



Audit Report

Mineral Products Qualifications Council (MPQC)

31 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.

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1 Executive summary

This was the fourteenth audit of the Mineral Products Qualification Council (MPQC) since it was approved as an awarding body by SQA Accreditation in 1994.

1.1 Scope and approach

The audit was designed to review and evaluate MPQC's strategies, policies and procedures 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.**

As this was a full audit of MPQC, all Principles were included within the scope of the audit.

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 audit date.
- ◆ The awarding body must sign and return the audit report and associated Action Plan within 30 working days of the audit 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 issues 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 the audit, 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 Awarding body audit report timeline

MPQC audit date	31 March 2014
SQA Accreditation audit report date	6 May 2014
Date audit report and Action Plan to be signed and submitted by MPQC	18 June 2014

1.3 Background

MPQC is the sector specific awarding body for the extractives (quarrying and mining); mineral products and related manufacturing industries.

MPQC is a not-for-profit organisation owned and managed by the sector.

MPQC's headquarters are in Chilwell, Nottingham.

The audit team was provided with full access to the awarding body's premises, staff and documentation.

1.4 Overview

As a result of the audit and post-audit activities, one Requirement has been raised and four Recommendations have been recorded.

The one Requirement forms the basis of the MPQC Action Plan. This must be completed and submitted to SQA Accreditation for agreement within 30 working days of the audit report being issued. The Action Plan must be submitted by 12 June 2014.

Outcome(s)	Area(s) of concern	Risk rating
Requirement 1	Principle 6	Low
Recommendation 1	Principle 3	n/a
Recommendation 2	Principle 5	n/a
Recommendation 3	Principle 5	n/a
Recommendation 4	Principle 23 Regulatory Principles Directive RPDIR - 5 Complaints handling.	n/a

2 Audit 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 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.

MPQC's *Awarding Organisation Centre Manual, February 2014, v.14* and *External Quality Assurance Resource Pack, September 2012 v.7* state that Direct Claim status (DCS) is given to approved centres on a qualification basis, subject to meeting a number of criteria.

One particular criterion states that the centre must be able to demonstrate that it has 'a number of candidates/learners who can be shown to have completed consistently to the required standards'.

During the audit, it was established that all MPQC centres holding approval to deliver SQA accredited qualifications had been granted direct claim status (DCS). The Auditors were surprised at this position given the fact that information provided by the awarding body on 16 January 2014 noted that the majority of approved centres had shown no registrations or certifications for Scottish Vocational Qualifications (SVQs) during the previous 12 months.

The Auditors sought clarification around how DCS could be held by non-active centres in respect of SVQs. Awarding body representatives believed that such a stance was acceptable as the centres in question were either currently delivering QCF qualifications, or had previously done so, with the same assessment, verification and evidence requirements as the equivalent SVQs.

However, the Auditors would contend that a gap of 12 months or more in the practice of assessing and verifying of SVQs represents a significant break in continuity that may impact upon a centre's ability to ensure that candidates 'consistently achieve the required standard'.

Also, the stance is not consistent with the awarding body's published guidance to both centres and appointed External Verifiers.

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

2.2 Recommendations

Principle 3. The awarding body must ensure that they employ robust processes to protect their own business interests as well as the interests of their approved centres and learners.

As noted under Requirement 1 above, a number of centres approved to deliver SQA accredited qualifications have had no candidate registrations/certifications over the previous 12 months.

All MPQC centres are subject to an annual systems audit to ensure continued compliance with awarding body and regulatory requirements as determined at the point of initial approval.

MPQC's *External Quality Assurance Resource Pack, September 2012 v.7* and *Awarding Organisation Centre Manual, February 2014, v.14*, provide extensive detail on areas for review as part of the systems audit, but the Auditors did not feel that there was sufficient focus on underperforming qualifications within the process.

MPQC representatives noted that centres liked to retain existing qualification approval status regardless of levels of activity. Reasons for this are varied, but feedback from centres indicated that the ability to be in a position to respond quickly to customer requests for qualification delivery, however infrequent, remained a key business objective.

The awarding body also believed that potential costs linked to seeking qualification re-approval may also play a factor in retaining approval status.

Whilst fully appreciating all of the above, the Auditors were of the opinion that the awarding body might consider putting more emphasis on reviewing underperforming qualifications as part of the annual systems audit. This would support approved centres to focus resources effectively on active qualifications.

This has been recorded as Recommendation 1.

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.

As part of the pre-audit document review, the Auditor teams scrutinised MPQC's *Centre Agreement v.2 October 2012*.

It was noted the document would benefit from a general review to remove any references to the *Awarding Body Criteria (2007)*, and the audit team is content that this will happen as part of the awarding body's normal cycle of revision as it seeks to ensure that all policies and procedures appropriately reference SQA Accreditation's current regulatory requirements, ie the *Regulatory Principles (2014)*.

However, of more concern to the audit team was the presence of Clause 11.2 in the agreement, which states:

The centre shall provide a copy of all its communications with the Regulatory Bodies to MPQC, unless the Regulatory Bodies have expressly asked the Centre not to do so, or providing a copy to MPQC would be unlawful.

The Auditors are of the opinion that this clause has the potential to conflict with SQA Accreditation's practice of ensuring that anonymity remains at the heart of the centre monitoring process when reporting findings to the awarding body.

MPQC representatives indicated that the contract is based on that operated by a range of awarding bodies to ensure compliance with Ofqual's *General Conditions of Recognition*.

The clause in question is a standard part of the document. It was also stated that MPQC has not invoked, and would not invoke, the clause in any way, being comfortable with SQA Accreditation's use of anonymity in respect of centre monitoring.

Nonetheless, MPQC may wish to consider reviewing either the presence of the clause or its wording as part of any future update of the Centre Agreement.

This has been recorded as Recommendation 2.

Similarly, MPQC may wish to revise Clause 20.3 in respect of the use of regulator logos:

The Centre shall only use the Regulatory Bodies' Logos for the purposes permitted by the Regulatory Bodies, if any, and shall ensure that any such use complies with the Logo Requirements which may be published by the Regulatory Bodies and revised from time to time.

Currently, SQA Accreditation does not permit centres to use its logos. MPQC may wish to take account of the wording of the *Regulatory Principles Directive RPDIR — 3 Logos and certificate requirements for SQA accredited qualifications* as part of any future update of the Centre Agreement.

This has been recorded as Recommendation 3.

Principle 23. The awarding body and their centres must publish clear, fair and equitable procedures and timelines for dealing with enquiries about results and appeals. They must take appropriate, corrective and/or preventative action for all learners and centres affected.

MPQC's *Candidate Guidance v.8 January 2013* outlines the candidate appeals procedure. Only sufficient in stating the required steps and associated timescales for any appeal, it also contains the following:

If the candidate is still dissatisfied then the candidate may refer their appeals to the relevant Regulatory Body (eg Ofqual/SQA) whose decision will be final.

This is not strictly accurate because SQA Accreditation will not consider an appeal in respect of any assessment decision. Candidates wishing to make referral to the Qualification Regulator can only do so by raising a complaint. In such circumstances, the Qualification Regulator will only consider the complaint in terms of the effectiveness of the awarding body's documented assessment and appeals policies and procedures.

It should also be noted that in the case of complaints, SQA Accreditation is no longer the final arbiter in respect of any decision. This role is now under the remit of the Scottish Public Service Ombudsman (SPSO) as specified in *Regulatory Principles Directive RPDIR - 5 Complaints handling*.

There were no identified complaints or appeals in respect of SQA accredited provision at the time of the audit. Therefore, MPQC may wish to review information regarding candidate appeals as part of any overall review of policies and procedures to ensure compliance with SQA Accreditation's *Regulatory Principles (2014)*.

This has been recorded as Recommendation 4.

3 Outstanding approval and accreditation conditions

A condition will be recorded at the time of approval of the awarding body or at the time of accreditation for an SQA accredited qualification. A condition is recorded when SQA Accreditation's Co-ordination Group (ACG) finds evidence that the awarding body does not fully meet the requirements 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.

Principle no.	Condition	Date due
None		

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 Table of awards

Accredited qualifications currently offered by MPQC

SQA-accredited qualification title	Level	Code	Accreditation date	Re-accreditation date
SVQ 2 in Weighbridge Operations	n/a	G8TJ 22	09/01/2008	31/08/2014
SVQ 2 in Plant Operations (Construction) (Extractives)	n/a	GE65 22	07/12/2011	31/12/2014
SVQ 2 in Highways Maintenance (Construction)	n/a	GE66 22	07/12/2011	31/12/2014
SVQ 2 in Roadbuilding	n/a	GE67 22	07/12/2011	31/12/2014
SVQ 1 in Processing Operations for the Extractive and Minerals Processing Industries	n/a	GE84 21	15/02/2012	31/12/2014
SVQ 2 in Processing Operations for the Extractive and Minerals Processing Industries	n/a	GE85 22	15/02/2012	31/12/2014
SVQ 3 in Processing Operations for the Extractive and Minerals Processing Industries	n/a	GE86 23	15/02/2012	31/12/2014

6 List of documents reviewed pre and post audit

Document title	Date of issue	Version number
MPQC Marketing Strategy	2013	V9
MPQC Procedure for the Development, Submission and Ongoing Review of Qualifications	November 2013	V4
Briefing Paper: MPQC Structure to include SSO Function		V3
Organisational structure of MPQC Awarding Organisation	November 2013	V9
Terms of Reference Qualifications & Quality Assurance Group [QQAG]	August 2013	V1
Staff Development and Continual Professional Development Policy	July 2013	V4
MPQC Training & Education Committee Agenda – Standing Agenda Items		
Minutes of the MPQC Council and Proskills Industry Group Meeting	14 June 2012	
MPQC Policy on Reasonable Adjustments and Special Consideration	February 2013	V8
MPQC Price List (External Version)	2014	V3
MPQC Terms of Reference for the Main Board	October 2013	V5

Document title	Date of issue	Version number
MPQC Terms of Reference MPQC Council	October 2013	V5
Risk Management Policy & Contingency Plan	July 2013	V7
MPQC Quality Management Committee Meeting – Standing Agenda Items		
MPQC Board Meeting – Standing Agenda Items		
MPQC Council Meeting – Standing Agenda Items		
MPQC Diversity and Equality Policy and Procedures	February 2013	V5
MPQC Notes of EV meeting	7 January 2013	
Data Protection Policy	July 2013	V3
MPQC General Manager Job Description	December 2011	V6
ICO Data Protection Register – Entry details	01/10/2003 – 30/09/2014	
MPQC Main Board members as at 1 December 2013		
MPQC Terms of Reference Quality Management Committee	October 2012	V6
MPQC Notes of Qualifications & Quality Assurance Group [QQAG] Meeting	2 October 2013	

Document title	Date of issue	Version number
Committee Structure of MPQC Awarding Organisation	October 2013	V5
MPQC Candidate Guidance	January 2013	V8
MPQC External Quality Assurance Resource Pack	September 2012	V7
MPQC Centre Staff Application Form M1	2012	
MPQC Generic Candidate Registration Form M3		V1
MPQC Contract for Provision of Services	Effective from 1 January 2014	V9
MPQC PEV Sampling Checklist	2011	
MPQC Procedure for the Design, Development and Delivery of Assessments	July 2013	V5
MPQC Malpractice/Maladministration Policy	July 2013	V6
MPQC Centre Manual	February 2014	V14
MPQC New Qualification Application Form M2	January 2013	V7
MPQC Application for Centre Approval	September 2013	V13
MPQC Centre Agreement M18	October 2012	V2

Document title	Date of issue	Version number
MPQC External Quality Assurance Verification Report	September 2013	V4
MPQC Whistleblowing Policy & Procedures	July 2013	V5
MPQC Customer Service Policy	February 2013	V13
MPQC Request for Duplicate or Replacement Certificate M9	September 2012	V9
MPQC Procedure for the Approval of Certificate Claims	July 2013	V2
MPQC Appeals Procedures against MPQC Decisions for Centres/Candidates	February 2013	V3
MPQC Awarding Body – Online Registration Instructions		

7 Action Plan

A separate document in Microsoft Word has been forwarded with this Audit 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	During the audit, it was established that all MPQC centres holding approval to deliver SQA accredited qualifications had been granted direct claim status (DCS). This in spite of a number of centres not actively delivering SQA accredited provision over the previous 12 months.	Low	<ol style="list-style-type: none"> 1. Revise the DCS policy 2. Issue revised DCS policy 3. Include reference to the change in policy on the EQA Report Form 4. Advise non-active SVQ Centres of the change in the AO's DCS policy; this will be done via the normal planned EQA visits over the next 12 month period. <p>Extension to 31 August 2014.</p>	<p>June 2014 July 2014</p> <p>June 2014</p> <p>June 2015</p>