'Any centre and or learner with knowledge about suspected/actual incidences or malpractice or maladministration must report without delay in the first instance to REHIS or to SQA Accreditation.'

SQA Accreditation Auditors recommended amending 13.3 to: Any centre and or learner with knowledge about suspected/actual incidences or malpractice or maladministration must report without delay in the first instance to REHIS who will then notify SQA Accreditation.

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.

During the audit SQA Accreditation Auditors discussed *Supplement Number: 6, 01 May 2020* with REHIS representatives. The document states that 'Examination papers must be held securely by the centre at all times. Examination papers must be retained by the centre for a minimum period of twelve months from the date of an examination.' There was no evidence to suggest that these requirements are not being adhered to, but it is a recommendation of the Accreditation Auditors that these requirements could be added to *Quality Assurance/Audit Visit, SW/SCPLHQA checklist/Amended September 2024*, to allow REHIS External Verifiers the opportunity to test compliance which in turn would increase quality assurance robustness.

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

3 Acceptance of Audit Findings