



# **Provider Monitoring Report**

**National Examination Board in Occupational Safety  
and Health (NEBOSH)**

**5 September 2018 – 20 September 2018**

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# 1 Background

Three NEBOSH examinations were monitored between 5 September 2018 and 20 September 2018. Two of these were standard date examination sittings and one was an on-demand examination sitting. The first examination was held at a NEBOSH accredited course provider's premises and included three different courses providers. The second and third examinations were held in venues external to the course providers' premises.

The Accreditation Auditor would like to acknowledge the contribution of the NEBOSH contact involved in the planning and organising of the visits to examination venues. This contribution involved the supply of detailed data throughout the process and frequent liaison with SQA Accreditation and staff at NEBOSH accredited course providers and venues.

## 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 has been identified by SQA Accreditation.

## 1.2 Provider Monitoring Report Timescales

NEBOSH provider monitoring dates: 5 September 2018 – 20 September 2018

Provider Monitoring Report approved by  
Accreditation Co-ordination Group on: 24 October 2018

Provider Monitoring Report to be signed by NEBOSH: 6 December 2018

Action Plan to be e-mailed  
to [regulation@sqa.org.uk](mailto:regulation@sqa.org.uk) by NEBOSH: 6 December 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](mailto: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 NEBOSH 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 three Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 6	Invigilators are required to record the candidate identity check with their signature on the candidate register, as stated in awarding body documentation. However, upon viewing the candidate register at the examination venues visited, there is no field for the invigilator's signature.	Low
2. Principle 10	At venue two, the process of dispatching examination materials to a designated person at a designated venue was not completed in accordance with awarding body requirements, as the materials were transported elsewhere upon receipt and then returned by unknown means. Consequently, the trackable element of transit was lost and the security of the examination materials was potentially jeopardised in this instance.	High
3. Principle 10	At venue three, additional examination scripts used by candidates were inserted into original examination scripts, rather than being attached with treasury tags. This contravenes the relevant awarding body documentation and presents a potential risk of additional scripts being lost.	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 6	NEBOSH may wish to consider updating the <i>NEBOSH Instructions for Conducting Examinations</i> at the next revision, to reference the right of regulatory access to examination premises, as is stated elsewhere.
2. Principle 7	NEBOSH may wish to communicate the rationale for the order on the candidate register and examination scripts to their providers.
3. Principle 10	NEBOSH may wish to consider incorporating an open book element into its examinations.

## 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 NEBOSH'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:

The examination contact at venue 1 highlighted the:

- timely receipt of examination materials and the trackable facility
- informative communication from NEBOSH and quick response to queries

A candidate at venue 2 highlighted the:

- facility to undertake a NEBOSH examination in a venue different to the NEBOSH accredited course provider premises

The examination contact at venue 3 highlighted the:

- timely receipt of examination materials and the trackable facility
- NEBOSH accredited course provider in terms of course delivery at the venue and communication about the examination

### 2.2 Issues

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

Page 11 of the *NEBOSH Instructions for Conducting Examinations, Version 11a, May 2018* states that. 'invigilators must record the identity check with their signature on the candidate register'. However, upon viewing the candidate register at the examination venues visited, there is no field for the invigilator's signature. Appropriate identity checks were conducted at the venues visited and the means of identity was recorded on the candidate register under the 'remarks' column but there was no invigilator signature in accordance with the stated awarding body requirements.

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

**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.**

Prior to an examination, NEBOSH accredited course providers complete an examination request form. This form requires course providers to specify details such as the address of the examination venue, the person to receive examination pack tracking details and the person designated to receive examination materials at the venue.

At venue two, the Accreditation Auditor attempted to speak to the person designated to receive examination materials, as indicated on the courier box, in order to have an overview of the process for the receipt and storage of the materials at the venue. However, it emerged that the person was not actually based at the venue. Reception staff stated that they thought someone had sent the box from the venue upon courier receipt to the designated contact at another location, as the contact had then phoned the reception staff to check that the box had been received back at the original venue. The box had indeed been received back and had been placed in the safe of the venue, until collected by the invigilator on the morning of the examination.

The Accreditation Auditor was able to inspect the examination materials and could verify that everything was correct and intact for the examination being monitored. Another examination had taken place in the morning, involving materials from the same courier box. The invigilator confirmed that all those examination materials were correct and intact too. Nonetheless, the examination materials had been dispatched to another location by an unknown person using unknown means, then returned to the designated venue, again by unknown means.

Therefore, the process of dispatching to a designated person at a designated venue, in accordance with the NEBOSH examination request form, was not completed appropriately. Consequently, the trackable element of transit was lost and the security of the examination materials potentially jeopardised in this instance.

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

**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.**

In terms of invigilator responsibilities at the end of examinations, page 18 of the *NEBOSH Instructions for Conducting Examinations, Version 11a, May 2018* states that, 'the invigilator must as appropriate remind candidates to attach and secure additional scripts with treasury tags – paper clips and staples must not be used'.

At venue three, three candidates required additional scripts in the course of the examination. At the end of the examination, candidates were instructed by the invigilator to insert the additional scripts into the original script. When the Accreditation Auditor highlighted to the invigilator that this practice did not accord with awarding body requirements, the invigilator pointed out that treasury tags had not been provided from the awarding body in the examination paperwork and that it had never been queried by NEBOSH when done previously, although he commented that additional scripts are not often used. The invigilator further explained that it would not be practical for these tags to be provided by venues, as some are based in locations which would have neither treasury tags or paper punches to make the holes necessary for the tags.

Having visited Linney where the processing of exam materials is done for NEBOSH, the Accreditation Auditor was able to see that where additional examination scripts had been used and not attached correctly, Linney staff inserted treasury tags as standard practice when digitally scanning the scripts before dispatching to examiners. This action means the risk of additional scripts being lost after this point in the process is no greater than additional scripts that were attached correctly initially. The concern is then focused on the part of the process when scripts are collected after examinations and returned to Linney. However, having also watched invigilators diligently pack scripts after each examination into the return envelopes and then watch the methodical process of receipt at Linney, the Accreditation Auditor considers the risk of additional scripts without tags being lost at this part of the process to be mitigated to a large extent, though the risk is not eradicated completely.

Additionally, where candidates use additional scripts, they are required to number the scripts accordingly. In the event that an additional script is not with the original script, Linney staff commented that they would highlight this to NEBOSH who would investigate with the course provider and invigilator. Linney staff also commented that there had been no known incidences to date.

Nonetheless the practice of inserting additional examination scripts into original examination scripts contravenes awarding body requirements and presents a potential risk of additional scripts being lost.

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

## 2.3 Recommendations

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

Page 20 of the *NEBOSH Instructions for Conducting Examinations, Version 11a, May 2018* includes information about the inspection of examination premises by NEBOSH.

For clarity, NEBOSH may wish to consider updating this document at the next revision to reference the right of regulatory access to examination premises, as is stated elsewhere, notably page 18 of the *NEBOSH Course Provider Accreditation Agreement, Version 3*.

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

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

The candidate register supplied by NEBOSH for examinations is arranged by NEBOSH student number and corresponds with the order of examination question papers in the envelope provided. Staff at venue 1 explained it would be more effective to have the candidate register and the scripts arranged in alphabetical order, as this would allow the papers to be distributed more easily around the room, especially as the seating plan is done by alphabetical order at this venue and there can be a large number of candidates.

However, having visited Linney, as mentioned previously where the processing of exam materials is done for NEBOSH, the Accreditation Auditor understands that the numerical order is integral to the process which involves the digital scanning of individual papers.

Therefore, NEBOSH may wish to communicate the rationale for the order on the candidate register and examination scripts to their providers.

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

**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 invigilator at venue three, who also works both as a tutor for a NEBOSH accredited course provider and as a NEBOSH examiner, suggested that the assessment of NEBOSH qualifications could be enhanced by including open book examinations. The invigilator felt that the open book scenario encourages the application of knowledge and mitigates the element of memory testing which is part of traditional assessment.

NEBOSH may wish to consider incorporating an open book element into its examinations.

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

### 3 Acceptance of Provider Monitoring Findings

For and on behalf of NEBOSH:

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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