Centre Monitoring Report

GQA Qualifications (GQA)

4 March 2014

Note

Restricted or commercially sensitive information gathered during SQA Accreditation's quality assurance activities is treated in the strictest confidence. However, please note the following:

- The findings of this report and the associated Action Plan will be presented to SQA's Accreditation Committee.
- The report and Action Plan will be published on SQA Accreditation's website following receipt of the signed acceptance of audit findings.
- The contents will contribute towards the Quality Enhancement Rating which will, in turn, contribute towards the quality assurance activity and timescales.

Please note that SQA Accreditation's quality assurance activities are conducted on a sampling basis. Consequently, not all aspects of an awarding body's performance in quality assurance, contract compliance, implementation, awarding of certificates and fee arrangements (not an exhaustive list) may have been considered in this report to the same depth.

Contents

1 Introduction

1.1 Scope and approach of centre monitoring

SQA Accreditation conducts quality assurance activities of all awarding bodies offering SQA accredited qualifications or Units. This involves monitoring a sample of the awarding body's approved centres/providers or assessment sites. All centre monitoring will be conducted in a consistent manner within and between centres. The aim of monitoring is to:

- Ensure compliance under **SQA Accreditation's *Regulatory Principles (2011)*, Regulatory Principles Directives, the requirements of the clauses within and any conditions attached to the approved awarding body agreement and the Criteria for Accredited Qualifications**.
- Confirm that quality assurance arrangements are being conducted by the awarding body in accordance with its prescribed arrangements.
- Ensure that quality assurance arrangements are being conducted in a consistent manner, within and between centres.
- Inform future audit and monitoring activity for the awarding body.

All Principles were included within the scope of the monitoring activity.

A Requirement has been raised where SQA Accreditation found evidence that the awarding body has not met SQA Accreditation's regulatory requirements.

The following timescales apply:

- SQA Accreditation will issue this report within 30 working days of the final centre monitoring date.

- The awarding body must sign and return the report and associated Action Plan within 30 working days of the centre monitoring report being issued.

- Within a further 20 working days of receiving the proposed action plan, SQA Accreditation will confirm whether the Action Plan is appropriate to address the Requirements. This will be subject to the actions proving appropriate to the Requirements raised.

- SQA Accreditation will monitor progress towards completion of the actions identified in the Action Plan.

A Recommendation may be recorded in instances where SQA Accreditation considers there to be scope for improvement. Where these are agreed during centre monitoring, they are recorded on the report for future reference. As Recommendations are recorded for awarding body consideration only, it is not necessary to agree either actions or timescales to resolve these in the awarding body Action Plan.

1.2 Centre monitoring report timeline

SQA Accreditation centre monitoring report date 9 April 2014

Date centre monitoring report and Action Plan to be signed and submitted by GQA 26 May 2014

1.3 Centre monitoring dates

One centre was monitored on 4 March 2013.

1.4 Overview

As a result of the centre monitoring activities, two Requirements have been raised and one Recommendation has been recorded.

The two Requirements form the basis of the GQA Action Plan. This must be completed and submitted to SQA Accreditation for agreement within 30 working days of the centre monitoring report being issued. The Action Plan must be submitted by 26 May 2014.

Outcome(s)	Area(s) of concern	Risk rating
Requirement 1	Principle 6	Low
Requirement 2	Principle 18 and Regulatory Principles Directive 5	Medium
Recommendation 1	Principle 5	N/A

2 Centre monitoring findings

The following sections detail Requirements raised and Recommendations recorded against SQA Accreditation's *Regulatory Principles (2011),* Regulatory Principles Directives, the requirements of the clauses within and any conditions attached to the Approved Awarding Body agreement and the Criteria for Accredited Qualifications.

2.1 Areas of good practice

The following areas of good practice were noted by centres.

The Co-ordinator at Centre 1 highlighted that:

- GQA are normally very good at responding to any queries raised.

2.2 Requirements

Principle 6: The awarding body and their approved centres must have the relevant expertise, quality assurance procedures, technological, financial, human resources and other physical resources, to carry out their regulated functions, during the life of the qualifications and Units they offer.

The Centre Co-ordinator from Centre 1 stated to the Accreditation Auditor that GQA's External Verifier had not visited any of the centre's assessment sites. The three GQA EV Reports dated (February 2014, June 2013 and March 2013) provided by Centre 1 and reviewed by the Accreditation Auditor recorded that all external verification visits had taken place at the centre's main site.

The evidence available indicates that GQA does not meet the requirements of Principle 6. This has been raised as **Requirement 1.**

Principle 18: The awarding body and their centres must deal with complaints on a fair and equitable basis, in line with their published procedures and timescales, and without unreasonable delay. The awarding body, their centres and learners must be made aware of how and when they can complain to SQA Accreditation. Where a complaint is upheld, the awarding body and/or centre must take appropriate, corrective and/or preventative action.

Centre1 provided the Accreditation Auditor with a copy of its centre-devised leaflet *Making a Complaint to the College*, which does refer complainants to the SQA regulator in the section called 'What if you are still dissatisfied'.

However, the centre-devised *Complaints Handling Procedure* provided by Centre 1 does not inform centres and learners of how and when they can complain to SQA Accreditation. The Centre Co-ordinator did state to the Accreditation Auditor that the wording in section 2.8 of this procedure was to be reviewed to ensure consistency between the student leaflet *Making a Complaint to the College* and its *Complaints Handling Procedure.*

The evidence available indicates that GQA does not meet the requirements of Principle 6. This has been raised as **Requirement 2.**

Regulatory Principles Directive RPDIR 5 – Complaints Handling

GQA Guide to Qualifications May 2012, Section 6 Complaints/Appeals, currently uploaded on Quickr by GQA does not meet the requirements of *Regulatory Principles Directive RPDIR – 5 Complaints handling.* This regulatory directive states that any awarding body devised complaints handling process must reflect the role of the Scottish Public Service Ombudsman (SPSO) in investigating complaints from users of public bodies in Scotland.

The evidence available indicates that GQA does not meet the requirements of Principle 6. This has been raised as **Requirement 2.**

2.3 Recommendations

Principle 5: The awarding body must promote a culture of continuous improvement within the organisation and throughout their approved centres, and have in place a system which allows them to manage risk.

The Centre Co-ordinator from Centre 1 commented to the Accreditation Auditor that GQA's website needs to be more user-friendly.

Furthermore, when a centre registers candidates on GQA online, it would be useful to receive a message to say that the registrations had been completed successfully. **This has been recorded as Recommendation 1.**

GQA may wish to consider the comments and suggestions highlighted by Centre 1 to enable continuous improvement.

3 List of documents reviewed during centre monitoring

Document title	Date of issue	Version number
Guide to GQA Qualifications	May 2012	
Completed GQA Qualification Approval Request – Centre GQA 258		Version 2
Completed GQA Centre Recognition Application	*14/06/2010*	
GQA Approved Centre Certificate	24/06/2010	
Curriculum Vitae for Centre's Assessors and Internal Verifier		
CPD Logs for Centre's Assessors and Internal Verifier		
GQA Letter enclosing Assessment Team Licence ID cards	11/02/2014	
Centre-devised Assessment Strategy / Delivery and Resources	August 2012	
Course Team Meeting Minutes	09/01/2014 16/01/2014 23/01/2014 30/01/2014	
Centre-devised SLC/V2 IV Report		
Centre-devised SLC.IV2 Report Session 2013/14		
Your Role in SQA Assessment Arrangements Discuss any major problems with SQA? Currently under review this academic session.	August 2009	
Internal Verifier	Revised August 2012	
GQA Guidance notes for Approved Centres - GQA 802	July 2013	Version 3
Policy on Assessment and Re-assessment Assessment of Prior Learning Credit Transfer Plagiarism	Revised August 2009	

Malpractice		
Completed EV Visit Reports	February 2014 June 2013 March 2013	
Centre-devised Feedback from GQA EV Visit	February 2014	
Student Induction Manual • General Introductory Advice • Change of Personal Details • College Services • Fire Drill Procedures • Health & Safety General Introductory Advice • Ice Breaker • College Hours Timetable and Programme • Generic Units • Learning Resource Centre • Construction Computing Suites • Weekly Timetable • Equal Opportunities Statement of Policy Revised August 2013 • Internet access • Disability • Race Equality Policy • Risk Assessments • Student Risk Self-Assessment Checklist • Previous Student Successes • Student Induction Programme Checklist • Bus Timetable • Aurora House • Learning Agreement • Useful Contact Numbers.	2013/14	
Equality Policy	May 2007	
Centre-devised Complaints Handling Procedure	June 2013	
Centre-devised Making a Complaint to the College		
Quality Manual 2012/2013 Student Assessment Appeals Policy/Procedure		

4 Risk rating of Requirements

SQA Accreditation assigns a risk rating to each Requirement recorded as a result of awarding body quality assurance activity. The table below illustrates how the rating for a Requirement is assigned. A weighting is applied that depends on the risk identified and the possible impact on qualifications and/or the learner of failure to implement that Requirement.

The assignment of a risk rating allows an awarding body to assign their resources to areas which have been identified as having a major impact on the qualifications and/or the learner. The risk rating also allows SQA Accreditation to assign its resources to support awarding bodies in improving their performance.

Risk	**Impact of Requirements identified through quality assurance activity**
Very Low	The Requirement has been identified as 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 identified Requirement is unlikely to recur once resolved and no long lasting damage would be anticipated.
Low	The Requirement has been identified as low impact but is 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.
Medium	The Requirement has been identified as having the potential to 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.
High	The Requirement has been identified as having a potentially high impact on the integrity and reliability of the qualification, or the effective operation of the 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.
Very High	The Requirement has been identified as having 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 Requirement is considered on its own merit, taking account of the context in which it was identified.

5 Action Plan

A separate document in Microsoft Word has been forwarded with this centre report.

Areas of concern	Requirement	Risk rating	Proposed action (Please include a description of your intended methodology and details of the evidence that will be provided.)	Target date for completion
Principle 6	Where a centre has one or more assessment locations or satellite sites, GQA must ensure that an External Verifier visits them over a period of time.	Low		
Principle 18 and Regulatory Principles Directive 5 – Complaints Handling	GQA must ensure that its centres approved to deliver SQA accredited qualifications centre-devised complaints policies inform learners how and when they can complain to SQA Accreditation. GQA must also ensure that its complaints policy meets the requirements of the Scottish Public Service Ombudsman (SPSO), as specified within RPDIR 5.	Medium		

Signatures of agreement of action plan

For and on behalf of GQA:

Signature

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Date

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For and on behalf of SQA Accreditation:

Signature

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Date

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6 Acceptance of centre monitoring findings

For and on behalf of GQA:

Signature

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Designation

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Date

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For and on behalf of SQA Accreditation:

Signature

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Designation

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Date

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