

Provider Monitoring Report

SafeCert Awards Limited

19 August 2022 – 1 September 2022

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1 Background

Three providers were monitored remotely between 19 August 2022 and 1 September 2022.

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

SafeCert provider monitoring dates: 19 August 2022 – 1 September

2022

Provider Monitoring Report approved by

Accreditation Co-ordination Group on: 21 September 2022

Provider Monitoring Report to be signed by SafeCert: 3 November 2022

Action Plan to be emailed

to regulation@sqa.org.uk by SafeCert: 3 November 2022

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 SafeCert 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. Principles 7, 9 and 12 | Staff at providers 1 and 3 stated that they have been instructed by SafeCert that it is an awarding body requirement that trainers/assessors for first aid qualifications must retake a trainer/assessor qualification every three years. Staff at provider 2 stated that they were advised the three yearly requalification was not necessary. The Accreditation Auditor cannot find where this requirement as stated to providers 1 and 3, is detailed in awarding body documentation. SafeCert must ensure that any awarding body requirement to retake a trainer/assessor qualification every three years is stated in its documentation and that this is communicated consistently to providers. | Low |
| 2. Principles 7 and 13 | Providers 1 and 3 had not received their external quality assurance (EQA) reports according to awarding body timescales, despite repeated requests to the awarding body. A similar Issue was raised in the 2018–19 Provider Monitoring Report. SafeCert must ensure that EQA reports are received by providers according to timescales and must ensure that communication in this regard is actioned. | High |
| 3. Principle 14 | Providers 1 and 2 had listed protected characteristics in their equal opportunities policies but had omissions. | Low |

| | SafeCert must ensure that its providers' equal opportunities policies include all protected characteristics, where listed. | |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 4. Principle 16 | The complaints policies at providers 1 and 2 did not reference appropriate escalation. | Low |
| | SafeCert must ensure that provider policies reference appropriate escalation of complaints to the awarding body and to SQA Accreditation as the regulator. | |
| 5. Principle 18 | The Malpractice and Maladministration policy at provider 2 did not reference the fact that all suspected and actual cases of malpractice and maladministration would be referred to the awarding body. | Low |
| | SafeCert must ensure that its providers' Malpractice and Maladministration policies reference appropriate escalation to the awarding body. | |

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 | At provider 2, the Accreditation Auditor noted that all trainers/assessors had undertaken non-regulated first aid qualifications through the provider's own company in association with an industry body. |
| | As an SQA Accreditation approved awarding body offering regulated provision, SafeCert may wish to encourage staff in its providers to undertake the same regulated qualifications that the provider is actively delivering to its customers. |
| 2. Principle 9 | SafeCert should ensure that approval certificates issued to providers are current or remove the need for approval certificates from its processes. |
| 3. Principle 12 | SafeCert may wish to consider the timescales for the review of multiple-choice question papers for its first aid qualifications. |

| 4. Principle 15 | SafeCert may wish to develop or continue developing an online entry system for results, as this would reduce paper and improve accuracy and efficiency for providers when inputting leaner data. |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | |

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 SafeCert'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

Providers noted the following areas of good practice:

Provider 1 highlighted the:

- helpful and responsive administrative staff in the awarding body
- system which allows learner registration and certification data to be processed simultaneously without the need for prior registration

Provider 2 highlighted the:

- · development of new qualifications which have expanded delivery and accessibility
- desktop spot checks on assessment and observation of assessment visits which SafeCert have incorporated into their EQA regime
- positive contact with the external quality assurers who conducted the desktop spot checks and observation of assessment visits
- timely dispatch of certificates

Provider 3 highlighted the:

- availability of a resit paper for Emergency First Aid at Work which had been unavailable previously
- marked improvement in certification timescales and in accuracy of learner details on the certificates
- quick response from administrative staff in the awarding body
- development of new qualifications making them more accessible to a wider audience
- desktop spot checks on assessment

2.2 Issues

Regulatory Principle 7. The awarding body must have an effective approach for communicating with its staff, stakeholders and SQA Accreditation.

Regulatory Principle 9. The awarding body and its providers must maintain accurate documents, records and data.

Regulatory Principle 12. The awarding body and its providers must ensure that they have the necessary arrangements and resources required to manage and administer qualification delivery and assessment.

Staff at providers 1 and 3 stated to the Accreditation Auditor that they have been instructed by SafeCert that it is an awarding body requirement that trainers/assessors for first aid qualifications must retake a trainer/assessor qualification every three years, even though the existing qualification meets the *First Aid Assessment Principles, 2017, Version 6.* Staff at provider 2 informed the Accreditation Auditor that they were advised the three yearly requalification for training and assessing of first aid qualifications was not necessary. The Accreditation Auditor cannot find where this requirement as stated to providers 1 and 3, is detailed in awarding body documentation.

SafeCert must ensure that any awarding body requirement to retake a trainer/assessor qualification every three years is stated in its documentation and that this is communicated consistently to providers.

This has been recorded as Issue 1.

Regulatory Principle 7. The awarding body must have an effective approach for communicating with its staff, stakeholders and SQA Accreditation.

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.

As part of its EQA regime, SafeCert conducts monitoring on a risk-based cycle with a minimum of one visit every three years. Additionally, SafeCert also conducts desktop spot checks on assessment and observation of assessment visits.

In terms of the receipt of external quality assurance reports, page 14 of the *SafeCert Centre Handbook*, February 2020, Version 2.5 states, 'the centre receives their copy of the report within 14 days of the EQA visit'.

At the time of provider monitoring, provider 1 had not received their EQA monitoring report more than two months after the visit in June 2022, despite repeated requests to the awarding body. Provider 3 had not received their EQA reports from a monitoring visit in March 2020 or an observation of assessment visit in June 2021, despite repeated requests to the awarding body. Additionally, provider 3 had not received an EQA monitoring report from March 2018 which was raised previously as part of a similar Issue in the 2018–19 Provider Monitoring Report.

Provider 3 had received EQA reports for desktop spot checks on assessment.

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The Accreditation Auditor understands from staff at provider 1 that there were actions or recommendations given verbally, as a result of the EQA monitoring visit. However, in the absence of a report, the provider has no written details and no notion of timescales for closing out any actions that may be required. Provider 3 had not been given any actions or recommendations verbally as a result of EQA activities, but should still have the relevant reports as formal evidence of the activities and in accordance with awarding body documentation.

SafeCert must ensure that EQA reports are received by providers in accordance with timescales and must ensure that communication in this regard is actioned.

This has been recorded as Issue 2.

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.

The equal opportunities policy at provider 1 omitted gender re-assignment. The equal opportunities policy at provider 2 omitted pregnancy/maternity.

Neither provider had any incidences where its equal opportunities policy had been invoked.

SafeCert must ensure that its providers' equal opportunities policies include all protected characteristics, where listed.

This has been recorded as Issue 3.

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 1 had no reference to the escalation of complaints to SQA Accreditation. The complaints policy at provider 2 had no reference to the escalation of complaints to the awarding body or SQA Accreditation.

Neither provider had any incidences of complaints.

SafeCert must ensure that provider policies reference appropriate escalation of complaints to the awarding body and to SQA Accreditation as the regulator.

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 and Maladministration policy at provider 2 did not reference the fact that all suspected and actual cases of malpractice and maladministration would be referred to the awarding body.

Provider 2 had not had any incidences of malpractice or maladministration.

SafeCert must ensure that its provider Malpractice and Maladministration policies reference appropriate escalation to the awarding body.

This has been recorded as Issue 5.

2.3 Recommendations

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

When reviewing staff qualifications at provider 2, the Accreditation Auditor noted that all trainers/assessors had undertaken non-regulated first aid qualifications through the provider's own company in association with an industry body.

Although the awarding body accepts these qualifications, as an SQA Accreditation approved awarding body offering regulated provision, SafeCert may wish to encourage staff in its providers to undertake the same regulated first aid qualifications that the provider is actively delivering to its customers.

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

Regulatory Principle 9. The awarding body and its providers must maintain accurate documents, records and data.

The approval certificates issued by SafeCert to providers 1 and 3 were out of date.

SafeCert should ensure that approval certificates issued to providers are current or remove the need for approval certificates from its processes.

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

Regulatory Principle 12. The awarding body and its providers must ensure that they have the necessary arrangements and resources required to manage and administer qualification delivery and assessment.

Staff at providers 1 and 3 felt that the questions used in the multiple-choice papers for first aid qualifications have now been in existence since April 2019 and therefore would benefit from being revised. Staff also felt that wording could be improved on a few questions.

SafeCert may wish to consider the timescales for the review of multiple-choice question papers for its first aid qualifications.

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

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

Staff at providers 1 and 3 suggested that an online entry system for results would be beneficial, as it would reduce paper and improve accuracy and efficiency for providers when inputting leaner data.

Staff at provider 2 commented to the Accreditation Auditor that they believed that SafeCert already had a dashboard system in progress.

SafeCert may wish to develop or continue developing an online entry system for results.

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

3 Acceptance of Provider Monitoring Findings

| For and on behalf of SafeCert: | For and on behalf of SQA Accreditation: |
|--------------------------------------|-----------------------------------------|
| Print name | Print name |
| Paul Horsburgh | LOUISE MCKAY |
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| Director | SENIOR REGULATION MANAGER |
| Date | Date |
| Monday 31 st October 2022 | WEDNESDAY 21 SEPTEMBER 2022 |