



Provider Monitoring Report

City and Guilds

26 February 2019 to 21 March 2019

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1 Background

Five providers were monitored between 26 February 2019 and 21 March 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

City and Guilds provider monitoring dates:	26 February to 21 March 2019
Provider Monitoring Report approved by Accreditation Co-ordination Group on:	29 May 2019
Provider Monitoring Report to be signed by City and Guilds:	10 July 2019
Action Plan to be e-mailed to regulation@sqa.org.uk by City and Guilds	10 July 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 City and Guilds 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 one Recommendation has been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 1, 14	The awarding body did not contact SQA Accreditation after discovering potential maladministration.	High
2. Principle 12	The providers' complaints policy did not adequately reference the organisations to which the candidates can escalate complaints.	Low
3. Principle 14	At more than one provider, the malpractice and maladministration policies fail to make any mention of maladministration.	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.

Recommendation	Detail of Recommendation noted
1. Principle 7	City and Guilds may wish to review how and when to communicate with their providers after reviewing the evidence for closing out any issues found during their quality assurance activity.

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 City and Guild'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:

Many of the providers visited highlighted the knowledge and availability of external verifiers (EVs) and the good working relationships that have been built with them.

2.2 Issues

Regulatory Principle 1. The awarding body shall have clearly defined and effective governance arrangements.

Regulatory Principle 14. The awarding body and its providers shall ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.

There had been an incident at provider 2 where the course tutor had downloaded and printed off the exam paper for the refresher course instead of the SCPLH course. The candidates sat the wrong exam and were resultted. This was picked up by the awarding body's external verifier (EV), the certificates were recalled, and the candidates were given the opportunity to sit the correct exam. This should have been reported to the relevant Regulation Manager at the time it was discovered, as it could be classed as maladministration.

Managing cases of suspected malpractice in examinations and assessments version 6.2 August 2018 states 'It should be noted however, that it is a regulatory requirement of SQA Accreditation that they are informed of any potential malpractice relating to their qualifications, not just confirmed cases.'

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

Regulatory Principle 12. The awarding body and its providers shall have open and transparent systems to manage complaints.

At Provider 5 the *Complaints Procedure* states that candidates have ‘the right to escalate it directly to the regulator where appropriate’. However, the procedure does not name or provide contact information for SQA Accreditation as the regulator. Any candidate undertaking an accredited qualification must be made aware of the right to complain to the SQA Accreditation.

This has been recorded as **Issue 2**

Regulatory Principle 14. The awarding body and its providers shall ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.

When reviewing documentation at the providers, the Accreditation Auditor noted that provider 1’s *Malpractice Policy* and provider 3’s *Malpractice Policy and Procedure* both fail to make any mention of maladministration.

City and Guilds’ *Managing cases of suspected malpractice in examinations and assessments* version 6.2, August 2018, quotes Regulatory Principle 14, stating ‘it is the awarding body’s responsibility to ensure it and its providers has safeguards to prevent and manage cases of malpractice and maladministration.’

The Accreditation Auditor is unsure how these providers could be safeguarding or managing maladministration when their policies make no mention of it.

This has been recorded as **Issue 3**

2.3 Recommendations

Regulatory Principle 7. The awarding body shall have effective arrangements for communicating with its staff, stakeholders and SQA Accreditation.

Providers have noted that after uploading evidence to the City and Guilds' walled garden' to close out any action points from External Quality Assurance (EQA) visits, they receive no more communication and have to assume that the evidence has been sufficient. City and Guilds may wish to contact their providers once the evidence has been received to let them know whether or not the issue is closed.

City and Guilds may wish to review how and when it communicates with its providers after reviewing the evidence for closing out any issues found during its quality assurance activity.

This has been noted as Recommendation 1

3 Acceptance of Provider Monitoring Findings

For and on behalf of City and Guilds:

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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