



Provider Monitoring Report

IMI

25 June 2018 – 24 July 2018

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1 Background

Two providers were monitored on 25 June 2018 and 24 July 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

IMI provider monitoring dates: 25 June 2018 – 24 July 2018

Provider Monitoring Report approved by Accreditation Co-ordination Group on: 29 August 2018

Provider Monitoring Report to be signed by IMI: 11 October 2018

Action Plan to be e-mailed to regulation@sqa.org.uk by IMI: 11 October 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 IMI 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 six Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 10	<p>Provider 1 had three assessors for its SVQ qualifications but there was no evidence of the required workplace/job shadowing in accordance with the <i>IMI Automotive Retail Sector Assessment Strategy for Scottish Vocational Qualifications (SVQs), 2016</i>.</p> <p>Additionally, a recent external quality assurance visit conducted at the provider had checked staff competence but had not recorded any concerns with regard to insufficient evidence of work shadowing for assessors.</p>	Medium
2. Principle 11	<p>The <i>IMI Equality and Diversity policy, October 2017</i> gives providers information on protected characteristics in relation to provider policies but only some characteristics are listed.</p>	Low
3. Principle 12	<p>The complaints policy in provider 2 did not reference escalation to the awarding body or SQA Accreditation as the regulator, contravening both awarding body and regulatory requirements.</p>	Low
4. Principle 14	<p>The malpractice and maladministration policy at provider 2 did not ensure that suspected cases of malpractice and maladministration would be reported to the awarding body, contravening both awarding body and regulatory requirements.</p>	Medium

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 4	IMI may wish to review the effectiveness of the IMI online system with regard to multiple logins and aspects of the Centres Hub and e-portfolio system.
2. Principle 6	IMI should update the document, <i>Monitoring Approved Centres, EQC-04, Sep 2016</i> for currency, thereby removing an erroneous reference.
3. Principle 6	IMI may wish to consider reviewing its external quality assurance reports to improve style and layout.
4. Principle 6	IMI may wish to ensure providers have appropriate systems in place for version control.
5. Principle 7	IMI may wish to alert providers when the end certification date of an SQA accredited qualification is imminent, thereby circumventing any problems with candidate completion.
6. Principle 11	IMI may wish to advise providers that their Fair Assessment policies and procedures should reference all aspects of the process.

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 IMI'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:

- ◆ extremely helpful, supportive and professional External Quality Assurers.
- ◆ employed status of the External Quality Assurers at IMI, ensuring continuity for providers.
- ◆ customer contact team in the awarding body who handle queries very effectively from the beginning through to solution.
- ◆ instant results from the IMI online tests and the randomised test questions removing the risk of candidate copying.

Provider 2 highlighted the:

- ◆ supportive and knowledgeable External Quality Assurers.
- ◆ individuals within the customer contact team who are extremely helpful.

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.

The *IMI Automotive Retail Sector Assessment Strategy for Scottish Vocational Qualifications (SVQs), 2016*, states assessors must, 'provide evidence of completing five days working/ job shadowing in industry within their professional area in a 24 month period.'

Provider 1 had three assessors for its SVQ qualifications but there was no evidence of the required working/job shadowing. Two of the assessors only had a Continuing Professional Development (CPD) record for 2018, so the 24 month period could not be checked and the record for 2018, at that point, did not include job shadowing; the other assessor of the three had referenced job shadowing within a 24 month period but the detail was actually concerned with mentoring activities and therefore not relevant to shadowing. The Co-ordinator at the provider commented that he did not believe job shadowing was undertaken by the assessors as stipulated, as it was extremely difficult to arrange for staff to have time away from usual duties to spend in industry. The Co-ordinator also acknowledged however, that it was a requirement that was not being met.

Additionally, a recent external quality assurance visit conducted at the provider had checked staff competence but had not recorded any concerns with regard to insufficient evidence of work shadowing for assessors; a specific criterion is listed in the report for this purpose. As there were no records of shadowing at the provider monitoring visit, the Accreditation Auditor can only surmise that there was an error of some sort within the external quality assurance report.

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

Regulatory Principle 11. The awarding body shall ensure that its qualifications and their assessment are inclusive and accessible to learners.

The *IMI Equality and Diversity policy, October 2017* states, 'the IMI expects its centres to enable learners to have equal access to training and assessment for qualifications irrespective of their sex, marital status, age, religion, colour, race, nationality or ethnic origin or disability. Centres are required to have in place a policy to ensure that such discrimination does not occur.' This list as stated does not include all protected characteristics, notably omitting pregnancy/maternity, sexual orientation and gender re-assignment. Hence providers who replicate this list in their own policies will have incomplete information.

Although the IMI policy mentions the *Equality Act 2010*, elsewhere within the document with reference to the awarding body's compliance with legislation, the information given to providers does not cover all protected characteristics as it should.

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

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

The complaints policy in provider 2 did not reference escalation to the awarding body or SQA Accreditation as the regulator.

The *IMI Complaints policy, October 2017* includes specific reference to the responsibility of its providers to make the complaint escalation route clear in its own policy, in accordance with Regulatory Principle 12 but this requirement has not been met in the provider policy.

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

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 malpractice and maladministration policy in provider 2 did not ensure that suspected cases of malpractice and maladministration cases would be reported to the awarding body; the policy allowed for an internal investigation within 10 days of the reporting of malpractice and maladministration at provider level and thereafter only actual cases would be reported to the awarding body.

The *IMI Malpractice and Maladministration policy, October 2017*, includes specific reference to the responsibility of its providers with regard to the reporting of suspected and actual malpractice and maladministration, as this is a regulatory requirement under Regulatory Principle 14, with further detail included in the *SQA Accreditation's Regulatory Principle Guidance Note — Principle 14 Reporting and Managing Cases of Malpractice and Maladministration*. However, this requirement has not been met in the provider policy.

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

2.3 Recommendations

Regulatory Principle 4. The awarding body shall continually review the effectiveness of its business services, systems, policies and processes.

The IMI online system contains the Centres Hub management system; the web portal 2 for registration and certification; the IMI e-portfolio; and the online assessments for candidates undertaking tests as part of the IMI Scottish Vocational Qualifications (SVQs) and Vocationally Related Qualifications (VRQs).

The Co-ordinator at provider 2 commented that there are different logins for each of the different systems which can be onerous and is not particularly necessary. Staff also felt that the Centres Hub and the e-portfolio system could be improved to make them more user friendly and intuitive.

Additionally, with regard to the e-portfolio system, staff at provider 2 highlighted that even though the written tests are optional within the VRQs and intended for preparation for the online assessments, if the written tests are not undertaken by candidates, the VRQ only shows as 50 percent complete on the e-portfolio system even when it has been completed fully. This is misleading to both staff and candidates when reviewing e-portfolios. Further, for the online assessments, the e-portfolio system only shows a pass result and does not show the candidate's actual score which can range from 60 percent to 100 percent. If the actual score was presented within the e-portfolio, providers would be able to use system data to conduct trend analysis on results linked to both candidates and assessors. This analysis would be useful in identifying areas for improvement.

IMI may wish to review the effectiveness of the IMI online system with regard to multiple logins and aspects of the Centres Hub and e-portfolio system as described.

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

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

The IMI document, *Monitoring Approved Centres, EQC-04, Sep 2016* contains a reference to the procedure, *Risk Management of Centres EQC-11*. However, this procedure is now incorporated into another document *Standardising the Approach and Risk Mitigation, EQ04-03* and the procedure, *Risk Management of Centres EQC-11* is no longer current.

IMI should update the document, *Monitoring Approved Centres, EQC-04, Sep 2016* for currency.

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

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

Staff in provider 1 commented that the style and layout of the IMI external quality assurance reports can make them lengthy and difficult to read.

IMI may wish to consider reviewing its external quality assurance reports in this regard.

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

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

The Accreditation Auditor noted that while most policies at provider 2 contained an issue/version number, a couple of policies did not contain an issue/version number as would be expected.

IMI may wish to ensure providers have appropriate systems in place for version control.

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

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

On reviewing the registration and certification data at provider 2, the Accreditation Auditor noted that there were hundreds of current registrations for the *Diploma in Light Vehicle Maintenance and Repair Principles at SCQF Level 5, R150 04* which has an end certification date of 30/11/18. The Co-ordinator was unaware of the impending end date and informed the Accreditation Auditor that this may present problems for candidate completion. The Co-ordinator welcomed the information imparted during the provider monitoring visit and intends to consult with the awarding body separately on this matter.

Nonetheless, it may be useful for IMI to alert providers when the end certification date of an SQA accredited qualification is imminent, thereby circumventing any problems with candidate completion.

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

Regulatory Principle 11. The awarding body shall ensure that its qualifications and their assessment are inclusive and accessible to learners.

In accordance with awarding body requirements, provider 2 operates a *Fair Assessment procedure for Reasonable Adjustments and Special Considerations*. When reviewing the provider policy, the Accreditation Auditor noted it was comprehensive with the exception of detailing that *some* reasonable adjustments and *all* special considerations are referred to the awarding body for approval. Inclusion of this information will ensure that candidates are aware that not all requests are at the discretion of the provider, as some decisions are the responsibility of the awarding body.

IMI may wish to advise providers that their Fair Assessment policies and procedures should reference all aspects of the process.

This has been noted as **Recommendation 6**.

3 Acceptance of Provider Monitoring Findings

For and on behalf of IMI:

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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