



# **Strategy for Centre Assessment Standards Scrutiny (CASS) requirements**

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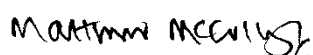
# Foreword

I am pleased to introduce SQA's Centre Assessment Standards Scrutiny (CASS) strategy. The purpose of the strategy is to provide an overview of how we apply the requirements of CASS to the Ofqual regulated qualifications we award.

Based on the principles of CASS, the strategy incorporates a common thread of risk identification and associated controls throughout. Chapters cover the approval of centres offering internal assessment; selection and planning of centre verification; conducting verification and internal monitoring activities; and finally, CASS review arrangements and associated quality improvement measures.

SQA has always had robust processes in place to monitor and quality assure internally-assessed Ofqual regulated qualifications. The introduction of this strategy enables us to build on those processes, and in particular to broaden the scope of data we use to identify qualification and centre risk, and document in more detail the processes we use to mitigate against the risks we identify.

We will review the strategy every six months, along with all associated processes, to ensure we are responsive where changes may be required to our approach, based on our centres' evidence-based practice.



Matthew McCullagh

Head of Operations HNVQ

## Change Log

Description of change All relating to the update of this CASS Strategy Version 2 Aug 22	Date and location
Foreword added	08/22 Page i
Glossary of terms and contents page expanded	08/22 Page 1
Old for new arrangement (approvals) added	08/22 Page 4
Monitoring of centres (selection and planning) expanded	08/22 Pages 6–12
Types of systems and qualification verification updated	08/22 Page 7
Overview of CASS Review Group remit added	08/22 Page 12
QV/EV sampling approach expanded	08/22 Pages 12–14
Data management team section added	08/22 Page 18
Centre data requirements updated to include candidate home addresses and short certification	08/22 Page 20

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# Glossary

**Assessment principles** — validity, reliability, practicability/manageability, comparability/equity, and fairness.

**Data management team** — team which monitors data supplied by centres; and provides them with data management support. Collates, analyses and presents data to inform SQA quality assurance decisions.

**External verifier (EV)** — person who conducts qualification verification.

**Indirect claims status (ICS)** — a control measure applied by SQA which removes a centre's right to directly claim certification from SQA for specified qualifications/units without prior authorisation from SQA.

**QAMs** — repository for completed systems and qualification verification reports. Used where applicable to access and check reports before release to centres. It is used to allocate centres to verifiers and gather data for further analysis.

**Qualification verification** — process used to check that national standards in assessment are maintained.

**Quality assurance logistics team** — team which selects centres for qualification verification; and through monitoring, confirms centre risk and initiates the verification planning process.

**SQA Connect** — system used by all authorised departments to input and store data relating to centre activities/status.

**Systems verification** — process to ensure centres have appropriate policies and procedures in place and are implementing those effectively.

**Systems verifier (SV)** — person who conducts systems verification.

**Verification event** — generic term used for a systems or qualification verification event (an event can be a verification visit or be carried out virtually or remotely).

**Verification group** — verifiers in a named group who verify the same or associated subjects/occupational competences.

**Verification planning team** — team which selects centres for systems verification; and through monitoring, confirms centre risk and schedules verification events accordingly.

**Verifier** — a generic term, applicable to both a systems verifier and external verifier.

## **Overall approach**

### **Strategy for Centre Assessment Standards Scrutiny requirements (CASS)**

Our strategic aim is to get more centres more compliant, more of the time. This supports our evidence-based understanding that compliant centres conduct valid and reliable assessment.

In support of this aim, we have developed one strategy covering all the Ofqual qualifications we award.

Our strategy covers:

- ◆ how we ensure approaches to assessment are valid, and assessment judgements are reliable.
- ◆ why we consider internal assessment by a centre appropriate for the Ofqual qualifications they offer.
- ◆ the verification approaches we deploy to ensure each centre and the qualifications it offers are subject to risk identification and management.
- ◆ how we ensure the results issued, based on a centre's assessments, are accurate, and comply with national standards.
- ◆ our approach to quality assuring assessments, based on the nature of the evidence produced by learners.

Our strategy encompasses three Ofqual qualification groupings of internally-assessed qualifications, each grouping sharing similar assessment characteristics (refer to Annex 1 in this strategy).

### **Occupational competence-based qualifications**

The majority of Ofqual qualifications we award come under this category. They require continuous assessment of candidates in a workplace setting using methods such as observation, product evaluation, questioning and witness testimony.

### **Professional vocational qualifications**

These qualifications extend or broaden professional or vocational knowledge, and have a more structured delivery format than that of occupational competence-based qualifications. Supervised assessments in controlled assessment conditions feature in these qualifications.

### **Invigilated vocational qualifications**

These include qualifications that test knowledge (and to a small degree skills) over a relatively short period of time. These types of qualifications always include some form of invigilation.

All the Ofqual qualifications we offer under each qualification grouping are internally assessed. SQA supports the use of internal assessment for vocational and vocationally-related qualifications as a valid form of assessment that supports the broader scope of candidate performance. It can successfully assess higher-order skills and allows for the use of a range of assessment methodologies. Some knowledge components are assessed via [SQA's SOLAR online assessment system](#) while also being subject to internal invigilation.

## **Qualification verification and systems verification — definitions**

In our strategy, we use the terms qualification verification and systems verification.

Systems verification is the process we use to ensure centres have all the appropriate policies and procedures in place and are implementing those effectively to support all the qualifications they deliver.

Qualification verification is the process we use to check that centres offering our qualifications maintain national standards in assessment and continue to have the resources in place to support qualification delivery.

The combination of qualification verification and systems verification provides us with the assurances that centres are complying with all our quality assurance criteria and meet Ofqual recognition requirements.

## **Allowing centres to internally assess qualifications**

### **Centre approval**

Ofqual centres are approved for qualifications that meet the design criteria applied by SQA's qualification development teams, which allow them to be internally assessed. On release, each qualification is placed under a qualification grouping heading. All qualifications within a grouping share similar characteristics in terms of learner evidence and how they are to be assessed and subsequently externally verified. More detail on this is provided in Annex 1.

New centres must have a firm understanding of their roles, policies and procedures at the point of being approved. This increases their chances of longer-term success significantly.

All centres must agree to us carrying out a due diligence check before they engage with us in an operational sense. This process gives us a level of assurance about a potential centre's financial viability and business values. A centre's delivery history provides an indication of whether the centre is likely to be able to deliver SQA qualifications in line with our requirements.

We require centres applying to SQA for centre approval to meet all criteria for both systems and qualification quality assurance. This ensures we are satisfied that the centres have the capability, systems, and resources in place to operate effectively as SQA-approved centres offering internally-assessed qualifications.

Once all centre evidence has been considered, systems verifiers (SVs) and external verifiers (EVs) choose one of only two options: 'approved' or 'not approved'. This binary choice provides clarity and robustness to the approval process.

When a centre has been newly approved for qualifications, or an existing centre has been approved for new qualifications, SQA will inform the centre of its indirect claims status (ICS) for these qualifications. Centres are reminded of their responsibility to keep SQA up to date with any changes to centre co-ordinator and assessor/verifier roles. Once approved, centres are thereafter quality assured based on SQA's established, intelligence-led risk-based system of qualification and systems verification. Centres that are new, or running new qualifications, require a timely verification approach, so are identified for verification as soon



as candidate entries for qualifications emerge. These centres will also be subject to ICS controls as communicated to them at the point of qualification approval.

At times SQA will develop replacement/updated qualifications that are not significantly different from their predecessor qualifications. In this case, the Approvals Section can approve centres to offer these replacement qualifications without the centre having to formally apply to SQA for approval. However, this 'new for old arrangement' is only offered to centres in the lower risk category.

### **The first stage of internal verification as part of the approval process**

Centres must supply evidence of having applied the first stage of internal verification, which confirms their assessment approach:

- ◆ has been subject to internal verifier agreement pre-assessment
- ◆ is fit for purpose
- ◆ meets the principles of validity, reliability, practicability/manageability, comparability/equity and fairness

More specifically, evidence of first-stage internal verification helps ensure that:

- ◆ assessments can generate sufficient evidence to allow candidates to demonstrate that they have met the national standard for the qualification
- ◆ all assessors are familiar with the national standards and can apply them ahead of assessments
- ◆ assessors reach accurate and consistent assessment judgements for the same qualification for all candidates in their centre, in line with the national standard for the qualification

These aims are covered in the first of three stages of internal verification. All three stages must form part of a centre's documented internal verification policy/procedure.

Evidence for the first stage is subsequently confirmed and reported on through systems and qualification verification reports.

## Centre support

To help centres understand our assessment and internal verification requirements, we provide a range of resources. The main ones are:

Resource	Purpose
<a href="#">Approval for centres and SQA qualifications</a>	Provides link to enquiry form to begin the process of becoming an approved centre for SQA qualifications.
<a href="#">Guide to Assessment</a>	Includes methods of assessment and all our quality assurance principles.
<a href="#">Internal verification: A guide for centres</a>	Provides support for all those involved with quality assuring SQA's internally-assessed qualifications.
<a href="#">Internal Verification Toolkit</a>	Helps centres design and implement a three-stage system of internal verification that aligns with our quality assurance principles.
<a href="#">SQA Academy</a>	<p>SQA Academy offers centres guidance on understanding the standards of the qualifications they are assessing, and on strategies for e-assessment.</p> <p>The module <i>An Introduction into 'Ofqual CASS Compliance'</i> is available for those who wish to gain an overview of CASS.</p>
<a href="#">Ofqual Centre Assessment Standards Scrutiny</a>	This web page is used to inform centres of SQA's CASS strategy, associated requirements, and updates.

## Centre support (interface with SQA staff)

Our strategic aim is to enable centres to become successful in the way they deliver our qualifications. We do this by having clear criteria which describe:

- ♦ the standards that must be met
- ♦ the likely sources of evidence that centres can provide to prove compliance

We see the support we provide as integral to our centres' success.

For new centres, we offer [qualification and systems verification development visits](#) within the first six months of becoming approved. These visits allow centres an opportunity to discuss the implementation of their systems while allowing SQA verifiers a chance to identify areas of support.

Network meetings are offered to centres, allowing assessors and internal verifiers operating in the same sector an opportunity to share experiences, discuss current trends, and receive qualification updates from SQA.

Centres can access continuing professional development in the core areas of assessment and internal verification by booking onto one of our [professional development workshops](#).

The cycle of systems and qualification verification allows us to systematically gather and evaluate centre performance data in relation to our quality assurance criteria. This evaluation also covers the performance of individual and groups of qualifications.

The outcomes of these evaluations:

- ◆ support general and sector-specific guidance development
- ◆ inform qualification and systems verification team activities
- ◆ inform webinar development

## **Monitoring of centres — selection and planning**

The term ‘monitoring’ is used frequently in this strategy to describe:

- ◆ monitoring of centre performance to inform verification selection and planning
- ◆ monitoring of centre performance during a verification event
- ◆ monitoring of data recording in SQA verifier reports

Subsequent sections of this strategy cover the last two bullet points. This section deals with the first bullet point, verification selection and planning.

### **Our quality assurance systems**

Once approved, centres are verified using SQA’s intelligence-led risk-based system of external quality assurance.

This system is designed to measure centre performance clearly, and to identify and address areas that require attention promptly and effectively.

We use five categories of quality assurance criteria to identify areas of risk. Following a verification event, centres receive one of the following outcome ratings for each of the five categories: high confidence, broad confidence, reasonable confidence, low confidence, and no confidence.

Information relating to these terms and how we quality assure through qualification and systems verification processes can be found in [Qualification and system verification](#).

Our established external quality assurance system, operating in tandem with the newly developed qualification risk-rating system we have developed to support CASS, allows us to maintain an external quality assurance that is compliant with internal and external regulatory requirements.

Post-approval, centre data is used to initially identify a suitable date for the next verification event. Verification event is the umbrella term we use to cover the following types of verification:

- visiting verification
- virtual verification
- remote verification

### **Types of systems verification**

Visiting and virtual verification are the main methods of verification we use. Systems verification is normally carried out at a centre's location, but virtual verification is considered where a centre's main mode of operation is via remote delivery/assessment, or there are valid circumstances that prevent a physical visit taking place such as a COVID related issue.

### **Types of qualification verification**

Visiting and virtual verification are the main methods of verification we use. Remote verification is also used and is based on reduced criteria and focuses on core assessment and internal verification activities. It is used for lower risk centres running low-risk qualifications. This method is periodically used in conjunction with visiting or virtual verification.

### **Projecting the verification date**

**Projecting the verification date** → centre monitoring and selection → verification  
planning for each centre → carrying out verification

All SQA departments involved in selection, planning and verification of centres take a systematic risk-based approach to ensure centres' assessment standards are effectively scrutinised. This section of the CASS strategy gives an overview of each department's contribution to the underlying processes.

The Verification Planning Team firstly determine the projected date for systems verification. The Quality Assurance Logistics Team do this for qualification verification. Projected dates are initially and primarily based on previous/current centre report history and outcome ratings. Subsequent ongoing centre monitoring activities use centre and qualification risk factors (set out in more detail below) to decide whether the initial projected date remains or is amended in light of any new or heightened risks.

The projected date is informed by data held in access databases used by the Verification Planning Team for systems verification, and the Quality Assurance Logistics Team for qualification verification. The projected date is then recorded on a shared CASS database housed on SQA's Connect portal. SQA Connect contains live centre/candidate data, and can therefore only be accessed by SQA authorised personnel.

### **Determining qualification and centre risk**

The projected dates for verification are worked out based on two sets of risk factors. The first set is **qualification risk factors**, as follows:

- a) New qualifications in a new subject area, or with a new mode of delivery or mode of assessment
- b) License to practice qualifications
- c) Qualifications recognised by regulatory/standard-setting bodies as requiring enhanced quality assurance arrangements
- d) Qualifications that have been updated, e.g. because of change of professional standards/increased breadth/depth/level
- e) Qualifications that fall under 'Invigilated Vocational Qualifications (IVQs)'
- f) Qualifications that have a pattern of low outcome ratings (reasonable, minimum or no confidence)
- g) Qualifications with a pattern of reported maladministration and/or malpractice
- h) Qualifications in sectors with known risk factors

The second set is **centre risk factors**, as follows:

- i) A new centre, or one which is offering qualifications for the first time
- j) A significant change in a centre's entry pattern or number of entries processed
- k) The length of time since the last verification event (centre may also have been inactive)
- l) A pattern of low outcome ratings (reasonable, minimum or no confidence) including where marking criteria are not being applied consistently
- m) Centres with a pattern of reported maladministration and/or malpractice
- n) Significant changes in key personnel such as assessors/IVs/coordinators
- o) Centres which have submitted inaccurate results
- p) Centres with a pattern of late payment of bills

Based on data gathered from past verification events and other centre intelligence, both sets of risk factors are used to decide if a centre and/or its qualifications pose higher levels of risk.

In relation to (l) above, centres with a high or broad outcome rating are considered lower risk, and centres with a low or no confidence rating are considered higher risk. Centres that fall into the reasonable confidence rating category will also generally be considered higher risk. However, decisions on risk level will also be informed by the number and specific nature of non-compliant criteria associated with this 'middle ground' confidence rating category.

Refer to [SQA systems verification](#) and [Qualification verification](#) which explain our verification outcome ratings traffic-light system. Patterns of outcome ratings and compliance/non-compliance across centres and our quality assurance criteria are analysed for both systems and qualification verification from the data stored on the QAMs system.

Once qualification and centre risks are known, they are considered separately (at times there are only centre risks **or** qualification risks) and then, when applicable, together. In this way an accurate picture of risks can be identified, and controls can be deployed to mitigate against these risks. The tables below **illustrate the principle** of how we use centre/qualification risks to inform the verification approach we take for each centre. Our documented processes confirm in detail how we actually do this.

**Table 1: Systems verification**

	<b>S1 — Every 36 months</b>	<b>S2 — 0 to 36 months</b>
<b>New centre</b>	No	Verify at first opportunity, once entries made
<b>Last systems verification</b>	Within last three years	Inactive centre or verification more than three years ago
<b>Previous verification outcomes</b>	High/broad confidence	Reasonable/minimal or no confidence
<b>Centre information</b>	Not significant enough to change risk rating	Significant enough to raise risk level
	<b>Lower risk centre</b>	<b>Higher risk centre</b>

For box S1 (a lower risk centre) routine verification arrangements and timescales apply. For box S2 (a higher risk centre) one or more controls are required, depending on the risk identified. Controls at this planning stage may include a shorter verification timescale or action to be taken as a result of significant centre information.

**Table 2: Qualification verification**




	<b>Q1 — Every 12 months</b>	<b>Q2 — 0 to 12 months</b>
<b>First time qualifications</b>	Verify evidence as part of next verification event	Verify as soon as evidence is available
<b>Apply ICS</b>	Yes/no	Yes
<b>Inactive centre</b>	No	Yes
<b>Previous verification outcomes</b>	High/broad confidence	Reasonable/minimal or no confidence
<b>Qualifications</b>	Lower or higher risk	Higher risk
<b>Centre Information</b>	Not significant enough to impact rating	Significant enough to raise risk level
	<b>Lower risk</b>	<b>Higher risk</b>

For box Q1 routine verification arrangements and timescales apply. Box Q2 indicates that one or more controls are required, depending on the risk identified. Controls considered at the planning stage may include a shorter verification timescale, and/or action to be taken as a result of higher risk qualifications being offered or the emergence of significant centre information.

Note that, for both systems and qualification verification purposes, centre formation alone can alter the risk rating of a centre, depending on the significance of the information. It can include, but is not restricted to:

- ◆ centre co-ordinator changes
- ◆ assessor/internal verifier changes
- ◆ candidate entry volume changes
- ◆ inaccurate results made by centre
- ◆ rapid entry to certification
- ◆ internal centre intelligence such as qualification verification history
- ◆ malpractice incidences
- ◆ financial issues

### Centre selection and monitoring

Projecting the verification date  **centre monitoring and selection**  verification  
planning for each centre  carrying out verification

There are detailed process maps, documented processes and databases covering the mechanics of centre selection for systems verification and qualification verification.

The monitoring process allows us to gather data based on verifier activities and associated reports, and other sources such as SQA Navigator, SQA Connect and internal departmental intelligence.

The monitoring data feeds into systems and qualification databases. The databases provide a global picture of each centre's quality assurance strengths and risks, and this helps inform the most quality assured verification approach.

Monitoring is carried out prior to projecting the initial verification event date, and then again between this date and the date of planning the event.

The conclusion of monitoring either confirms the original projected verification date or gives a revised date due to changes in centre risk factors. This change of date is recorded in the CASS Portal on SQA Connect.

The monitoring process outlines the type of information that is monitored and used to inform possible centre risk levels.

Monitoring also helps identify emerging centre information, as referred to in the table below. This table explains the relevance of the different types of centre information that is gathered and brought to the attention of the CASS Review Group — and subsequently, when applicable, to SVs and or EVs — to inform their verification planning activities.

**Table 3: Centre information**

<b>Centre information</b>	<b>Relevance to systems verification (SV) or qualification verification (QV)</b>
<b>Centre co-ordinator changes</b> <b>SV — 1.3</b>	<b>SV:</b> changes communicated by centres to SQA confirm centre is keeping SQA up to date with changes as required.  <b>SV/QV:</b> changes communicated by centres to SQA help ensure SQA and its verifiers communicate with the most current centre co-ordinator.
<b>Assessor/verifier changes</b> <b>SV/QV — 2.1</b> <b>SV — 2.2</b>	<b>SV:</b> changes can indicate the likelihood of induction evidence. Also, of how centres are applying the 18-month rule.  <b>QV:</b> EVs use this information to factor new assessors/verifiers into their sample planning activities.
<b>Malpractice</b> <b>SV — 1.5</b> <b>QV — 4.2/3/4/6</b>	<b>SV/QV:</b> when verifiers receive information relating to the conclusion of malpractice investigations from SQA, they can take appropriate follow-up actions with centres.
<b>Inaccurate results</b> <b>SV — 6.3</b> <b>QV — 4.2/3/4/6</b>	<b>SV:</b> can use this information to check on the implementation of centres' data management processes.  <b>QV:</b> EVs can check that the results processed by centres to SQA accurately reflect candidate achievement and status.
<b>Candidate entry volume changes</b> <b>QV — 4.6</b> <b>SV — 3.1/4</b>	<b>QV:</b> EVs can use this information to monitor if centres' arrangements can accommodate the increase in candidate entries — to ensure fair and timely access to assessment is being maintained.  <b>SV:</b> centres that take on significantly higher candidate numbers may require checks on the implementation of their policies and procedures.
<b>Rapid entry to certification</b> <b>SV — 6.3</b> <b>QV — 4.2/4/6</b>	<b>SV:</b> can use this information to monitor centres' application of SQA guidance/requirements relating to short certification.  <b>QV:</b> If short certification is identified, EVs can check on the validity of assessor/verifier judgements as well as the conditions of assessment.
<b>Financial information</b>	SQA may hold back the planning of verification events or put in place control measures such as suspension of entries if there are issues with a centre's payment of fees to SQA.



## The CASS Review Group

The CASS Review Group meet on a monthly basis to agree and record quality assurance approaches for centres and situations that have been identified via the monitoring process as requiring closer scrutiny.

The group comprises senior managers who are responsible for all the data management and verification activities described in this strategy.




The group focuses on the potential risks as outlined in the table above and as documented in the Centre Risk and Qualification Risk Registers. The contents of the registers inform the agenda for the CASS Review Group meetings.

A set of pre-determined risks and controls for each reportable item listed in the registers help guide discussions relating to effective control measures.

The output from these meetings includes confirming centre risks or qualification risks, or a combination of both. The group also agrees control measures to mitigate against identified risks and, where applicable, passes on this information to the relevant teams to inform qualification and systems verification event planning.

All decisions from these meetings are recorded in a standardisation log.

## Verification planning for each centre

Projecting the verification date  centre monitoring and selection  **verification**  
**planning for each centre**  carrying out verification

The senior manager for systems verification confirms centre selections on a quarterly basis for SVs. SVs then make initial contact with centres based on the information input by the Verification Planning Team.

Similarly, the selection of centres for qualification verification is confirmed by the senior manager/quality assurance logistics officers (QALOs) based on an allocation table covering different centre types (such as training provider, college, employer). The table confirms when each centre type will be scheduled for verification.

Planning is initiated by QALOs in agreement with each centre. QALOs then create a Sampling Control Document (SCD) which includes the Ofqual qualifications and units to be verified. Annex 1 of this strategy includes the Ofqual qualifications groupings that the different types of Ofqual qualifications belong to. Ofqual qualifications are also listed on the qualifications risk register.

## QV sampling guidance

Identifying the scope of unit sample: The period of time since the previous verification event is considered, highlighting any new and certificated units from group awards (GAs) as well as current open entries. Previously verified units are factored in to calculations to inform the selection of an appropriate unit sample.

Deciding on sample: The size of sample considers the breadth and number of units each assessor is profiled to assess — the sample will always include new assessors/verifiers and those not yet qualified.

The points below expand on the above sampling approach.




1. Certificated units: The verification of certificated units from Ofqual qualifications offers EVs the chance to verify complete candidate evidence/achievement and final assessment and IV decisions.
2. Group awards: SQA has its own coding structure for group awards (GAs) and units (sub-sets of Ofqual qualifications). It is these SQA GA and unit codes that will appear in the quality assurance documentation throughout selection, monitoring, and verification reports.
3. Open entries: The verification of open unit entries allows the verification of candidate evidence at various stages of progress as well as the ongoing verification of assessment decisions.
4. Previously verified units: A systematic approach to sampling ensures all components (units) of an Ofqual qualification are verified within a 5 year time frame.
5. Allocation of units: Assessors/IVs are the gatekeepers of quality assurance. Unmonitored assessors are an unknown quantity and an awarding body risk. Our approach is to follow their tracks, and sample units based on assessor experience and the breadth and number of units they assess — sampling the work of all assessors/verifiers for an Ofqual qualification within a 5 year time frame.

We have not created a sampling approach based solely on candidate numbers but have factored in candidate entries into our approach (1,3,5). Sample size is determined by a combination of many of the above factors, with the overriding aim of sampling all units from an Ofqual qualification over a 5 year period. The controls we place on qualification and centre risk are mainly related to increased verification frequency, ICS, and additional verification measures, rather than solely an increase in sample size. However, this control can be used by an EV when required and is covered in the next section, Carrying out verification.

The specific sampling approach for each centre is documented for qualification verification in the SCD by a QALO and then made available to the EV.

For SV, the Verification Planning Team populate the selections and allocations spreadsheet so that SVs can begin the planning process with each of their centres.

## Carrying out verification

Projecting the verification date  centre monitoring and selection  verification  
planning for each centre  **carrying out verification**

The EV uses the SCD information to populate their visit plans, which they agree and communicate to each centre.

The EV bases their sampling on the SCD and current entries from the summary report on QAMs. As part of planning, they agree with centre:

- ◆ units to be sampled belonging to different candidate cohorts, such as full-time/part-time/sessional or roll-on/roll-off
- ◆ any methods of assessment to be sampled not already captured in the initial units selected
- ◆ opportunities for observing assessments taking place
- ◆ the date, time and place of the verification activity, including evidence from a number of assessment site locations

Where significant changes to the original sample recorded in the SCD are being considered, the EV must seek approval for adjustments from the QALO team before going ahead with planning the verification event.

Once SCD information has been consolidated, the EV will agree and communicate the event details (including sampling requirements) to the centre in their visit plan. The CASS QV guidance document covers EV responsibilities for sample planning.

During an event, if the EV has concerns about the evidence they have sampled, they can request to see additional units/evidence to help them corroborate their findings. In some circumstances this may result in sanctions being placed and a follow-up verification event being requested by the EV.

Visit plans and the SCD are important in informing what should be recorded in the EV report as well as confirming with centres the verification activities to be undertaken. Visit plan information includes, for example, the units to be verified, assessor/verifiers to be sampled, the sample required to enable ICS status to be changed, and any centre information that requires reporting upon.

Systems verifiers access centre information from the selections and allocations spreadsheet. This spreadsheet includes any relevant centre information, used to inform only, or where significant, to be acted upon and reported through the systems verification report. Similar to QV, visit plans play a significant role in confirming the agreed arrangements for each centre being verified.

### **Deploying verifiers**

To be appointed/employed, verifiers must possess the required interpersonal skills, and must be appropriately qualified and experienced. EVs must also show this in relation to the subject areas for which they are appointed, and must meet any regulatory requirements, such as the acquisition of the relevant assessor/verifier qualifications. [EV role information - SQA](#) is housed on SQA's appointee website.

The following human resource support structure is in place for verifiers:

## **Qualification verification structure**

The senior operations manager manages a team of QALOs, who centrally manage verification planning/sampling and EV deployment. This team initiates verification events and monitors their progress to a conclusion.

The lead verifier leads on and develops good practice and consistency of approach to support the quality assurance of our qualifications. This is achieved with the support of a team of depute lead verifiers. The lead verifier reports to and works closely with the senior operations manager.

The senior operations manager ensures comprehensive training is carried out for all new EVs. This comprises a mix of online development and face to face shadow training. EVs are then given a specific induction by the senior external verifier responsible for their verification group.

Senior external verifiers ensure that all approval and verification activities undertaken by their team of EVs are carried out in line with SQA policies and procedures. They monitor the work of each EV in their team against [key performance measures](#), which include carrying out qualification verification in line with the conditions and timescales set by SQA, writing reports to SQA's required standard, and maintaining their occupational competence and continuing professional development (CPD).

One of their key responsibilities is ensuring EVs apply a consistent approach to verifying the qualifications within their verification group. This is supported by the organisation of standardisation events.

## **Understanding qualification requirements and standardisation**

EVs are allocated a verification group. All verifiers included in a verification group verify the same or associated subjects/occupational competences. As experts in their subject areas, they are contractually required to understand the structure and content of the qualifications and units they have been appointed to verify.

This level of understanding is important in informing the sample they select, and ensuring it encompasses a wide enough range of candidate evidence to form a representative sample.

Verifiers within a verification group standardise with each other throughout the year. Standardisation events are chaired and led by the [senior external verifier](#) and cover, for example, new and problematic qualifications/units and trends in centre evidence.

The results of standardisation events are recorded in standardisation logs and maintained for future reference by the verifier group (to support consistency of approach). SQA at times refers to standardisation logs to answer internal and external queries.

Senior external verifiers review the findings from standardisation events, and from a sample of completed verification reports on an annual basis. They compile an evidence-based report ([example](#)) which is published on relevant SQA websites. Centres and SQA use the report for quality improvement purposes.

## Systems verification structure

The senior operations manager manages a team of quality enhancement managers (QEMs), who in turn support a team of [systems approvers/verifiers](#).

Like systems approvers/verifiers, QEMs carry out systems verification. However, their remit is a management one and wider than systems verification. The following is a summary of their main QEM responsibilities:

- ◆ development and implementation of centre guidance
- ◆ design and delivery of CPD events and webinars for centres
- ◆ publication of 'key messages' based on an annual analysis of centre compliance with quality assurance criteria
- ◆ standardisation relating to SQA systems verification requirements
- ◆ involvement in centre malpractice investigations

QEMs and systems approvers/verifiers are collectively referred to as SVs throughout this strategy.

All new SVs complete a compulsory induction programme and are provided with a dedicated mentor during their initial training period.

Subsequently, SVs maintain CPD activities which are reported upon via SQA's online performance review system.

The conflict of interest register used by SVs (called exception centres for QVs) is checked prior to verifier deployment to ensure a verifier is not allocated a centre where they have already declared a potential conflict of interest. The declaration of a potential conflict of interest is a contractual responsibility for all staff and appointees as outlined in SQA's [Conflict of Interest Policy](#).

We also require centres to develop and implement a conflict of interest policy/procedure (criterion 1.6). This is to ensure that no one with a personal interest in the outcome of assessment is involved with the assessment process. This includes assessors, internal verifiers, and invigilators.

## Monitoring of a centre's performance during verification events

Verifiers apply the quality assurance criteria and associated requirements for [systems verification](#) and [qualification verification](#). Centres can find these requirements on our websites. These quality assurance criteria and requirements are crucial for making verification decisions about a centre's level of compliance.

The qualification verification of evidence provides confirmation to centres and SQA that assessors are applying the qualification requirements for assessing candidates' performance accurately and consistently in line with national standards.

Where the evidence appears to show that national standards are not being met, the verifier is required to increase the sample size (where possible) to help them make a 'safe' overall verification decision.

Once all evidence has been weighed up, a red, amber or green (RAG) rating is applied to each quality assurance criterion, in the light of the verification decisions which have been reviewed. Amber and red ratings mean that required remedial actions are agreed with the centre, and where appropriate a sanction is also applied.

The RAG rating then triggers an algorithmic calculation of the outcome rating for each of five categories that the quality assurance criteria fall under. Where the outcome rating confirms higher levels of risk, required actions (and sanctions if appropriate) are applied, with associated completion timescales.

Quality assurance criteria covering the following are high impact rated:

- ◆ selection and use of assessment methods
- ◆ authenticity of candidate evidence
- ◆ accurate assessment of evidence

If a red or amber rating is given to any of these criteria, the centre is automatically given a required action (or actions) and, where applicable, a corresponding sanction. This in turn means a short timescale is applied to the required action(s) or sanction(s), minimising quality assurance risks.

Where sanctions are imposed, such as a period of indirect claims status, centres must prove to the EV that their assessments are being carried out in line with SQA's requirements for the qualifications under assessment. Where other sanctions, such as a hold on certification, have been imposed, centres must adjust their assessments to align with national standards, again monitored by the EV.

Where there are concerns about assessment of qualifications or units already certificated, the EV, through established processes, can advise SQA to apply two sanctions:

- ◆ an immediate hold on the certification of the qualification or units
- ◆ a period of indirect claims status

In addition, if any quality assurance criteria concerning assessment have been given a 'red' status, then the EV will ask SQA to reclaim the relevant candidate certificates.

The Data Management Team (see below under SQA's Data Management Team) recall certificates from centres and candidates.

The above sanctions and reclamation will remain in place until the EV is satisfied that the centre is assessing and internally quality assuring in line with national standards. The follow-up qualification verification sample will automatically include the re-assessment of those candidates through standard processes.

Centres are told the verification decisions at the end of a verification event. The subsequent verifier report confirms:

- ◆ required actions and/or sanctions (where applicable)
- ◆ any recommendations to enhance existing arrangements
- ◆ areas of good practice

QALOs, in relation to Ofqual qualifications/CASS, have responsibility for checking if a centre has a sanction, placing holds on certification, and removing existing holds.

### **Dealing with malpractice and maladministration**

We ask our centres to take steps to prevent and manage any occurrences of malpractice or maladministration. These are set out in our qualification and systems verification guidance documents, which all SQA staff, verifiers and centres have access to.

In terms of systems verification, centres are required to develop suitable policies and procedures to reduce the quality assurance risks associated with malpractice and maladministration. To aid policy and procedure development, we provide centres with comprehensive guidance and templates.

For qualification verification, centres must ensure only the work of each candidate is considered for assessment. This falls under Qualification Criterion 4.4. Evidence generated by candidates not directly authenticated (for example through direct assessor observation) must be subject to authenticity checks. Some centres use plagiarism detection software. For some qualifications, there is a requirement for centres to carry out identity checks prior to examination/assessment.

The criteria relating to malpractice for systems verification and for qualification verification are high impact rated. This means that any shortfalls in centre evidence for these criteria will automatically mean a required action, and possibly also a sanction, with appropriate completion dates.

Malpractice reported to SQA by centres and/or verifiers is dealt with by SQA's Malpractice Team. Once suspected malpractice has been investigated and a conclusion reached, this information is shared with SQA's Verification and Planning Team, who then factor this information into their selection reports, making the relevant information available to qualification and/or systems verification teams.

SQA's [Malpractice](#) website gives the definition and examples of candidate and centre malpractice, as well as information and contact details should centres need to report suspected malpractice to SQA.

SQA's Data Management Team are responsible for adding or amending malpractice data.

### **SQA's Data Management Team**

This team monitor data supplied by centres and provide them with data management support. They are also responsible for the identification, collation and analysis of data associated with the specific quality assurance risks described in Table 3 of this strategy, under centre monitoring and selection. This data is scrutinised by the Ofqual CASS Review Group who meet monthly.

Processes they have responsibility for include:

- ◆ adding or amending finance data
- ◆ adding or amending verification data
- ◆ adding or amending reference data
- ◆ recall of certificates

### Quality assurance criteria that feature in both qualification and systems verification.

**Table 4: Quality assurance criteria that have a shared focus for both systems and qualification verification.**

<b>Systems verification</b>	<b>Qualification verification</b>
<b>1.5: Malpractice</b>	<b>4.4: Malpractice</b>
<p>SVs require centres to develop and implement suitable policies and procedures to help mitigate against the quality assurance risks associated with malpractice and maladministration.</p> <p>EVs require centres to show through their practices that procedures are being followed to ensure the authenticity of candidates' evidence and safeguard integrity of achievement.</p>	
<b>4.7: Retention of evidence</b>	<b>4.7: Retention of evidence</b>
<p>EVs require evidence to be retained to enable all selected assessment and internal verification decisions to be scrutinised.</p> <p>SVs require centres to develop, manage and maintain their evidence retention policies/procedures in line with SQA requirements.</p>	
<b>4.1: Internal assessment and internal verification</b>	<b>4.2: Internal assessment and internal verification</b>
<p>SVs check that centres' internal verification procedures include the three stages of internal verification (pre-assessment, during assessment, and post-assessment), and that they are generally being implemented.</p> <p>EVs check that centres' internal assessment and verification procedures are implemented in the subject areas they are deployed to verify, to ensure standardisation in assessment.</p>	
<b>2.1: Assessor and internal verifier competence</b>	<b>2.1: Assessor and internal verifier competence</b>
<p>SVs focus on ensuring centres have and implement suitable policies and procedures for recruitment, selection, and deployment of staff, ensuring the required levels of competence are maintained.</p> <p>EVs check centres are deploying appropriately qualified and competent assessors/internal verifiers, in line with qualification requirements, and maintaining up-to-date records on this.</p>	



Verifiers who identify issues relating to Criteria 2.1 and 4.1/4.2 that are relevant to the other verification group (systems or qualification verification), must follow the processes for the cross-reporting of issues.

Where non-compliance issues are identified against the same criteria across different verification groups, or against the same type of systems and qualification verification criteria, the Verification Planning Team will make information available to the CASS Review Group and relevant verification group(s) for verification follow-up.

## **Centre data requirements**

### **Candidate entry to certification timescales for Ofqual qualifications awarded by SQA**

Centres are required to build in sufficient time between entering candidates for a qualification and certification. This provides SQA with a timeframe during which they can conduct external quality assurance, if required.

To support this requirement, centres must enter candidates for a qualification as soon as possible after their enrolment on the programme.

The SQA published total qualification time (TQT) attached to each qualification should be used to calculate the time required for a candidate to complete their qualification post-entry.

#### [List of regulated qualifications awarded by SQA in England and Wales \(indicating TQT\)](#)

There are some exceptions to this requirement, such as qualifications of a very short duration with a low TQT. Any entries for these qualifications can take place prior to or on the day of assessment.

SQA will monitor compliance with this requirement via its external quality assurance activities and through central monitoring of centre data.

### **Use of candidate home addresses**

We have recently introduced two additional fields on SQA Connect Candidate Services:

- ◆ candidate email address
- ◆ candidate telephone number

If you require certificates to be sent to your centre address you will no longer have to provide the candidate's home address as long as at least one of the new fields are populated.

The new fields can be completed when registering a candidate for the first time or when you make an update to a candidate's registration details. You must provide a valid email address and/or telephone number that belong to the candidate. We will not accept a centre's email address or telephone number.

Where monitoring carried out by SQA identifies that a candidate's email address and/or telephone number are not being used as described above, centres will be required to rectify the situation immediately.

## **Data retention**

All centres are required to retain candidate evidence for a period of one year from the date of final certification of the qualification. This allows SQA an opportunity to retrospectively sample evidence that has been subject to assessment and internal verification. In certain circumstances, evidence must be retained for longer periods. [SQA's evidence retention requirements](#)

All centres are required to retain candidate, assessment and internal verification records for a period of one year. In certain circumstances, records must be retained for longer periods. [SQA's retention of candidate assessment records](#)

## **Internal monitoring of data by SQA**

Senior operations managers are ultimately responsible for the implementation of CASS-related processes and strategy under their remit. Senior management responsibility is divided into verification planning, quality assurance logistics, quality enhancement (systems verification) and data management

Monitoring responsibilities focus on the effectiveness of data collection and processing from the date of the identified verification event through to the recording of data during the planning and execution of verification events.

The monitoring of data is an ongoing process and follows an audit trail of documentation captured in databases, spreadsheets and reports.

The main monitoring sources are, as described in this strategy:

- ◆ the data and documents worked on by the verification planning team
- ◆ CASS review group
- ◆ quality assurance logistic officers
- ◆ qualification and systems verifiers
- ◆ senior external verifiers

These documents show an audit trail of data-capture, processing and recording that enables the scrutiny that is applied to centres.

## **Meeting CASS minimum requirements**

We as an awarding organisation are used to taking a risk-based approach to quality assuring our centres. To meet CASS requirements, we have augmented our procedures to introduce more central control over sampling, and we have introduced a system for risk rating qualifications.

Internal IT systems have been developed to support the processes of date projection, monitoring and selection, and verification planning and sampling.

In this strategy, we have covered the meeting of CASS minimum requirements throughout all sections rather than just one dedicated section. The following activities in particular focus on risk identification and mitigation:

The monitoring of a centre's activities/quality assurance:

- ◆ prior to planning and selection for verification purposes
- ◆ during a qualification verification event and subsequent follow-up
- ◆ in relation to potential/suspected malpractice and maladministration

The bullet points below are a summary of the arrangements we have put in place which go beyond Ofqual's minimum requirements.

### **Going beyond CASS minimum requirements**

- ◆ We have long-standing processes in place, through our verification systems and associated quality assurance criteria, which ensure we have the verification controls and sanctions available to deal proportionately with centres who are not consistently assessing candidates to meet national standards.
- ◆ Where a new type of qualification is released, it will automatically be classified as higher risk on our Qualifications Risk Register, and centres offering this for the first time will automatically be placed on indirect claims status.
- ◆ Where the professional standard in a qualification has changed enough for the qualification to be considered new or updated, the qualification will be placed in a higher-risk category on the Qualifications Risk Register for the purposes of identifying and following an appropriate verification strategy.
- ◆ Where malpractice or maladministration has occurred in a centre's delivery, whether picked up via systems or qualification verification reports, the centre is automatically placed in a higher-risk category for subsequent verification events.
- ◆ SQA has created a CASS Review Group which meets monthly to agree quality assurance approaches for previously identified risks/centres. The group comprises senior managers with designated responsibility for specific quality assurance activities described in this strategy.

### **Review of CASS requirements**

A review of the CASS requirements will take place every six months initially.

Reviews will encompass a review of the CASS strategy and associated processes and standards of performance. Previously completed monitoring reports will be integral to the review process, as will staff interviews.

The results of reviews will be used for quality improvement purposes and be used specifically to update CASS-related processes and procedures, and the CASS strategy itself. The results of the review process will be documented in the CASS Strategy Change Log.

## Annex 1: Ofqual qualification groupings

Groupings	Verification approaches
<p>1. Occupational competence-based qualifications (OCB)</p> <p>These types of qualifications require continuous assessment of candidate performance in a workplace setting. The main methods used to assess these qualifications comprise assessor observation, the scrutiny of product evidence, and questioning.</p> <p>Assessment for these types of qualifications is often planned at short notice to meet the working patterns of candidates and the assessment opportunities that present themselves.</p>	<p><b>Routine verification</b> includes sampling work products, observation reports, and questioning. Planned observations by the QV observing the assessment process whenever it is feasible, including seeing the assessor confirm and/or mark the associated assessment decisions where applicable.</p> <p><b>Additional verification options</b> may include: verifying a larger sample of candidate/ assessor/verifier evidence; increasing the number of assessor observations (in line with an increase in events); deploying remote as well as visiting verification.</p>
<p>2. Professional vocational qualifications (PVC)</p> <p>We offer regulated qualifications that extend or broaden professional or vocational skills and are linked to the national apprenticeship standards. Qualifications currently coming under this category are the Diplomas in Conveyancing/Probate Law and Practice. These qualifications have a degree of continuous internal assessment based on evidence generated from natural workplace practice. They also include a requirement for supervised assessments to be administered under controlled assessment conditions.</p>	<p><b>Routine verification</b> includes sampling work products, candidate reports, candidate responses to case studies and questioning, supervised assessments under controlled assessment conditions.</p> <p><b>Additional verification options</b> for these qualifications would include: verifying a larger sample of candidate/assessor/verifier evidence; deploying remote as well as visiting verification.</p>

Groupings	Verification approaches
<p>3. Invigilated vocational qualifications (IVQ)</p> <p>These qualifications test knowledge and skills over a relatively short period of time. Some of these types of qualifications may include an element of ongoing practical assessment. Prior to sitting knowledge tests such as multiple-choice tests, learners must have covered all knowledge and understanding required for each part of the qualification. These types of qualifications always include invigilation of knowledge tests.</p>	<p><b>Routine verification</b> would include: sampling observation records; planned observations by the EV, observing the invigilation process.</p> <p>Centres offering these qualifications must submit examination dates to SQA via the Centre Hub. This allows the Logistics Team to select dates for verification and unannounced visits.</p> <p><b>Additional verification options</b> for these qualifications would include: verifying a larger sample of candidate/assessor/verifier evidence; increasing the number of unannounced visits; deploying remote as well as visiting verification.</p>