Provider Monitoring Report

Mineral Products Qualification Council (MPQC)

9 April 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 provider 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 providers/providers or assessment sites. All provider monitoring will be conducted in a consistent manner within and between providers. The aim of monitoring is to:

- Ensure compliance under SQA Accreditation's *Regulatory Principles (2014)*, Regulatory Principles Directives and the Accreditation Licence.
- 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 providers.
- 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 provider monitoring date.
- The awarding body must sign and return the report and associated Action Plan within 30 working days of the provider 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 provider 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 Provider monitoring report timeline

SQA Accreditation provider monitoring report date	14 May 2014
Date provider monitoring report and Action Plan to be signed and submitted by Mineral Products Qualification Council (MPQC)	25 June 2014

1.3 Provider monitoring date

One provider was monitored on 9 April 2014.

1.4 Overview

As a result of the provider monitoring activity, two Recommendations have been recorded.

Outcome(s)	Area(s) of concern	Risk rating
Recommendation 1	Principle 6	N/A
Recommendation 2	Principle 13	N/A

2 Provider monitoring findings

The following sections detail Requirements raised and Recommendations recorded against SQA Accreditation's *Regulatory Principles (2014),* Regulatory Principles Directives, the requirements of the clauses within and any conditions attached to the Approved Awarding Body agreement.

2.1 Areas of good practice

The following areas of good practice were noted by provider 1:

- the helpfulness of awarding body contact staff and external verifiers
- appropriate timescale of notice given when organising visits
- MPQC's approach to external verification visits which focus on ensuring good practice is maintained rather than fault finding

2.2 Requirements

No requirements have been raised.

2.3 Recommendations

Principle 6. The awarding body and its approved providers shall maintain accurate documents, records and data.

At the time of monitoring, provider 1 had not received its MPQC annual provider approval certificate for the calendar year of 2014. The provider had reported this discrepancy to the awarding body and had received it by the time of report writing. This issue has been raised previously in the provider monitoring report of 2013-14. Accordingly, MPQC may wish to review procedures around the dispatch of its annual certificates to providers.

Provider devised internal verification reports at provider 1 included a space for the internal verifier name, the assessor name and the date that verification was requested. None of these fields were completed on the forms sampled, although the signature of the verifier and the dates of completion were present. MPQC may wish to remind providers about record keeping in this regard.

This has been recorded as Recommendation 1.

Principle 13. The awarding body and its providers shall have clear, fair and equitable procedures to manage appeals.

The provider devised appeals procedure in provider 1 references the right of candidate escalation to awarding body level, though specifically mentions another awarding body without including MPQC in this regard. The provider is in the process of amending the procedure to include escalation to MPQC where appropriate.

MPQC may wish to remind providers that appeal procedures should include the right of candidate escalation to the awarding body.

This has been recorded as Recommendation 2.

3 List of documents reviewed during provider monitoring

Document title	Date of issue	Version number
MPQC Provider Manual	February 2014	Version 4
MPQC checklist for assessment sites	Sep 2009	Version 8
Candidate registration and certification information		
EV reports	2011; 2012; 2013	
Provider devised assessment and IV schedule	2013-14	
Provider devised Equality Outcomes Document	2013-15	
Provider devised Health and Safety policy	2010	
Induction checklist		
Internal verification reports	2014	
Standardisation minutes	2014	
Staff qualification information		
Provider devised assessment and appeals procedure	2011	
Provider devised complaints policy	2011	
Provider devised complaints handling procedure	2013	

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.

6 Acceptance of provider monitoring findings

For and on behalf of Mineral Products Qualification Council (MPQC):

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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