



Provider Monitoring Report

**The Royal Environmental Health Institute of
Scotland (REHIS)**

1 June 2023 – 8 June 2023

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1 Background

Two providers were monitored remotely on 1 June 2023 and 8 June 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

REHIS provider monitoring date(s): 1 June 2023 – 8 June 2023

Provider Monitoring Report approved by
Accreditation Co-ordination Group on: 5 July 2023

Provider Monitoring Report to be signed by REHIS: 17 August 2023

Action Plan to be emailed
to regulation@sqa.org.uk by REHIS: 17 August 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.
- ◆ 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

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 emailed to REHIS 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, five Issues have been recorded and four Recommendations have been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 5	Related to Issues 3, 4 and 5 below, both providers seemed unsure which policies were needed by them and what these should contain, especially in regard to complaints, appeals and malpractice.	Medium
2. Principles 14 and 5	The Accreditation Auditor cannot find any information in the <i>REHIS Scottish Certificate for Personal Licence Holders (SCPLH) Regulations, December 2021</i> or <i>Supplement 12, Additional Support</i> , with regard to the awarding body processes for special considerations.	Low
3. Principle 16	The Complaints Policy at provider 2 did not reference escalation to REHIS or to SQA Accreditation as the regulator.	Low
4. Principle 17	Providers 1 and 2 did not have an Appeals Policy or procedure for REHIS qualifications.	Low
5. Principle 18	The Malpractice Policies at providers 1 and 2 did not reference that all suspected and actual cases of malpractice and maladministration will be notified immediately to REHIS.	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 5	The previous version of the <i>REHIS SCPLH Regulations</i> should be removed from SharePoint.
2. Principle 5	REHIS may wish to stipulate a minimum number of hours for Continuing Professional Development (CPD) to promote standardisation across course presenters. Additionally, with regard to CPD, there is an inaccuracy in the numbering between <i>Supplement 4</i> and the <i>REHIS SCPLH Regulations</i> .
3. Principle 6	REHIS may wish to remind providers that it is good practice in document control to have dates on policies.
4. Principle 13	It may be advisable to include checking of provider policies during external quality assurance activity.

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 the awarding body'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

Both providers spoke extremely highly of REHIS as an awarding body.

Provider 1 highlighted the:

- professional nature of the organisation
- widely recognised industry status
- friendly, helpful staff
- designated customer contact
- excellent customer service
- cost effectiveness of the courses
- quality of course materials
- user friendly website for registration and certification
- easy to read documentation
- Scottish brand

Provider 2 highlighted the:

- excellent communication
- qualifications which are pitched at the right level
- annual seminar
- industry respect afforded to REHIS
- knowledge of the external quality assurer
- proactive customer service in answering queries
- designated customer contact
- easy navigation of the online registration and certification system
- quick dispatch of certificates

2.2 Issues

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

Related to Issues 2, 3 and 4 below, both providers seemed unsure which policies were needed by them and what these should contain, especially in regard to complaints, appeals and malpractice.

In terms of complaints, *REHIS SCPLH Course: Supplement to the Regulations 8*, does state that training centres are required to have an internal complaints policy and does reference escalation to REHIS and SQA Accreditation; this information is also noted in the *New Centre Pre-approval visit form. Supplement 8*, is actually entitled, *Quality Assurance Policy*, with the information about complaints being at the end, hence this information is perhaps being overlooked.

In terms of appeals, *REHIS SCPLH Course: Supplement to the Regulations 7*, states that candidates should contact the approved centre that delivered the course to raise the concern in the first instance, but the Accreditation Auditor cannot find where it is specified that providers need an appeals policy or procedure as such.

In terms of malpractice and maladministration, Regulation 13.3 within the *REHIS SCPLH Regulations*, states that any centre or learner with knowledge about suspected/actual incidences of malpractice or maladministration must report, without delay, to REHIS or to SQA Accreditation, but it is not explicitly stated that providers need a policy or procedure as such.

Accordingly, REHIS must make it clear to providers which policies/procedures are needed and what these must contain.

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

Regulatory Principle 14. The awarding body and its providers must ensure that its qualifications and their delivery and assessment are fair, inclusive and accessible to learners.

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

The note against Principle 14 on SharePoint states that, 'The Institute has always ensured that all its courses and assessments are inclusive and accessible to learners by making reasonable adjustments and given special considerations where appropriate. This is detailed in the course regulations.'

However, the Accreditation Auditor cannot find any information in the *REHIS SCPLH Regulations* or *Supplement 12, Additional Support*, with regard to the awarding body processes for special considerations.

Neither provider had needed to request special considerations for any learner at the time of provider monitoring.

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

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

The complaints policy at provider 2 did not reference escalation to REHIS or to SQA Accreditation as the regulator.

A similar Issue was raised with regard to regulator escalation in the Provider Monitoring Report of 2021–22.

No complaints had been received at provider 2 at the time of provider monitoring.

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

Regulatory Principle 17. The awarding body and its providers must have clear, fair and equitable systems, policies and procedures to manage appeals.

Providers 1 and 2 did not have an appeals policy or procedure for REHIS qualifications.

No appeals had been received at either provider at the time of provider monitoring.

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

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 Malpractice Policies at providers 1 and 2 did not reference that all suspected and actual cases of malpractice and maladministration will be notified immediately to REHIS.

A similar Issue was raised in the Provider Monitoring Report of 2021–22.

No incidences of malpractice or maladministration had occurred in either provider at the time of provider monitoring.

This has been recorded as **Issue 5**.

2.3 Recommendations

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

There are two versions of the *REHIS SCPLH Regulations* on SharePoint — November 2020 and December 2021.

Accordingly, the current version, December 2021, should be retained and the previous version should be removed.

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

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

The *REHIS SCPLH Regulations* state that course presenters are required to maintain occupational knowledge through planned CPD. However, there is no specific guidance about the minimum number of hours that should be completed. As this can lead to variations between presenters, REHIS may wish to stipulate a minimum number of hours.

Additionally, *Supplement 4* entitled, *Course Presentation and CPD*, refers to *Regulations* 8.3 (d) and 8.4. It should actually be 8.4 (d) and 8.5.

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

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

The Accreditation Auditor noted that the policies at provider 1 had a version number but lacked a date.

REHIS may wish to remind providers that it is good practice in document control to have dates on policies.

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

Regulatory Principle 13. The awarding body and its providers must ensure that they have systems and processes which ensure the effective quality assurance of accredited qualifications.

The Accreditation Auditor noted that the REHIS external quality assurance activities involve the observation of course delivery and examination. Given that both providers have Issues with policies and that this has been a recurrent theme in both provider monitoring reports to date, 2021–22 and the current report, 2023–24, it may be advisable to include checking of provider policies during external quality assurance activity.

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

3 Acceptance of Provider Monitoring Findings