Provider Monitoring Report

BIIAB

3 December 2018 to 4 December 2018

Contents

1   Background

Two providers were monitored between 3 December 2018 and 4 December 2018.

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

BIIAB provider monitoring date: 3 and 4 December 2018
Provider Monitoring Report approved by
Accreditation Co-ordination Group on: 13 February 2019

Provider Monitoring Report to be signed by BIIAB: 27 March 2019

Action Plan to be e-mailed
to regulation@sqa.org.uk by BIIAB   27 March 2019

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 e-mailed 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 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 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.

The Action Plan is e-mailed to BIIAB 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, three Issues have been recorded and no Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 6	The provider's data protection policy has not been updated to take account of recent changes in legislation.	Low
2. Principles 6, 10	Actions from External Quality Assurance (EQA) activity were not recorded in the awarding body's report.	High
3. Principle 10	The provider's Continuous Professional Development (CPD) records have not been updated in line with the awarding body's requirements.	Low

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.

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 provider monitoring will count towards BIIAB'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

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 providers:

Provider 1 highlighted: that the response from customer support is always excellent.

Provider 2 highlighted: that the system for ordering exam papers is easy to use.

2.2   Issues

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

The Accreditation Auditor noted that Provider 1's *Data Protection Policy June 2018* makes no mention of General Data Protection Regulations (GDPR). As of May 2018, the GDPR regulates the processing by an individual, company or organisation, of personal data relating to individuals in the European Union, and was incorporated into the Data Protection Act.

The awarding body and its providers must ensure that their policies and procedures take account of current legislation.

This has been recorded as **Issue 1**

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 Accreditation Auditor noted that at Provider 2, no actions had been recorded on the awarding body's previous EQA report. However, during discussion at Provider 2, it became apparent that the provider had completed actions from the previous EQA visit and had recorded them internally. Actions included sending staff CVs to the external verifier, as well as creating and amending review documentation and policy documents.

The *BIIAB EQA Handbook August 31 2016* gives the instruction 'On concluding the EQA visit remember to: Update the Annual Quality Assurance Plan'.

The awarding body and its providers must ensure any agreed actions from EQA visits are recorded, and that the awarding body rather than the provider retains a documented record of these, so that they can be monitored by the awarding body.

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 Auditor noted that at Provider 1, CPD records for two of the tutors had not been updated since 2014 and 2015. The *Training delivery and assessment strategy for Scottish alcohol licensing qualifications March 2013* states that CPD 'should be a planned process, reviewed on an annual basis, for example of an individual's performance review.'

The awarding body and its providers must ensure that their staff meet the required standards of the assessment strategy and are able to provide evidence of this.

This has been recorded as **Issue 3**

2.3   Recommendations

There were no recommendations

3   Acceptance of Provider Monitoring Findings

For and on behalf of BIIAB: For and on behalf of SQA Accreditation:

Print name   **Print name**

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Signature   **Signature**

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Designation   **Designation**

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Date   **Date**

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