

Provider Monitoring Report

Safety Training Awards (STA)

03 September 2019 to 09 September 2019

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1 Background

Three providers were monitored between 03 September 2019 and 09 September 2019.

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

STA provider monitoring dates: 03 September 2019 to 09 September 2019

Provider Monitoring Report approved by Accreditation Co-ordination Group on: 20 November 2019

Provider Monitoring Report to be signed by STA: 16 January 2020

Action Plan to be emailed to regulation@sqa.org.uk by STA 16 January 2020

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 emailed 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 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 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 emailed to STA 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, four Issues have been recorded and one Recommendation has been noted.

Issue	Detail of Issue recorded	Risk rating
1. Principle 6	Provider 3's data protection policy has not been updated to take account of current legislation.	Low
2. Principle 6, 10	Two of the Providers could not provide Continuous Professional Development (CPD) records for all of their staff.	Medium
3. Principle 13	The Awarding Body states that Providers must include escalation to SQA Accreditation and the Provider's Appeals Policy did not include this.	Low
4. Principle 14	The Provider's Malpractice and Maladministration does not meet STA's requirements.	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 7	STA may wish to consider providing more detailed information in its communications to Approved Training Centres (ATC), particularly in relation to technical updates.

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 STA'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: Good Resources and quick turnaround for booking courses.

Provider 2 highlighted: Telephone and online support is particularly good.

Provider 3 highlighted: Updates to qualifications have been beneficial.

2.2 Issues

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

Provider 3's data protection policy is not up to date with regard to current legislation.

When reviewing the documentation at Provider 3, the Accreditation Auditor noted that the provider's data protection policy makes no reference to General Data Protection Regulation (GDPR) and references the Data Protection Act 1998.

Data Protection Policy 30/08/2016 states 'The trust will ensure that data is always processed in accordance with the provisions of the Data Protection Act 1998'.

The Safety Training Awards Approved Training Centre (ATC) Manual version 19.3 states 'Centres must ensure that they adhere to legislation surrounding GDPR and DPA 2018'.

This has been recorded as **Issue 1**

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

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.

Two of the providers visited could not show evidence of CPD for staff members involved in the delivery of accredited qualifications.

When reviewing the documentation at Providers 1 and 2, the Accreditation Auditor noted that Provider 1 could not provide CPD records for two of its tutors and Provider 2 had no CPD record for its only assessor.

The *Safety Training Awards Approved Training Centre (ATC) Manual version 19.3* states 'It is a requirement, that tutors, assessors and IQA's maintain their competency to deliver and assess Safety Training Awards courses. This can be achieved through keeping relevant qualifications up to date, as detailed within the qualification specification, and also through engagement with a programme of continual professional development (CPD)'.

This has been recorded as **Issue 2**

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

Provider 3's appeals policy makes no reference to SQA Accreditation as the regulator when describing the appeals escalation process.

Provider 3's *Appeals and Enquiries Policy* states 'If a learner is not satisfied with a decision made by an assessor or course organiser, they may refer their complaint to the STA where their enquiries and appeals policy will be followed. An enquiries and appeals form must be submitted to the STA within 28 Days of the final results being issued to the learners'.

The *Safety Training Awards Approved Training Centre (ATC) Manual version 19.3* states 'For Centres based in Scotland, they must include the appeals escalation process to SQA Accreditation in their policy in order to meet regulatory requirements'.

The Supplementary Information in *SQA Accreditation's Regulatory Principles (2014)* makes it clear that "Where a referral is made to SQA Accreditation, we may undertake activities to assess the effectiveness of the Awarding Body and/or the provider's appeals process to ensure they are in line with regulatory requirements." And "The awarding body and its providers should ensure that their documentation is clear that SQA Accreditation is unable to overturn assessment decisions or academic judgements."

STA must ensure that this is made clear to their providers and candidates.

This has been recorded as **Issue 3**

Regulatory Principle 14. The awarding body and its providers shall ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.

Provider 3's malpractice policy does not describe an appropriate escalation process to the awarding body and also puts the responsibility for judging whether or not a concern is malpractice or maladministration on the individual reporting any incidents.

The Provider's *Malpractice and Maladministration Policy and Procedure* states 'It is the responsibility of the employee/learner to confirm to the member of staff contacted that they wish to raise their concern in accordance with this procedure in order to avoid any misunderstanding of the status of the concern'. The document then lists the stages relating

to investigation and then informing the individual who raised the concern of the outcome and possible escalation to the general manager or board of trustees, then goes on to state '4.(b) any suspicious activities must be reported to STA'.

STA's *Malpractice and Maladministration Policy V19.2* states 'Anybody who identifies or is made aware of suspected or actual cases of malpractice or maladministration at any time must immediately notify Safety Training Awards'.

This has been recorded as **Issue 4**

2.3 Recommendations

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

Provider 1 and Provider 3 highlighted to the Accreditation Auditor that communication from STA to its ATCs could be improved. For example, Provider 1 stated that the communication, particularly in relation to technical updates, could provide more information detailing the specifics of what changes are made to manuals and assessment and also the drivers for the changes.

STA may wish to consider providing more detail in its communications to its providers.

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

3 Acceptance of Provider Monitoring Findings

For and on behalf of STA:

For and on behalf of SQA Accreditation:

Print name

Print name

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LAURA WALKERDINE

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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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21 NOVEMBER 2019

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