



NOTE: Any text shown in this font (Consolas) will not appear in the final report.

Scottish Vocational Qualifications

Qualification Verification Summary Report 2017 Scottish Vocational Qualifications

Care 82

Please provide the details indicated by the angle brackets above.
In <qualification type> insert one or more of the following as appropriate:

Scottish Vocational Qualifications

Note: National units include those that contribute to National Qualification Group Awards.

Please also complete the table below. This information will not appear in the published report.

| | |
|---------------------------|----------------|
| Verification group number | 82 |
| Senior external verifier | John Currie |
| Date completed | September 2017 |

Notes for report authors

Qualification verification summary reports (QVSRs) are designed to provide centres, verification teams and SQA staff with a summary report on visiting and central verification activity in relation to a qualification within a verification group (eg HN Business).

The QVSR should provide information on how well centres are meeting the requirements of the quality assurance criteria.

Report authors should aim is to provide information for centres on the overall standards in relation to the following criteria:

Resources: Criteria 2.1 and 2.4

Candidate support: Criteria 3.2 and 3.3

Internal assessment and verification: Criteria 4.2, 4.3, 4.4, 4.6, 4.7, 4.9.

Please note that the criteria differ slightly depending on the qualification type. You should ensure that your report covers the relevant criteria as outlined in the tables below:

| | 2.1 | 2.4 | 3.2 | 3.3 | 4.2 | 4.3 | 4.4 | 4.6 | 4.7 | 4.9 |
|--|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| HN | | X | X | X | X | X | X | X | X | X |
| HN GU (exam) | | | | | X | X | X | X | X | |
| HN GU (project) | | X | X | X | X | X | X | X | X | X |
| SVQ | X | X | X | X | X | X | X | X | X | X |
| National units that contribute to NQ Group Awards | | X | X | X | X | X | X | X | X | x |
| Regulated Qualifications for England Wales | X | X | X | X | X | X | X | X | X | x |

China

| | 2.1 | 2.4 | 3.2 | 3.3 | 4.2 | 4.3 | 4.4 | 4.6 | 4.7 | 4.9 |
|------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| HN | X | X | X | X | X | X | X | X | X | x |
| HN GU (exam) | | | | | X | X | X | X | X | |
| HN GU (project) | | | | | X | X | X | X | X | |

Writing your report

When preparing your report, please:

- write in plain English using the headings provided on the following pages
- ensure that your comments stand on their own within the overall context of the report, and are not just responses to the prompts
- be as specific as possible
- use objective language — base your comments on fact rather than assumption or opinion and indicate if the standard is improving or deteriorating
- back-up all comments with verification activity evidence — for example, provide an indication of what is causing a problem
- follow SQA’s writing guidance as outlined in *Writing for SQA* and *SQA’s Guide to Using Capital Letters* — see SQA Academy/Appointee Portal

Reviewing the quality criteria

Each quality assurance criterion to be reviewed and evaluated is listed in the pages that follow. Each criterion includes a note (in this font) which gives guidance on what you should comment on. The note will not appear in the final report.

You should use evaluative language and quantify your evaluations using the terms shown below:

all — 100%
almost all — 90%
most/many — 60%
some — 40%
more than a few — 10%
very few — 5%

Here is an example for criterion 2.1:

Criterion 2.1: Assessor and internal verifier competence to assess and verify

Please comment on the extent to which staff at centres are qualified, occupationally experienced and where relevant receiving appropriate CPD.

‘Staff at almost all centres undertook appropriate professional and vocational continuing professional development (CPD) activities to ensure that they maintained currency. CPD records were completed effectively by staff at almost all centres. At one centre staff reflected on how the CPD had impacted on their assessment practice and, where necessary, identified individual targets for further improvement.

However, assessors at more than a few centres failed to undertake CPD activities to ensure industrial currency in line with assessment strategy requirements.’

Please start your report below by over-typing ‘Start here...’.

Introduction

In this section please list the units that were verified (include the unit codes and unit titles) and provide a short background statement to set this year’s report in context.

Start here...

Social Services and Healthcare at SCQF level 9 (GH61 24)

Social Services and Healthcare at SCQF level 7 (GH60 23)

Social Services and Healthcare at SCQF level 6 (GH5Y 22)

SVQ 4 Care Services Leadership and Management at SCQF level 10(GJ9V 24)

SVQ 4 in Leadership and Management for Care Services at SCQF level 10 (G8W8 24)

SVQ 2 Health and Social Care (G7LN 22)

SVQ 3 Health and Social Care (Adults) (G7LP 23)

SVQ 3 Health and Social Care (Children and Young People) (G7LV 23)

SVQ 4 Health and Social Care (Adults) (G7LR 24)

SVQ 4 Health and Social Care (Children and Young People) (G7LT24)

Category 2: Resources

Criterion 2.1: Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.

(This criterion should be completed for regulated qualifications only.)

Please comment on the extent to which staff at centres are qualified, occupationally experienced and, where relevant, are receiving appropriate CPD.

Staff at almost all centres were compliant for this criterion. Almost all staff are appropriately professionally competent and qualified to deliver the awards. Almost all also hold the relevant assessor/verifier qualifications. Staff information and evidence of competence and qualifications was available for External Verifiers (EVs) to review. CPD records were also available showing recent and relevant activity. CPD records are in the main good and examples within reports have been highlighted as good practice. One example of good practice is as follows: “The IV observes the assessor and there is reference to L&D9Di standards, this shows that assessors are currently operating within the current standards for assessment (L&D9Di)”.

In more than a few centres, there have been issues with unqualified assessors signing off units without this being countersigned by a qualified assessor. This can be difficult in small centres where there is only one assessor and one internal verifier. This will be explored further and discussed at the Scottish Awarding Body Forum in November 2017 to look for a solution in order that centres can be supported to meet the assessment strategy requirements.

It may be useful for assessors and verifiers to complete the CPD toolkit, showing how they are working to and understand the current national standards of assessment/verification (L&D9Di/L&D 11).

Criterion 2.4: There must be evidence of initial and ongoing reviews of assessment environments; equipment; and reference, learning and assessment materials.

Comment on the effectiveness of ongoing reviews of the assessment environment(s) assessment procedures, equipment, learning resources and assessment materials at centres.

Almost all centres are compliant with this criterion. In the reports reviewed this year, there is clear evidence that assessment environments, equipment, reference and learning materials are reviewed regularly. Centres vary in their timescales regarding their review cycle with some being annually and others being longer. EVs are required to ensure that before giving feedback to the centre with regards to non-compliance that they are aware of the timescales the centre has decided to adopt.

Centres appear to be using the SQA preferred 3 stage model of verification, however, there is some variation in its implementation, this will be explored in a workshop at the SVQ updates in November 2018

An example of this criterion's compliance. "There is evidence of policies being reviewed via the use of a footer e.g. The Verification Strategy has the footer version number and date of review."

Category 3: Candidate support

Criterion 3.2: Candidates' development needs and prior achievements (where appropriate) must be matched against the requirements of the award.

Please comment on the extent to which centres identify candidate prior achievements and development needs and match them to the qualification.

From the review of reports, it is clear, that almost all centres deliver an induction process for candidates that contains information relating to what they need to do to complete their award. It is clear from EV feedback that the candidate induction process within centres covers areas such as Quality Assurance, the SCQF Framework, levels of the awards being assessed and roles and responsibilities of each person in the assessment process.

There is also evidence in reports of detailed candidate induction checklist being completed by candidates.

An example of RPL contained in a report stated the following:

“through my (EV) conversation with assessors it was clear that this(RPL) is used where necessary and relevant. There is a form contained in the assessor/verifier induction handbook that discusses prior achievements, where and what it can be used for.”

Another example is” “During their first interview with the Assessor it is noted if any special arrangements are necessary to aid the completion of their award. The assessor and candidate complete an assessment plan and during induction the assessor talks them through what a VQ is and how it can be achieved. They also use this time to look at prior learning and achievements and how these can be used to complete their award. This is all recorded in the learning agreement and signed by the Candidate and the Assessor”

Criterion 3.3: Candidates must have scheduled contact with their assessor to review their progress and to revise their assessment plans accordingly.

Please comment on how effective centres are at ensuring scheduled contact with candidates throughout the life of the qualification.

All centres comply with this criterion. Where a centre uses an electronic system, e.g. “Proof Positive”, there is a section which clearly shows contact between assessor and candidate on a scheduled and regular basis.

In paper portfolios, assessment plans and records of contact contained within candidates' portfolios clearly showed scheduled and regular contact between the assessor and candidate. This contributed to the assessment of candidates giving clear expectations of what to complete for the next meeting between the assessor and candidate.

Category 4: Internal assessment and verification

Criterion 4.2: Internal assessment and verification procedures must be implemented to ensure standardisation of assessment.

Please comment on how well assessors and internal verifiers apply their centre's assessment and verification procedures.

From the reports sampled this session it is clear centres are using the Assessment Strategy well and in conjunction with the 'Guidance to Assessment' document. Candidates' evidence is of a good standard in almost all centres verified. The SCQF Level of awards has changed the standard of written work produced by candidates and one of the most frequent quotes from EVs has been "that the work sampled meets the SCQF level of the award".

Internal verification clearly happens in centres and they all have their own sampling strategy. As stated in 2.4: Centres appear to be using the SQA preferred 3 stage model of verification, however, there is some variation in its implementation; this will be explored in a workshop at the SVQ updates in November 2017

As noted above, it may be useful for centres to review CPD for assessors and internal verifiers to ensure that they are working in line with current national standards for assessment and verification (L&D9di and L&D 11).

Criterion 4.3: Assessment instruments and methods and their selection and use must be valid, reliable, practicable, equitable and fair.

Please comment on how centres have demonstrated the effective selection and use of assessment methods/instruments to ensure validity, equitability and fairness in assessment.

All centres use a range of evidence gathering methods that are appropriate and adhere to the Assessment Strategy. Candidates have produced highly detailed reflective accounts and products of practice.

In one centre, there is a learner's appendix to the candidate handbook which contains information about the principals of assessment i.e. Valid, Authentic, Reliable, Current, Sufficient. (V.A.R.C.S) giving clear guidance to candidates and assessors.

Where candidates required additional support, the use of professional discussion and questioning and observation has been used more extensively to support candidate requirements.

Criterion 4.4: Assessment evidence must be the candidate's own work, generated under SQA's required conditions.

Please comment on centres' processes and procedures for ensuring that evidence on which an assessment judgement decision is made solely belongs to the candidate.

Almost all centres complied with this criterion. In reports reviewed, candidates sign declaration forms and the centres have clear plagiarism and malpractice policies.

EVs noted in their reports that the assessment methods of Observation, Witness testimony and expert witness have all been used to authenticate that the work is the candidates own work. This criterion is part of our next standardisation meeting for EVs, to give clarity of information that if candidates are not using an academic referencing system within their reflective accounts, centres cannot find the centre non-compliant for this criterion.

Criterion 4.6: Evidence of candidates' work must be accurately and consistently judged by assessors against SQA's requirements.

Please comment on centres' abilities to make accurate and consistent assessment judgements, to ensure the integrity of the SQA qualification.

Reports from EVs noted that they had sampled candidates evidence across almost all units within all awards being delivered by centres.

It is confirmed by EVs that in almost all centres that the evidence presented from candidates was clearly at the required SCQF level of the awards being assessed and that the evidence sampled met the standards being assessed on a consistent basis.

The assessment cycle is being followed within centres, with evidence of planning, giving feedback and making judgements/decisions.

Some of the comments from EV reports is as follows: "A minute of standardisation was sampled and this showed evidence of the Assessment Strategy being a standing item on the agenda."

Another stated: "Assessors make consistent judgements and decisions across units and that this was confirmed through the verification sampling strategy being implemented within the centre."

A result of a workshop presentation at a recent customer support event where holistic planning was a workshop topic. Evidence of holistic approach to assessment planning has been seen to have been implemented by centre through different mediums e.g. mind-mapping .

In almost all centres standardisation meetings are being held and candidates evidence is documented in minutes as being discussed and agreements reached as to the standards being met. This clearly demonstrates that standardisation adds to the quality of assessment delivery. Consistent and accurate judgements and decisions are being within these centres.

In very few centres standardisation still requires some development work in relation to candidate's evidence being discussed. Standardisation will also this will be explored in a workshop at the SVQ updates in November 2018

Criterion 4.7: Candidate evidence must be retained in line with SQA requirements.

Please comment on how effective centres are at retaining candidate assessment evidence for defined periods for the purposes of internal and external verification.

All centres comply with this criterion although they do not all have the same policy. Some centres retain the candidates evidence for longer than SQA requirements and this is down to other mitigating circumstances e.g. funding issues or other organisational reasons.

It could be suggested that centres include in their policies of "data cleansing" or "record and retention" policies a section regarding SQA requirements for retention. This would ensure standardisation for this criteria across centres.

Criterion 4.9: Feedback from qualification verifiers must be disseminated to staff and used to inform assessment practice.

Please comment on how effectively centres make known the results of qualification verification to centre staff to affirm what is being done well and to highlight areas for improvement.

All centres comply with this criterion. Evidence from reports reviewed showed that centres disseminate these reports to assessors and verifiers. Some centres also send reports to directors or chief executives to inform them of candidates' achievements.

Some assessors and verifiers have included these reports within their CPD records, through discussions with EVs assessors and IV's confirmed that they received and discussed the EV Reports.

Areas of good practice report by qualification verifiers

Please comment on key areas of good practice identified within the report. This does not need to be detailed, as the detail will be evident from the report narrative. A short list of bullet points will suffice, for example:

- ◆ Reflection and target-setting in relation to CPD undertaken
- ◆ etc

The following good practice was reported during session 2016–17:

- ◆ Some examples of CPD activity such as observation of assessor by the I/V and feedback being linked to L&D9Di standards.
- ◆ Assessors and verifiers have a strong commitment in supporting candidates.
- ◆ The standard of candidate's written work has improved and this is clearly linked to the inclusion of the SCQF level of the award.

Specific areas for development

Please comment on key areas for development within the narrative for each quality assurance criterion. This does not need to be detailed, as the detail will be evident from the report. A short list of bullet points will suffice, for example:

- ◆ CPD to ensure compliance with the assessment strategy
- ◆ etc

The following area for development was reported during session 2016–17:

- ◆ Implementation of SQA preferred model of verification known as the 3, stage model.
- ◆ Standardisation.
- ◆ CPD toolkit for assessors and verifiers who do not hold the current standards for assessment and verification. (L&D9Di/L&D11)
- ◆ Feedback from candidates clearly states that assessors go above and beyond their role of assessing, they mentor/coach/teach/counsel candidates and this has been expressed by a large number of candidates who have been interviewed as part of the verification visits.

