



Provider Monitoring Report

**Engineering Construction Industry Training Board
(ECITB)**

24 April 2024

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1 Background

One provider was monitored remotely on 24 April 2024.

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

ECITB provider monitoring date: 24 April 2024

Provider Monitoring Report approved by
Accreditation Co-ordination Group on: 8 May 2024

Provider Monitoring Report to be signed by ECITB: 20 June 2024

Action Plan to be emailed
to regulation@sqa.org.uk by ECITB: 20 June 2024

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

- ◆ The awarding body will be sent a copy of the Provider Monitoring Report by email.
- ◆ The awarding body must sign the copy of the Provider Monitoring 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 Action Plan and return by email 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 ECITB 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, four Issues have been recorded and five Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 9	The Data Protection documentation at provider 1 was concerned mainly with learner information relevant to another awarding body.	Low
2. Principle 14	The Equal Opportunities policy at provider 1 listed the protected characteristics in reference to the Equality Act (2010). However, gender reassignment and sex were missing from the list.	Low
3. Principle 16	The complaints procedure at provider 1 did not state that learners can escalate a complaint to SQA Accreditation as the regulator.	Low
4. Principles 18 and 13	The malpractice policy at provider 1 had incorrect definitions of maladministration and did not make it clear that all suspected and actual cases of malpractice and maladministration would be referred immediately to the awarding body. A recent ECITB external quality assurance activity at the provider referenced that the policy had been checked during approval with no action required.	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 5	It is recommended that ECITB consider whether it would be appropriate to specify a minimum number of hours for continuing professional development (CPD) to ensure consistency among staff across providers.
2. Principle 5	<p>Provider 1's website had incorrect qualification information.</p> <p>It is recommended that ECITB ensure that provider websites contain accurate information in terms of qualifications and qualification content.</p>
3. Principle 6	ECITB may wish to consider developing an on-screen tutorial for the Membership Services Portal to aid navigation for providers.
4. Principle 7	<p>It was noted that the minutes of standardisation meetings at provider 1 did not include any detail of the discussion or any relevant actions.</p> <p>It is considered best practice when preparing minutes that some detail of the discussion is included, as well as any actions. It is therefore recommended that providers are made aware of this.</p>
5. Principles 12, 13 and 5	<p>At the time of provider monitoring, the staff contact at provider 1 was unsure about some internal quality assurance requirements of the awarding body.</p> <p>It is recommended that ECITB clarify internal quality assurance requirements with providers.</p>

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 ECITB'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 the:

- ◆ quick receipt of certificates
- ◆ helpful staff
- ◆ regular external quality assurance
- ◆ updated Membership Services Portal
- ◆ general communication from the awarding body

2.2 Issues

Regulatory Principle 9. The awarding body and its providers must maintain accurate documents, records and data.

The Data Protection documentation at provider 1 was concerned mainly with learner information relevant to another awarding body. ECITB was named but the documentation was not clear in terms of what data the provider holds for ECITB learners and how this would be handled.

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

Regulatory Principle 14. The awarding body and its providers must ensure that its qualifications and their delivery and assessment are fair, inclusive and accessible to learners.

The Equal Opportunities policy at provider 1 listed the protected characteristics in reference to the Equality Act (2010). However, gender reassignment and sex were missing from the list. The list also included characteristics such as colour, nationality and ethnic origin; these are not protected characteristics listed in the Equality Act, as it incorporates all of these into race as a protected characteristic.

This has been recorded as **Issue 2**.

Regulatory Principle 16. The awarding body and its providers must have open and transparent systems, policies and procedures to manage complaints.

During the recent ECITB audit, the auditors identified that two ECITB documents, the ECITB Approved Centre Application and Recognition Form and the ECITB Approved Centre Monitoring Report, did not make it clear that providers could escalate a complaint to SQA Accreditation. This has been raised as an Issue in the ECITB 2024 Audit Report.

During provider monitoring, the Accreditation auditor found that the complaints procedure at provider 1 did not state that learners can escalate a complaint to SQA Accreditation as the regulator; this suggests that the information in the above forms is impacting provider policies.

This has been recorded as **Issue 3**.

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

Regulatory Principle 13. The awarding body and its providers must ensure that they have systems and processes which ensure the effective quality assurance of accredited qualifications.

Provider 1 had a malpractice policy which included maladministration, but the definitions of maladministration were incorrect; the policy cited it as a deliberate act and included examples such as forgery. Additionally, the policy did not make it clear that all suspected and actual cases of malpractice and maladministration would be referred immediately to the awarding body. A recent ECITB external quality assurance activity at the provider referenced that the policy had been checked during approval with no action required.

This has been recorded as **Issue 4**.

2.3 Recommendations

Regulatory Principle 5. The awarding body and its providers must provide clear information on their procedures, products and services and ensure that they are accurate and appropriate to accredited qualifications.

The Accreditation auditor reviewed CPD records for staff in provider 1; all staff had undertaken a range of activities over a number of hours. However, there does not seem to be a definitive number of hours required by the awarding body noted in documentation.

It is recommended that ECITB consider whether it would be appropriate to specify a minimum number of hours for CPD to ensure consistency among staff across providers.

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

Regulatory Principle 5. The awarding body and its providers must provide clear information on their procedures, products and services and ensure that they are accurate and appropriate to accredited qualifications.

The ECITB qualification offered by provider 1 was misrepresented on the provider website. The title was listed as a National Vocational Qualification instead of a Diploma, and the number of mandatory units was listed as six rather than seven.

It is recommended that ECITB ensure that provider websites contain accurate information in terms of qualifications and qualification content.

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

Regulatory Principle 6. The awarding body must continually review the effectiveness of its services, systems, policies and processes.

The staff contact in provider 1 suggested it would be beneficial to have an on-screen tutorial for the ECITB Membership Services Portal, as this would aid navigation for providers.

ECITB may wish to consider developing an on-screen tutorial for the Membership Services Portal.

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

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

The Accreditation auditor reviewed the minutes of standardisation meetings at provider 1. It was noted that while the minutes contained items to be discussed, it did not include any detail of the discussion or any relevant actions.

It is considered best practice when preparing minutes that some detail of the discussion is included, as well as any actions. It is therefore recommended that providers are made aware of this.

This has been noted as **Recommendation 4**.

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.**Regulatory Principle 13. The awarding body and its providers must ensure that they have systems and processes which ensure the effective quality assurance of accredited qualifications.****Regulatory Principle 5. The awarding body and its providers must provide clear information on their procedures, products and services and ensure that they are accurate and appropriate to accredited qualifications.**

The staff contact at provider 1 had been informed that it was a requirement for the internal quality assurer to attend the first and last assessment session with the assessor for every candidate. The staff contact had engaged with the external quality assurer to seek clarification on this matter, as they felt it was at odds with the notion of sampling. Additionally, the *ECITB Awarding Organisation Approved Centre Handbook* does not seem to mention this specific requirement, instead being concerned with internal quality assurers planning and undertaking formative and summative sampling.

At the time of provider monitoring, the staff contact at provider 1 was still unsure about the internal quality assurance requirements of the awarding body in this regard.

It is recommended that ECITB clarify internal quality assurance requirements with providers.

This has been noted as **Recommendation 5**.

3 Acceptance of Provider Monitoring Findings