

Provider Monitoring Report

Associated Sports Qualifications (ASQ)

27 November 2019

Contents

1 E	Background	3
1.1	Scope	3
1.2	Provider Monitoring Report Timeline	4
1.3	Summary of Provider Monitoring Issues and Recommendations	5
1.4	Risk Rating of Issues	5
2 (Good Practice, Issues and Recommendations	6
2.1	Good Practice	6
2.2	Issues	7
2.3	Recommendations	8
		40
3 F	Acceptance of Provider Monitoring Findings	10

ASQ: 27 November 2019

1 Background

One assessment location used by the ASQ provider was monitored on 27 November 2019. Both the written assessment and practical assessment were included within the scope of the provider monitoring visit.

ASQ: 27 November 2019

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

ASQ provider monitoring date: 27 November 2019

ASQ: 27 November 2019

Provider Monitoring Report approved by

Accreditation Co-ordination Group on: 8 January 2020

Provider Monitoring Report to be signed by ASQ: 19 February 2020

Action Plan to be emailed

to regulation@sqa.org.uk by ASQ: 19 February 2020

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

- The awarding body will be sent two signed copies of the Provider Monitoring Report by post.
- ♦ The awarding body must sign both copies of the Provider Monitoring Report and return one by post to SQA Accreditation in accordance with the timescale specified above.
- ◆ The awarding body will also be emailed a copy of the Provider Monitoring 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 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 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 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.

ASQ: 27 November 2019

The Action Plan is e-mailed to ASQ 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, one Issue has been recorded and two Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principles 10 and 6	During the multiple-choice assessment, learners were not seated in a classroom-style arrangement or with adequate space between each learner, contravening awarding body instructions and potentially compromising the integrity of the assessment. Additionally, the relevant awarding body documents do not give clear definitions of 'classroom-style' or 'adequate space'.	High

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.

ASQ: 27 November 2019

Recommendation	Detail of Recommendation noted
1. Principles 6 and 10	It is recommended that the relevant ASQ document is updated to include procedures to be followed when learners wish to leave the assessment room temporarily.
	It is also recommended that a wall clock is made a mandatory requirement, as this is normally standard practice in timed assessments.
2. Principles 6 and 10	The area in which the assessment took place was extremely cold with no heating. It is recommended that the <i>Risk</i> Assessment Form (Form CE135) issued by the provider is updated to include room temperature to ensure this is captured in the risk assessment. Additionally, ASQ may wish to remind its provider that the <i>Guidelines for Assessment sites – ASQ MCQ</i> assessments (H8) state that approved assessment sites should ensure that written assessments take place in a location with adequate heating.

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.

ASQ: 27 November 2019

Issues recorded during provider monitoring 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 Good Practice, Issues and Recommendations

ASQ: 27 November 2019

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 the tutor/assessor at the assessment location used by the provider:

- respected qualifications within the sector
- · appropriate qualification structure and assessment
- straightforward and easy to use paperwork
- positive learner feedback

2.2 Issues

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.

ASQ: 27 November 2019

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

ASQ has two documents relating to its multiple-choice question (MCQ) assessments. They are entitled: Guidelines for Invigilators – ASQ MCQ assessments (H7) and Guidelines for Assessment sites – ASQ MCQ assessments (H8).

In terms of preparation for the assessment, the *H7* document states that, 'the room should be quiet and prepared classroom style with adequate space between each candidate'. The assessment attended by the Accreditation Auditor took place in a small recessed area with no door, although it was very quiet and learners were not disturbed. The layout however meant that learners sat opposite each other sharing a small desk. Seven learners in total sat at four desks, two learners facing each other at three of the desks and one learner sitting at the fourth desk. The space between each desk was only about 30 centimetres.

The term 'classroom style' is commonly recognised as learners facing the same direction at separate desks, while 'adequate space' between candidates is commonly regarded as 1.25 metres, meaning the ASQ instructions have not been followed in this instance. The way the area had been set up by the venue meant that learners' assessment papers were in very close proximity, both to the learner sitting across and the learner sitting alongside. As a result, it may have been possible for a learner to see another learner's answers during the assessment, although there was no evidence of this being done. The learners are usually assessed in a different room at the venue but this room was closed for renovation and hence a different space was used. The Accreditation Auditor did not view the original room. Nonetheless, the area used for this assessment was not sufficient in terms of layout and potentially compromised the integrity of the assessment.

Additionally, although 'classroom style' is commonly recognised as learners facing the same direction at separate desks and 'adequate space' between desks is commonly regarded as 1.25 metres, the *H7* document does not actually include definitions of these terms; the *H8* document includes some information on how learners should be seated which could be interpreted as a definition of classroom style. However, both terms need to be defined clearly and be stated in both relevant documents to ensure the instruction is unequivocal and followed without exception.

This has been recorded as Issue 1.

2.3 Recommendations

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

ASQ: 27 November 2019

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 *Guidelines for Invigilators – ASQ MCQ assessments (H7)* do not include any information about procedures to be followed should learners require to leave the room temporarily during the assessment, for example to use the toilet. The Accreditation Auditor acknowledges that the assessment is only 45 minutes and therefore learners may not need to leave during this short time. However, it is good practice to have stated procedures for such eventualities to ensure that the integrity of the assessment is maintained at all times.

It is recommended that the relevant ASQ document is updated to include procedures to be followed when learners wish to leave the room temporarily.

Secondly, the *Guidelines for Invigilators – ASQ MCQ assessments (H7)* state, 'ideally there should be a wall clock all candidates can see'.

There was no wall clock or any time device present in the assessment area.

It is recommended that a wall clock is made a mandatory requirement, as this is normally standard practice in timed assessments.

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

ASQ: 27 November 2019

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

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 area in which the assessment took place was extremely cold with no heating. Learners remarked on the temperature to the tutor/assessor and kept all outdoor wear on throughout the assessment primarily for this reason. All learners had finished the assessment 30 minutes into the 45 minute time allowed before moving on to the practical assessment outside on the golf course and therefore they were not sitting for a long time. Nonetheless, the environment was very cold which could have impacted test performance.

The tutor/assessor completes a *Risk Assessment Form (Form CE135)* issued by the provider, which has to be completed before learners use the facilities. This form includes a section on the classroom which has subheadings for such things as lighting and trip hazards. It is recommended that this section of the form is updated to include room temperature, to ensure this is captured in the risk assessment. Additionally, ASQ may wish to remind its provider that the *Guidelines for Assessment sites – ASQ MCQ assessments (H8)* state that approved assessment sites should ensure that written assessments take place in a location with adequate heating.

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

3 Acceptance of Provider Monitoring Findings