



# **Provider Monitoring Report**

**Pearson Education Limited**

**3 March 2023**

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# 1 Background

One provider was monitored remotely on 3 March 2023.

## 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**

Pearson provider monitoring date: 3 March 2023

Provider Monitoring Report approved by  
Accreditation Co-ordination Group on: 29 March 2023

Provider Monitoring Report to be signed by Pearson: 16 May 2023

Action Plan to be emailed  
to [regulation@sqa.org.uk](mailto:regulation@sqa.org.uk) by Pearson: 16 May 2023

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](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 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

Issues have 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 Pearson 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, two Issues have been recorded and two Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 16	The complaints process at provider 1 made no reference to the escalation route, either to the awarding body or to SQA Accreditation as the regulator.	Low
2. Principle 18	The training malpractice policy at provider 1 did not state that all suspected or actual cases of malpractice and maladministration would be reported immediately to the awarding body.	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 6	Pearson may wish to review the effectiveness of its systems with regard to the accessibility of information for providers and the population of data in the annual quality declaration form.
2. Principle 15	Pearson may wish to consider adding some flexibility to the 365 days allocated for Direct Claim Status to ensure its continuation, where there has been a delay in arranging an external quality assurance visit.

## 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 Pearson'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:

- ◆ professional engagement and communication from external quality assurers across sectors with developmental and constructive feedback
- ◆ quick receipt of external quality assurance reports
- ◆ separate external quality assurance visits for Workplace Core Skills
- ◆ designated point of contact for queries
- ◆ helpful awarding body staff

### 2.2 Issues

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

The complaints process at provider 1 made no reference to the escalation route either to the awarding body or to SQA Accreditation as the regulator.

The complaints process had been reviewed during a recent Pearson external quality assurance activity but the discrepancy had not been highlighted during this activity.

There had been no complaints received at the provider for any SQA accredited qualifications but the process needs to be amended.

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

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

The training malpractice policy at provider 1 did not state that all suspected or actual cases of malpractice and maladministration would be reported immediately to the awarding body. The policy only referenced reporting with regard to one specific area of malpractice, namely cheating.

There had been no incidences of malpractice or maladministration at the provider for any SQA accredited qualifications but the policy needs to be amended.

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

## 2.3 Recommendations

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

Provider 1 commented that they did not find Pearson systems to be user friendly in terms of extracting registration and certification data or information for external quality assurance visits.

Staff further commented that they found the annual quality declaration form to be very time consuming and onerous with one page for each qualification. Even where there are no changes from the previous year, staff still need to populate all the same information.

Pearson may wish to review the effectiveness of its systems with regard to the accessibility of information for providers and the population of data in the annual quality declaration form.

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

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

Pearson grants Direct Claim Status for 365 days from the date of the last external quality assurance visit. In the event that the external quality assurance visit is arranged out with this year, Direct Claim Status is lost until a visit can take place. Provider staff felt that it would be useful to have some flexibility in this system, allowing a short period of time after the 365 days window to ensure the continuation of Direct Claim Status and the uninterrupted certification of learners.

Pearson may wish to consider adding some flexibility to the 365 days period allocated for Direct Claim Status.

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

## 3 Acceptance of Provider Monitoring Findings