



Provider Monitoring Report

GQA Qualifications

07 June 2018

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1 Background

One provider was monitored on 07 June 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. Consequently, this approach to provider monitoring reporting will not detail areas where compliance or good practice was identified by SQA Accreditation.

1.2 Provider Monitoring Report Timescales

GQA provider monitoring date:	07 June 2018
Provider Monitoring Report approved by Accreditation Co-ordination Group on:	04 July 2018
Provider Monitoring Report to be signed by GQA:	16 August 2018
Action Plan to be e-mailed to regulation@sqa.org.uk by GQA	16 August 2018

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 GQA 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 and no Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 10	The CPD (Continuous Professional Development) records at the provider do not meet the awarding body's requirements.	Medium
2. Principle 5, 13	The provider's appeals procedure does not contain appropriate reference to SQA Accreditation and does not clearly communicate which awarding body candidates have the right to appeal to.	Low
3. Principle 14	The provider's malpractice policy does not define maladministration	Low
4. Principle 15	The provider is entering candidate details into the registration of another awarding body to generate a unique identifier for the registration of candidates on GQA systems.	Medium

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 GQA'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 awarding body's electronic system is easy to use and they have never experienced any issues with it. They also noted that the external verifier is very supportive and knowledgeable.

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.

When reviewing the Assessor's CPD records, the Accreditation Auditor noted that the most recent entry was for 31 March 2017. According to *GQA Qualifications Ltd Approved Centre Agreement*, 'Assessors and internal verifiers are required to maintain a reflective CPD record with a minimum of two significant occupational and two significant assessment/verification entries per calendar year.' The provider's CPD record for the Assessor did not reflect this.

This was not mentioned in the External Verifier (EV) reports.

The awarding body must ensure that staff at their providers meet the minimum requirements set out by the approved centre agreement.

This has been recorded as **Issue 1**

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

Regulatory Principle 13. The awarding body and its providers shall have clear, fair and equitable procedures to manage appeals.

The provider's appeals procedure in the '*Learner Induction Pack*' is potentially confusing for candidates and did not contain an appropriate reference to SQA Accreditation.

The procedure states: 'In the case of an appeal to SQA against an internal assessment result in a regulated qualification...' The provider confirmed to the Accreditation Auditor that this is supposed to be a reference to SQA Accreditation, not SQA as an awarding body. The procedure also makes reference to 'GQA & [another awarding body]', which could be interpreted to mean that GQA is working in partnership with the other awarding body when this is not the case.

GQA must ensure that its providers make candidates fully aware of when and how they can appeal to the relevant awarding body, and when they can contact SQA Accreditation to resolve any complaints they have about the appeals process. They should also communicate this in a manner that is clear.

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.

The provider's *Malpractice Policy* does not clearly define maladministration. The awarding body should remind its providers that these policies should explain the difference between malpractice and maladministration, and how to manage examples of each. The only reference to maladministration in the Provider's Malpractice Policy states: 'Malpractice can include both maladministration in assessment delivery and deliberate non-compliance with awarding organisations'.

However, the Regulatory Principles establish that there should be safeguards to prevent and manage cases of malpractice and maladministration. Additionally, the Regulatory Principles provide a clear distinction between the two, with definitions of each.

By not giving maladministration equal status to malpractice within the awarding body/provider policies, there is a concern that this could result in an increased risk of cases of maladministration not being reported to the awarding body

This has been recorded as **Issue 3**

Regulatory Principle 15. The awarding body and its providers shall have effective, reliable and secure systems for the registration and certification of learners.

The Accreditation Auditor noted that when registering candidates for GQA qualifications, the provider asks candidates for their Scottish Candidate Number (SCN). If a candidate does not have an SCN, the provider enters the candidate on another awarding body's system to generate a new SCN before registering them with GQA. The provider stated that GQA require an SCN from all candidates in order to register them on their systems, but GQA are unable to generate SCNs.

This means that candidates' personal information is being given to an awarding body that they had not intended to register with, without their knowledge, in order to generate an SCN.

The '*GQA Qualifications Ltd Approved Centre Agreement*' states that providers must 'have arrangements in place to obtain on behalf of its Learners, where appropriate, a unique identifier (for example a Unique Learner Number (ULN), a Scottish Candidate Number (SCN), and a learner record (unless Learner chooses not to have one)'.

This puts undue strain on providers to generate unique identifiers for candidates in order to register them on awarding body systems. When an awarding body requires a unique identifier for its candidates, it must have arrangements in place to generate them rather than abdicating the responsibility to its providers.

This has been recorded as **Issue 4**

2.3 Recommendations

There are no recommendations

3 Acceptance of Provider Monitoring Findings

For and on behalf of GQA:

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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