



# **Post-accreditation monitoring report**

## **Scottish Qualifications Authority (SQA)**

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## **Introduction**

### **Regulating external qualifications**

Responsibility for regulating external qualifications lies jointly with three regulators:

- the Office of Qualifications and Examinations Regulation (Ofqual)
- the Department for Children, Education, Lifelong Learning and Skills (DCELLS), the regulator for Wales
- the Council for the Curriculum, Examinations and Assessment (CCEA), the regulator for Northern Ireland.

Following the accreditation of a qualification, the regulators systematically monitor awarding organisations against the requirements set out in the statutory regulations. The aim of this activity is to promote continuing improvement and public confidence in the quality of external qualifications.

Where an awarding organisation is found not to comply with relevant criteria, the regulators set conditions of accreditation. Even if an awarding organisation is compliant, the monitoring team may make observations on ways that the awarding organisation could change its systems and procedures to improve clarity or reduce bureaucracy.

Accreditation conditions and observations arising from this monitoring activity are specified at the end of each section of this report. Awarding organisations are required to produce an action plan to show how they will deal with accreditation conditions imposed as a result of a monitoring activity. The regulators will agree the action plan and monitor its implementation.

The regulators will use the outcomes of monitoring and any subsequent action taken by awarding organisations to inform decisions on the re-accreditation of qualifications, or if necessary, the withdrawal of accreditation.

### **Banked documents**

As part of their awarding organisation recognition processes, the regulators require awarding organisations to submit certain documents to Ofqual for the purposes of 'banking' them centrally. Information from banked documents will be used to inform monitoring activities and may also affect the awarding organisation's risk rating.

A suite of documents has been identified as suitable for banking and are those considered to be the most crucial in supporting an awarding organisation's ability to operate effectively. In order to maintain the currency of the banked documents, awarding organisations are responsible for updating them as and when changes

occur. They are also reminded to review them at least annually at the time of completion of the self-assessment return.

## **About this report**

The monitoring activity for the Scottish Qualifications Authority (SQA) was carried out by Ofqual on behalf of the regulators in November 2009.

This was the first monitoring activity on SQA. The activity was to test compliance with SQA's Awarding Body Recognition Application (ABRA) and the awarding organisation's application for access to the five-day accreditation process, both of which were approved in 2007.

The monitoring activity looked at the regulatory criteria relating to the following key areas:

- corporate governance
- resources and expertise
- qualifications development
- application of assessment methods:
  - quality assurance and control of internal assessment
  - quality assurance and control of independent assessment.
- registration and certification
- malpractice
- equality of opportunity, reasonable adjustments and special consideration
- customer service statement
- enquiries and appeals.

The monitoring activities included a desk review of information already held by the regulators, including the banked documents, scrutiny of the SQA website and visits to two National Vocational Qualifications (NVQ) centres.

The monitoring team visited the SQA head office in Glasgow to conduct interviews with staff and review documentation.

This report draws together the regulators' findings from these monitoring activities.

## **About SQA**

SQA is an executive non-departmental public body (NDPB) sponsored by the Scottish Government Schools Directorate. It is the national body in Scotland responsible for the development, accreditation, assessment and certification of qualifications other than degrees. In England, Wales and Northern Ireland, SQA is accredited to offer NVQ, Vocationally Related Qualifications (VRQ) and Qualifications and Credit Framework (QCF) qualifications. For further information on SQA, visit [www.sqa.org.uk](http://www.sqa.org.uk).

## Corporate governance

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 5, 6 and 7.

### Findings

1. SQA was accredited as an awarding organisation in 2007. In the same year, it was also recognised for access to the five-day application process, which allowed SQA to take part in the tests and trials for the QCF.
2. Since being recognised, SQA has undergone significant change with a new chief executive and a restructure that started in 2008 and is yet to be fully established. For example, the qualifications directorate now focuses entirely on qualifications development providing a full portfolio underpinned by business principles. Previously, the qualifications development role included marketing and customer support. In becoming more commercially aware, the restructured business development directorate will now look at all new business ideas with the product services group reviewing the operational impact of any new business or qualifications.
3. SQA is also the regulator for qualifications accredited in Scotland. To avoid any potential for conflict of interest, the regulatory directorate has its own budgetary arrangements and reports directly to the chief executive. Staff consider there to be a clear separation of the two areas.
4. There is a new partnership arrangement with the Driving Standards Agency to deliver the level 1 safe road user Award QCF qualification. The contract was available to the monitoring team and it confirmed that there was a clear demarcation of responsibilities between the two parties. It was clear from this that the responsibility for quality assurance lay with SQA.
5. The chief executive is not the same person as that on the original ABRA. During the monitoring, SQA staff stated verbally that the chief executive remained the single point of accountability, but this could not be confirmed through the provision of a job description. Confirmation that the chief executive is responsible for maintaining the quality and standards of all accredited qualifications needs to be provided to the regulators in writing.
6. SQA is a large organisation with a complex structure. The Board of Management is responsible for ensuring that SQA's statutory functions, including its policies and procedures are being met and that the use of resources is appropriate and effective.
7. The main committees reporting to the board are the Audit Committee, International and Commercial Committee, and the Qualifications Committee.

These are made up of a mix of board members and SQA staff. There are a number of other internal meeting groups in place to deal with business across the organisation. The committees were detailed on a chart entitled *Draft meetings and groups*. Following the monitoring, a final version of the *Meetings and groups* chart was provided. A further committee, which is independent of the board, is the Advisory Council. This provides dedicated representation of SQA's stakeholders and reports directly to the Scottish government. Its role is to consider and provide advice to SQA and Scottish ministers on the needs and views of stakeholders.

8. The board delegates day-to-day responsibility to the Executive Management Team (EMT), which is made up of the chief executive and directors. The directorates cover all areas of SQA's business and include business development, qualifications development, operations, business systems development, human resources, and finance.
9. Staff confirmed that the work of the awarding organisation relating to Ofqual accredited qualifications on the National Qualifications Framework (NQF) was initially supported by the then External Development Team (now included in the international business area). The work has since been integrated into the appropriate areas of the business, for example qualifications development has responsibility for developing qualifications, internal assessment delivery is responsible for the quality assurance of internal assessment. There is no one group that has specific accountability for all aspects of the management of qualifications accredited by Ofqual, as is the case for all qualifications offered by SQA.
10. There was a long-standing Scottish Vocational Qualifications (SVQ) Management Group, which was a cross-functional group that shared issues, information and updates, and ensured actions arising and audit action plans were progressed for SVQs. At its 16<sup>th</sup> September 2009 meeting, SQA proposed a change to this group's name, scope and terms of reference. It was agreed to extend the remit to cover to all accredited qualifications and change the name of the group to Regulated Qualifications Management Group. However, the terms of reference for this group only mention SVQs and QCF provision. Minutes of meetings scrutinised by the monitoring team did not refer to NQF provision in any detail.
11. SQA has a far-reaching strategy called '2020' that looks at where the organisation aims to be in years to come. The strategy includes looking at demographic and competition as well as the challenges relating to the Scottish Curriculum for Excellence programme. It also has a corporate plan 2009–2012 from which an annual business planning process is derived. The annual business plan is dependent on government approval and funding.

12. Business continuity and risk are included in the corporate plan. There is an overall risk register and each directorate across SQA has its own business recovery team plan. The plans include identifying named incident management teams, critical functions and priorities checklists for restoring systems. The plans also include a spreadsheet of critical periods of activity by teams so that the area of business that is most at risk at any time can be identified. Business continuity and recovery has been tested through the use of scenarios such as an incident at the nearby train station and an arson attack. Finally, there is a telephone contact number on all staff passes that staff can ring in an emergency to find out the latest information. The system is very detailed and thorough.

### **Accreditation conditions**

1. SQA must have more transparent management systems in place to deal with Ofqual accredited qualifications (*The statutory regulation of external qualifications in England, Wales and Northern Ireland (QCA/04/1293)*, paragraph 5a).
2. SQA must provide written confirmation that the single named point of accountability is responsible for maintaining the quality and standards of Ofqual accredited qualifications (*The statutory regulation of external qualifications in England, Wales and Northern Ireland (QCA/04/1293)* paragraph 5b).

### **Observations**

There are no observations for this section.

## Resources and expertise

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 8 and 10, and the *NVQ code of practice* (QCA/06/2888), paragraphs 1, 4, 5, 19 and 71.

### Findings

1. SQA employs in excess of 600 staff across the whole organisation. The Ofqual accredited qualification functions are subsumed into the normal activity of staff who deal with other Scottish accredited qualifications, such as SVQs and National Qualifications (NQs) that relate to the Scottish curriculum.
2. The SQA offices are split across two sites with the bulk of the work happening in Glasgow. There is a processing office in Dalkeith where most of the staff deal with the management and control of scripts and processing of certificates.
3. All new members of staff take part in a generic induction for which there are set procedures and templates. Staff who are new in post receive a 'buddy' regardless of whether they are a new member of staff or someone who has moved internally. The 'buddy' is a peer who has a similar role and can provide advice and guidance on the practical aspects of carrying out the job.
4. There is an annual appraisal system with an interim appraisal carried out midway through the year by line managers. Each member of staff has objectives that are directly linked to their team operational plan, which is in turn derived from SQA's annual business plan. This is good practice and shows that the organisation's procedures and vision are embedded in the work of each team and individual.
5. In addition to the appraisals that each member of staff has, a personal development plan is held by the Organisational Development Team. Individual learning needs inform the need for any internal or external training provision that can be provided to SQA as a whole.
6. The decision to take on additional staff has to be made through a set process, which is followed for each post even where the post has fallen vacant. All requests are subject to approval by the EMT. The monitoring team considered that this showed the awarding organisation is reviewing its staff resource requirement.
7. SQA contracts with around 15,000 individuals known as 'appointees'. Those who are assessment experts are grouped into teams of subject-specific external verifier teams led by senior external verifiers. While SQA has access to around 1,200 external verifiers, approximately 35 of these are allocated to work on Ofqual accredited qualifications in addition to the Scottish qualifications.

8. SQA also contracts with qualification development specialists to work on specific qualifications and develop items for question banks of qualifications, such as those for the SQA level 1 Award in internet safety.
9. The Appointee Management Team is responsible for the process of annually contracting with external verifiers. Any new appointee must first have their application reviewed by the qualification manager within the relevant subject area before the Appointee Management Team checks the references and appoints. All appointees are required to confirm their acceptance by signing the *Terms and conditions* agreement. The monitoring team considered that while this document was similar to the NVQ external verifiers' code of practice required by the *NVQ code of practice* (QCA/06/2888), it did not meet all of the criteria. It makes no reference to the requirement for continuing professional development (CPD) despite this also being an SQA requirement, or to the appeals process for centres to appeal against external verifier decisions.
10. SQA maintains a record of CPD carried out by its appointees. This is checked annually to ensure that external verifiers are carrying out the required amount of CPD. SQA staff stated that they are looking at introducing a system whereby external verifiers may not be reappointed if they had not completed the requisite CPD. The onus would be on senior verifiers to check this. Currently, the monitoring of external verifiers is carried out by the Quality Enhancement Team.
11. SQA staff advised that all external verifiers attend standardisation meetings at least twice a year. Although there was evidence of meetings and training events, no evidence was available to demonstrate that standardisation of assessment had taken place, which is a requirement for NVQ external verifiers. Staff stated that this would be carried out by senior verifiers at subject-specific verification team meetings. SQA must ensure that records of standardisation are kept.
12. The monitoring team noted that SQA did not provide training or guidance to external verifiers on understanding the tariff of sanctions in appendix 3 of the *NVQ code of practice* (QCA/06/2888). This must be made part of external verifier training in order to comply with regulatory criteria.
13. SQA has reliable technical resources, including a bespoke database that is capable of being interrogated and running reports. There are servers at both the Glasgow and the Dalkeith site that replicate each other as well as an additional off-site server.
14. The website currently only holds information for centres on some of the Ofqual accredited qualifications and only includes details for one of the 42 accredited NVQs. Staff stated that the website is under review and they are looking at

improving the search facility and adding new qualifications. This is part of a wider exercise for which SQA is seeking government approval.

### **Accreditation conditions**

3. SQA must ensure that its external verifiers confirm their acceptance of the expectations put on them for CPD. This document must also include the details of the appeals policy for centres appealing against external verifier decisions (*NVQ code of practice (QCA/06/2888)*, paragraph 4).
4. SQA must ensure that external verifiers make accurate and consistent assessment decisions, and that auditable records of standardisation activities are kept to demonstrate this (*NVQ code of practice (QCA/06/2888)*, paragraph 70).
5. SQA must ensure that external verifiers understand the NVQ system, including the requirements of the *NVQ code of practice (QCA/06/2888)*, and are trained on the application of the tariff of sanctions (*NVQ code of practice (QCA/06/2888)*, paragraph 71).

### **Observations**

There are no observations for this section.

## Qualifications development

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 1–4 and 43–45.

### Findings

1. SQA is implementing a new system for qualifications development from September 2009. This is based on a business model and will mean that all new products will follow the same procedure from conception through to development. The qualifications being looked at by the monitoring team were all developed prior to the new system being in place. It was not possible to fully test the robustness of the new system during this monitoring activity as no Ofqual qualifications had been through it. This will be tested through the QCF application and recognition process.
2. The process for qualification development is managed by qualification managers for the relevant business sector. The new system will support them by allowing the formal marketing and research to be carried out by the business development department. Once a product has been approved for development, the qualifications managers will work on the development of assessment and materials.
3. Ideas for potential new qualifications come from a variety of sources. These can include requests from colleges, training providers, sector skills councils (SSCs) and SQA itself.
4. SQA has a *Qualifications development strategy* document, which was submitted as part of the five-day accreditation process. This document details the stages to be followed, such as market research and review of existing qualifications to minimise excess provision, but it does not refer to NVQs or VRQs. A further document, a draft flowchart entitled *Ofqual qualifications process (overview)* shown to the monitoring team, does indicate the stages to be followed when developing Ofqual qualifications, but this has not been formally approved or implemented.
5. SQA offers a number of NVQs, but these were existing qualifications on the NQF and not developed solely by SQA. Staff were asked to explain the systems that were followed to develop two other existing qualifications, the SQA level 1 Award in internet safety (a VRQ), and the level 2 Award, Certificate and Diploma in playwork principles into practice (a QCF qualification).
6. An organisation approached SQA to develop its training programme for playworkers into qualifications. The organisation submitted a detailed business proposal, which included evidence of market research, SSC support and potential demand. SQA had a number of meetings with the organisation to

explore the outcomes of the pilot qualification and to confirm that it would go on the QCF. The content and assessment methodology was developed by the organisation and checked by external verifiers at SQA to ensure that the standards were aligned to the national occupational standards and key skills. The monitoring team has some concerns about the qualification's assessment methodology. For example, there is no identifiable mark scheme for written questions.

7. The other concern for the regulators is that the organisation involved is currently the only centre approved to deliver this qualification. As a nationally accredited qualification, assessment materials should be available to all centres. As the assessment materials are 'owned' by the submitting organisation, should another organisation seek centre approval they would not be able to access them. SQA is aware of this issue and currently developing its own materials for use by centres when they come forward for approval.
8. The qualification in internet safety was developed by SQA using a consultant to oversee the process of writing items for a question bank and levelling these items. The monitoring team was shown a document entitled *Development of the qualification: Internet safety VRQ level 1 (single unit)*, which identified the following issues.
9. The document includes a series of questions and answers about the process, such as the rationale for development and support materials for centres. There was no formal rationale for the development of the qualification or support materials generated. Additionally, there was no identification of a qualification end date. Staff stated that 'as this is a single unit, there is no expiry date', which is incorrect. All accredited qualifications have expiry dates regardless of size.
10. The development processes for both qualifications followed procedures that were in operation in SQA at the time. However, these processes were different to each other, indicating there was no single process. Staff responses to questions did address some of the issues. However, the regulators are not confident that sufficient rigour was applied to the SQA level 1 Award in internet safety and the level 2 Award, Certificate and Diploma in playwork principles into practice during development.
11. SQA staff stated that there is a policy for withdrawing qualifications included in the new procedure, but the monitoring team could only find a single sentence referring to qualification withdrawal. Staff did explain the arrangements for informing centres about the withdrawal of qualifications, but there is no documented procedure to support this.

## Accreditation conditions

6. SQA must subject all accredited qualifications to the same development process to ensure the quality and robustness of design, content and assessment methodology (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 33a).
7. SQA must document its procedures for withdrawing an accredited qualification prior to its expiry date (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 44).

## Observation

1. SQA should ensure that its new qualifications development process is finalised and implemented.

## Quality assurance and control of internal assessment

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 13, 36, 56, 57, 59 and 60–62, and the *NVQ code of practice* (QCA/06/2888), paragraphs 40–70 and 72

### Findings

1. At the time of the monitoring activity, SQA had 51 qualifications accredited on the NQF, the majority of which were NVQs, 39 of which were accredited in May 2009.
2. Prior to the monitoring activity, SQA provided information on those qualifications that were actively being delivered at centres and with candidates registered. Those with internal assessment included the level 2 Certificate, Award and Diploma in playwork principles and practice, which is a QCF qualification. For its NVQ provision, the monitoring team looked at the systems SQA had in place to deliver NVQ levels 2 and 3 in food manufacture.
3. As part of the monitoring activity, visits were made to the two centres delivering the NVQs in food manufacture. Both centres are based in Scotland and were previously approved to deliver SVQs. The centres completed a qualification approval form to deliver the NVQs, but were not advised of the additional requirements of the centre approval as detailed in the *NVQ code of practice* (QCA/06/2888). SQA has allowed these centres to continue with their existing SVQ arrangements to deliver the NVQs.
4. Following the centre visits the monitoring team concludes that while it is satisfied with the way centres are operating, SQA must implement the *NVQ code of practice* (QCA/06/2888). This is referred to throughout this report. See also the section on 'Registration and certification'.
5. The NVQ levels 2 and 3 in food manufacture have an assessment strategy owned by the sector skills council, Improve. The assessment strategy covers four main areas, including external quality control, workplace evidence, simulation and occupational expertise, and requirements for assessors and verifiers. It is available on the SQA website. During the approval process, NVQ centres are asked to confirm that they have the relevant assessment strategy.
6. During the monitoring, it was noted that more centres had recently become active in delivering NVQs for other sectors. The SQA website only shows information on the food manufacture assessment strategy. Assessment guidance specific to individual NVQs is provided to centres on request.

7. SQA has two documents currently dealing with internal verification – the published *Guide to internal moderation for SQA centres* and the draft replacement of *Internal verification: a guide for centres*. *Internal verification: a guide for centres* has not been issued to centres yet.
8. External verifiers are not allocated to specific centres, but are provided with a list of centres to be visited by SQA. They are deployed by subject, location and availability.
9. SQA does not currently have a risk-based management system for centres although one is under development. Staff explained that the new model would have categories of risk and the level of risk would inform the number of visits. Currently, external verifiers only have two options: they can either confirm that the visit was successful; or place a ‘hold’ on the centre if there is a problem. The ‘hold’ means that candidate certification will be suspended until the matter is resolved. For NVQ centres, it is a requirement to have a risk-based management system in place and also a requirement of the Improve assessment strategy.
10. SQA has not implemented the tariff of sanctions as required by the *NVQ code of practice* (QCA/06/2888).
11. SQA produced the document *Guidance on completion of external verifier visit plan and external verifier report for NVQs and other qualifications*. This document was dated October 2009. The document was published on the SQA website in October 2009 and on SQA Academy in November 2009. Although the title of the document includes NVQs, they do not appear specifically in the list of qualifications that the centre may be delivering.
12. The external verifier guidance and report do not comply with the specific requirements of the *NVQ code of practice* (QCA/06/2888). For example, the visit planning process provides centres with a list of candidates and portfolios to be sampled two weeks prior to the visit. However, there is no provision made for sampling some evidence not in the initial list.
13. The list of candidates provided to external verifiers specifies the stage of development that the candidate is at to allow a breadth of cover. The list also includes the assessor’s and internal verifier’s names. External verifiers sample the work of assessors and internal verifiers through looking at units. In sampling candidates’ evidence only, the number of portfolios looked at is recorded. This does not allow for an accurate recording of which units were sampled for which candidates and is not an auditable sampling strategy.
14. External verifiers may not always visit the same centre although they are provided with a copy of the previous visit report. It is not clear how SQA ensures

that the full scope of the NVQ external verification sampling strategy is covered. The strategy should look at the work of all assessors, internal verifiers and candidates and cover all assessment types and sites. It is unclear how this is achieved if external verifiers do not have access to sampling information over time.

15. Centres receive feedback in the form of reports from the systems monitoring visits carried out by quality enhancement managers (QEM), and the external verification visits. Neither report allows provision for noting any changes to the assessment staff. The systems verification report may include actions against non-compliance with SQA's quality framework. The number of systems visits is unspecified. Staff stated that this could be as few as once in a three-year period although if there are concerns arising from the external verifiers' visits, additional systems visits may then be carried out. It was noted that one of the centres visited had not received a QEM visit since being approved to deliver NVQs in 2008.
16. The development points raised at external verification visits are reviewed at the next visit, but the *SQA Guidance on completion of the external verifier visit plan and external verifier report for NVQs and other qualifications* states that these are advisory and that it is not essential that centres implement them. The *NVQ code of practice (QCA/06/2888)* states that external verifier reports should track any actions or non-compliances with the *NVQ code of practice (QCA/06/2888)*, including the centre approval criteria and that any actions will result in a level of sanction.
17. The level 2 Award, Certificate and Diploma in playwork principles into practice qualifications use a range of assessment methods, including observation, reflective accounts, oral and written questions. The monitoring team looked at the Certificate in playwork assessors' pack, which contained guidance on assessment. However, there is no mark scheme available for assessors to use in marking the written questions. This could lead to inconsistency across assessors and unreliable results. The monitoring team noted that two consecutive external verifier reports had identified this as an issue and had recorded them as development points in the reports. It is not clear how this issue is to be dealt with at SQA.
18. The dual processes of systems and external verification need to be reviewed to ensure that approval and monitoring of centres meet all the requirements for NVQ delivery.
19. Senior verifiers are responsible for carrying out accompanied visits with new external verifiers or those requiring development. The QEMs review external verifiers' performance through centre visits and centres provide feedback. The relevant qualifications manager and the qualification approval and verification

officer review external verifier reports to check for consistency before they are sent to the centre. Senior verifiers work with the qualification managers to produce annual reports on internally assessed qualifications.

20. SQA is implementing a change to the current process for managing external verifiers by enhancing the role of the senior verifiers to include performance management. This will be implemented from April 2010.

### **Accreditation conditions**

8. SQA must put in place a risk management strategy for monitoring approved NVQ centres (*NVQ code of practice* (QCA/06/2888), paragraph 59).
9. SQA must ensure that the tariff of sanctions is implemented to allow external verifiers to make an appropriate sanction on NVQ centres that are non-compliant with the NVQ code of practice (*NVQ code of practice* (QCA/06/2888), paragraph 69).
10. SQA must ensure that external verifiers visiting NVQ centres select some samples of work without prior notifications (*NVQ code of practice* (QCA/06/2888), paragraph 66).
11. SQA must ensure that the external verifier report for NVQ centres meets the NVQ code of practice (QCA/06/2888) by including details of any changes in centre staff or competence, and specifying the actions that a centre must take if its performance does not meet requirements (*NVQ code of practice* (QCA/06/2888), paragraph 67).
12. SQA must ensure that for NVQs, external verifiers record which units have been sampled for which candidates so that there is a clear audit trail (*NVQ code of practice* (QCA/06/2888), paragraph 65).
13. SQA must ensure that NVQ candidate sampling is effective over time and covers all assessors, all assessment methods, all locations and all candidates (*NVQ code of practice* (QCA/06/2888), paragraph 65).

### **Observation**

2. SQA should continue to review all of its systems, procedures and documentation relating to the delivery of NVQs to ensure that staff, centres (whether new or existing) and external verifiers are aware of all of the requirements of the *NVQ code of practice* (QCA/06/2888) and that these requirements are implemented.

## Quality assurance and control of independent assessment

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 13, 36, 38–42 and 56–58.

### Findings

1. SQA offers a single unit qualification, the level 1 Award in internet safety, which is internally and independently assessed. The qualification is available on demand. Candidates complete a short multiple-choice question test online for learning outcomes 1–3. Outcome 4 is a log of learner activity such as a 'blog', which is internally assessed and subject to external verification.
2. SQA staff confirmed that determining the pass rate for the multiple-choice question test for internet safety was based on the professional judgement of subject experts. It was agreed that candidates should answer a minimum of 16 questions correctly for outcomes 1–3. Outcome 4 is a pass/fail only determined by the assessor. When results are combined candidates are issued with a pass/fail for the overall qualification.
3. Item writers are issued with the *Guide to writing objective tests*. The items for these tests can be developed online by item writers and undergo peer review. Access to the items is password protected and controlled by SQA. The system enables SQA to identify the author and who evaluates items.
4. Items are uploaded to the item bank and tests are generated on request. The rules and criteria about curriculum coverage allocate a facility value to each question, which determines the level of difficulty. The item bank holds about 175 items and each test has 25 items. SQA staff confirmed that candidates at the same centre will have different tests on the same day as the item bank records all allocated tests. The system stores all information and can check which items candidates have answered. SQA is able to run reports on the performance of particular items and edit individual items when live, particularly if specific issues such as a low-facility value are identified as this could mean the item is misleading.
5. The monitoring team looked at the guidance documents to support the SQA level 1 Award in internet safety. Guidance documents include the *Assessment support pack*, which details the standards to be assessed, assessment methods and evidence required. The information is confusing as it refers to closed book testing under supervision and the use of a CD if there is no online facility. It also implies, as does the information on the National Database of Accredited Qualifications (NDAQ), that centres can devise their own assessments with permission. SQA staff confirmed that the CD is no longer sent to centres.

6. All tests are now developed by SQA, taken online and automatically marked. This is a change to the assessment arrangements agreed at the point of accreditation. SQA will need to formally inform Ofqual and agree these changes.
7. The regulators require candidates and centres to confirm the authenticity of evidence presented for assessment. It is not clear from the *Assessment support pack* or the centre guide to approval how this is done. Invigilators are nominated by the centre and authorised by SQA. Staff at SQA confirmed that they have not carried out any spot checks during tests.
8. Centres manage the delivery of the assessments and all centres have direct claims status (DCS) to request certificates. When candidates take the online test, the results are available automatically to centres. If candidates pass and have achieved outcome 4, certificates are applied for by the SQA centre coordinator. SQA confirmed that there had been no external verification visits to look at the internal assessment decisions for outcome 4 although centres are expected to provide external verifiers with access to this information if required. The regulators are not confident that overall results are determined on the basis of sufficient evidence if SQA does not sample and record the verification of outcome 4.
9. Candidates who fail the online test are allowed a second attempt. Any further attempts are at the discretion of the centre. The monitoring team posed the question of special consideration if for example the test was interrupted because of system failure or incapacity on the day. SQA confirmed that if the internet connection is lost, or if there is an unexpected break in the session (such as a fire alarm), candidates can log back in and will be taken back to the last question that they completed and finish the test. In the case of incapacity on the day or illness, the centre will decide if candidates can retake the test. However, the regulators do require awarding organisations to make formal provision for special consideration and it is not clear how centres are informed of this requirement. See also the section on 'Equality of opportunity, reasonable adjustments and special consideration'.

### **Accreditation conditions**

14. SQA must revise its guidance to centres so that they are clear about the assessment and external verification requirements for all NQF qualifications (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 56).
15. SQA must ensure that outcome 4 is sampled and tracked so that there is sufficient evidence to confirm the final result (*The statutory regulation of*

*external qualifications in England, Wales and Northern Ireland (QCA/04/1293), paragraph 63b).*

### **Observation**

3. SQA must inform Ofqual of the changes to the assessment methodology for internet safety qualifications.

## Registration and certification

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 11, 12, 21 and 22, and the *NVQ code of practice* (QCA/06/2888), paragraphs 6–18 and 20–30.

### Findings

1. The Business Development and Customer Support Team works with potential centres in providing them with sufficient information to enable them to go forward to the main centre approval process. There is a document entitled *A guide to approval* (July 2009 edition) that includes information on the process, the roles and responsibilities of centre staff and administrative requirements. However, this document makes no specific reference to NVQs other than an inclusion in the list of qualification types available.
2. The approval process is the same for all SQA centres and qualification types. It is in two parts, one for systems and one for each subject or qualification to be delivered. Centres are expected to submit both parts for approval. The systems verification is carried out by a QEM. The qualification approval is carried out by a subject-specific external verifier or other appointee. Both approvals are confirmed by a visit, but these may not necessarily be at the same time. The QEM and the external verifier base their judgements on *SQA's quality framework* document, which contains the centre approval criteria.
3. The centre approval form makes reference to the fact that the centre must give right of access to the awarding organisation and 'national agencies'. SQA should consider enhancing this statement to clarify that this includes the regulators.
4. The generic advice and guidance provided to centres is not sufficient for centres delivering NVQs. The documents do not meet all of the specific NVQ approved centre criteria contained within the *NVQ code of practice* (QCA/06/2888).
5. For example, *A guide to approval* states that assessors and verifiers may be working towards achievement of assessor and verifier qualifications (A1 and V1) but does not state that the centre should have countersigning arrangements in place. Nor does the guidance state the timescales in which A1 and V1 should be achieved.
6. It was noted that there were centres based in Scotland delivering NVQs to assessment sites in England and Northern Ireland. The regulatory criteria states that centres cannot extend their operations overseas and that assessment sites across country borders must become centres in their own right.

7. In Scotland, all young people are registered onto the education system through the allocation of a Scottish candidate number (SCN) while they are at school. When the candidate is entered for a school examination, an SCN will be allocated from the batch given to the school and SQA is advised. This number stays with the candidate for life.
8. Centres notify SQA of all candidates taking SQA qualifications. Candidate information is mostly submitted electronically. Details are checked for matches against existing candidate records. If no match is found, a new number is allocated.
9. SQA stated that it does not collect information on the ethnicity of candidates due to the way in which the SCN is allocated. Collection of this data is a regulatory requirement for NVQs. Under diversity and inclusion legislation, the regulators would expect awarding organisations to collect similar information for all qualifications.
10. Following the process of registration, candidates must be entered separately for each unit of the qualification that they will be undertaking. The 10-week rule from registration to certification for N/SVQs has been built into the system so it is not possible to certificate a candidate within 10 weeks of entry.
11. Candidates can follow the progress of their registration record from the 'My SQA' section of the website as well as being able to view their results from here. 'My SQA' remains open indefinitely for candidates even after they have completed their qualification.
12. The role of the SQA coordinator is described in the *A guide to approval* document and includes responsibility for the process of registering candidates, inputting unit entry information and submitting results in order to certificate. The same system used for registrations is also used for submitting entries and results. Receipt of results leads automatically to certification (where units or the full qualification have been completed.)
13. For NVQs, it is a requirement that all claims for certification are authorised by an appropriately qualified internal verifier. SQA staff considered that the work of internal verifiers is checked by the external verifier and that the responsibility for ensuring the internal verifier had authenticated results lay with the SQA centre coordinator. The monitoring team found no evidence to indicate that this is currently part of the centre coordinator's role. SQA must only accept claims that meet this requirement and therefore needs to put a process in place to ensure it is met. This is particularly important, as all centres are able to claim certificates directly without prior validation from external verification.

14. Unit certificates are provided alongside the full qualification certificate. If a candidate wishes to claim unit certification, the centre would make an electronic request to SQA.
15. A form for requesting replacement certificates can be downloaded from the website. SQA makes appropriate checks to ensure authentication before it issues a replacement.

### **Accreditation conditions**

16. SQA must provide NVQ centres with a clear statement of the administrative procedures, requirements and responsibilities associated with NVQ delivery (*NVQ code of practice* (QCA/06/2888), paragraph 1).
17. SQA must collect data on ethnicity for NVQ candidates (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293) paragraph 12).
18. SQA must put in place a procedure to ensure certificate claims for NVQs are authenticated by an appropriately qualified and occupationally expert internal verifier (*NVQ code of practice* (QCA/06/2888), paragraph 30).

### **Observations**

4. SQA may wish to clarify the reference on its centre approval form that states centres must allow right of access to national agencies to include the regulators.
5. SQA should keep under review how candidates are being assessed in sites across country borders.
6. SQA does not collect data on ethnicity of candidates given that the majority are entered onto the Scottish candidate numbering system. However, it may wish to review this and consider how it will meet this data requirement in the future.

## Malpractice

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 28–31, and the *NVQ code of practice* (QCA/06/2888), paragraphs 73–81.

### Findings

1. The malpractice documentation submitted at the point of accreditation and banked with the regulator was in draft format.
2. SQA head of quality systems stated that documents, including malpractice, complaints and appeals, were all under review to clarify the distinction between them. The review is to include formalising the system and process and the use of sanctions. The malpractice guidance for staff, centres and learners is currently in its third draft. Therefore, SQA does not have an existing published procedure for dealing with malpractice.
3. Malpractice is not referred to in SQA documents such as the *Guide to approval* or *SQA's quality framework: a guide for centres*.
4. Currently, SQA relies on QEMs and external verifiers to deal with suspected cases of malpractice within centres, although there was no evidence of any such cases to date.
5. No specific malpractice training has been carried out with QEMs, external verifiers or centres. This is a requirement for NVQs.

### Accreditation conditions

19. SQA must produce and publish procedures to centres on dealing with malpractice that meet the statutory requirements. These procedures must also be submitted to Ofqual for the purposes of banking (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 28–31) and *NVQ code of practice* (QCA/06/2888), paragraphs 74–77).
20. SQA must ensure that external verifiers are fully trained in the procedures for dealing with suspected centre malpractice (*NVQ code of practice* (QCA/06/2888), paragraph 73).

### Observations

There are no observations for this section.

## Equality of opportunity, reasonable adjustments and special consideration

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 9, 14–20 and 38–42, and the *NVQ code of practice* (QCA/06/2888), paragraphs 2, 3 and 39.

### Findings

1. SQA's ABRA included a reasonable adjustments and special considerations policy in the submission. This document is held by the regulators as a banked document. However, this policy does not describe the system currently in operation at SQA.
2. The SQA system of reasonable adjustments is known as 'assessment arrangements'. The procedures are detailed in the document *Assessment arrangements – Explained* dated November 2008 and is on the SQA website. The Assessment Arrangements Team is based at the Dalkeith site and all requests are submitted directly to them. The arrangements are written primarily for the SQA national (schools) qualifications.
3. The majority of SQA qualifications are internally assessed. The assessment arrangement guidance allows for a centre to make its own arrangements. In areas where the awarding organisation has to be consulted or for all external assessments, the request comes in to the Assessment Arrangements Team, which liaises with the equal opportunities officer. This is documented through emails and the final decision is logged.
4. SQA staff advised that in providing assessment arrangements, it aims to ensure that the candidate follows their usual methods of working. Evidence of the candidates' requirement and of the application of assessment arrangements for internal assessments must be kept by centres to allow SQA to audit them. SQA staff said that they only needed to be informed should the requested adjustment affect the competency requirements of the qualification.
5. For external assessment, the awarding organisation keeps a record of arrangements made and publishes data in an annual statistics report.
6. While SQA has a comprehensive system in place for reasonable adjustments through its assessment arrangements policy, there does not appear to be any provision for special consideration. Staff interviewed were not aware of the special considerations policy that was held by the regulators. Staff stated that any incidents at the time of assessment would be dealt with using the appeals process. However, the monitoring team was also informed that for the VRQ in internet safety centres can use their discretion as to whether candidates can

retake an assessment. SQA is required to put into place arrangements for dealing with special consideration that can be applied consistently.

7. Equalities and disabilities training is provided to awarding organisation staff. The Appointee Management Team is looking to extend this training to include appointees. It is a requirement of the *NVQ code of practice* (QCA/06/2888) that training must be provided to NVQ external verifiers to allow them to meet their responsibilities.

### **Accreditation conditions**

21. SQA must publish and implement a special considerations policy that states the conditions of eligibility and the application of procedures, and treats candidates fairly. There must be a system put in place to monitor the use of special considerations (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 18, 19 and 20).
22. External verifiers must be made aware of the appropriate sections of current legislation relating to equality of opportunity (*NVQ code of practice* (QCA/06/2888), paragraph 3).

### **Observations**

There are no observations for this section.

## Customer service statement

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 32 and 33b, and the *NVQ code of practice* (QCA/06/2888), paragraph 33.

### Findings

1. SQA has a clear customer service statement published on the organisation's website. It is also signposted from centre approval guides.
2. New business support teams have been set up with a single central telephone number and email address published.
3. To monitor its service targets and overall customer satisfaction, SQA has implemented an automated customer relationship management (CRM) system to record all contact with customers. This system is currently used within the Customer Service Team and SQA plans to implement it across the rest of the organisation.
4. SQA has recognised that the current website is too large, not easy to navigate to specific information very difficult to access. A new site is currently in development. The new site will be easier to navigate, show learning routes and have greater information about Ofqual accredited qualifications.
5. SQA carries out targeted stakeholder surveys on a quarterly basis, which include centres, candidates, employers and parents.

### Accreditation conditions

There are no accreditation conditions for this section.

### Observations

There are no observations for this section.

## Enquiries and appeals

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 23–27, and the *NVQ code of practice* (QCA/06/2888), paragraphs 31 and 32.

### Findings

1. With the ABRA, SQA submitted a draft *QCA, NVQ and VRQ appeals and enquiries about results policy* document and the separate draft document, *QCA, NVQ and VRQ appeals and enquiries about results form*. These documents do not appear to have been implemented by SQA and are not published.
2. Staff stated that a new operating agreement for appeals was being produced to align with other work being done on complaints and malpractice.
3. A further document *The Appeals process: a handbook for centres* dated March 2004 was made available to the monitoring team. Staff confirmed that this was the procedure currently being applied. This document pre-dates Ofqual recognition and therefore does not refer to the SQA qualifications accredited with Ofqual. It is insufficient as it does not meet statutory regulations or the requirements of the *NVQ code of practice* (QCA/06/2888).
4. For example, candidates are advised that they must follow the centre's own procedures before any appeals can be made to SQA. However, *The appeals process: a handbook for centres* only makes provision for appeals to SQA by centres and not by candidates.
5. Another example is that candidate appeals against internal assessment decisions are dealt with wholly by the centre. The centre makes the final decision and SQA does not get involved. This is stated in the *Guide to approval* document and was confirmed by staff. Candidates must have recourse to the awarding organisation if they are not satisfied with the outcome of the centre appeals process. SQA must put an appeals process in place, which includes provision for dealing with appeals from internal assessment.
6. *The appeals process: a handbook for centres* states that applications from centres appealing against approval or other decisions are reviewed by the chief executive, and if not satisfied, can go to an SQA appeals sub-committee. An independent person sits on the appeals sub-committee as an observer only and reports on the actions taken. The document clearly states that the decision of the committee is final. However, this is inconsistent with the process for appeals against external verification where subject specialists review the evidence and their decision is final. SQA needs to consider and remove any inconsistencies when reviewing the appeals process.

7. SQA staff stated that if the appeal was unresolved, the centre would be advised to go to the ombudsman and that this forms the independent review. This is insufficient and SQA must include the required levels of independence throughout the appeals process.
8. SQA must review its policy and procedures for enquiries and appeals, ensuring that they meet the statutory requirements.

### **Accreditation conditions**

23. SQA must review and publish its procedures for enquiries and appeals that either centres or candidates can follow, including candidates undertaking internal assessment (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 23).
24. SQA must ensure its appeals procedures meet the statutory requirements and the requirements of the *NVQ code of practice* (QCA/06/2888). The procedures must include details of who is involved in considering the appeal, relevant contact details, the required levels of independence, communication with appellants and fees, and explain how unresolved appeals can go to independent review (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 25, and *NVQ code of practice* (QCA/06/2888), paragraphs 31 and 32).
25. SQA must include in its appeals procedures provision to look at other results should the appeal bring into question the accuracy of results (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 26).

### **Observations**

There are no observations for this section.

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