

# Aligning Centre Assessment and Verification Procedures with the Assessor and Verifier Units

## Case Study

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## **Introduction**

This document contains two case studies, from separate SQA approved centres, highlighting the work that they carried out on their internal quality assurance systems as a result of aligning their practices with the principles of the assessor and verifier qualifications (the A and V Units).

## **Content of case studies**

The case studies focus on the types of decisions and subsequent activities that were undertaken by the two centres involved, namely; Glasgow Council Social Work Services Learning and Development Section and Dumfries and Galloway College.

Each case study provides a summary of the steps undertaken by each centre on their journey towards the updating of their procedures.

The ultimate aim of these case studies is to provide other centres with some practical guidance and support.

# Case Study 1: Dumfries and Galloway College

## Rationale

It became increasingly apparent to the College that the A and V Units did as was originally predicted herald a new era in the assessment and quality assurance of SVQs/Work-based Awards.

As soon as the A1/2 and V1 Units were made available, we incorporated them into our quality assurance systems in readiness for delivery (as we do with all new Awards/Units) but in the early stages, a number of emerging issues informed us that we needed to look beyond delivery. The issues were:

- ◆ The operational differences in following the A and V Units in comparison with the D Units (especially the V1 Unit).
- ◆ The differences in assessment and verification practices between those assessors and verifiers previously qualified to D Units standards and those qualified to A and V Unit standards.
- ◆ The focus of SQA's new external verifier report in relation to assessment and internal verification practice (now aligned with the principles of the A and V Units).

In identifying the above, we gathered information from a number of sources, however the department delivering the A and V Units were instrumental in confirming much of the above as they were in contact with most departments and had first hand experience of the emerging issues through their work with assessor and internal verifier-candidates (those enrolled for the A and V Units) and SQA's External Verifier for the A and V Units. We therefore created an action group lead by the Quality Assurance and Business Management, Computing department. The groups' remit was to address the issues we had identified.

The Action Group (Christine Robertson, Head of Department and Elizabeth McDonald, Quality Officer) recognised the following stages as being instrumental in moving things forward:

Development of an Action Plan to guide the following key actions:

- ◆ Conduct a systems review in relation to current assessment and internal verification practice.
- ◆ Introduce a systematic way of updating and monitoring assessment practice in line with A Unit standards.
- ◆ Revise internal verification procedures in line with the V1 Unit standards.
- ◆ Review and evaluate the changes to procedures and refine.

It seemed natural for us to provide information for this Case Study structured around the above stages.

## Action Plan

The Action Plan was amended and reviewed periodically as we progressed. The final plan you see below is a fairly accurate account of what we did:

<b>Identified action end of February 2006</b>
<b>Review current internal verification procedures</b> The main purpose of the review was to determine whether the College's current Internal Verification procedures met the needs of the appropriate subject specific Assessment Strategies and the A1/2 and V1 Units standards in respect of all SVQ/Work-based Awards being offered at the college.
<b>Action Required</b> <ul style="list-style-type: none"><li>◆ Review current internal assessment and internal verification procedures in relation to A and V Unit standards and requirements of all relevant Assessment Strategies.</li><li>◆ Discuss any staff development implications with HR Department, Programme Managers/Heads of Department, incorporating need for update for Assessors/Verifiers with 'D' units to ensure understanding of A1/2 and V1 Units standards; creation and maintenance of CPD logs, etc.</li><li>◆ Develop draft documentation for staff information/consultation sessions.</li><li>◆ Identification of staff for attendance and schedule dates for delivery of sessions.</li></ul>
<b>Identified action end of March 2006</b>
<ul style="list-style-type: none"><li>◆ Undertake a series of update information sessions on role of assessor as described in the A Units and introduce CPD Logs and Competence Review Records.</li><li>◆ Consult with staff and gather feedback from the above sessions to facilitate the review of the internal verification procedures.</li><li>◆ Agree further dates for staff information sessions ensuring all assessors and verifiers with 'D' Units have the opportunity to participate.</li></ul>
<b>Identified action by end of April 2006</b>
<ul style="list-style-type: none"><li>◆ Complete remainder of staff information sessions.</li><li>◆ Develop draft proposals for amendments to internal verification procedures for SVQs/Work-based Awards and submit to the College Senior Management Team for consideration.</li><li>◆ Agree revised and new standard documentation to be used, for example, Internal Verification Strategy, IV recording documentation, Observation Checklist (assessor monitoring record).</li></ul>

### Identified action by end of May 2006

- ◆ Draft an Internal Verification Strategy template to cover the internal verification of all SVQs/Work-based Awards with appropriate accompanying recording documentation.
- ◆ Submit above to the College Academic Quality Group for approval by 10 May.
- ◆ Develop Staff Development/Training plan for new procedures, paperwork etc, timescales to be agreed with HR Department prior to implementation of the revised/new Internal Verification for session 2006/2007.

### Identified action by end of June 2006

- ◆ Hold a second round of sessions to include:
  - Training on the aims and use of the IV Strategy and how to customise it appropriately for each particular VQ Award area.
  - Provide an opportunity for staff to discuss the draft IV procedure and proposed associated paperwork. All feedback received will be considered and will be used to amend both the procedure and associated paperwork, if appropriate.
- ◆ Disseminate revised IV procedures and associated paperwork.
- ◆ System review to be completed by the end of June and arrangements put in place for annual review.

## Findings from the review of our procedures

Although we were confident that our current internal verification system continued to meet the needs of internal and external verification of all non-work-based awards including HNs and National units, there was a need to improve our current procedures to more appropriately support SVQs/Work-based Awards. This need was confirmed on further analyses of internal and external feedback.

Feedback highlighted a generic need for all assessors (previously and newly qualified) to work to the same 'code of assessment practice'. There was no point in new assessors working towards A1/2 and not being able to produce naturally occurring evidence because their department's systems did not fully support all of the unit requirements.

Furthermore, it was important that all assessors, previously qualified and working towards A1/2, all understood and applied the same principles of assessment. It was clear that assessors required to work in line with the A Units and the college required updated systems to allow that to happen naturally for **all** assessors.

The V1 Unit and associated evidence requirements highlighted more of an individual internal verifier role rather than just a quality assurance process. The internal verifier competences described in this unit were in part different from the

role performed by the internal verifiers within our centre. It became apparent the differences were also down to the fact that our internal verification procedures were originally created to quality assure more than SVQs/Work-based Awards. However SQA's monitoring process accepted this procedure for all awards offered at our centre.

This 'one system' approach was discussed with Senior Management and a decision taken to carry out a more in-depth review of our internal verification procedures to determine whether separate procedures were now more appropriate for the internal verification of SVQs/Work-based Awards. This is covered later in a subsequent section.

## **Staff information sessions**

Before staff information sessions could take place, prior approval was required from the Human Resource Department (HR). A schedule of training sessions was agreed with HR; this was sent to all Heads of Department and Programme Managers with a request for them to identify staff for attendance.

The information sessions focused on:

- ◆ Updating qualified/experienced and new/unqualified assessors on the requirements of A1/2.
- ◆ The actions required by all assessors to ensure they work in line with the A Units and how this should be evidenced (via a Competence Review Checklist and CPD Log).
- ◆ Consulting all assessors/internal verifiers on current internal verification procedures and their appropriateness in relation to the requirements of the A and V Units?

Although the main purpose of the sessions was to aid the transition required from the 'D' units to the A&V units, in order to ensure consistency across the college, the training was mandatory for all staff involved in the assessment and verification of VQs within the College and was led by EMcD and CR. A Powerpoint presentation was prepared and a folder containing the presentation, A&V Unit standards, A1 Competence Review Checklist (downloaded from SQA's website), Continuing Professional Development (CPD) proforma and a completed CPD exemplar was given to each member of staff. Because of the difficulty in getting staff together, we optimised opportunities where possible and did some of the sessions to groups of staff as part of their regular monthly standardisation meetings in the evenings; to date, a total of 18 sessions have been held in the Heathhall Campus and one in the Stranraer Campus. Further information sessions will be offered to new assessors and verifiers on appointment.

On the whole, these sessions have been received very positively and excellent feedback has been given. CPD was a major topic of discussion at each session, and realising that this was likely, one of the Care Assessors had been asked and

had agreed to pilot the CPD proforma. She was very enthusiastic about its usefulness and its ease of completion so encouraging the remaining members of her team. It had been subsequently agreed with HR that we should adopt this proforma for all staff involved in SVQs with a view to extending it to all academic staff. At the end of each of the sessions staff were asked to complete the A1 Competence Review Checklist which we downloaded from SQA's website and as a result of completing the checklists staff were advised to arrange any identified staff development with their appropriate line manager. Subsequently, the internal verifier will use a form already used by the college in the form of an Observation Checklist to monitor and confirm assessor performance.

Staff who have not previously taken a formal approach to CPD have been advised to include the information session and the subsequent completion of the A1 Competence Checklist in their CPD log.

*'Assessors required a mechanism to consolidate/prove that they were 'updated' and working in line. Hence the requirement for the completion of the A1 Competence Review Checklist, CPD Log and Observation Checklist'.*

## Consultation on internal verification procedures

An important part of the information sessions included a review of our internal verification procedures with all attending assessors and internal verifiers. After a number of sessions, it became apparent that our current internal verification procedures were not fully meeting the needs of SVQs/Work-based Awards and their related Assessment Strategies. The outcome of this consultation concluded that we should develop an internal verification system specifically for SVQs/Work-based Awards and continue to operate our current procedure for all non-work-based awards. This proposal was welcomed by practitioners at the information sessions and it was also concluded that there was no need to change the existing system for the internal verification of HNs.

The Internal Verification Procedure was written and then sent to SQA for comment. It was also sent to the Academic Quality Group for outline approval before we proceeded to discuss further with staff.

As part of re-writing the procedures, we set ourselves the task of producing an Internal Verification Strategy (IV Strategy), incorporating the following important elements. Strategies are currently being written for each occupational area and include:

- ◆ Internal verification measures appropriate and specific to that occupational area.
- ◆ The Assessment Strategy requirements for that occupational area.
- ◆ Specific requirements for the induction and training of assessors and verifiers.
- ◆ The names and qualifications of the assessor/verifier team.

Each occupational area has been given the task of developing its own Internal Verification Strategy based on a generic template provided by the college. A draft template was sent to our SQA Quality Assurance Manager and External Verifier for the A and V Units for their comment and these comments were incorporated and included in the current updated version.

*'It was becoming difficult to ensure our Internal Verification Procedures met the requirements of all the different Assessment Strategies, which have gained greater importance and significance over the past few years. It seemed a logical step for each department to create their own Internal Verification Strategy which would set out how each would manage and quality assure the SVQs/Work-based Awards (taking account of their occupation's Assessment Strategy) in their designated occupational area(s)'.*

As with all suggested changes to procedures a review of associated paperwork was a natural requirement to support the revised procedures. In order to achieve standardisation across all VQs, and to avoid the proliferation of paperwork to meet the needs of different stakeholder groups, it was decided that consultation must take place with SQA and a number of other affected Awarding Bodies.

The proposed documentation, which was based on previously accepted paperwork already being used by assessors and internal verifiers (but further streamlined and amended to meet the requirements of the A and V Units), was further discussed with SQA and External Verifiers for EAL and VTCT awards and an agreement reached that they met their awarding body requirements. Once final paperwork has been piloted further discussions will take place during their next respective visits.

## **Review and evaluate the implementation of procedures and refine**

The new procedures were implemented at the beginning of session 2006/2007. Elizabeth McDonald, Quality Officer for the Quality Assurance Department will monitor progress and provide advice to staff where necessary. A review of the process will take place prior to the end of the academic session and staff involved in the procedure will be invited to comment. Feedback and findings will again be used to improve the procedure, where appropriate, prior to continued delivery.

This review and training will be ongoing for Assessors and Internal Verifiers involved in the SVQs in accordance with our Quality Assurance Policies and Procedures.

*'We now think of the A and V units more as codes of practice other than purely qualifications. If all of our assessor/verifiers are naturally working in line with A and V Unit standards, then it promotes consistency across the whole college. It also means that new assessors/verifiers achieve their units by simply following existing procedures rather than doing something different just to gain a qualification.'*

*Dumfries and Galloway College will be happy to share any associated documentation with interested centres and SQA'.*

# **Case Study 2: Glasgow City Council Social Work Services Learning & Development Section**

## **Background to the organisation**

Glasgow City Council Social Work Services Learning & Development Section has been functioning as an SQA Approved Centre since 1993 when as part of Strathclyde Regional Council. Then, after re-organisation in 1996, as Glasgow City Council Social Work Services SVQ Assessment Centre. The Assessment Centre is approved to deliver SVQ 2, 3 and 4, Registered Managers Award in Health & Social Care and the SVQ 3 Community Justice Award. In 2005 the Assessment Centre gained approval to deliver the SVQ 3 & 4 Learning & Development Awards and in September 2006 was approved to deliver the HNC in Social Care. The Assessment Centre is also approved to deliver the A and V Units (and previously delivered the predecessor D Units). The Assessment Centre at present employs a team of 13 full-time Internal Verifiers and 21 full-time Workplace Assessors. Four of the Internal Verifiers and four Workplace Assessors have recently taken up post and require to complete either the V1 or A1 Unit. The remaining Internal Verifiers or Workplace Assessors all hold the D32, 33 and/or D34 Units. A number of the Assessors and Verifiers also hold the D36 Unit.

## **Meeting the requirements of the A and V Units**

Our organisation had an infrastructure that supported SVQs and the principles of the A and V Units fairly well but we recognised that there were some practices especially in relation to V1 that required to be updated/incorporated into our current systems to ensure Assessor/Verifier-candidates had the opportunity to gain their units by following appropriate and established centre procedures and systems.

The following information highlights what we did to improve our current systems to incorporate the requirements of the A and V Units without having to go through major change.

## **Consistency in Assessment Planning**

Although we had been using the same planning format for Care SVQs for quite some time, there were inconsistencies in our assessment planning of the A and V Units and felt that we as assessors of A and V Units must show assessor/verifier-candidates that we practice what we preach. We proposed to our EV for the A and V Units, using exactly the same format as we used for our Care SVQs which he agreed as long as assessment methods were clearly annotated etc.

Using the same planning format has had benefits in terms of assessor/verifier-candidates already being familiar with the format.

## **Developing CPD records to include evaluation**

We already recorded CPD but it was becoming obvious that Assessment Strategies were impacting on the amount and nature of CPD required. The Assessment Strategy for Learning and Development (covering the assessment and verification of the A and V Units) requires assessors and verifiers to undertake at least two activities a year, where the Care Assessment Strategy is less prescriptive but on-going CPD is required to show a current understanding of practice.

A number of our assessors assess/verify Care SVQs as well as the A Units. The SVQ Co-ordinator verifies the A Units and assesses the V Units with the Principal Officer, Learning and Development undertaking the verification of the V Units. We felt the best way to accommodate the requirements of different Assessment Strategies and our own organisational requirements was again to look at using one CPD recording format across the board. However, we also needed to keep a focus on meeting minimum Assessment Strategy requirements, therefore we have incorporated the responsibility for the planning of CPD into the IVs role which fits well with V1 and IVs will record this in individual Assessor's Supervision Notes. This is not to say that we do not encourage assessors and verifiers to take CPD opportunities as they arise as that is also very important, but it encourages a proactive approach which helps to ensure opportunities are not missed, and this targeted approach sits well with helping us meet various Assessment Strategy requirements.

We have added an evaluation section to our CPD recording format to encourage the assessor/verifier to reflect on whether or not their practice has or is being updated. Evaluation can happen at many different levels, and we don't expect evaluation of the CPD activities themselves to be carried out by the assessor/verifier as we feel the organisation as a whole can take this on board when conducting audits of internal training etc.

## **Amending internal verification procedures to accommodate V1 requirements**

It was clear when the A and V Units were accredited in 2002 that the internal verifier's role, as described in V1, was clearly set at a more significant level of responsibility from its predecessor (D34). The V1 Unit mirrored typical management responsibilities; the first of the four elements covering the setting up and maintenance of quality assurance systems; the next two elements covering the support and monitoring of assessors; and the fourth relating to meeting external quality assurance (external verification visits). The elements by their nature appeared to reflect a familiar management cycle in that the establishment of operational standards were the starting point with support and monitoring being provided and finally the maintenance of the internal quality assurance system to meet external audit requirements.

We looked at the general role of the internal verifier as per the V1 Unit and its associated evidence requirements and matched it against our then current

procedures. It was clear that our organisational structure did not need changed in any way to meet V1 responsibility levels as our internal verifiers were already responsible for a designated number of assessors which they managed, supported and monitored as a natural part of their job.

There was, however, some areas of their role that needed to be tweaked in order to accommodate the full requirements of the V1. The areas we identified as requiring attention were:

- ◆ Internal Verification Plans
- ◆ Standardisation meetings
- ◆ Meeting the requirements of external verifier visits

## **Internal verification plans**

In V1, there is a requirement for internal verifiers to formulate verification plans with their assessors to check that they have access to and are applying centre policy and procedures appropriately, also to inform assessors how they will conduct their verification based on a number of factors such as assessor experience, newness of awards/units being assessed etc.

Instead of developing a new document to accommodate the above requirement, we looked at how we could incorporate this into our existing systems. We discussed using the IV Supervision Notes along with other verification documentation and decided that they could easily be used to show that the internal verifier proactively supports and monitors their assessors.

We discussed with our external verifier who concluded that this would be acceptable as verification plans in this context were more about what the IV planned to do, eg an approach rather than completing a single planning document.

## **Standardisation meetings**

We struggled with the prescriptiveness of the A and V Unit evidence requirements surrounding Standardisation Meetings as we felt that the system we had in place supported assessors very well and we did not see the value in changing it without good reason. After a period of internal discussions we put to our EV a case for maintaining our current systems which he agreed.

To meet the requirements of A1.4 and V1.2 we will continue to use our Internal Verification Panel as a mechanism for meeting the requirements for reviewing pieces of evidence ie assessment plans, elements, units, assessment methods etc. However, to more fully accommodate V1 requirements, we will record our feedback to assessors/assessor-candidates and any decisions we make in relation to the evidence we review in more detail.

All internal verifiers sit on this panel, therefore in A1 Unit terms, when the assessor-candidate submits their assessment work for standardisation, their

internal verifier will, along with other colleague internal verifiers, minute the decision(s) and communicate their collective decision back to the assessor-candidate at individual supervision meetings or at sub-team standardisation meetings.

To meet A1.4 requirements, the assessor-candidate will still be expected to attend and contribute towards Sub-team Meetings which are held 3-monthly. These meetings are chaired by the assessor-candidate's internal verifier (which also accommodates the requirements of V1.2) and standardisation does take place in the form of discussing issues and solutions and feedback from the review of evidence from the IV Panel. Relevant issues from these meetings are then fed back to the Centre Co-ordinator who will include if appropriate in the Quarterly Standardisation Meetings which all internal verifiers attend.

### **Meeting the requirements of external verifier visits**

As Centre Co-ordinator, to help meet the requirements of V1.4, I plan to give more responsibility to internal verifiers when Visit Plans are sent to me by the External Verifier. The procedures will be:

- ◆ Internal verifiers will organise portfolios for sampling by the External Verifier for assessors within their respective sub-teams in adequate time for the External Verifier's visit.
- ◆ Internal Verifiers will meet with the External Verifier and provide background information about the assessment process for assessors within their respective sub-teams. These meetings will also provide the Internal Verifiers with the opportunity to explain and/or provide the External Verifier with further information if requested.
- ◆ Concerns relating to external audit decisions can also be discussed by Internal Verifiers at these meetings.
- ◆ Internal Verifiers will now have responsibility for providing assessors with feedback from External Audit decisions at their respective sub-team standardisation meetings.
- ◆ Internal Verifiers will have more ownership of including external audit decisions in internal reviews of procedures within the Assessment Centre.

## Conclusion

As a large and experienced centre, our quality assurance structure has always served us well and we feel with the amendments we have now incorporated we are now in a position to ensure our assessors and verifier can naturally meet A and V Unit requirements.

*'The 'A' and 'V' Unit standards provide an excellent foundation for sound assessment and verification practice. To meet the requirements of the 'V' Unit we have had to develop systems within the Assessment Centre which now allows the Internal Verifiers, not just the SVQ Co-ordinator, to have more autonomy in managing the assessment/verification process, These developments allow the Internal Verifiers to broaden their experience and develop new skills. I also feel the CPD component of both the 'A' and 'V' units are excellent. Assessors and Internal Verifiers not only provide evidence of learning & development but how this has impacted on their practice.*

*Since implementing the above systems within the Assessment Centre the External Verifier has visited and very positive feedback has been received in relation to the systems which we now have in place.'*