



Centre Monitoring Report

IMI Awards

27 November to 13 December 2013

Note

Restricted or commercially sensitive information gathered during SQA Accreditation's quality assurance activities is treated in the strictest confidence. However, please note the following:

- ◆ The findings of this report and the associated Action Plan will be presented to SQA's Accreditation Committee.
- ◆ The report and Action Plan will be published on SQA Accreditation's website following receipt of the signed acceptance of audit findings.
- ◆ The contents will contribute towards the Quality Enhancement Rating which will, in turn, contribute towards the quality assurance activity and timescales.

Please note that SQA Accreditation's quality assurance activities are conducted on a sampling basis. Consequently, not all aspects of an awarding body's performance in quality assurance, contract compliance, implementation, awarding of certificates and fee arrangements (not an exhaustive list) may have been considered in this report to the same depth.

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1 Introduction

1.1 Scope and approach of centre monitoring

SQA Accreditation conducts quality assurance activities of all awarding bodies offering SQA accredited qualifications or Units. This involves monitoring a sample of the awarding body's approved centres/providers or assessment sites. All centre monitoring will be conducted in a consistent manner within and between centres. The aim of monitoring is to:

- ◆ Ensure compliance under **SQA Accreditation's *Regulatory Principles (2011)*, *Regulatory Principles Directives*, the requirements of the clauses within and any conditions attached to the Approved Awarding Body agreement and the Criteria for Accredited Qualifications.**
- ◆ 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 centres.
- ◆ Inform future audit and monitoring activity for the awarding body.

All Principles were included within the scope of the monitoring activity.

A Requirement has been raised where SQA Accreditation found evidence that the awarding body has not met SQA Accreditation's regulatory requirements.

The following timescales apply:

- ◆ SQA Accreditation will issue this report within 30 working days of the final centre monitoring date.
- ◆ The awarding body must sign and return the report and associated Action Plan within 30 working days of the centre monitoring report being issued.
- ◆ Within a further 20 working days of receiving the proposed Action Plan, SQA Accreditation will confirm whether the Action Plan is appropriate to address the Requirements. This will be subject to the actions proving appropriate to the Requirements raised.
- ◆ SQA Accreditation will monitor progress towards completion of the actions identified in the Action Plan.

A Recommendation may be recorded in instances where SQA Accreditation considers there to be scope for improvement. Where these are agreed during centre monitoring, they are recorded on the report for future reference. As Recommendations are recorded for awarding body consideration only, it is not necessary to agree either actions or timescales to resolve these in the awarding body Action Plan.

1.2 Centre monitoring report timeline

SQA Accreditation centre monitoring report date 29 January 2014

Date centre monitoring report and Action Plan to be signed and submitted by IMI Awards 12 March 2014

1.3 Centre monitoring dates

Two centres were monitored between 27 November and 13 December 2013.

1.4 Overview

As a result of the centre monitoring activities, two Requirements have been raised and two Recommendations have been recorded.

The two Requirements form the basis of the IMI Awards Action Plan. This must be completed and submitted to SQA Accreditation for agreement within 30 working days of the centre monitoring report being issued. The Action Plan must be submitted by 12 March 2014.

Outcome(s)	Area(s) of concern	Risk rating
Requirement 1	Principle 6	Medium
Requirement 2	Principle 18	Medium
Recommendation 1	Principle 3	N/A
Recommendation 2	Principle 6	N/A

2 Centre monitoring findings

The following sections detail Requirements raised and Recommendations recorded against SQA Accreditation's *Regulatory Principles (2011)*, Regulatory Principles Directives, the requirements of the clauses within and any conditions attached to the Approved Awarding Body agreement and the Criteria for Accredited Qualifications.

2.1 Areas of good practice

The following areas of good practice were noted:

Centre 1 commented on the excellent support provided by the External Verifier and the speed of the administration systems used by IMI Awards.

Centre 2 noted that IMI Awards are very helpful and supportive towards their centres and always give a timely response and guidance to any questions or concerns raised with them.

2.2 Requirements

Principle 6: The awarding body and their approved centres must have the relevant expertise, quality assurance procedures, technological, financial, human resources and other physical resources, to carry out their regulated functions, during the life of the qualifications and Units they offer.

Centre 1 could not provide the Accreditation Auditor with original or copies of Assessor or Verifier qualification certificates. The centre co-ordinator noted that the External Verifier had seen the originals previously and as this is fully recorded on IMI Awards systems it is not necessary to keep the certificates or copies to hand. However, as the Regulator, this is something we would expect to see at centre level. This is for our own reassurance of accurate and appropriate qualifications of staff delivering SQA accredited qualifications.

It was also noted by the Accreditation Auditor that there was no formal minuted standardisation meetings, only verification meeting minutes. As there are various members of staff who are not qualified to undertake both roles of Verifier and Assessor, it would be expected that separate formal meetings take place to account for standardisation overall and verification of SQA Accreditation accredited qualifications. However, it should be noted that the centre co-ordinator did confirm that staff share the same office space and thus *ad hoc* standardisation meetings occur regularly.

The evidence available indicates that IMI Awards do not meet the requirements of Principle 6. This has been raised as **Requirement 1**.

Principle 18: The awarding body and their centres must deal with complaints on a fair and equitable basis, in line with their published procedures and timescales, and without unreasonable delay. The awarding body, their centres and learners must be made aware of how and when they can complain to SQA Accreditation. Where a complaint is upheld, the awarding body and/or centre must take appropriate, corrective and/or preventative action.

The Accreditation Auditor reviewed the materials provided by Centre 2, via remote monitoring. The Auditor noted the centre-devised complaints and appeals policy, provided to candidates within their *Learner Welcome Information Pack*, failed to reference SQA Accreditation as the Qualifications Regulator for SQA Accreditation accredited qualifications or to state the circumstances under which it would be appropriate to progress a complaint to SQA Accreditation. Furthermore, the centre also provided the awarding-body-devised complaints and appeals policy, which they also use. However, this again fails to mention the above information.

The evidence available indicates that IMI Awards do not meet the requirements of Principle 18. This has been raised as **Requirement 2**.

2.3 Recommendations

Principle 3: The awarding body must ensure that they employ robust processes to protect their own business interests as well as the interests of their approved centres and learners.

Centre 1 confirmed a recent external verification visit had taken place. The Accreditation Auditor asked to see the report of this visit; however, the centre co-ordinator had trouble locating it. Once located, the cause of the confusion was identified as an incorrect date being left on the front sheet of the report by the External Verifier. It is important from both an awarding body perspective and at centre level that these reports are accurate.

This has been recorded as Recommendation 1.

Principle 6: The awarding body and their approved centres must have the relevant expertise, quality assurance procedures, technological, financial, human resources and other physical resources, to carry out their regulated functions, during the life of the qualifications and Units they offer.

The information provided by Centre 2 did not include a malpractice/maladministration policy, or present any evidence that this topic is discussed with students at induction. However, the centre did state that other induction materials, including PowerPoint presentations are provided to candidates. Therefore, the Accreditation Auditor would expect this to be discussed with candidates and would therefore expect the awarding body to confirm that centres are bringing this issue to the candidates' attention.

This has been recorded as Recommendation 2.

3 List of documents reviewed during centre monitoring

Document title	Date of issue	Version number
Centre 1 Approval Report	01.04.97	
Centre 1 Approval Certificate	23.04.97	
Centre 1 Reapproval Report	15.05.13	
Centre 1 Monitoring Reports	13.11.13 14.06.12 13.07.12	
Centre 1 Status Report	13.11.13	
Centre 1 Health and Safety Checklist		
Centre 1 Complaints and Appeals Policy		
Centre 1 Candidate Induction Programme		
IMI Awards Centre Guidance Handbook		
Centre 2 Approval Certificate		
Centre 2 Reapproval visit Report	05.10.12	
Centre 2 Centre Status Report	04.12.13	
Centre 2 Site Addresses		
Centre 2 Monthly Health and Safety		HSF-015
Centre 2 Qualification and Development Record	Jan 2010	IV01
Centre 2 Standardisation Minutes	07.06.13 12.08.13 20.09.13	
Centre 2 ICO Register	08.10.02 – 07.10.14	
Centre 2 Equality Policy	16.02.09	
IMI Awards Candidate Complaints and Appeals Procedure		
Centre 2 Apprenticeship Programme Learner Welcome Information Pack	01.06.12	LWIP

Centre 2 Approved Centre Monitoring Visit Report	05.10.12 22.10.13	
Centre 2 Internal Verification Review Schedule		
Centre 2 Formative & Summative Discussion Verification Report	March 2010	IV04 – V1
IMI Awards Assessment Attendance Register and Supervision Report	August 2011	Form 31
Centre 2 Sign-up Guidance Pack		

4 Risk rating of Requirements

SQA Accreditation assigns a risk rating to each Requirement recorded as a result of awarding body quality assurance activity. The table below illustrates how the rating for a Requirement is assigned. A weighting is applied that depends on the risk identified and the possible impact on qualifications and/or the learner of failure to implement that Requirement.

The assignment of a risk rating allows an awarding body to assign their resources to areas which have been identified as having a major impact on the qualifications and/or the learner. The risk rating also allows SQA Accreditation to assign its resources to support awarding bodies in improving their performance.

Risk	Impact of Requirements identified through quality assurance activity
Very Low	The Requirement has been identified as likely to cause minimal concern and would not threaten the integrity of the qualification or impact adversely on the learner. Any overall effect is likely to be small scale and/or localised, rather than widespread. The identified Requirement is unlikely to recur once resolved and no long lasting damage would be anticipated.
Low	The Requirement has been identified as low impact but is of sufficient importance to merit intervention, with a low threat to the systems or procedures associated with the qualification and/or impact on the learner. Disruption may not just be localised but more widespread and would possibly cause residual damage; however, this could be easily corrected without further consequence.
Medium	The Requirement has been identified as having the potential to damage the credibility of the qualification and/or be detrimental to the learner. There may be some impact to the systems or procedures that support the qualification or the operational effectiveness of the awarding body.
High	The Requirement has been identified as having a potentially high impact on the integrity and reliability of the qualification, or the effective operation of the awarding body as a whole, if corrective action is not quickly taken. There is a high probability that the qualification and/or learner will be negatively affected.
Very High	The Requirement has been identified as having a serious impact on the integrity and reliability of the qualification or the effective operation of the awarding body if corrective action is not immediately taken. There is a very high probability that the qualification and/or learner will be negatively affected.

In assigning a risk rating, each Requirement is considered on its own merit, taking account of the context in which it was identified.



5 Action Plan

A separate document in Microsoft Word has been forwarded with this centre report.

Areas of concern	Requirement	Risk rating	Proposed action (Please include a description of your intended methodology and details of the evidence that will be provided.)	Target date for completion
Principle 6	The awarding body must ensure centre co-ordinators hold originals or copies of occupational qualifications for Assessors and Verifiers. The awarding body must ensure that standardisation meetings are documented.			
Principle 18	The awarding body must ensure that both centre-devised complaints and appeals policies, as well as awarding body policies adequately reference SQA Accreditation as the Regulator and the situations in which a candidate can complain or appeal.			

Signatures of agreement of Action Plan

For and on behalf of IMI Awards:

Signature

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Date

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For and on behalf of SQA Accreditation:

Signature

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Date

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6 Acceptance of centre monitoring findings

For and on behalf of IMI Awards:

Signature

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Designation

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Date

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For and on behalf of SQA Accreditation:

Signature

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Designation

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Date

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