



Provider Monitoring Report

SFEDI Awards

24 May 2018

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1 Background

One provider was monitored on 24 May 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

SFEDI Awards provider monitoring date:	24 May 2018
Provider Monitoring Report approved by Accreditation Co-ordination Group on:	10 October 2018
Provider Monitoring Report to be signed by SFEDI Awards:	21 November 2018
Action Plan to be e-mailed to regulation@sqa.org.uk by SFEDI Awards	21 November 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 SFEDI Awards 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 one Recommendations has been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 10	<p>Provider 1 explained to the Accreditation Auditor that they did not hold a copy of the appropriate assessor/quality assurance qualification certificates for one of their Assessor/Quality Assurers. This was because the qualification certificates had been burnt in a house fire approximately 15 years earlier. The Assessor/Quality Assurer stated that they could not request duplicate qualification certificates, as they were unable to remember the awarding body who certificated these qualifications.</p> <p>Additionally, Provider 1 did not hold a CPD record for its other Assessor, therefore Provider 1 could not demonstrate how all members of the assessment team had completed their development activities.</p>	High
2. Principle 10	<p>SFEDI Awards have not complied with their own procedure, as Provider 1 had not received an external monitoring visit from SFEDI Awards from June 2015 until May 2017, an approximate timescale of 23 months.</p>	Medium
3. Principle 6 & 12	<p>The provider-devised complaints procedure shown to the Accreditation Auditor on the day of the provider monitoring visit, did not inform candidates of the circumstances under which they have the right to escalate complaints to the qualifications regulator, SQA Accreditation.</p>	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.

Recommendation	Detail of Recommendation noted
1. Principle 13	SFEDI Awards should amend its appeal document to state that candidates only have the right to escalate a complaint to the qualifications regulator, SQA Accreditation. We cannot overturn an academic decision from an appeal; we would only review the process that the awarding body followed.

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 SFEDI Awards' 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 that SFEDI Awards provide a good service, are quick to respond to queries, and are happy to listen to ideas and feedback from its providers.

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 SFEDI Awards *Diploma in Business and Enterprise Support at SCQF Level 8 Qualification Specification* (January 2013), states the following:

'Delivery/Assessment/Quality Assurance Staff Requirements

'All Assessors must have the necessary competence in the subject matter of the qualification and the necessary competence in the assessment procedures to be used. They must also hold or be working towards the appropriate Assessor qualification, eg D32/33 or A1. Assessors must also hold occupational competence for the units that have been selected to the level and content of the unit.

'Quality Assurance staff must have the necessary competence in the subject matter of the qualification and the necessary competence in the assessment and quality assurance procedures to be used. They must also hold or be working towards the appropriate Quality Assurance qualification, eg. D34 or V1. Quality Assurance staff must also hold occupational competence for the units that have been selected to the level and content of the unit.'

Provider 1 explained to the Accreditation Auditor that they did not hold a copy of the appropriate assessor/quality assurance qualification certificates for one of their Assessor/Quality Assurers. This was because the qualification certificates had been burnt in a house fire approximately 15 years earlier. The Assessor/Quality Assurer stated that they could not request duplicate qualification certificates as they were unable to remember the awarding body who certificated these qualifications.

SFEDI Awards approved Provider 1 on 30 January 2013. Provider 1 would not have been able to provide SFEDI Awards with a copy of this Assessor/Quality Assurer's qualification certificates during its approval application stage, for the same reason as that given to the Accreditation Auditor on the day of the provider monitoring visit.

SFEDI Awards' *Continuous Professional Development (CPD)* document states 'The lead quality assurer should hold the following information, either hard copy or electronically, in relation to each person within the centre who is involved in the delivery of SFEDI Awards qualifications:

- Personal profiles or CVs demonstrating skills, knowledge, experience and competence at an appropriate level
- Copies of all assessment and quality assurance certificates
- CPD records demonstrating how all members of the team have completed their development activities

Additionally, Provider 1 did not hold a CPD record for its other Assessor, therefore Provider 1 could not demonstrate how all members of the assessment team had completed their development activities.

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

The SFEDI Awards *Conducting Approval and Monitoring Activities* document states 'the ratings we use are:

Blue

Description:

No issue identified

Actions:

No action required, the centre will be visited on a 12-monthly basis and can be considered for the awarding of Direct Claims Status (DCS) for programmes or qualifications

Green

Description:

Minor procedural, policy or resource issue identified resulting in a minimum of one Core Principle sub-section with a risk rating of Green

Actions:

Action plan set, the centre will be visited on a 12-monthly basis with additional monitoring activities to progress the actions set. The centre can be considered for the awarding of Direct Claims Status (DCS) for programmes or qualifications

Provider 1 gave the Accreditation Auditor copies of its previous three external quality assurance monitoring reports dated and risk-rated as follows:

25 May 2017 – risk rating (Blue)

29 June 2015 – risk rating (Green)

25 April 2014 – risk rating (Blue)

This indicates that SFEDI Awards have not complied with their own procedure, as Provider 1 had not received an external monitoring visit from SFEDI Awards from June 2015 until May 2017, an approximate timescale of 23 months.

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

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

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

The provider-devised complaints procedure shown to the Accreditation Auditor on the day of the provider monitoring visit, did not inform candidates of the circumstances under which they have the right to escalate complaints to the qualifications regulator, SQA Accreditation.

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

2.3 Recommendations

Regulatory Principle 13. The awarding body and its providers shall have clear, fair and equitable procedures to manage appeals.

SFEDI Awards' *Appeals* document states that 'only once the independent investigation has been completed, the centre or individual, can appeal to the regulator.'

SFEDI Awards should amend its appeal document to state that candidates only have the right to escalate a complaint to the qualifications regulator, SQA Accreditation. We cannot overturn an academic decision from an appeal; we would only review the process that the awarding body followed.

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

SFEDI Awards

For and on behalf of SQA Accreditation:

Print name

Print name

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Signature

Signature

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Designation

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Date

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