



Provider Monitoring Report

Chartered Institute of Housing (CIH)

24 April 2019

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1 Background

One provider was monitored on 24 April 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

CIH provider monitoring date:	24 April 2019
Provider Monitoring Report approved by Accreditation Co-ordination Group on:	8 May 2019
Provider Monitoring Report to be signed by CIH:	19 June 2019
Action Plan to be emailed to regulation@sqa.org.uk by CIH:	19 June 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 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.

The Action Plan is emailed to CIH 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 three Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 6	Most of the qualification materials produced and used by the provider referenced the SQA accredited qualification, incorrectly, as the 'Level 2 Certificate in Housing Practice' rather than the 'CIH Certificate in Housing Practice at SCQF level 5'. The last external quality assurance report at the provider also referenced the qualification title incorrectly.	Medium

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 6	The updated <i>CIH Centre Agreement</i> does not contain a version number or date. CIH should ensure all documents display evidence of version control.
2. Principle 6	The most recent <i>CIH Centre Quality Assurance visit form</i> at provider 1 did not detail recommendations raised from the previous visit in the relevant section of the form as required. CIH should ensure that all sections of the external quality assurance reports are completed as intended.
3. Principle 10	The interim internal verification at the provider for the current cohort of candidates was undertaken after they completed the third of four units within the qualification. To optimise feedback to assessors, it may be more beneficial to conduct this process earlier. CIH may wish to give some supplementary guidance about the timing of interim internal verification.

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 CIH'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 the provider:

- ◆ good communication and information from CIH
- ◆ easy to contact relevant personnel who answer queries promptly
- ◆ location and content of the annual update meeting held in Glasgow
- ◆ efficient registration and certification system

2.2 Issues

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

Most of the qualification materials produced and used by the provider referenced the SQA accredited qualification incorrectly, as the 'Level 2 Certificate in Housing Practice' rather than the 'CIH Certificate in Housing Practice at SCQF level 5'. The last external quality assurance report at the provider also referenced the qualification title incorrectly.

The Accreditation Auditor understands that referencing the qualification as 'the level 2', is commonly recognised across the sector. The Accreditation Auditor also acknowledges that the titling of the qualification on the candidate certificate viewed at the provider was correct. Nonetheless, the referencing in documentation is not correct.

This Issue has been raised previously in the provider monitoring report of 2017–18 and as a recommendation in the provider monitoring report of 2018–19. In the latter report it was raised only as a recommendation to give the awarding body sufficient time for the embedding of the action from the 2017–18 report. However, this Issue persists and therefore is being raised again in this report.

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.

In 2018 CIH updated its *Centre Agreement* from a 2015 iteration, but the new agreement does not contain a version number or date.

CIH should ensure all documents display evidence of version control.

This been noted as **Recommendation 1.**

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

Section 4 of the *CIH Centre Quality Assurance visit form* requires the external quality assurer to complete the detail of any recommendations from the previous visit. However, this section had not been completed in the most recent report at the provider, even though several recommendations had been raised in the previous report. It is acknowledged that the external quality assurer did make reference to the previous recommendations in the body of the report.

Nonetheless, CIH should ensure that all sections of the external quality assurance reports are completed as intended.

This been noted as **Recommendation 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 the interim internal verification at the provider for the current cohort of candidates was undertaken after the candidates completed the third of the four units within the qualification. Since the purpose of interim internal verification is to give feedback to the assessor which can be acted upon as the qualification progresses, it may be more beneficial to conduct the interim sampling process earlier.

Accordingly, CIH may wish to give some supplementary guidance about the timing of interim internal verification.

This been noted as **Recommendation 3.**

3 Acceptance of Provider Monitoring Findings

For and on behalf of CIH:

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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