**Higher National and Graded Unit**

# Qualification Verification Summary Report 2017
# Sport and Fitness

## Introduction

The following units were looked at by the qualification verification team during the academic session 2016-17:

H01A 34:  Inclusive Sports Provision: An Introduction
H1S2 34:  Working Effectively & Safely with Clients [seen in two centres]
H1S5 34:  Planning and Management of Personal Training
H4TB 34:  Exercise Physiology & Anatomy [seen in two centres]
H4TC 34:  Exercise Principles and Programming
H4TD 34:  Flexibility Training
H4TE 34:  Health Screening [seen in two centres]
H4TF 34:  Nutrition for Fitness, Health and Exercise
H4TK 34:  Plan, Teach and Evaluate a Gym Based Exercise Session (seen in two centres)
H4T8 35:  Current Exercise Trends [seen in two centres. In one centre, despite prior agreement to this effect, no evidence was presented]
H4T9 34:  Exercise and Fitness: Health and Safety Management
H4T6 35:  Applied Fitness Assessment for Special Population Groups
H4T5 35:  Applied Exercise Prescription for Special Population Groups
FW60 34:  Strength and Conditioning: An Introduction
FW63 34:  Fitness Testing in Sport
FX9K 35:  Fitness Conditioning in Sport [seen in three centres. In one centre, despite prior agreement to this effect, limited evidence was presented]

H4VL 34:  Fitness, Health and Exercise: Graded Unit 1
H4VM 35:  Fitness, Health and Exercise: Graded Unit 2

After an initial standardisation meeting, the decision was made to view a broad spectrum of units covering both theory and practical elements of both the HNC and HND year. This target was achieved, and in general terms centres have developed sound working practice derived from delivering this course over a long period. It is apparent that the issue of merger has presented a number of logistical problems for centres: while some have made excellent progress in responding to these demands, there remain some significant issues still to be resolved. The team have been able to disseminate a wide range of good practice suggestions during the visit programme, many of which have been put into practice by centres submitting material for prior verification following a visit.

# 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 is not assessed as part of the HN programme, however it was apparent that centres have exceptionally well qualified teams delivering the award.

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

All centres visited had procedures in place to ensure review as required by this criterion. These varied from regular team meetings where the review process was a standing agenda item, to a basic QA pro forma which required staff to carry out review on an annual basis. These differences resulted in problems arising in some centres where the system had been treated as a paper exercise without thorough checks being made. Best practice was demonstrated in the form of regular team meetings involving reviews of learning, teaching and assessment materials, and reflections on teaching practice. In some instances, Health and safety reviews of buildings and equipment were conducted in association with the centre's Estates department. Centres where issues arose had not identified changes to unit specifications, had made alterations to assessment processes which overlooked critical evidence requirements, or had misinterpreted the demands of the SCQF. Generally speaking, reviews of assessment environments, of equipment, and of reference, learning and assessment materials were carried out effectively.

**Additional comments regarding graded units**

In more than a few centres, staff have met with other colleges to share information and good practice on delivery and assessment of GU1.

# Category 3: Candidate support

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

In all of the centres visited, candidate selection processes were well documented and appropriate for the award(s). Students undergo college-defined selection processes and are generally placed at an appropriate level for their identified abilities. Entry requirements for HN are normally two Highers, though choice of subjects or qualifications depend on the individual candidates' other experience and/or skills.

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

All centres visited had robust procedures in place to support candidates. Most visits involved discussion with candidates, who were unanimous in their positive comments relating to this criterion. Centres offer significant support to learners at all levels: guidance time is offered through the use of units such as Personal Development Planning, or tutorial/individual guidance time is specifically timetabled. All centres visited had comprehensive arrangements in place for candidates with additional support needs.

In all centres candidates felt that assessors and IVs were easy to approach, and accessible when they required feedback regarding their assessment progress. Good practice was demonstrated where staff involved candidates in the decision making regarding assessment times and deadlines: candidates felt involved and empowered by this. Positive comments were also made about verbal feedback provided by lecturers, which gave depth and understanding to written assessment decisions. In one centre, a lack of assessor availability had been identified through the review process (See section 2.4 above) and the problem satisfactorily resolved.

**Additional comments regarding graded units**
In almost all centres, Graded Unit meetings with students are recorded for each stage. Good practice was demonstrated where centres provided these records as part of the QV process. In a very few centres, staff indicated that progress meetings were conducted informally (or in conjunction with other units), and thus went unrecorded. In all centres there is regular contact time between students and assessors, with formal assessment timeframes notified to students at the start of each of the three stages.

# Category 4: Internal assessment and verification

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

Most centres showed significant strengths in this criterion, however more than a few demonstrated amber or red results. This issue has been more prevalent in recent sessions, as a result of centres struggling with the demands of increased student numbers, multiple campuses resulting from merger, and variance in KPIs. Significant strengths were apparent in the form of robust application of clearly defined procedures, merged colleges drawing together staff from multiple campuses to ensure a standardised approach to assessment, the use of experienced staff to mentor new lecturers, and extensive use of the SQA prior verification service.

Problems occurred where centres had misinterpreted the requirements of SCQF levels, and a lack of expansion of marking guidance resulted in inconsistent assessment decisions, or second assessments mirrored first attempts in direct contravention of centre (and SQA) guidance. Centres should be particularly vigilant when assessing across different units to ensure that all of the evidence requirements have been met.

During the course of the session, it became apparent that whilst all centres have excellent procedures and policies in place, the interpretation in practice was variable. IV feedback was in some cases limited to commentary such as 'I agree with the assessment decision', rather than an evaluative review of process and response. It should be noted that where this criterion does not meet SQA standards, there is frequently a domino-type effect whereby criteria 4.3 and 4.6 are also affected.

It should also be noted that simply recording an issue (eg a non-compliant assessment) in an IV meeting does not resolve the problem. Action to address the issue should be allocated to a specific individual to resolve, and would apply to the affected cohort as well as all those following.

### Additional comments regarding graded units

In some centres, assessment materials from the current ASP had been adapted and accepted by the SQA prior verification process. In more than a few centres, standardisation and internal verification processes had failed to identify that some candidate research projects submitted were not in line with the evidence requirements, with the result that candidates failed to meet minimum evidence requirements. Centres should be vigilant to ensure this does not occur.

Good practice was observed where many centres carried out on course IV after the completion of each stage. In Graded Unit 2 it was noted that some centres used mentors to provide independent corroboration of candidate interventions. Many centres had developed extended marking guidance (in the form of competence statements) to ensure standardised awarding of additional marks.

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

Most centres showed significant strengths in this criterion, however more than a few demonstrated amber or red results. Centres are generally using materials derived from SQA produced exemplars, however it has become apparent during visits that there has been a little 'drift' from the evidence requirements where centres have re-interpreted material. This is also apparent in the development of resit assessments, or those units where there is no exemplar (SQA policy generally is to only produce exemplars for core units). In more than a few centres exemplars had been modified and the changes have not been subject to effective IV, with the result that materials failed to cover the evidence requirements. This was due to both revisions made in the marking allocations, or inappropriate alteration to the assessment brief. Another issue noted by the EV team was where assessments had been split into smaller sections, thus reducing the SCQF level and academic demand. In some instances, assessment instruments used were compliant with the evidence requirements of the unit specifications, but (for example in the case of unit FX9K 35) the assessor and IV had not ensured that the marking guidance was appropriate — see also section 4.6 below.

Good practice was noted in most centres, with SQA exemplars or prior-verified material used across multiple campuses as standard. The value of a clear re-assessment policy to ensure standards are met across all outcomes was apparent in most centres. Where materials have been developed, consistency among different assessors has been ensured with the development of effective statements of minimum competence to form the basis of marking guidance. There is a broad awareness and increasing use of the SQA prior verification service, and feedback to SQA verifiers regarding the support materials has in the majority of cases been positive.

**Additional comments regarding graded units**

In some centres, the practice of handing candidates the SQA unit specification had created some difficulties regarding candidate interpretation of the brief. Good practice was observed in centres where the briefs for each stage had been written in the third person, and benefited from being re-worded in more 'learner friendly' language. Revising the layout of information in each brief was of benefit to some learners as it helped them more easily understand the requirements of the graded units. See also comments in 4.2 above regarding the awarding of additional marks.

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

All centres had procedures in place to ensure that candidates' work was their own. This varied from a plagiarism agreement form/malpractice policy document signed at induction, to signatures of authenticity on all submitted work. Many centres made use of anti-plagiarism software such as Turnitin. Where submissions are made electronically, use of VLE/Moodle ensures that personal login details underpin this process.

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

This area generated some significant issues, particularly in merged colleges where there are now multiple assessors delivering the same unit. (See also sections 4.2 and 4.3 above.) In more than a few centres, problems occurred where candidate evidence was judged/marked using centre-devised marking allocations which were not compliant with the evidence requirements of the unit, and thus had not been subject to effective IV.

Good practice was apparent in most centres with the use of the SQA exemplars/prior-verified material setting a clear standard backed up by regular IV/markers meetings to ensure that consistency is being achieved across all units and across all sites. In most centres, marking was clear and feedback detailed, and standardisation meeting minutes reflected discussion within the delivery team. Documentation provided during visits clearly demonstrated effective standardisation in most centres.

**Additional comments regarding graded units**
Many centres were using the SQA exemplar marking guidance (it should be noted that Graded Unit 2 has no exemplar — marking guidance is available in the unit specification). More than a few centres were using prior-verified, expanded checklists and clear guidance for the awarding of additional marks. In one centre, as a standardisation method (and acting as an assessor), the IV had blind double-marked all learner evidence for six learners. The two assessors then compared marks and, where necessary, discussed and recorded decisions made on marks/grades awarded. This reflection also identified some areas where further clarity was required on the awarding of additional marks: a point centres should consider when devising marking guidance. In almost all centres, candidate evidence sampled was accurately assessed and written feedback detailed and constructive.

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

In all centres candidate evidence was retained in line with SQA requirements. In most centres it was apparent that policies for the retention of paper-based and electronic evidence made greater demands that those required by SQA.

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

In all centres, qualification verification information is disseminated from the Quality department to staff via the appropriate line manager. Good practice was apparent in some centres where feedback from both the QV and IV processes was disseminated across the full staff team, who are spread across multiple sites. This is done during whole-team meetings but also via e-mails. Almost all centres have timetabled weekly meetings for individual course/campus teams. All centres encouraged staff to attend SQA update and best practice events, though it is apparent that sometimes these are attended by managers rather than lecturing staff — centres should ensure that information from such events is appropriately cascaded.

# Areas of good practice report by qualification verifiers

Encouragingly, all qualification verifiers reported good practice during session 2016–17.

♦ Involving candidates in the assessment planning process demonstrates flexibility and joint-ownership of the learning process.

♦ Use of non-teaching weeks to bring staff from multiple campuses together to discuss standardisation across courses and units.

♦ Development of clear re-assessment statements, and the development (and prior verification) of second assessments.

♦ Students able to comment on the feedback received to better inform staff of their own understanding of what is expected.

♦ Extensive staff CPD, which enriches the teaching of units due to increased currency of industry knowledge and standards.

♦ Standardised master files containing comprehensive pre-delivery checklists, up to date unit specification, SQA exemplar materials, minutes of standardisation meetings covering the life of the qualification, on-course checks, and sampling strategy.

♦ Additional awards are offered to learners.

♦ HN learners often working with others in a peer-assisted learning context.

♦ Online candidate progress charts maintained by the teaching team so that learners can be easily monitored (and track their own progress).

♦ Evidence of a high level of candidate support in all centres.

**Additional comments regarding Graded Unit 2**

One centre had made extensive (and prior-verified) amendments to the marking guidance to ensure consistency of assessment within the delivery team. The amended guidance contains statements on how minimum evidence can be met in the context of SCQF level 8, and provides guidance on how additional marks may be awarded for relevant material that is over and above the minimum evidence requirements.

# Specific areas for development

The following areas for development were reported during session 2016–17:

♦ Development of greater diversity between existing assessment and re-assessment materials.
♦ Record full justification of assessment decisions and provide all candidates with detailed, constructive feedback on their performance.
♦ IV sampling should be conducted for all cohort groups and provide constructive and detailed assessor feedback.
♦ Centre-devised assessments should be submitted to SQA for prior verification before delivery of a unit, rather than after it has been delivered and assessed.
♦ Centres should develop minimum competence statements to aid in the standardisation of assessment across course teams and campuses. Ideally, these would augment existing assessment marking guidance.
♦ When assigning marks to candidate work, the use of half marks should be avoided.
♦ Ensure effective mentoring of new assessors takes place to help them assimilate the mandatory requirements and guidance aspects of unit specifications and understand the SCQF levels.
♦ Assessor feedback should aim to avoid significant repetition.
♦ Centres should consider the difficulties of cross assessing units, especially when they are from different SCQF levels.

**Additional comments regarding graded units**
♦ Centres are reminded of the importance of ensuring consistency in the awarding of additional marks, along with clear interpretation of the requirements of the relevant SCQF level.