

Post-accreditation monitoring report

Active IQ

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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 that are considered to be the most crucial in supporting an awarding organisation's ability to operate effectively. 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 as part of the annual self-assessment return.

About this report

This report is the outcome of a monitoring activity on Active IQ awarding organisation and was carried out by Ofqual on behalf of the regulators in November 2009. It draws together our findings on areas of:

- corporate governance
- resources and expertise
- qualifications development
- quality assurance and control of internal assessment
- banked documents.

This is the second post-accreditation monitoring activity on Active IQ's activities. An Awarding Body Recognition Update (ABRU) and monitoring report was completed in 2005 under its previous name, Premier IQ, for which there are no outstanding accreditation conditions.

The monitoring activities included desk research of information already held by the regulators, the ABRU submission and scrutiny of the website. The monitoring team visited Active IQ's head office to conduct interviews with staff and review documentation. They also visited centres and observed an external verifier training day to check how the awarding organisation's quality assurance systems worked in practice.

About Active IQ

Active IQ provides access to a range of national vocational qualifications (NVQs) and vocationally related qualifications (VRQs) in the fitness and related sectors. For more information on Active IQ and the qualifications it offers, visit the website at www.activeiq.co.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. Active IQ, previously known as Premier IQ, is one of three subsidiary companies within the Premier Global Group. The remaining companies are Premier Training International (PTI) and Premier Training Solutions (PTS), which are both training providers for the active leisure sector. Premier Global has a chairman and chief executive officer (CEO) who oversees the full group and controls the group business plan. The Active IQ business plan is one component of the parent group plan. Objectives from the business plan are shared with the senior management team (SMT) and cascaded down to staff and external contractors. Any changes to the existing business plan, such as additional recruitment, have to be agreed by the parent company. The awarding organisation shares systems, such as finance and human resources, with the parent company.
- 2. The regulators require awarding organisations to have transparent governance, organisation and management arrangements. The current arrangements shown on the banked documents are not clear. According to the organisational chart, staff from both Premier Global and Active IQ report to the group sales and marketing manager who works for Premier Global.
- 3. There is no reference to any committees or groups that support the work of the awarding organisation on the organisational chart. The banked documentation suggests that the Advisory Board is the independent advisory body for governance and the mechanism for avoiding conflicts of interest. In practice, this group advises on qualifications development not governance or management.
- 4. The executive director of Active IQ is the single named point of accountability for maintaining the quality and standards of all qualifications, and responsible for operational issues. However, the current job specification for the executive director does not specify this responsibility.
- 5. The executive director is supported by the SMT, which includes the lead external verifier, customer services manager, qualifications manager and head of business development. They have regular meetings. The executive director confirmed that this group deals with reports on malpractice, appeals and reasonable adjustments. Reports are then passed through the monitoring and evaluation committee, which meets annually.

- 6. Discussions with awarding organisation staff clarified that governance arrangements are in place, but these are not supported by written terms of reference detailing the role and remit of the SMT and Advisory Board or clear lines of reporting. The SMT needs to be clearly identified as the group responsible for the governance of Active IQ and show its independence from the parent company, Premier Global.
- 7. The Advisory Board is made up of training providers, including representatives from PTI, employers, colleges and the industry trade body expert (represented by the CEO of Premier Global). The monitoring team has some concerns about the make up of this group and the potential for conflicts of interest when developing qualifications. The monitoring team recognises the professionalism of these individuals, but there are no written terms of reference for this group detailing its roles and responsibilities, or any policy explaining how potential conflicts of interest will be identified and managed.
- 8. Another potential conflict of interest is the formalised internal verification service provided by Active IQ to PTI. As part of the regulatory requirements, awarding organisations can offer internal verification services in exceptional circumstances. The monitoring team was shown a service-level agreement between PTI and Active IQ dated September 2009. The main issue of concern is that the agreement is signed by the executive director of Active IQ and the CEO of Premier Global who is the executive director line manager. Active IQ will need to document fully how this potential conflict of interest will be managed.
- 9. Active IQ carries out annual benchmarking activities to ensure that its fees are reasonable. Feedback from centres has led to a reduction in unit fees for some qualifications.
- 10. The banked documents were reviewed and changes were recommended for some of the existing policies.
- 11. The monitoring team was given full access to awarding organisation documentation, including the business plan, minutes of meetings and reports.

Accreditation conditions

1. Active IQ must review its current governance arrangements so that it is clear where decisions concerning awarding organisation policies and procedures are made. Terms of reference are required for all groups and committees. In addition, the organisational chart must show the position of the groups and committees supporting its work, and the reporting lines from the awarding organisation to the parent company (*The statutory regulation of external*

- qualifications in England, Wales and Northern Ireland (QCA/04/1293), paragraph 6a).
- 2. Active IQ must have a clear conflict of interest policy describing how potential conflicts of interest are managed between the awarding organisation, the parent company and its subsidiary companies (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 5d).

Observations

- Active IQ should amend the job specification of the executive director to include the role of single named point of accountability with responsibility for maintaining the quality and standards of all qualifications.
- 2. Active IQ is reminded to provide the monitoring team with the revised policies for banking.

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 4, 5, 19 and 71.

Findings

- 1. Active IQ has 16 staff to support the delivery of its accredited qualifications, including three employed external verifiers and a lead external verifier. Two additional head office staff externally verify on a part-time basis. The awarding organisation also has three part-time contracted external verifiers. All of them externally verify both NVQ and VRQ centres. Some of the external verifiers are also carrying out internal verification for PTI centres.
- 2. There is a staff appraisal process, which is linked to the objectives of the business plan. Active IQ uses the Premier Global appraisal process, which includes both interim and annual appraisals.
- There are suitable arrangements for recruiting and training external verifiers, which are fully documented. All potential external verifiers have to meet the expertise and competence requirements of the awarding organisation, and the relevant assessment strategy.
- 4. All new external verifiers have an induction covering the operating procedures and the NVQ code of practice (QCA/06/2888) requirements. Training includes shadowing experienced external verifiers and accompanied visits. In addition, external verifier reports completed by inexperienced external verifiers are scrutinised. The monitoring team noted that external verifiers are given a 'toolkit' that gives detailed guidance on the procedures to be followed with exemplar forms and how to risk-assess centres. This is good practice.
- 5. All external verifiers are required to attend standardisation activities twice a year. The monitoring team observed part of a recent meeting that looked at the *Operating procedures for external verifiers 2009/2010* in detail and desk-based verification. Standardisation activities were included on the agenda. Previous events looked at applying sanctions and assessing risk at centres. The lead external verifier confirmed that candidate evidence was also considered during these meetings. However, no evidence was seen in the training materials on how external verifiers should support equality of opportunity.
- 6. The monitoring team noted that four of the existing external verifiers, including two employed staff members, are working towards V2. Active IQ tracks the progress of external verifiers through its status as an approved V2 centre.

- 7. The monitoring team require awarding organisations to provide external verifiers with a code of practice, which is confirmed in writing. Active IQ issues all external verifiers with a code of practice that meets all the regulatory requirements.
- 8. Active IQ has a contingency plan and data recovery procedures in place. Information is backed up off-site daily.

Accreditation condition

3. Active IQ must ensure that external verifiers are provided with guidance and/or training on supporting the equality of opportunity (*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraph 10f).

Observation

3. Active IQ should keep under review its capacity for carrying out external verification for NVQ centres where internal verifiers are used from its external verification team.

Qualifications development

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (QCA/04/1293), paragraphs 1–4, 43 and 44–55.

Findings

- At the time of the monitoring activity, the awarding organisation was working towards supplementary recognition for the qualifications credit framework (QCF). Therefore, the systems for qualifications development could not be fully tested.
- 2. Active IQ has well-documented procedures on qualifications development.

 Although these were prepared for the QCF, the process was also applicable to the current NVQ qualifications that Active IQ awards.
- 3. The process for qualifications development is undertaken from start to finish by the awarding organisation's qualifications development team (QDT).
- 4. While Ofqual does not request plans of provision, the awarding organisation advised that they had annual contact with their sector skills council to advise them of its plans for the year ahead.
- 5. The initial concept for a qualification can come from a number of areas. It may be initiated through a government agenda (for example on obesity) or an idea developed by a training provider.
- 6. If the concept comes from an outside organisation, Active IQ requests that the organisation completes a form detailing its proposal and evidence to support the need for the qualification. Similar work is undertaken by the awarding organisation if the idea is internal.
- 7. All rationales are developed by the QDT then submitted to the SMT for approval. If the rationale is approved, the proposal is sent to the sector skills council to gain its support.
- 8. If the sector skills council supports the rationale, Active IQ begins the design process for the qualification. Initially this involves looking at the expertise Active IQ has in-house and what must be sourced from outside. Experts in both technical content and assessment are required.
- 9. The first items to be developed are the unit and assessment methodologies. These are approved by the SMT, which may recommend alterations. Once the SMT has seen and agreed the alterations, it signs-off the process. The monitoring team were shown documents developed in the last eight months that showed clear sign-off points at each stage of the process.

- 10. Following the qualification sign-off, there is liaison with centres and the QDT develops the assessment guidance and other supporting materials.
- 11. The monitoring team noticed that there was no reference to equality of opportunity in the qualifications development process. The awarding organisation is advised to look at equality of opportunity at all stages in the development of qualifications.
- 12. There is currently no piloting of new qualifications. Active IQ advised that it had identified a lack of liaison with centres in its self-assessment. This is an area that it intends to develop.
- 13. In order to assist centres with new qualifications, training days are provided. This should be a good forum for centres to gain advice on the logistics of providing a new qualification.
- 14. The take-up of new and existing qualifications is monitored by the awarding organisation. If a qualification was not performing as well as expected, Active IQ would seek feedback from key stakeholders to identify any problem areas.
- 15. The monitoring team scrutinised the document *Guidance for centres* and found reference to the fact that if a qualification was withdrawn, there would be a period of consultation with centres so that the needs of existing candidates were met. Active IQ advised that no accredited qualification had been withdrawn before its certification end date and that this would be a final resort.

Accreditation conditions

There are no accreditation conditions for this section.

Observations

- 4. Active IQ should ensure that diversity and equality of opportunity is explicit at every stage of the qualifications development process.
- 5. Active IQ should document fully its policy for the withdrawal of an accredited qualification.

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, 38–42, 56–57 and 59–62, and the *NVQ code of practice* (QCA/06/2888), paragraphs 18, 40–70 and 72.

Findings

- 1. The monitoring team looked at the quality assurance and control systems in place to support the assessment and verification of NVQs. Active IQ has nine NVQs on the National Qualifications Framework (NQF).
- 2. Active IQ provides award-specific guidance to centres and candidates. This includes the specification, information on NVQ assessment and exemplar materials. Bespoke portfolios to record evidence are also available. Details of the responsibilities of assessors and internal verifiers, and the awarding organisation's requirements on maintaining records, are included within this documentation. All centres visited confirmed that they had received this information, but one centre was unaware of the 10-week rule or that the awarding organisation and/or regulators could visit at short notice. The monitoring team noted that this was a relatively new centre. Additional guidance such as training manuals can be purchased if required, but is not mandatory.
- 3. The nature and type of acceptable evidence is included in the relevant assessment strategy. For NVQs, most of the evidence is collected via observation, witness statements and questioning. Guidance on simulation is provided. Staff confirmed that simulation is permitted for elements of first aid and this is monitored during external verification.
- 4. Centres are given clear information on the timelines for keeping assessment records in the *Centre handbook*. The documentation also includes detailed information on assessment and internal verification, and policies and procedures such as reasonable adjustments and appeals.
- 5. The awarding organisation runs qualification-specific training days for centres so that the requirements of the awards can be interpreted consistently. It also offers online e-classes. This is good practice.
- 6. Candidates and assessors are required to provide a written declaration that the evidence is authentic and that assessments are carried out in accordance with the assessment specification. In addition, the *Evidence grid* assessment form is signed by the internal and external verifier if the candidate is part of the sample. However, one centre visited said that it had not been asked to do this and was

- unaware of other administrative requirements. The monitoring team noted this was a relatively new centre.
- 7. The awarding organisation requires centre personnel to inform it of any staff changes, such as the internal verifier leaving. This requirement is stated in the documentation and is checked by the external verifier.
- 8. The NVQ code of practice (QCA/06/2888) requires awarding organisations to check the qualified status of assessors and internal verifiers, and the documented internal verification policies and procedures used by centres. The former are checked through the centre and qualifications approval process and external verification. However, two of the centres visited, which were existing VRQ centres, were unable to confirm if they had completed a centre or qualification approval form for the NVQs as no copies were available for scrutiny by the monitoring team. Copies of certificates and curricula vitae for the assessment and verification staff and the centre approval certificate were provided to the monitoring team.
- 9. Information from centre visits confirmed that two centres had been offering NVQs since September 2008 and one from March 2009. Therefore, the monitoring team acknowledge that some of the internal verification processes may not be fully implemented for the latter centre. There was evidence of internal verification of portfolios at two centres, but only one recorded observation of assessor practice. Active IQ needs to reinforce the importance of assessor observation to confirm consistency across assessors.
- 10. Active IQ is providing internal verifiers for two of the centres visited. At one centre, this is because one of these centres is small and the internal verifier is being recruited. The arrangement with the other centre is national and covers about 15 centres. The monitoring team visited one of these centres. The manager was a qualified, internal verifier and carried out assessments of candidates plus observations of the assessor who was working towards A1.
- 11. Active IQ has developed a risk-based approach to external verification as part of its quality assurance strategy. The *External verification strategy 2009/2010* requires centres to develop a *Quality management system verification* portfolio to enable the desk-based verification of systems and risk rating of centres. This is good practice, but evidence from centre visits suggests that the strategy is not yet fully embedded in view of its recent launch. Only one centre had a file containing some of this information. In another centre, the information was not held centrally and had to be gathered by different staff to aid the monitoring process. In addition, the centre could not produce a copy of its internal verification policy detailing the sampling of candidates, observations of assessors and countersigning arrangements.

- 12. The strategy identifies centres as high, medium or low risk depending on the outcome of external verification visits or their performance if approved by other awarding organisations. The strategy is documented and includes guidance on direct claims status (DCS) and the requirements for NVQ and VRQ centres. However, the guidance is slightly confusing as it does not differentiate between DCS for NVQ and VRQ centres. Active IQ must be confident in the assessment practices of NVQ centres before awarding DCS.
- 13. Head office staff stated that not all certificate claim forms for DCS centres were checked against the internal verifier signature list. Awarding organisations are required to check that all claims for NVQ certificates are valid. This may become an issue for Active IQ if the internal verifier left without informing the awarding organisation and the form is signed by another staff member without V1.
- 14. The strategy also states that NVQ centres must have two visits per year. One location visited was approved for NVQs in 2008. It had not had an external verification visit since then, but had claimed NVQ certificates. However, according to the manager, much of the work such as claiming certificates is carried out centrally by its head office. The location had run at least two courses since approval and certificated candidates. It appears that it had DCS because of existing VRQ qualifications. However, the requirements for NVQs are different and awarding organisations must ensure that the requirements of the approved centre criteria have been met before candidates are certificated or centres granted DCS.
- 15. The document *Operating procedures for external verifiers* 2009/2010 gives clear guidance on the sampling of candidates based on the centre's risk rating. It also contains detailed information on the steps that external verifiers have to follow prior to, during and after the visit.
- 16. There are suitable arrangements in place if centres cancel a pre-arranged visit and this is confirmed in the *Operating procedures for external verifiers* 2009/2010.
- 17. External verifiers are required to confirm that centres continue to meet the approved centre criteria and recommend sanctions if applicable. External verifiers check that previous development points have been completed, but there is no specific section on the external verifier report to record the development points. The lead verifier confirmed that development points are highlighted in the text of the report and that sanctions would be applied if centres failed to meet the approved centre criteria.

18. Active IQ has arrangements in place to monitor the work and performance of external verifiers. These are described in the *External verification strategy* 2009/2010. Activities include the review of external verifier reports and accompanied visits. The monitoring team looked at a sample of *EV evaluation* and development forms that recorded external verifier performance and were satisfied that the awarding organisation was checking that external verifiers were performing to the V2 standards. If areas of development are identified, these form part of the external verifier's development plan.

Accreditation condition

4. Active IQ must ensure that centres continue to meet the approved centre criteria with particular reference to ensuring that claims for certification are authentic (*NVQ* code of practice (QCA/06/2888), paragraph 60).

Observations

- 6. Active IQ should reinforce the requirement for centres to provide quality portfolios that include, for example a copy of the centre application form, and documented internal verification policies and procedures. Active IQ should apply sanctions if centres are slow to comply.
- 7. Active IQ should include a section on the external verification report for recording development points so that failure to meet these is tracked and sanctions applied where applicable.

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