





Post-accreditation monitoring report: The Association of Medical Secretaries, Practice Managers, Administrators and Receptionists (AMSPAR)

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Contents

Introduction	3
Regulating external qualifications	3
About this report	3
About AMSPAR	4
Corporate governance	5
Findings	5
Accreditation conditions	6
Observation	6
Resources and expertise	7
Findings	7
Accreditation conditions	8
Observation	8
Application of assessment methods: Quality assurance and control of internal asses	ssment9
Findings	9
Accreditation conditions	10
Observations	11
Application of assessment methods: Quality assurance and control of independent	
assessment	12
Findings	12
Accreditation conditions	14
Observation	14
Determination and reporting of results	15
Findings	15
Accreditation condition	15
Observation	15
Registration	16
Findings	16
Accreditation conditions	16
Observations	16

Introduction

Regulating external qualifications

Responsibility for regulating external qualifications lies jointly with three regulators of external qualifications in England, Wales and Northern Ireland:

- the Qualifications and Curriculum Authority (QCA), the authority for England
- the Department for Children, Education, Lifelong Learning and Skills (DCELLS), the authority for Wales
- the Council for the Curriculum, Examinations and Assessment (CCEA), the authority for Northern Ireland.

Following the accreditation of a qualification, the regulators of external qualifications in England, Wales and Northern Ireland systematically monitor awarding bodies 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 body is found not to comply with relevant criteria, the regulators of external qualifications in England, Wales and Northern Ireland set conditions of accreditation. Even if an awarding body is compliant, the monitoring team may make observations on ways that the awarding body 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 bodies 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 action plan will be agreed by the regulators of external qualifications in England, Wales and Northern Ireland and its implementation monitored.

The regulators of external qualifications in England, Wales and Northern Ireland will use the outcomes of monitoring and any subsequent action taken by awarding bodies to inform decisions on the reaccreditation of qualifications or, if necessary, the withdrawal of accreditation.

About this report

This report is the outcome of a post-accreditation monitoring activity carried out on the Association of Medical Secretaries, Practice Managers, Administrators and Receptionists (AMSPAR) awarding body by QCA on behalf of the regulators of external qualifications in England, Wales and Northern Ireland in January 2007. It focuses on the systems underpinning AMSPAR's arrangements for delivering accredited vocational qualifications. A post-accreditation audit was last carried out in early 2003.

About AMSPAR

AMSPAR is a professional association for non-clinical personnel working in the health sector and operates an awarding body offering qualifications in a number of subjects relevant to the industry.

For more information on AMSPAR and the qualifications it offers visit its website at www.amspar.com.

Corporate governance

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland*, (2004), paragraphs 5, 6 and 7.

- 1. AMSPAR is a company limited by guarantee. It is governed by a council elected by members of the association in its 12 regions. There are usually several regions without an elected member and, although provision is made for up to 30 councillors, there are currently only eight elected and seven co-opted councillors. The awarding body is part of AMSPAR and there are no separate published accounts for the awarding body. AMSPAR has an arrangement whereby one of its qualifications includes the need for successful completion of another awarding body's qualification. AMSPAR did not feel that this arrangement constituted partnership, consortium, licensing or any other formal relationship. The regulators of external qualifications in England, Wales and Northern Ireland monitoring team agreed with this opinion.
- 2. Organisation charts were provided for AMSPAR as a whole and the awarding body was included within this structure. The chief executive of AMSPAR is the head of the awarding body and is the single named point of accountability for maintaining the quality and standards of all qualifications. There is nothing in the chief executive's job description that specifically refers to this role. In its application for continued recognition, AMSPAR had not named the 'single named point of accountability', merely stating the job title.
- 3. Apart from the awarding body, AMSPAR's principal other function is as a membership body providing services to its members, such as a legal helpline and guidelines and protocols to assist those working in administration in the health sector. References in its documentation to a training function were only in respect of training examiners. The regulatory monitoring team found no evidence of any conflicts of interest.
- 4. Awarding body policy is the responsibility of the education board whose membership is predominantly made up of the six chief examiners together with the chairman of council, council office bearers and a college tutor. The remit of the education board (its terms of reference) states that 'the chief executive will attend as and when possible.'
- 5. The regulatory monitoring team examined the terms of reference and minutes of the board and found confusing references to other groupings, many no longer in existence, such as the executive committee, head office and the management team reflected in them. The reality was that the education board decided matters relating to the awarding body, albeit subject to council ratification. The board met regularly but recent attendance seemed to be predominantly by the

- chief examiners. The board signed off the examiners' reports and the proposed assessment material that the chief examiners had prepared.
- 6. AMSPAR has a small full-time staff involved in awarding body activities. There are others employed in a part-time capacity on the examination setting and marking side.
- 7. AMSPAR needs to review its corporate governance arrangements. The regulatory monitoring team considered that the governance of the awarding body was predominantly in the hands of the chief examiners who also had the technical expertise. There were insufficient checks on their work other than by their peers. This lack of accountability was reflected in AMSPAR's council where seven out of 12 constituencies had vacancies and the co-opted councillors almost equalled the number elected. The role and involvement of the chief executive in the awarding body needs to be clarified and strengthened.
- 8. AMSPAR provided full details of its fees structure, in confidence, to the regulatory monitoring team.
- 9. The regulatory monitoring team examined all the documents that AMSPAR had banked with the regulators of external qualifications in England, Wales and Northern Ireland, not just those concerned directly with governance. It is a condition of recognition that an awarding body must keep these documents up to date. At the time of post-accreditation monitoring, AMSPAR was in the course of updating the documents with another team from the regulators of external qualifications in England, Wales and Northern Ireland. Where necessary, this report comments on the existing banked document.

Accreditation conditions

AMSPAR must review its governance arrangements to make its management more robust.
 The work of the chief examiners must be checked independently. The awarding body responsibilities of the chief executive must be detailed in the job description for that post (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 5a).

Observation

1. AMSPAR should consider revising its council membership arrangements.

Resources and expertise

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland*, (2004), paragraphs 8 and 10.

- 1. No undue pressures were reported or seen during the central systems audit but centre visits and examination of the assessment and marking activities suggested that the awarding body needed to do more to ensure that candidates' and centres' experience of AMSPAR qualifications was improved. Avoidable errors in the examination papers and complicated rubric on assessments were seen and commented upon by centres visited by the regulatory monitoring team. Centres visited also expressed the desire to reduce the published timescale for results.
- 2. There may be a lack of resource or expertise at the awarding body in terms of the design and development of the examination papers. It is not possible to judge the extent of this exactly until the awarding body procedures have been applied. For example, the procedure states there are checklists that would allow errors to be identified. These could not be found or had not been developed.
- 3. The awarding body administrators were unaware of all the job descriptions and person specifications that the regulatory monitoring team suspected existed from references in past minutes of the education board. Some were found in files that the regulatory team examined and brought to the attention of the administrators, e.g. chief examiner and country specialists, who have in most cases been in post for several years. This called into doubt the effectiveness of recruitment and selection policy although the awarding body maintained that, when recruitment was needed, the necessary procedures would be followed and job descriptions updated.
- 4. The regulatory monitoring team accepted this argument since, when it examined the CVs of key staff, it was satisfied that the required level of expertise is generally available to the awarding body. Chief examiners are responsible for training new examiners.
- The regulatory monitoring team observed that the awarding body's quality control of its centres' internal assessment depended on its central sampling strategy, which was developed by the chief examiners. Centre visits, after centre approval, were rare although examination spot checks do occur.

Accreditation conditions

There are no accreditation conditions for this section.

Observation

2. AMSPAR should review its recruitment and training procedures and assess its operational needs afresh for keeping documentation on file.

Application of assessment methods: Quality assurance and control of internal assessment

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland*, (2004), paragraphs 13, 36, 38–42, 56–57, 59–62.

- 1. AMSPAR uses internal assessment as part of its assessment strategy for all of its accredited vocational qualifications except the level 3 certificate in medical terminology for non-clinical professionals. Centres assess candidates by using written tests as mini-examinations throughout the course and/or a work-based assignment. These are set by the awarding body but marked by the centres using an awarding body mark scheme.
- 2. The mark schemes provided by AMSPAR were insufficiently detailed to ensure that assessors allocated marks in a standard way. Centres visited confirmed this. Internal moderation was required of centres but there was no guidance from the awarding body on how this should be carried out. As the awarding body did not visit its centres regularly there was no way of checking that this had occurred. Exemplar material appeared to have been discontinued for the level 2 and level 3 diplomas although centres visited valued what had been produced in the past.
- 3. AMSPAR took a sample of its centres' internal assessments and moderated them centrally. The procedures relating to moderation of internal assessment were contained in the chief examiner's handbook and were sufficiently detailed to cover most matters regarding how the sample was decided, but did not clearly state that the work of all assessors would be scrutinised over time. External moderation was carried out by a panel of moderators under the direct supervision of the chief examiner.
- 4. A report was provided to centres commenting on the quality of the marking and the reasons if marks were adjusted. No individual report on each assessor was provided. Centres visited commented that they needed greater detail and felt unsure why marks had been adjusted, despite internal moderation. The regulatory monitoring team found it difficult to understand which candidates' marks had been changed.
- 5. Centres did not have to keep assessment records after the results were published and it was not clear how appeals or other activities of a retrospective nature could be carried out, if required. Centres visited tended to keep their records for longer based on experience acquired with other awarding bodies. AMSPAR retained the sample of assessments that it took from

centres. The awarding body had not specified what records centres should keep in order to track candidate progress.

- 6. The regulatory monitoring team attended a meeting of the chief examiners and asked about the sampling process for moderating internal assessment. The work was carried out on a communal basis after each examiner had looked at the papers individually. There was an unsigned report submitted to the centre on unheaded paper. No report was produced on the individual external moderator's performance by the chief examiner.
- 7. The awarding body used plain English in all its documents and this requirement appears in the appropriate checklist. English is the only language of assessment, although AMSPAR was willing to provide assessment in other languages where there was a demand. Evidence is reliable and sufficient and centres visited confirmed this. They commented that parts of the specification appear to be somewhat higher than the requirements of the job performed. Both candidates and centre confirm that candidate work is authentic by their signatures.
- 8. AMSPAR provides a clear indication of the limits of assistance that can be given to candidates with their projects and the extent to which they are allowed to redraft work before it is finally assessed.
- 9. The regulatory monitoring team found it difficult at times to understand the structure of the qualifications and felt that candidates may have the same difficulties. This was confirmed by centres visited. The clearest example of why it is difficult is that AMSPAR refers to four assignments in the level 2 intermediate diploma in medical reception and shows only two in the course handbook. It expects centres to realise that, although only assignment four is labelled as such, the other paper is to be split into three and marked and reported separately. There is no apparent need for this confusion.
- 10. Centres report marks to the awarding body using a paper-based system. The website was commented on unfavourably as centres visited found it difficult to locate relevant information. The regulatory monitoring team found some of the wording needed greater clarity. The website does not provide sufficient information, especially to a non-AMSPAR member. (Membership of AMSPAR is not compulsory to access its qualifications.)

Accreditation conditions

2. AMSPAR must provide assessors with information on the nature and type of acceptable evidence and how to ensure that assessment requirements can be interpreted consistently by, for example, making its mark schemes more detailed and re-introducing exemplar material (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraphs 60b and 60e).

- 3. AMSPAR must provide guidance for centres to carry out internal moderation (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 61b).
- 4. AMSPAR must provide guidance to its external moderators to ensure their sampling includes all of the assessors over time (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 61dii).
- 5. AMSPAR must provide centres with information on the minimum data that they need to keep to track candidates' progress (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 60f).
- 6. AMSPAR must compile reports on each external moderator (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 61f).

Observations

- 3. AMSPAR should improve its feedback to centres on moderation, including reporting on the work of different assessors where centres have more than one.
- 4. AMSPAR should consider whether its period of recommended record retention is sufficient to meet all requirements, such as appeals, audit and monitoring over time.
- 5. AMSPAR should print its assignments so that centres are aware that they are separate items and require separate marking, where appropriate.
- 6. AMSPAR should consider improving the clarity, content and accessibility of the information on its website.

Application of assessment methods: Quality assurance and control of independent assessment

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland*, (2004), paragraphs 13, 36, 38–42 and 56–58.

- AMSPAR uses mainly written examinations as the method of independent assessment for its
 qualifications. Candidate work is confirmed as authentic. The awarding body felt that there
 might be room for improving the certainty of identity for distance-learning candidates going to
 centres to sit the single unit level 3 certificate in medical terminology for non-clinical
 professionals. Records of independent assessment are kept indefinitely as the awarding body
 stores these centrally.
- 2. Having examined the procedures and spoken to centres, the regulatory monitoring team was satisfied that AMSPAR maintains security of the written examination process. Centres visited regarded the invigilation procedures and distribution of papers process as thorough. AMSPAR had introduced spot checks on its examination centres. Centres visited had noted that this was occurring. No centre reported experiencing any difficulties. However, there is a module of one qualification that may be sat using a computer and the awarding body has made no restrictions on candidates' accessing the internet or email. As a result, the examination may be vulnerable to cheating depending on the nature of the questions set.
- 3. Centres visited confirmed that the evidence for the qualifications was relevant and sufficient.
- 4. The chief examiners may teach candidates for the qualifications they set. Although there is no particular monitoring of the centre's results where the chief examiner works, there is a review that identifies underperforming and overperforming centres. The chief examiner is able to mark up to 25 per cent of candidate papers but there is no procedure for checking his or her work. AMSPAR has procedures for its chief examiner to monitor the work of its examiners and produce a report. No reports on examiners by the chief examiner were provided to the regulatory monitoring team and the awarding body said that such reports had not been produced recently.
- 5. All assessment is in English but provision in other languages would be made available if there were demand. The rubric of the examination papers was not always clear, although centres

visited said that the candidates reported no problems as they sat a number of mock examinations based on past papers.

- 6. An examination is set by the chief examiner and checked by the education board. The board's minutes revealed that attendance at these meetings could be almost exclusively made up of chief examiners. The regulators of external qualifications in England, Wales and Northern Ireland monitoring team did not consider that this was a sufficiently independent check. At a meeting of the chief examiners, attended by the regulatory monitoring team, it was said that independent checking did in fact occur on an individual basis. The awarding body provided no evidence of this, checklists requested for specific examinations could not be found and there were no written procedures for these activities.
- 7. The regulatory monitoring team observed that the examination papers brought to an examiners' meeting were in different states of completion. One paper was only handed out at the meeting which precluded advance preparation of comments. The committee did not always identify errors in the examination papers even where the paper had been distributed in advance. The regulatory monitoring team found an error in completed and examined papers. Centres visited commented on errors they had noticed in past papers. The absence of procedures and the failure to enforce the correct completion and filing of checklists meant that the regulatory monitoring team lacked confidence in the reliability of the examination setting process.
- 8. Questions are mapped to the qualification's specification although some records of this being done were not up to date. Mark schemes are produced but, like those for internal assessments, they are insufficiently detailed and exemplars, although provided in the past, have not been produced recently. The chief examiner is responsible for training and supervising the work of examiners. Sampling of examiners' work is carried out and standardisation occurs but there is no evidence of this as no record is kept.
- 9. AMSPAR requires an annual declaration of 'conflict of interest' from all of its examiners. The information gathered is collated onto a computerised log for ease of reference.
- 10. The chief examiners produced reports on the outcome of examinations and these were distributed to all centres for information and guidance. They often identified production problems that had arisen such as repetition of the question.
- 11. The annual report of the council 2005/6 noted that 25 per cent of appeals (seven out of 26) were successful. AMSPAR might wish to investigate the reasons.

Accreditation conditions

- 7. AMSPAR must specify arrangements to maintain security during assessment and ensure use of computers in examinations does not allow access to sites that could provide undue assistance to candidates (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 58f).
- 8. AMSPAR must ensure that it has procedures in place to check the work of all examiners, including that of chief examiners (*The statutory regulation of qualifications in England, Wales and Northern Ireland*, 2004, paragraph 36).
- 9. AMSPAR must improve the quality of its question paper and mark scheme setting to make the process reliable. It must devise procedures that evidence the monitoring of examiners' work in setting examinations and drawing up mark schemes and the independent checking of these by appropriately qualified individuals (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraphs 56 and 58d).
- 10. AMSPAR must keep records of its activities to enable both internal and external review of its procedures, especially on the consistency of assessment (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 58i)

Observation

7. AMSPAR should consider how all candidates might be positively identified, including independent candidates presenting themselves at centres for assessment.

Determination and reporting of results

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland*, (2004), paragraphs 63–67.

Findings

- AMSPAR uses fixed pass marks for all tests although it exercises flexibility on this if appropriate. Syllabus grids are used to ensure that assessment covers the full specification over time. The centres visited and candidates interviewed by the regulatory monitoring team reported uniformly that the awarding body had provided clear information on how the overall award was derived from candidate performance.
- 2. AMSPAR reviews decisions and adjusts results where errors are identified. Centres visited found the feedback inadequate and did not always understand it. There had been 26 appeals in 2006.
- 3. If candidates fail to achieve the qualification there is no possibility of re-sitting the tests until the following year. Examinations are in some cases tightly timetabled over a period of two successive days when the indisposition of a candidate may unduly affect their progress.
- 4. AMSPAR stated that the main method of ensuring consistency of assessment over time was by the low turnover of examiners. Following each examination the chief examiner produces a report on that year's performance. Candidates receive an examination results slip and a certificate, although one qualification depends upon the candidate also completing two units of another awarding body's qualification before certification can occur.
- 5. The regulatory monitoring team looked at the audit trail for checking the successful completion of the other awarding body's units and it was not possible to follow this in all cases, even though only 10 per cent of these results are checked by AMSPAR with the other awarding body.

Accreditation condition

11. AMSPAR must improve its arrangements for checking the results it requires for another awarding body's units so that a clear audit trail is available (*The statutory regulation of qualifications in England, Wales and Northern Ireland,* 2004, paragraph 63a, b, c and f).

Observation

8. AMSPAR should consider providing opportunities to re-sit the examinations within each year.

Registration

This is subject to *The statutory regulation of external qualifications in England, Wales and Northern Ireland*, (2004), paragraphs 11 and 12.

Findings

- The application for centre approval and centre registration arrangements did not identify a single named point of accountability for the quality assurance and management of the qualifications.
- 2. The chief examiners assess centres' applications for approval, particularly the CVs of staff, but the regulatory monitoring team could not form an opinion on the adequacy of this as AMSPAR does not define the resources that centres need to be approved.
- 3. AMSPAR did not require its centres to provide access for the awarding body or the regulator (albeit the regulator has statutory powers of entry).
- 4. Registration of centres and of candidates is via a paper-based system and centres visited were comfortable with this.
- 5. AMSPAR allows direct registration by candidates for the single unit medical terminology qualification as candidates may complete this course by home study and sitting an examination at an AMSPAR approved test centre.
- 6. AMSPAR keeps data on its candidates that it could analyse, if the regulators of external qualifications in England, Wales and Northern Ireland were to ask for it.

Accreditation conditions

There are no accreditation conditions for this section.

Observations

- 9. AMSPAR should have procedures in place to ensure that each centre identifies a single named point of accountability for the quality assurance and management of qualifications.
- 10. AMSPAR should have procedures in place that define the necessary resources and systems, including staff subject competence, that each centre must possess to support the qualifications.
- 11. AMSPAR should have procedures in place to ensure that each centre agrees to provide the awarding body and the regulators of external qualifications in England, Wales and Northern

Ireland with access to premises, people and records, and to cooperate with the awarding body's monitoring activities.