



# **SQA Accreditation**

**Visit to The Institute of Revenues, Rating and  
Valuation (IRRV)**

**Awarding body centre report**

**7 June 2011**

## **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 Qualifications and Examinations Regulation (Ofqual) with a view to 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.

# Contents

Section 1: Introduction	1
Section 2: Scope of monitoring visits	2
Section 3: Discussion	3
Section 4: Action plan	5
Appendix 1: Documents reviewed	8
Appendix 2: Risk rating of non-compliances	9

## Section 1: Introduction

### The purpose of the visit

SQA Accreditation audits 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

One centre was monitored on 7 June 2011 and two non-compliances were recorded.

## Section 2: Scope of monitoring visits

All Key Goals were included within the scope of the centre monitoring visits.

Non-compliances were noted against the following Key Goals:

Key Goals		Observation	Non - compliant
9	The awarding body has open and transparent procedures for complaints and appeals.		✓
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 Centre Co-ordinator highlighted the:

- ◆ regular support meetings for the assessment centre, Internal Verifiers and assessors
- ◆ helpfulness of the main administrator in resolving any problems that arose occasionally

The Auditor would like to thank the Centre Co-ordinator for continued assistance during the course of centre monitoring.

### Areas of non-compliance

During the course of the centre monitoring visit, it was found that the awarding body was not in compliance with:

#### **Key Goal 9: The awarding body has open and transparent procedures for complaints and appeals**

Specifically criterion:

- ◆ 9.1.3 The circumstances under which a centre or candidate is entitled to make an appeal or complaint to the awarding body.
- ◆ 9.1.4 The circumstances under which a centre or candidate is entitled to make an appeal or complaint to SQA Accreditation.

Firstly, the appeals and complaints procedures in centre 1 state that, 'the centre will accommodate specific awarding body appeals provision for candidates'.

This statement does not detail that a candidate is entitled to make an appeal or complaint to the awarding body or SQA Accreditation.

IRRV must ensure that centres using their own appeals and complaints procedures, include details to specify the circumstances under which a candidate is entitled to make an appeal or complaint to the awarding body and then to SQA Accreditation.

Secondly, the *IRRV Customer Service and Complaints Policy* (January 2009) states a contact name, telephone number and customer service timescale for response to complaints but does not detail the procedure for making a complaint, as it does for appeals. Also, the complaints policy does not state the circumstances under which a centre or candidate is entitled to make a complaint to SQA Accreditation.

IRRV must update the complaints policy to detail the procedure for centres and candidates and must ensure that this process states the circumstances under which a centre or candidate is entitled to make a complaint to SQA Accreditation.

**This has been recorded as a non-compliance; non-compliance 1 refers.**

During the course of centre monitoring, the auditor found that the *IRRV Review and Appeals Procedures* (December 2010) did not state the circumstances under which a centre can appeal to SQA Accreditation. These procedures have been updated in the last few days and therefore this issue has not been included within this non-compliance.

**Key Goal 21: The awarding body has systems and procedures for monitoring the quality and consistency of assessment provided at any location.**

Specifically criterion:

- ◆ 21.10 The verification sample must be designed to ensure that where a centre has one or more assessment location or satellite site, an External Verifier visits them over a period of time.

The Centre Co-ordinator informed the Auditor that the External Verifier had not visited any of the centre's assessment sites. The *External Verifier Centre Monitoring Documents* (dated 3 July 2009, 3 March 2010 and 23 February 2011) confirmed that only the main office had been visited.

IRRV must ensure that where a centre has one or more assessment location or satellite site, an External Verifier visits them over a period of time.

**This has been raised as a non-compliance; non-compliance 2 refers.**

This non-compliance has been raised previously in the IRRV centre monitoring report of 2009-2010. Therefore, the risk rating has been increased in this instance.

## 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. Firstly, the appeals and complaints procedures in centre 1 do not detail that a candidate is entitled to make an appeal or complaint to the awarding body or SQA Accreditation.	Firstly, IRRV must ensure that centres using their own appeals and complaints procedures, include details to specify the circumstances under which a candidate is entitled to make an appeal or complaint to the awarding body and then to SQA Accreditation.	9.1.3 9.1.4	2
Secondly, the <i>IRRV Customer Service and Complaints Policy</i> (January 2009) does not detail the procedure for making a complaint. Also, the complaints policy does not state the circumstances	Secondly, IRRV must update the complaints policy to detail the procedure for centres and candidates and must ensure that this process states the circumstances under which a centre or		

<b>Non-compliance</b>	<b>Agreed action and date</b>	<b>Criterion</b>	<b>Risk rating</b>
under which a centre or candidate is entitled to make a complaint to SQA Accreditation.	<p>candidate is entitled to make a complaint to SQA Accreditation.</p> <p><b>IRRV must provide evidence of this action by 31 August 2011.</b></p> <p><b>Closed Out – 15/08/2011</b></p>		
<p>2. The Centre Co-ordinator informed the Auditor that the External Verifier had not visited any of the centre's assessment sites. The <i>External Verifier Centre Monitoring Documents</i> (dated 3 July 2009, 3 March 2010 and 23 February 2011) confirmed that only the main office had been visited.</p>	<p>IRRV must ensure that where a centre has one or more assessment location or satellite site, an External Verifier visits them over a period of time.</p> <p><b>IRRV must provide evidence of this action by 31 August 2011.</b></p> <p><b>Closed out – 15/08/2011</b></p>	21.2	4

## **Signatures of agreement to awarding body action plan: June 2011**

**For and on behalf of IRRV:**

**For and on behalf of SQA Accreditation:**

**Signature**

**Signature**

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**Designation**

**Designation**

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**Date**

**Date**

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## 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)
Centre approval letter		18 December 2000
EV reports		23 February 2011; 3 March 2010; 3 July 2009
A and V Unit certificates		
Candidate registration and certification list		
Centre's own management of information system		14 May 2009
Centre's own assessment strategy		14 May 2009
Centre's own external quality assurance		14 May 2009
Centre's own internal verification strategy		
Centre's own appeals procedure		
Centre's own candidate induction		15 May 2009
Centre's own complaints procedure		
Centre's own equal opportunities policy		
Centre's own health and safety policy		
Centre's own assessor/internal verifier induction		
Assessment centre information		
Centre structure		
Minutes of standardisation meetings		3 May 2011 21 February 2011 21 December 2010
SVQ assessment progress reviews		10 May 2011 27 April 2011 24 March 201 17 September 2010
IV schedules		2009–2010
IV records		14 September 2010 2 December 2009 29 October 2009

## 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 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.
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.