



Provider Monitoring Report

Mineral Products Qualifications Council (MPQC)

22 November 2016

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1 Background

One provider was monitored between on 22 November 2016.

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 Quickr 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

MPQC provider monitoring date:	22 November 2016
Provider Monitoring Report approved by Accreditation Co-ordination Group on:	25 January 2017
Provider Monitoring Report to be signed by MPQC:	08 March 2017
Action Plan to be e-mailed to regulation@sqa.org.uk by MPQC	08 March 2017

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 MPQC 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 no Recommendations has been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 6, 14	The provider's malpractice policy makes no reference to 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.

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 MPQC'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:

http://accreditation.sqa.org.uk/accreditation/Regulation/Quality_Assurance/Quality_Enhancement_Rating

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: That the awarding body is very responsive, and is consistent in its decisions and processes.

2.2 Issues

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

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 makes no reference to 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.

During the course of the provider monitoring visit, the auditor identified that the provider's *Assessment Malpractice Policy Version 1 24/07/2015* had failed to make any reference to maladministration.

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. Neither definition has been used by the awarding body/provider.

There is a concern that by not having a maladministration policy or referencing maladministration within the awarding body/provider malpractice policies, could result in an increased risk of cases of maladministration not being reported to the awarding body.

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

2.3 Recommendations

There are no recommendations.

3 Acceptance of Provider Monitoring Findings

For and on behalf of Mineral Products
Qualifications Council:

For and on behalf of SQA Accreditation:

Print name

Print name

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Scott Markwick

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Signature

Signature

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Designation

Designation

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Senior Regulation Manager

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Date

Date

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25 January 2017

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