

SQA Accreditation

Visit to VTCT Awarding Body Centre Report

31 August 2009 to 12 March 2010

Note

The findings of this report will be presented to the Scottish Qualifications Authority's (SQA) Accreditation Committee and made available to colleagues from the Department for Children, Education, Lifelong Learning and Skills (DCELLS), the Council for the Curriculum, Examinations and Assessment (CCEA) and the Office of the Qualifications and Examinations Regulator (Ofqual) with a view to the contents informing future accreditation and re-accreditation submissions submitted by the Awarding Body.

The report will be published on SQA Accreditation's website.

Please note that SQA Accreditation monitoring activity is conducted on a sampling basis. As a consequence, not all aspects of an Awarding Body's performance in quality assurance, contract compliance, implementation, awarding of certificates, and fee arrangements have been considered in this report to the same depth.

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Section 1: Introduction

The purpose of the visit

SQA Accreditation conducts audits of all awarding bodies offering SQA accredited qualifications or Units. The audit methodology includes visits to a sample of the Awarding Body's approved centres or assessment sites. The aim of these visits is to:

- ◆ confirm that quality assurance arrangements are being conducted by the Awarding Body in accordance with its prescribed arrangements
- ◆ satisfy SQA Accreditation of the Awarding Body's performance against SQA Accreditation's *Awarding Body Criteria (2007)*
- ◆ confirm that the Awarding Body's quality assurance arrangements are being conducted in a consistent manner, within and between centres
- ◆ inform future monitoring activity for the Awarding Body

Centre visit dates

Three centre visits were conducted between 31 August 2009 and 12 March 2010.

Section 2: Scope of monitoring visits

The following Key Goals were included within the scope of the centre monitoring visits:

Key Goal		The Awarding Body's processes for the criteria were:		
		Compliant	In need of improvement	Non-compliant
1	The Awarding Body has robust and transparent governance arrangements.	✓		
2	The Awarding Body's leadership is effective.	✓		
3	The Awarding Body has an effective business planning process.	✓		
4	The Awarding Body has a culture of continuous quality improvement.	✓		
5	The Awarding Body has robust systems in place for the management of the service it offers.	✓		
6	The Awarding Body has an effective communications strategy that supports its Awarding Body activities.			✓
7	The Awarding Body has systems and procedures for the approval of centres.		✓	
8	The Awarding Body has a customer service statement and identified service levels.	✓		
9	The Awarding Body has open and transparent procedures for complaints and appeals.			✓
10	The Awarding Body has an effective system for the registration and certification of candidates.		✓	
11	The Awarding Body has implemented a diversity and equality strategy.	✓		
12	The Awarding Body has a policy and procedure for malpractice and/or maladministration.	✓		
13	The Awarding Body provides clear written guidance for Awarding Body representatives and prospective or approved centres and their staff.	✓		
14	The Awarding Body has a record retention policy that takes into account any regulatory or statutory requirements.		✓	
15	The qualification and associated structure has been designed to ensure it is appropriate and meets the needs	✓		

Key Goal		The Awarding Body's processes for the criteria were:		
		Compliant	In need of improvement	Non-compliant
	of the occupational sector.			
16	The Awarding Body has designed an assessment methodology that is fit for purpose.	✓		
17	The Awarding Body submits timely and detailed qualification submissions.	✓		
18	The Awarding Body's assessment methods produce results that are authentic, reliable and consistent.	✓		
19	The Awarding Body ensures its approved centres have access to appropriately qualified personnel for the range of qualifications they are approved to deliver.	✓		
20	The Awarding Body's systems and procedures for the appointment, training, registration, deployment and monitoring of External Verifiers are effective and robust.	✓		
21	The Awarding Body has systems and procedures for monitoring the quality and consistency of assessment provided at any location. These systems must ensure that assessment is uniformly systematic, valid, and to the defined standard.	✓		

Section 3: Discussion

Areas of good practice

The following areas of good practice were noted:

Centre 1 found VTCT paperwork to be straightforward to use, minimising the amount of time and resources committed by the centre to VTCT administration.

Centre 3 indicated that the wide range and level of qualifications within VTCT's portfolio of awards is seen as a particular strength from both a centre and overall sector perspective.

The centre believes that the VTCT qualifications currently being delivered are structured in a manner that encourages candidates to take ownership of both the relevant award and their own learning.

Awarding Body personnel were described as knowledgeable and supportive by the centre.

Areas of non-compliance

During the course of the centre monitoring visits it was found that the Awarding Body was not in compliance with:

Key Goal 6: The Awarding Body has an effective communication strategy that supports its Awarding Body activities.

Specifically criterion:

- 6.2 Communicate to its approved centres, External Verifiers and other key stakeholders, any pertinent information in connection with SQA accredited qualifications and the Awarding Body activities.

During a review of candidate portfolios at Centre 3, the Auditor noted that VTCT's current *Record of Assessment* book, dated 1 August 2004, which is in use for the SVQ in Beauty Therapy, Level 1, contains an erroneous Group Award number. The document in question indicates the Group Award number to be G7KY 23 instead of the correct code of G7KY 21.

The centre representatives were of the opinion that the Awarding Body had taken some kind of action to address this error. However, they were unable to specify what the action may have been and any associated timescales.

Pre-visit information provided by the centre in respect of candidate registrations would suggest that there is a clear understanding at centre level of the correct Group Award number to be used when registering and certificating Level 1 Beauty Therapy candidates.

However, the Auditor was unable to see evidence of candidate certification records, including copies of relevant SVQ certificates, to be fully assured that the Awarding Body itself was appropriately compensating for the documented error and ensuring that candidates were being certificated at the correct level of award.

Consequently, VTCT must evidence the steps taken to ensure that all centres delivering the above SQA accredited qualification have been fully informed of the erroneous Group Award number. Also, that certification requests for Beauty Therapy at Levels 1 and 3 have been scrutinised prior to issue to ensure accuracy of both award and level, as well as the actions taken via external verification activity to offset potential problems given the Awarding Body's policy of Direct Claim Status (DCR) at approved centres. **Non-compliance 1 refers.**

Key Goal 9: The Awarding Body has open and transparent procedures for complaints and appeals

Specifically criterion:

- 9.1.4 The circumstances under which a centre or candidate is entitled to make an appeal or complaint to SQA Accrediting Body.

At Centre 1, the Auditor was presented with a copy of the centre's *Student Handbook* which included a copy of the centre's own appeals procedure. This document contained specific timescales for progressing an appeal against an assessment decision and clearly indicates at which stage it can be forwarded to the Awarding Body for consideration. However, it does not provide information on the circumstances under which an appellant may seek the intercession of SQA Accreditation in its role as qualification regulator.

The *Student Handbook* does not appear to contain a complaints policy or procedure as such. However, it does contain a grievance procedure which is designed to provide candidates with 'the necessary information to deal with any concerns about their work, working environment or working relationship' within the centre. Guidance is given on the number of stages available to the candidate as part of any grievance process but these do not have any specified timescales for completion and progression. Equally, there is no specified role for the Awarding Body or SQA Accreditation within the process.

At Centre 3, the Auditor was able to review both the Awarding Body's complaints and appeals policies/procedures and those devised by the centre. In respect of the centre documentation, both sets of policies/procedures were found to be fully time bound, referenced the role of the Awarding Body when appropriate but as in the case of Centre 1, failed to reference the potential role of SQA Accreditation as qualifications regulator in either process. It was also noted within the appeals policy that reference was made to calling 'on the help of an SQA External Verifier before making a final decision'.

In respect of VTCT's own appeals procedure evidenced at the centre as part of the *VTCT Centre Handbook, Version 1.0, October 2008*, regarding centre appeals any reference to SQA

Accreditation and the circumstances in which a centre could forward an appeal to the qualifications regulator was also omitted.

Specified timescales for conducting the respective stages of an instigated appeal process was also lacking from all evidenced policies/procedures as well as the *Guide for Centres (Scottish Vocational Qualifications)*, revised October 2008.

Consequently, VTCT must review all centre devised complaints and appeals policies/procedures within approved centres delivering SQA accredited qualifications to ensure that the appropriate references to SQA Accreditation as qualifications regulator are present.

Non-compliance 2 refers.

Areas for improvement

The Auditor considers that the following areas, whilst meeting SQA Accreditation's *Awarding Body Criteria*, have the potential for improvement:

Key Goal 7: The Awarding Body has systems and procedures for the approval of centres.

Specifically criterion:

- 7.16 Inform its approved centres that they must provide SQA's accrediting body with timely access to locations and records for monitoring purposes.

At the centres visited within the 2009 monitoring sample, the Auditor noted considerable variation in the range of documentation available as evidence of centre and qualification approval.

For example, at Centre 1, the Auditor was able to review a letter dated 30 March 2007, which noted that the centre had 'been given general approval by VTCT' as well as the associated *Form NV14, Issue date: 1 August 2006*, which specified the VTCT qualifications for which the centre held approval. However, the Auditor was unable to evidence a copy of a completed *Form NV1, April 2006, Application for Approval as an Assessment Centre* or a completed *VTCT Approval Report* as specified within the *VTCT Centre Handbook, Version 1.0, October 2008*.

Despite the above evidence, the Centre Co-ordinator seemed confused over the actual initial period of approval, suggesting that this may have been as far back as 1 August 2006. Even more confusingly, the Auditor was presented with a copy of a completed *Form NV10* relevant to an External Verifier's inspection visit dated 16 August 2005. However, this document related to a new centre application for another Scottish centre seeking to deliver NVQs in Hairdressing. As far as the Auditor was able to ascertain, the Centre Co-ordinator believed the centre to have had a contractual agreement at that time to provide teaching support to this NVQ centre as part of the application in question.

Although not an issue in itself, the Auditor has a concern that the centre has retained such historical approval records which do not have a direct bearing on its status but was unable to evidence the equivalent documentation in respect of current approval.

The Auditor was also unable to evidence a certificate of approval at Centre 1 as specified within the *VTCT Centre Handbook, Version 1.0, October 2008*.

At Centre 3, the Auditor was able to evidence a fuller range of approval documentation in respect of centre and qualification approval. Copies of relevant *Form NV1, April 2006, Application for Approval as an Assessment Centre*, dated 19 December 2007 and 8 May 2008 respectively, associated letters of approval and *Form NV14s, Issue date: 1 August 2006*, as well as a relevant *Form NV10 External Verifier's Inspection Report* were presented.

However, as with Centre 1, there was no evidence of a certificate of approval as specified within the *VTCT Centre Handbook, Version 1.0, October 2008*.

Consequently, VTCT may wish to review the approval documentation held at centres approved to deliver SQA accredited qualifications through its external verification activities, ensuring the sufficiency and consistency of record keeping in respect of both centre and qualification approval, to meet the requirements of the qualification regulator. **Observation 1 refers.**

Key Goal 10: The Awarding Body has an effective system for the registration and certification of candidates

Specifically criterion:

- 10.9 Ensure that candidates seeking certification for a full SVQ, a Workplace Core Skill Unit or the Assessor/Verifier Units are registered for at least 10 weeks before a claim for certification is made.

At Centre 1, the Centre Co-ordinator indicated no knowledge of the 10 week rule, as well as stating that no guidance surrounding this rule had been provided by VTCT.

The Auditor was unable to evidence any VTCT documentation or correspondence at the centre which provides information in respect of the 10 week rule.

Consequently, VTCT may wish to ensure that any future revisions of the *VTCT Centre Handbook* includes relevant guidance around the 10 week rule and ensure that awareness of the rule is promoted via the Awarding Body's external verification activities. **Observation 2 refers.**

Key Goal 13: The Awarding Body provides clear written guidance for Awarding Body representatives and prospective or approved centres and their staff.

At Centre 1, the Auditor was provided with a copy of centre devised induction materials which included a *Student Handbook*, as previously noted. The Auditor noted that the handbook contained a number of inaccurate references to QCA as the organisation responsible for 'approving awarding bodies' and 'approving qualifications' relative to SVQs.

VTCT may wish to advise its External Verifiers to review all centre devised materials which impact upon SQA accredited qualifications to ensure that they remain accurate and fit-for-purpose within a Scottish context. **Observation 3 refers.**

Key Goal 14: The Awarding Body has a record retention policy that takes into account any regulatory or statutory requirements.

Specifically criterion:

- 14.2 The Awarding Body must ensure it and its approved centres retain candidate records detailing:
- Scottish Candidate Number

The Auditor was unable to see evidence of Centres 1 and 3 using the Scottish Candidate Number (SCN) when registering candidates. Sampled candidate records including portfolios of evidence, made sole use of Awarding Body-produced candidate registration numbers.

The Centre Co-ordinators at both centres confirmed that no pro-active attempts were made to capture candidate SCNs at any stage.

It is imperative that every reasonable effort is made to collect SCNs as SQA produce a Scottish Qualifications Certificate for each candidate which provides an up-to-date total record of achievement for each candidate as they progress through their educational careers. The SCN is, in essence, a unique learner number that distinguishes one candidate from another and allows accurate records of attainment to be kept for each individual.

Consequently, VTCT may wish to take the opportunity to reiterate to all approved centres the importance of actively seeking SCNs from registered candidates undertaking SQA accredited qualifications at the earliest opportunity. **Observation 4 refers.**

Specifically criterion:

- 14.4 The Awarding Body must provide guidance to its approved centres on its minimum time requirement for record retention by centres

At Centre 3, the Centre Co-ordinator indicated that the Awarding Body provided no guidance in respect of a minimum timescale for the retention of assessment and verification records.

On reviewing the *VTCT Centre Handbook, Version 1.0, October 2008*, the Auditor can confirm that the Awarding Body provides comprehensive guidance on the type and content of records that should be retained by approved centres. However, there appears to be no statement in respect of how long records must be retained.

Consequently, VTCT may wish to re-visit its guidance in respect of record retention to provide some direction in respect of a minimum time requirement. **Observation 5 refers.**

Section 4: Action plan

A non-compliance will be recorded where the Lead Auditor finds evidence of non-compliance with either any of the criteria contained in SQA Accreditation's *Awarding Body Criteria (2007)* or any of the conditions attached to SQA accredited qualifications at the time of accreditation. When recording a non-compliance, the Lead Auditor will agree the action to be taken by the Awarding Body and a timetable for the resolution of each non-compliance.

SQA Accreditation risk-rates each non-compliance recorded during an audit of the Awarding Body. This section lists the grade of risk attached to each of the Awarding Body's non-compliances. See Appendix 2 for an explanation of grades of risk.

An observation will be noted to ensure that any area of potential improvement is noted for future reference. As observations are recorded for Awarding Body consideration only, it is not necessary to agree a timescale to resolve the observation in the Awarding Body action plan.

Once agreed, the action plan is signed by representatives from both SQA Accreditation and the Awarding Body and will inform future monitoring activity for the Awarding Body.

Non-compliance

Non-compliance	Agreed action and date	Criterion	Risk rating
1. VTCT's current Record of Assessment book, dated 1 August 2004, evidenced at Centre 3 carries an incorrect Group Award number relative to the SVQ in Beauty Therapy at Level 1.	VTCT must evidence the steps taken to ensure that all centres delivering the SQA accredited qualification are fully informed that the documented Group Award is incorrect, that certification requests pertaining to this award are scrutinised both prior to issue to ensure accuracy, as well as through external verification activity given the Awarding Body's policy of Direct Claim Status (DCR) for approved centres. VTCT should provide SQA Accreditation with evidence of this by 30 September 2010.	Criterion 6.2 refers	3
2. At Centres 1 and 3, the Auditor evidenced a range of appeals and complaints policies, both Awarding Body and centre-devised, that failed to identify and acknowledge the role of SQA Accreditation as the final arbiter in any complaints or appeals relating to SQA accredited qualifications.	VTCT must review all centre-devised complaints and appeals policies/procedures within approved centres delivering SQA accredited qualifications to ensure that the appropriate references to SQA Accreditation as qualifications regulator are present by 30 September 2010.	Criterion 9.1.4 refers	2

Observations

Observations	Agreed action and date	Criterion
1. Across the sample of centres visited, the Auditor noted considerable variation in the range of documentation available as evidence of centre and qualification approval.	VTCT may wish to review the approval documentation held at centres approved to deliver SQA accredited qualifications through its external verification activities, ensuring the sufficiency and consistency of record keeping in respect of both centre and qualification approval, to meet the requirements of the qualification regulator.	Criterion 7.16 refers
2. The Centre Co-ordinator at Centre 1 indicated no knowledge of the 10 week rule, as well as stating that no guidance surrounding this rule had been provided by VTCT.	VTCT may wish to ensure that any future revisions of the VTCT <i>Centre Handbook</i> include relevant guidance around the 10 week rule and ensure that awareness of the rule is promoted via the Awarding Body's external verification activities.	Criterion 10.9 refers
3. At Centre 3, the Auditor noted that centre-devised documentation contained a number of inaccurate references to QCA as the organisation responsible for 'approving awarding bodies' and 'approving qualifications' relative to SVQs.	VTCT may wish to advise its External Verifiers to review all centre-devised materials which impact upon SQA accredited qualifications to ensure that they remain accurate and fit-for-purpose within a Scottish context.	Key Goal 13 refers
4. At Centres 1 and 3, the Centre Co-ordinators acknowledged that no proactive attempts were made to capture candidate SCNs at any stage.	VTCT may wish to take the opportunity to re-iterate to all approved centres the importance of actively seeking SCNs from registered candidates undertaking SQA accredited qualifications at the earliest opportunity.	Criterion 14.2 refers
5. At Centre 3, the Centre Co-ordinator indicated that the Awarding Body provided no guidance in respect of a minimum timescale for the retention of assessment and verification records.	VTCT may wish to revisit its guidance in respect of record retention to provide some direction in respect of a minimum time requirement.	Criterion 14.4 refers

Signatures of agreement to Awarding Body action plan: 2008

For and on behalf of VTCT Awarding
Body

For and on behalf of SQA Accreditation

Signature.....

Signature.....

Designation.....

Designation.....

Date.....

Date.....

Appendix 1: Documents reviewed

The following documents were reviewed during the course of the centre monitoring visits.

Document title	Version number (if known)	Issue date (if known)
VTCT Centre Handbook	Version 1.0	October 2008
UK Assessment Centre Bulletin		
Form NV14 VTCT Qualification Groups		1 August 2006
Form NV1 Application for Approval as an Assessment Centre		April 2006
Form NV10 External Verifier's Inspection Report		
Form NV2/NV10 External Verifier's Report		August 2006
Form NV2/NV10 External Verifier's Report		September 2009
Form NV2/NV10a Assessor/Internal Verifier Records		September 2008
Candidate Registration (VT03)	Version 1	1 April 2008
VTCT News	Issue 6	Winter 2009
VTCT Guidance in relation to Reasonable Adjustments and Special Considerations	First edition	1 February 2006
Habia Assessment Strategy for Beauty Therapy NVQs and SVQs		
VTCT Appeals Procedure		

Appendix 2: Risk rating of non-compliances

SQA Accreditation assigns a risk rating to each non-compliance recorded as a result of an Awarding Body audit or through our centre monitoring activity. The table below illustrates how the rating for a non-compliance is assigned and identifies the possible impact of the non-compliance on qualifications and/or the learner.

The assignment of a risk rating allows an Awarding Body to target their resources to areas that have been identified as having a major impact. The risk rating also allows SQA Accreditation to target its resources to support awarding bodies in improving their performance.

Rating	Risk	Impact of non-compliance
1	Very Low	The non-compliance is 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 issue identified is unlikely to recur once resolved and no long lasting damage would be anticipated.
2	Low	The non-compliance is of low impact but 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.
3	Medium	The non-compliance could potentially 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.
4	High	The non-compliance could have a high impact on the integrity and reliability of the qualification or the effective operation of 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.
5	Very High	The non-compliance will have 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 non-compliance is considered on its own merit, taking account of the context in which it was identified.