



**Higher National Qualifications**

**Qualification Verification Summary Report 2017**

**Complementary Therapies**

## Introduction

F9T5	34	Human Anatomy and Physiology for Beauty and Complementary Therapists
F81T	34	Complementary Therapies: Graded Unit 1
F1D0	35	Complementary Therapies: Graded Unit 2

The HNC and HND Complementary Therapies awards were validated in October 2006. These awards were developed due to the specialised nature of complementary therapies and the national interest in this emerging occupational area. A limited number of centres deliver the Complementary Therapy awards. A revised HNC in Complementary Therapies was validated in August 2016. Centres where external verification activity took place were delivering the lapsing awards.

Five external verification visits took place this session (2016–17) — three for Unit F9T5 34 Human Anatomy and Physiology for Beauty and Complementary Therapists, one for Complementary Therapies: Graded Unit 1, and one for Complementary Therapies: Graded Unit 2. All visits were successful, with an overall outcome rating of significant strengths.

Unit F9T5 34 Human Anatomy and Physiology for Beauty and Complementary Therapists is a mandatory unit in both the HNC/HND Complementary Therapy awards and the HNC/HND Beauty Therapy awards. In all centres where external verification of this unit took place, delivery was on the HNC/HND Beauty Therapy programme.

## **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.**

Not verified for this qualification type.

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

Evidence of annual review was available in all centres. In many centres, review documentation is stored, and was viewed, online. Standardisation and team meeting records demonstrated that environment, and learning and assessment materials were reviewed in all centres on an ongoing basis.

One centre visited had recently moved into a new 'state of the art' building, where each teaching area is designed to give an excellent environment for learning and teaching.

## **Category 3: Candidate support**

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

Learners in all centres had personal learning plans (PLPs) in place, which are compiled following the recruitment and induction processes. Prior learning had been taken into consideration, and matched against the award requirements in all instances. Learners in many centres had previously successfully completed related studies, eg Beauty Therapy SVQ/HN, which gave these learners more scope in the selection of optional units.

Learners with identified support needs, if disclosed, were referred to centre support teams where the level of support required is assessed and put in place. Learners in all centres are also able to self-refer or be referred for additional support as required throughout their course of study.

In one centre, one class group had been allocated 25% extra time due to additional needs which had been identified. This centre also uses Gold write and makes laptops available for learners who require this type of support. Learners in another centre take part in workshops run by the library team, who give advice on project work and layout for written reports.

Learners in all centres are given opportunities to broaden their knowledge via links with external organisations, working within the community with diverse client groups, additional workshops, and enrichment activities. Learners in some centres take part in a commercial salon.

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

Learners in all centres have scheduled contact with their assessors when progress is reviewed. Evidence of constructive and supportive feedback to learners was seen through reviews and feedback sheets. Learners undertaking graded units have three mentor sessions following submission and marking of each stage — planning, developing and evaluating.

In one centre learners had a support tutor who they meet to review and update any required additional needs; updates are fed back to assessors and shown on an electronic register. In another centre learners had assessment planners issued at the start of the course. This centre has an open door policy enabling learners to access assessors when required.

## **Category 4: Internal assessment and verification**

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

Completed evidence of the internal verification activity carried out was available in all centres, clearly showing implementation of each centre's internal verification process and supporting standardisation. Pre-, mid- and post-internal verification documentation was available. Evidence in the form of standardisation meeting minutes also support the effectiveness of the assessment process.

Where assessment was carried out over multiple campuses the internal verification process supported standardisation in the form of an electronic system where records are kept. Evidence of standardisation meetings was also available showing that assessors over both campuses communicate on a regular basis facilitating a consistent assessment approach.

In one centre where there was one assessor and one internal verifier responsible for the unit sampled, they alternate assessor/internal verifier roles each academic session, ensuring both have a thorough knowledge of the content and assessment for the unit.

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

The SQA exemplar was being used effectively by all centres delivering F9T5 34 Human Anatomy and Physiology for Beauty and Complementary Therapists. All instruments of assessment had been subject to a pre-delivery internal verification check.

The SQA exemplar and marking guidelines were being used by all centres for both Complementary Therapies: Graded units 1 and 2. The marking guidelines were being used effectively supported by written feedback in all centres to justify the marks awarded to each learner for each section of and overall grade.

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

Plagiarism is discussed in all centres with learners at induction and regularly throughout the course of study. Learners in almost all centres sign an authenticity record/plagiarism sheet at induction. Assessments for unit F9T5 34 were undertaken in all centres as detailed in the evidence requirements section of the unit specification.

Where projects form part of an assessment, these are individual to each learner and more than a few centres use Turnitin software for checking. In one centre staff commented that a number of learners are now using an app on their mobile phones to check their reports before submission.

The graded units are generated by a given brief. Evidence viewed demonstrated that each learner has a different approach to the generation of their assignment content. Many centres use Turnitin software as a method of ensuring the evidence generated is the learners own work.

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

All centres were using SQA developed exemplars for the units which were subject to external verification. The evidence viewed indicated that learner evidence had been marked in accordance with the guidelines contained in exemplars and confirmed that accurate, consistent assessment judgements had been made by assessors against SQA requirements. Assessment decisions were supported by centre internal verification sampling.

Assessor feedback on completed assessments was constructive and supportive. Feedback on each stage of graded unit submissions were informative, clearly giving justification for marks allocated and final grade achieved. Cross-marking of graded unit submissions is carried out in more than a few centres.

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

All centres were aware of SQA retention guidelines; evidence however was retained by almost all beyond these. Information requested to inform planning for external verification received from all centres and requested evidence identified in visit plans made available on external verification visits.

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

In all centres feedback was received by the centre SQA co-ordinator/quality unit who disseminates the report to the appropriate staff. In two centres this was done via the centre share drive. Good practice is highlighted, required actions and/or recommendations where applicable, are recorded and actioned by the relevant member of staff in agreed timescales.

Outcomes of verification activity is discussed and recorded at regular staff/standardisation meetings in all centres; any relevant changes are identified and will form part of the annual review process.

**Areas of good practice reported by qualification verifiers**

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

- ◆ Scope of optional unit selection widened by considering prior achievement (3.2)
- ◆ Workshops which give advice on project work and layout for written reports (3.2)
- ◆ Opportunities to broaden the learning experience (3.2)
- ◆ Links with healthcare providers (3.2)
- ◆ Carrying out treatments with diverse client groups (3.2)
- ◆ Open door policy giving continuous support to learners throughout course (3.3)
- ◆ Assessor and internal verifier reverse roles in yearly cycle (4.2)
- ◆ Cross-marking of graded unit (4.6)

**Specific areas for development**

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

- ◆ Review timescale for unit delivery within the academic session (4.3)