



NHP

Living connected and fulfilling lives

Quality Manual for SQA Qualifications

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Category 1 Management of a Centre

Review Schedule and Version Control (1.1)

This manual and supporting policies and procedures were created in April 2023 to identify and demonstrate NHP's understanding of the Quality Assurance Criteria for the Management of Centre of SQA. This Manual and supporting policies and procedures will be reviewed on an ongoing basis or when:

- SQA's criteria/requirements change
- there are legislative or qualification changes
- external audits or internal agreements require us to do so

To manage version control we will keep the same file names throughout the life of the document and use consistent suffix in the footer to indicate the version number of the file (usually v1, v2, and so on).

We will use the SQA Systems Verification Criteria to organise, review and keep track of changes.

Senior Management Statement (1.2)

This quality manual has been completed by NHP in line with our customised award approval with SQA.

All policies and procedures in this quality manual have NHP support and it is essential that all staff and young people (candidates) understand the importance of strong quality assurance systems within our organisation.

“As the Director of the NHP, I am fully in support of, and endorse the policies and procedures included within his Shell Quality Manual. It is important that all policies and procedures within this manual are complied with” - Sue Hammersley – Director (NHP)

Role and responsibilities for management, delivery, and assessment of SQA qualifications (1.3/1.4)

As an organisation, it is important for us to document roles and responsibilities with regards to SQA approval and certification as this provides clarity for:

- the person or people undertaking the role
- someone who is new to the role
- all members of staff in the centre who are involved with the delivery, assessment and quality assurance of SQA qualifications
- the management team at NHP
- SQA quality assurance personnel (eg the approvals and verification teams, qualification verifiers, systems verifier).

Specific roles and responsibilities

The management of SQA qualifications

The SQA Coordinator will take management responsibility for SQA qualifications. The SQA Coordinator on behalf of NHP is:

Name: Kelly Mottram
Email Address: kelly@thehouseproject.org
Telephone (office): 01270 215888
Telephone (mobile): 07843 840092

Responsibilities as the single point of contact for SQA:

- To be the first point of contact between the centre and SQA
- Liaise between SQA quality assurance staff and LHP staff (assessors)/Practice Leads (Internal Verifiers) when SQA quality assurance staff wish to visit
- Ensure SQA quality assurance staff and regulatory personnel have access to relevant information, records, evidence, young people (candidates), staff and premises as requested
- Circulate the subsequent quality assurance report to appropriate personnel
- Ensure that any required actions and development points identified in a quality assurance report are discussed and acted upon within agreed time scales.
- Inform SQA of intention to deliver SQA qualifications or customised awards on alternative/satellite sites in another country/nation.
- Notify SQA of issues of concern, e.g. breaches in the security of assessment materials published on SQA's Secure Site or suspected centre malpractice
- Notify SQA of any changes that may affect your centre's ability to meet quality assurance criteria including:
 - change of premises
 - change of head of centre or SQA co-ordinator
 - change of name of centre or business
 - outcome of internal/external investigations
 - removal of centre and/or qualification approval by another awarding body
 - lack of appropriate LHP staff (assessors) or Practice Leads (Internal Verifiers)
 - changes to your centre's arrangements for secure storage of SQA examination materials and candidate evidence

Responsibilities to manage centre documents and resources:

- Ensure policies and procedures are documented, reviewed and updated in line with SQA requirements; legislative changes; and in line with internal centre decisions.
- Ensure any new and revised policies and procedures are version controlled and made available to staff
- Ensure initial and ongoing reviews of resources for all qualifications; ensure young people (candidates) have equal access to resources across assessment sites.
- Maintain the password for SQA Connect and only provide access to relevant LHP staff (assessors) and Practice Leads (Internal Verifiers); report any breach of security of assessment materials from SQA Connect to SQA immediately.

Responsibilities to support centre staff:

- Make information received from SQA available to staff and young people (candidates), ensure that current versions of all documents are used.
- Enable Practice Leads (Internal Verifiers) and LHP staff (assessors) to meet on a regular basis to standardise and share best practice.

The administration of SQA qualifications

The following will take data management responsibility:

Name: Tanya Greppellini
Email Address: tanya@thehouseproject.org
Telephone (office): 01270 215888
Telephone (mobile): 07876 217799

And

Name: Susan Farrington
Email Address: susan@thehouseproject.org
Telephone (office): 01270 215888
Telephone (mobile): 07876 217799

Responsibilities when registering young people (candidates):

- Gather young peoples' (candidates) personal details (full name, date of birth, gender, address).
- Inform young people (candidates) that their personal information will be sent to SQA and provide them with the web address for SQA's Privacy Statement.
- Register new young people (candidates) with SQA. Allocate Scottish Candidate Numbers (SCN) via SQA Connect to young people (candidates) who have not previously undertaken SQA qualifications.

Responsibilities when making candidate entries:

- Gather information about which SQA qualifications young people (candidates) should be entered for.
- Check your centre is approved to offer these qualifications.
- Check awards are not in their lapsing period before making candidate entries (regulated qualifications only).
- Submit candidate entries on SQA Connect as soon as possible after their induction.
- Make unit and group award entries; include appropriate estimated completion dates.

Responsibilities when submitting candidate results

- Gather information on young peoples (candidates) results, and update SQA Connect, ensuring the 10-week rule is applied where applicable.
- Ensure individual candidate entries and results are not submitted at the same time.
- Ensure all data passed on by IVs and LHP staff (assessors) is processed and results are submitted to SQA according to your centre's data management policy. Responsibilities when undertaking data cleansing

- Update SQA Connect with:
 - Changes to young peoples (candidates) personal details.
 - Withdrawal of unit and group award entries when past their completion date and not resulted as a pass or fail.
 - Extend unit and/or group award completion dates where young people (candidates) have been granted an extension.
 - Where applicable, reinstate young people (candidates) home addresses on SQA Connect after certification.

The assessment and quality assurance of SQA qualifications

LHP staff (assessors)

Responsibilities when supporting young people (candidates):

- Prepare young people (candidates) and recognise when they are ready for assessment.
- Explain to young people (candidates) how and when assessment and re-assessment will be carried out.
- Identify the prior achievements and development needs of young people (candidates).
- Maintain regular contact with young people (candidates) so that their progress can be monitored and support can be provided. Responsibilities when undertaking assessment
- Familiarise oneself with qualification requirements and conditions of assessment and standardise with colleagues.
- Apply the assessment requirements and conditions described in the qualification's Unit/Group Award Specification or assessment strategy.
- Make valid, reliable, practicable, equitable and fair assessment decisions.
- Provide written and verbal feedback to young people (candidates) on their assessments.
- Standardise assessment judgements with colleagues.

Responsibilities for Supporting and Promoting Quality Assurance:

- Maintain own experience, qualifications and, where applicable, CPD to meet the Unit/Group Award Specification or assessment strategy requirements.
- Provide candidate evidence and assessment records to Practice Leads (Internal Verifiers) as required for sampling.
- Respond to feedback from internal/external verifiers and address any action points.
- Participate in reviews of the assessment and internal verification process and planning improvements.
- Submit accurate information on candidate entries and results for qualifications/Units to data management staff.

Practice Leads (Internal Verifiers)

Responsibilities for supporting and promoting quality assurance:

- Maintain own experience, qualifications and, where applicable CPD, to meet the Unit/Group Award Specification or assessment strategy requirements.
- Define the approach to internal verification, including sampling.
- Internally verify centre-devised assessment. (Note: SQA strongly advises that you also submit centre-devised assessments to SQA for prior verification.)

- Check assessment requirements and conditions are applied (as described in the qualification's Unit/Group Award Specification or assessment strategy, including those requiring special assessment arrangements).
- Participate in reviews of the assessment and internal verification process and planning improvements.
- Respond to queries from and provide support and guidance to LHP staff (assessors).
- Authorise submission of results once internal verification, according to sampling plan, has been successfully completed.
- Provide internal verification records to SQA external verifiers as required for sampling.
- Respond to feedback from external verifiers and address any action points.

Responsibilities for ensuring standardisation:

- Collaborate with LHP staff (assessors) and other Practice Leads (Internal Verifiers) to ensure a shared understanding of the qualification requirements and conditions of assessment.
- Collaborate with LHP staff (assessors) and other Practice Leads (Internal Verifiers) to ensure that assessment approaches are valid, reliable, practicable, equitable and fair.
- Participate in or lead standardisation activities and ensure that standardisation activities have taken place.

Malpractice policy and procedures (1.5)

Please see **Appendix 1** for managing suspected candidate and centre malpractice.

Conflict of Interest in assessment (1.6)

Please see **Appendix 2** for managing conflicts of interest between staff and young people (candidates) between LHP staff (assessors) and Practice Leads (Internal Verifiers).

Communication procedures (1.7)

Communication to and from SQA will be the responsibility of the SQA Co-ordinator, alongside the Internal Verifiers (Practice Leads). Any relevant communications /information/newsletters will be circulated by the SQA Co-ordinator to Practice Leads (Internal Verifiers) who will then share this with LHP staff in their role as LHP staff (assessors), via email. LHP staff (assessors) will then circulate information (as appropriate) directly to young people (candidates) through the contact that they have with them in group sessions.

Relevant and significant information from SQA will also be shared as part of Community of Practice sessions held with LHP staff (assessors) on a bi-monthly basis as well as bi-monthly Project Leads meetings.

Individual members of staff can also keep themselves up to date using the SQA website and the My Alerts service. All new staff will be alerted to this when starting within their role.

Feedback (1.8)

Feedback will be gathered from young people (candidates) and the assessment team (LHP/NHP staff) in a variety of ways.

Young people (candidates) can provide feedback directly to their LHP staff (assessors), who in turn will share this with Practice Leads (Internal Verifiers) and the SQA Co-ordinator.

There will be opportunity to take feedback during bi-monthly Community of Practice sessions with LHP staff (assessors), and Practice Leads (Internal Verifiers).

Young people (candidates) will also be consulted as part of House Project Programme (HPP) working groups, and via representation as part of Care Leavers National Movement where their views will be shared. CLNM is made up of young people (candidates) and other young people across the House Project community who use skills as expert advisers to develop Local House Projects and improve outcomes for all young people leaving care.

The feedback gathered will:

- assist with monitoring and the operation of NHP systems
- ensure that NHP continues to comply with SQA criteria
- inform continuous improvement and development of the learning offer for young people (candidates) in the House Project community.

Requests from SQA for external verification (1.9)

SQA will make all requests for access to the SQA co-ordinator. The documented role and responsibilities of your SQA co-ordinator can be found in criteria 1.4.

External verification outcomes and feedback (1.10)

SQA will send the quality assurance reports to our SQA co-ordinator. The documented role and responsibilities of your SQA co-ordinator can be found in criteria 1.4. The SQA co-ordinator will share the quality assurance reports with staff involved with the SQA qualifications. See criteria 1.7 on communication procedures regarding how we will share the reports.

Any required actions will be circulated with the assessment team, as appropriate, and will be communicated in a timely manner to ensure adherence to agreed timescales.

Category 2 Resources

Recruitment and selection of LHP staff (assessors) and Practice Leads (Internal Verifiers) (2.1)

Practice Leads (Internal Verifiers) are employees of NHP and are required to have degree level qualifications in order to carry out their role.

LHP staff (assessors) are employed by Local Authorities but are employed on the basis that they have relevant experience to carry out their role in working with young people leaving care including the facilitation of group sessions.

As Practice Leads (Internal Verifiers) and LHP staff (assessors) will not have formal qualifications relating to the assessment of SQA units, they will need to evidence their competency to do this via an alternative code of practice process (recording evidence of competence of the LHP staff (assessors)/Practice Leads (Internal Verifiers) guidance) which will be viewed in annual external verification visits.

Assessor and internal verifier induction (2.2)

All LHP staff (assessors) and Practice Leads (Internal Verifiers) will undergo system training when SQA centre approval/qualification approval is obtained, and this will be reviewed on an annual basis. All new assessment staff will undergo relevant training.

NHP will ensure that there is a completed Assessment Induction Checklist for every member of assessment staff.

Reviews of assessment environments; equipment; and reference, learning and assessment materials (2.3)

Prior to any submissions to SQA, site visits will be undertaken to all LHPs in Scotland by an Internal Verifier in order to review equipment, learning and assessment materials. Regular reviews will also take place by the SQA co-ordinator and Internal Verifiers of the resources available of the HPP site.

NHP will document ongoing reviews of assessment environments and equipment. This may be covered under a range of activities (eg staff meetings, internal verification, planning, feedback from staff and young people (candidates)).

Alternative assessment sites (2.5)

Prior to any submissions to SQA, site visits will be undertaken to all LHPs in Scotland by an Internal Verifier in order to review equipment, learning and assessment materials. Regular reviews will also take place by the SQA co-ordinator and Internal Verifiers of the resources available of the HPP site.

NHP will document ongoing reviews of assessment environments and equipment. This may be covered under a range of activities (eg staff meetings, internal verification, planning, feedback from staff and young people (candidates)).

Category 3 Candidate Support

Candidate induction (3.1)

All young people (candidates) will be supported to access the House Project Programme by LHP staff (assessors) and will be shown how to navigate their online portfolio. Young people (candidates) will be given access to various materials (written leaflets, access to films) that provide further information about the

NHP will ensure that there is a completed Candidate Induction Checklist for every candidate.

Equal opportunities for assessment (3.4)

NHP commits to ensuring that young people (candidates) are not discriminated against because of any protected characteristic.

- Age
- Disability
- Gender
- Gender reassignment

- Marriage and civil partnership
- Pregnancy and maternity
- Race and ethnicity
- Religion and belief
- Sexual orientation

Reasonable adjustments to assessment (3.5)

Please see **Appendix 3** for assessment arrangements procedure.

Candidate Complaints (3.6)

Please see **Appendix 4** for the complaint's procedure.

Category 4 Internal Assessment and Verification

Internal assessment and verification procedure (4.1)

Please see **Appendix 5** for internal assessment and verification procedure.

Secure storage and transport of assessment materials and candidate evidence (4.5)

Please see **Appendix 6** for security of assessment procedure.

Retention of candidate evidence (4.7)

Please see **Appendix 6** security of assessment procedure for retention of candidate assessment evidence. NHP will adhere to the SQA [retention schedule](#).

Internal assessment appeals (4.8)

Please see **Appendix 7** for Internal Assessment for Appeals Procedure.

Category 6 Data Management

Please see **Appendix 8** for Data Management Procedure.

Appendix 1 - Malpractice procedure

Definition of malpractice

Malpractice means any act, default or practice (whether deliberate or resulting from neglect or default) which is a breach of SQA requirements including any act, default or practice which:

- compromises, attempts to compromise or may compromise the process of assessment, the integrity of any SQA qualification, the validity of a result or certificate; and/ or
- damages the authority, reputation or credibility of SQA or any officer, employee or agent of SQA

Malpractice can arise for a variety of reasons:

- Some incidents are intentional and aim to give an unfair advantage or disadvantage in an examination or assessment (deliberate non-compliance).
- Some incidents arise due to ignorance of SQA requirements, carelessness or neglect in applying the requirements (maladministration).

Malpractice can include both deliberate non-compliance with SQA requirements and maladministration in the assessment and delivery of SQA qualifications. It is necessary to investigate any suspected instances of malpractice, whether they are intentional or not, to protect the integrity of the qualification and to identify any wider lessons to be learned.

Examples — candidate malpractice

- frivolous content — producing content that is unrelated to the assessment
- offensive content — content in assessment materials that includes vulgarity and swearing that is out with the context of the assessment, or any material that is discriminatory in nature (including discrimination in relation to the protected characteristics identified in the Equality Act 2010).

Examples — centre malpractice

- managers or others exerting undue pressure on staff to pass candidates who have not met the requirements for an award.
- deliberate falsification of records in order to claim certificates.
- failure to assess internally assessed unit or course assessment work fairly, consistently and in line with national standards.
- failure to comply with SQA requirements in the preparation, quality assurance and submission of estimated grade information.
- failure to recognise and apply appropriate measures to manage potential conflict of interest in assessment or quality assurance
- failure to apply appropriate processes to ensure fairness in the provision of assessment arrangements
- failure to comply with SQA requirements in relation to appeals processes
- insecure storage, transmission or use of assessment instruments, materials and marking instructions, resulting in a breach of assessment security
- failure to comply with requirements for safe retention of candidate evidence, and safe and accurate maintenance of assessment and internal verification records

- failure to comply with SQA’s procedures for managing and transferring accurate candidate data
- failing to register candidates within a qualification’s accreditation period
- requesting late certification of learners after the certification end date
- for all SQA qualifications, failure by a centre to promptly notify, investigate and report concerns of potential centre malpractice to SQA
- failure to promptly notify SQA of a finding of centre malpractice, maladministration or an equivalent or similar finding by another awarding organisation
- withholding information about circumstances that may compromise the integrity of any SQA qualification or the credibility of SQA
- failure to notify SQA promptly if another awarding body removes approval from the centre, regardless of the reason given for this withdrawal
- failure to take action required by SQA or to co-operate with an SQA investigation into concerns of malpractice

Reporting of malpractice

Malpractice can be reported in the following ways:

- by candidates – young people can raise concerns with a member of staff from their LHP, or directly with NHP.
- by other members of staff – staff can raise concerns with another member of staff from their LHP, or directly with NHP. In the event that there are malpractice concerns within NHP, this can be raised directly with the NHP CEO or Director.

Concerns relating to malpractice should be reported to the SQA Coordinator. If concerns relate specifically to the practice of the SQA Coordinator, these concerns should be raised with the NHP Director.

Investigating possible malpractice

Investigations relating to malpractice will be investigated by the most appropriate person upon consideration of the concern raised. This may be investigated by the LHP Project Lead and the outcome explored and shared with the SQA Coordinator, or this will be investigated by the SQA Coordinator.

NHP will take all concerns of possible malpractice seriously, and any investigation will be fair, robust and in proportion to the nature of the concern.

Investigations may be conducted in a variety of ways depending on the concern raised. This may involve reviewing assessment evidence and records, seeking a second opinion from a Practice Lead in their role as Internal Verifier or interviewing other candidates or members of staff.

Communicating the outcome of the investigation

The outcome of any investigation will be communicated to the candidate or member of staff under investigation in writing. This will be done within one week of conclusion of the investigation. There will also be further communication with regards to the outcome of the investigation, with the line manager of the staff member within the local authority. This will be done in writing within one week of the conclusion of the investigation.

Actions taken in cases of proven malpractice

Candidates involved in an investigation of malpractice (whether candidate or centre malpractice) must not be resulted for the assessments in question until the investigation is completed, the outcome decided, and any appeal concluded.

Sanctions for candidates might range from having to re-sit an assessment to exclusion from the course without certification.

Sanctions for staff will be in line with Local Authority and NHP's Disciplinary Procedures but may range from staff having additional training, to NHP raising this more formally with the Local Authority in order for this to be dealt with in accordance with their internal procedures.

Appeals against malpractice decisions

If a candidate or member of staff wishes to appeal against the outcome of a malpractice investigation they should contact the Head of Centre within 28 days of receiving the written outcome.

We have the right to appeal a decision where a case of reported malpractice by our centre has been confirmed through investigation by SQA.

We also have the right to appeal a decision in the case of suspected malpractice by a candidate reported by our centre to SQA.

Candidates have the right to appeal to SQA where:

- SQA has conducted an investigation and the candidate disagrees with the decision
- our centre has conducted an investigation, the candidate disagrees with the outcome and has exhausted our centre's appeals process,
- SQA has asked our centre to conduct an investigation and the candidate disagrees with the outcome and has exhausted our centre's appeals process

Recording malpractice

Where an investigation of suspected malpractice is carried out, we will retain related records and documentation for three years for non-regulated qualifications and six years for regulated qualifications. Records will include any work of the candidate, and assessment or verification records relevant to the investigation.

In the case of an appeal to SQA against the outcome of a malpractice investigation, assessment records will be retained for six years.

In an investigation involving a potential criminal prosecution or civil claim, records and documentation will be retained for six years after the case and any appeal has been heard. If there is any doubt about whether criminal or civil proceedings will take place, we will keep records for the full six year period.

Reporting to SQA

Any suspected cases of centre malpractice must be reported to SQA as soon as we have carried out an initial screening exercise to establish the nature of the concern. This includes any concerns where we take the view that no further action is necessary.

We must inform SQA of any investigation carried out by an awarding body, industry body, funding agency or regulator which may or may not affect the delivery of SQA qualifications.

We must also promptly bring to SQA's attention any findings of centre malpractice or maladministration communicated to us by another awarding or industry body. We must notify SQA promptly if another awarding body removes approval from our centre, regardless of the reason given for this withdrawal.

SQA expects centres to bring candidate malpractice concerns for internal assessments to their attention only if:

- the concern came to our centre's attention after submission of internal assessment marks
- the concern relates to candidate malpractice for a qualification regulated by SQA Accreditation, Ofqual or Qualifications Wales
- a candidate affected by a malpractice decision, who has exhausted their right of appeal within our centre, wishes to exercise their right of appeal to SQA; or
- there are other exceptional circumstances, eg we believe that the malpractice case involves a criminal act (if the malpractice involves a criminal act the matter must also be reported to the police)

Appendix 2 - conflicts of interest in assessment procedure

Introduction

A personal interest in the outcome of an assessment amounts to a conflict of interest, which poses a risk to the integrity of the assessment. All staff must take responsibility for reporting any personal interest, and the NHP will take steps to address this. This includes LHP staff (assessors), and Practice Leads (Internal Verifiers).

All staff who are within the above assessment roles will have access to these procedures as part of their induction and will confirm this by completion of their induction checklist. Any updates to this procedure will be circulated to staff to review as and when required.

Procedures for declaring conflicts of interest.

LHP staff, who will be the LHP staff (assessors) of the units completed by young people, will be supporting them on a day-to-day basis and be employed by the Local Authority.

LHP staff should make a declaration if they are related to or have a private relationship with a candidate, as they will be responsible for:

- Planning the group sessions that young people will attend to complete the SQA units.
- In some cases, supporting young people in uploading their evidence for completion of SQA units.
- Assess young people's completed units prior to sending them to NHP for internal verification.

Practice Leads (Internal Verifiers) should make a declaration if they are related to or have a private relationship with a candidate, as they will be responsible for:

- Verifying the decisions of LHP staff (assessors) with regards to the submissions by young people.

All assessment staff are also required to make a declaration if they are related to or have a private relationship with another member of centre staff, particularly those involved in the internal verification of young people's submissions. (e.g. if the assessor and internal verifier are related in any way)

There is also a conflict of interest where an individual stands to make a personal financial gain from the outcome of any assessment, as opposed to payment to the centre through normal business practices.

Reporting a Conflict of Interest

If there is a conflict of interest, staff must report this immediately to their line manager, who will, in turn, report this to the SQA Co-ordinator at NHP. This can be reported verbally, or via completion of the attached form.

Procedures for addressing conflicts of interest

When a conflict of interest is reported, NHP will decide on a suitable way to address the conflict of interest, where required.

Possible actions might include:

- Requesting that another member of LHP staff (assessor) sign-off the young person’s submission.
- Requesting that another Practice Lead (IV) sign off the submission from the LHP.
- include the young person’s submission as part of the external verification process.

Any agreed decision and agreed action must be recorded.

Record keeping

Copies of any documentation, including details of the action taken to address the conflict of Interest, should be retained for **a year** after completion of the assessments in question.

Declaration of Conflict of Interest Form

Name of assessor/internal verifier/invigilator	
Name of candidate (if applicable)	
Candidate number (If applicable)	
Qualification	
Unit(s) involved	
Assessment(s) involved	
Nature of Conflict	
Signature of assessor/internal verifier/invigilator	
Date	
<u>Senior Management review and declaration:</u> I have reviewed the above declaration and noted the issue raised but have decided that no action is required.	Y/N
I have reviewed the above declaration and have decided that, to mitigate the risk of this declared conflict of interest in assessment, the following action will be taken:	
Signature and position of manager:	
Date:	

Appendix 3 - Assessment Arrangements Procedure

Introduction

- NHP have a commitment to providing assessment arrangements to allow young people (candidates) who have been identified as having additional support needs, or language barriers, to access the House Project Programme (HPP) and complete the specified SQA units without compromising the integrity of the programme.
- Young people completing the House Project Programme (candidates) are individuals with a diverse range of needs and LHP staff (assessors) and Practice Leads at NHP (Internal Verifiers) will consider this when signing off completed units.

Meeting needs across different subjects/units

The HPP has been designed to meet the needs of all young people in House Projects. The sections within HPP provide young people with a range of experiences that can be evidenced in a variety of ways to suit their needs. Evidence can be submitted in a variety of formats (photographs, written, video, voice-notes) to do this.

LHP staff, in their role as LHP staff (assessors), will have time to develop relationships with young people as they are completing HPP. This will help them to identify how to meet the individual needs of the young people that they are supporting.

Identifying the individual needs of young people (candidates)

Young people in House Projects are supported by LHP staff (assessors) employed by the Local Authority. As a result, they will have access to educational history and will know whether young people have a Coordinated Support Plan, which will give an indication of that young person's support needs.

LHP staff, in their role as LHP staff (assessors), will have time to develop relationships with young people as they are completing HPP. This will help them to identify how to meet the individual needs of the young people that they are supporting. Initial discussions will take place with young people as they join the project with regards to any additional needs or support that they require which will be documented with the young person in a plan. This plan belongs to the young person and outlines all aspects of support that they may require which is reviewed as and when required.

Confirming the proposed assessment arrangement

Young people will apply and be interviewed to be part of their LHP. They choose to be a part of the House Project community with the knowledge that one of the requirements is to complete the HPP.

Within each LHP, there are three staff (assessors) that will collectively decide which young people join the House Project and access the HPP based on knowledge of their individual needs.

Recording and communicating this information

Young people accessing the HPP will be known and will be in the care of the Local Authority. There will be extensive information held by the Local Authority about young people's needs and their educational history. This will be considered throughout young people's time completing the HPP. The HPP has been designed to be inclusive of a broad range of needs and prior educational experiences.

Reviewing the candidate's needs and the assessment arrangement/support over time

LHP staff, in their role as assessors, will be working closely with young people on a day-to-day basis. There will be an ongoing review of their needs weekly during the group sessions that are taking place, and support will be adapted accordingly by these staff as and when this is required.

Appendix 4 - Complaints procedure

We value feedback, including complaints. The following procedure should be used if you wish to complain about an assessment related matter (but not an assessment decision - see appeals procedure for that):

Stage 1 - you can speak informally to your assessor, or any other member of the NHP team; please do this within 14 days of the issue you would like to complain about. We will consider the information and respond within 28 days.

Stage 2 - If you are still not happy you can raise a formal complaint verbally or in writing and should do so by contacting Sue Hammersley (NHP Director) within 14 days. They will consider all the information and respond to you within 28 days.

You can view the NHP complaints procedure in full [here](#).

Complaints to SQA

In the eventuality that any complaint made is directly linked to the assessment of SQA units, complaints can also be made to SQA.

For assessment-related complaints, young people (candidates) of SQA qualifications may also have the right to complain to SQA awarding body. SQA will only consider your complaint if you have already exhausted all stages of NHP's complaints procedure and you remain dissatisfied with the outcome or the way in which we handled your complaint, or you believe that we have unreasonably failed to apply the procedure correctly.

SQA may consider complaints about:

- assessment — the content/planning and delivery of group sessions, and the assessment of your submissions on HPP.
- dissatisfaction with the way in which NHP handled your complaint.

SQA will not consider complaints about:

- academic judgement (use Appeals or Post-results Services)
- the wider experience of being a candidate.

[SQA's Customer Complaints and Feedback web page](#)

Appendix 5 - Internal assessment and verification procedure

Internal verification helps centres (NHP) ensure assessments are valid, reliable, practicable and fair. It also helps LHP staff, in their role as assessors to apply uniform and consistent standards.

Documenting internal verification activities helps manage internal assessment and verification, and plan for improvement.

It also shows SQA that an effective internal verification system is in place and helps to safeguard the quality of our qualifications.

Internal verification:

- ensure assessors understand national standards and can apply them.
- facilitates collaboration between LHP staff, in their role as assessors and Practice Leads in their role as internal verifiers.
- enables fair, accurate and consistent assessment judgements.
- supports the credibility of internally assessed Units and Awards
- identifies quality concerns.
- helps protect assessors against challenges to judgements
- supports preparation for successful external verification

What is an 'assessor'?

An assessor makes SQA units/awards assessment decisions for each young person (candidate) that is a member of their LHP. Within each LHP there are different assessors – those in the Facilitator role that will sign-off completed units by young people (candidates) in the first instance, and those within the Project Lead role who will quality assure this decision prior to this being sent to NHP for internal verification by Practice Leads.

What is an 'internal verifier'?

- supports assessors in understanding and applying standards.
- works with assessors and other internal verifiers to ensure assessment approaches are fit-for-purpose.
- samples assessment judgements of assessors to ensure they are valid and reliable. This will be done on every occasion that a unit is completed on the online portfolio and sent through NHP for verification sign-off.

Models of internal verification

The current model of interval verification for NHP works as follows:

1. Young people (candidates), with the support of staff (assessors), work through the units (mainly via groupwork but may also take place on a 1:1 basis).
2. As each unit is completed, young people (with or without the support of LHP staff) upload evidence onto their online portfolio and check off that they have completed each learning outcome within the unit.
3. This is then sent electronically to a staff member within the project (assessor) who will sign this off if all criteria is met. The assessor will complete the NHP observation checklist and upload this onto the young person's portfolio alongside their other evidence. They will complete a feedback comment to young people (candidates) that will be saved on their

online portfolio. In the event that all criteria is not met, LHP staff will return this to young people (candidates) and discuss and provide feedback to them about this to enable successful submission on the next occasion.

4. This will then be signed off by the lead in each project – therefore each completed unit is cross marked within each LHP prior to interval verification.
5. This is then sent electronically to NHP and Practice Leads (internal verifiers would consider every unit one by one and confirm the criteria is met. This would then complete verification.

1. Plan - pre-delivery

Assessors will:

- Understand their role and the role of the internal verifier.
- Be familiar with unit standards and conditions and be familiar with the observation checklist that will be completed by staff once every unit has been completed by young people.

The above will be confirmed through the induction checklist and highlighted within the Shell Quality Manual available to all staff.

Internal Verifiers will:

- Understand their role and the role of the assessor.
- Collaborate to ensure that assessment approach is valid, reliable, practicable, equitable and fair.
- Ensure that centre-devised assessments, due to the customised award, have been verified by SQA prior to use.

2. Do - support and sampling

The second stage of internal verification is the 'during delivery' stage. This includes:

- creating and managing standardisation activities
- sampling of candidates' assessed work
- sampling of assessment practice
- feedback to assessors
- consideration of feedback from SQA external verification
- confirmation of results
- supporting assessors and answering queries
- providing a second opinion for appeals, suspected malpractice, and special assessment arrangements

Assessors will:

- Sign-off units completed by young people that meet the criteria. Each sign-off is cross-marked by two members of LHP staff (Facilitators and the Project Lead) prior to coming to NHP for interval verification.
- Support delivery of group-sessions which cover the learning outcomes for each unit.
- Complete the appropriate NHP observation checklist for each completed unit and add this to young people's portfolio's as supplementary evidence.

- Provide feedback to young people (candidates) throughout. Should a unit be successfully completed, a sign-off comment is added by LHP staff (assessors) recognising the work completed by that young person. If this cannot be signed off, assessors will feedback to young people what would be required to enable sign off to be achieved

Internal Verifiers will:

- Ensure the standardisation of assessments (in accordance with the observation checklist attached to submissions)
- Provide support, feedback and guidance to assessors.
- Provide second opinion in appeals, if required.
- Provide second opinion in cases of malpractice, if required.
- Agree final results.

Sampling

Sampling assessment judgements

Every unit completed by young people (candidates) is assessed on two occasions; the Facilitator within each LHP will confirm that all learning outcomes have been met and will then send this across electronically to their Project Lead who will also assess this and quality assure this prior to being sent for verification at NHP.

Monitoring assessor judgements

Each completed unit will be sent to NHP for verification by Practice Leads (Internal Verifiers). Each unit will be reviewed and the observation checklist for each completed unit will be considered. In the eventuality that the internal verifier disagrees with the assessors submission on behalf on young people, feedback will be provided and the unit returned with clear guidance as to what would be required in order to sign-off.

3. Review - post-delivery review and reflection

The last stage of internal verification is post-delivery review. This includes:

- reflection creating a feedback loop, which can aid improved delivery of the qualification
- agreeing and planning any necessary changes in assessment approach for the future
- agreeing and planning any further standardisation activities to address any issues identified
- agreeing and planning any changes to internal verification processes for the future

Post-delivery tasks

Assessors will:

- Reflect on assessment approach and judgements in relation to: validity, reliability, practicability and accessibility.
- Reflect on assessment process.
- Reflect on support for candidates via consultation with Practice Leads.

Verifiers will:

- Collaborate with assessor(s) in review of assessment approach, judgements and process.

- Reflect on effectiveness of internal verification process, including sampling.
- Agree any future training requirements.

Appendix 6 - security of assessment procedure

Introduction:

Security of assessments everyone's responsibility. Centre managers and staff will take sufficient steps to protect the integrity of SQA assessments before and after assessment takes place. Security of assessments will be managed by NHP. The House Project Programme is an online learning programme supported by cloud storage.

Data management is monitored regularly in accordance with NHPs Data Protection Policy.

Staff will be alerted to these procedures as part of their induction and covered as part of the induction checklist.

Access to SQA Connect

The SQA-Coordinator and NHP Administrators, will have access to SQA Connect. However, it is likely that LHP staff (assessors) may also require access to this site with regards to checking and confirming candidate information remains up to date.

Access will be determined as staff start to work within LHPs and a record will be kept of those who have access to the SQA site. Security requirements will be covered as part of their induction process.

Secure storage of and access to internally-devised assessments

HPP is an online (web-based) programme that can only be accessed by candidates and staff using passwords and two-factor authentication.

Staff access is decided dependent upon their role within their House Projects with different levels of access and authorisation.

Transport of assessments and candidate evidence

Candidate evidence is never transported as a hard-copy. This is accessed online as outlined above.

Assessments in use

The House Project Programme is an online portfolio that can only be accessed using email and password combinations that young people and staff are able to access. Two-factor authentication is in place for access to the House Project Programme.

Security of candidate assessment evidence

As above. All evidence completed by candidates will be stored securely via their own log-in. This can only be accessed by them, and also by the assessors within their House Project. Practice Leads, in their role as Internal Verifiers, can also access this information by secure log-in only.

Candidates will have the option to download a copy of their portfolio at any stage.

The NHP do not retain downloaded copies of candidate's portfolio's and only access these via log-in to the House Project Programme online.

Retention of candidate assessment evidence

Candidate evidence will be obtained, in a retrievable format, in line with SQA requirements https://www.sqa.org.uk/sqa/files_ccc/SQA_Evidence_retention_requirements.pdf or until the young person's 25th birthday.

However, SQA have specific retention timescales in certain circumstances as outlined below:

If an appeal against an internal assessment result is made:

- Records, including all materials and candidate evidence, must be retained until the appeal has been resolved.

If an investigation of suspected malpractice is carried out:

- NHP must retain related records and documentation for three years for non-regulated qualifications.

If an appeal to SQA against the outcome of a malpractice investigation is made:

- Assessment records must be retained for six years.

If an investigation involving a potential criminal prosecution or civil claim is carried out:

- Records and documentation must be retained for six years after the case and any appeal has been heard. If there is any doubt about whether criminal or civil proceedings will take place, you must keep records for the full six-year period.

Appendix 7 - Internal assessment appeals procedure

Introduction

All young people (candidates) have the right to appeal against the results of internal assessments. There are certain grounds for appeal that will be accepted (e.g. if young people feel they were not treated fairly in assessments).

The right to appeal will be communicated to young people (candidates) throughout their time completing the HPP award and will also form part of the Induction Checklist provided to them at the start.

Stages of internal assessment appeal

Stage 1: Informal

On an informal basis, young people (candidates) can appeal against an assessment decision. This is most likely to be an appeal directly to their LHP staff (assessor).

Upon receiving their result, young people (candidates) will have a month to appeal.

Any appeal will be considered, and a response sent to the candidate within a month.

Any appeals and their outcome will be logged and recorded.

Stage 2: Informal

If young people (candidates) are dissatisfied with the response from their LHP staff (assessor) or feel that they cannot approach the assessor, it is recommended that the appeal is referred to a Practice Lead (Internal Verifier) at this stage.

Upon receiving the response from the LHP staff (assessors) based on an informal appeal, young people (candidates) will have two weeks for appeal. An appeal will be considered with a response sent to the candidate within one month.

If this appeal directly follows an assessment result, and in the eventuality that young people (candidates) cannot approach the assessment, the timescales applicable for Stage 1 apply.

Any appeals and their outcome will be logged and recorded.

Stage 3: Formal

Any formal appeals should be made in writing.

The formal stage of appeal should be to an independent third party who has not been previously involved in the assessment decision. This may be another member of the LHP staff team (assessor) or another Practice Lead (Internal Verifier).

To submit an appeal, young people (candidates) must do the following:

- Identify the person to address the appeal to, including email and/or postal address. NHP can support with identifying the correct person that any appeal should be sent to.
- An appeal can be sent via email to the SQA Coordinator in the first instance.
- Young people (candidates) can be supported to write their appeal by LHP staff, or any other person supporting them.

- Upon receiving the response to an informal appeal, or from receiving the assessment result, young people (candidates) must submit an appeal within one month.
- A response will be sent in writing to acknowledge this appeal, and a response to the appeal will be sent within one month. Every appeal will be investigated.
- The SQA coordinator will deal with all formal appeals.

As young people (candidates) are undertaking non-regulated qualifications they have no further right of appeal against internal assessment decisions. The final decision rests with NHP. SQA will not accept internal assessment appeals.

Appendix 8 - Data management procedure

Introduction

This data management procedure will be accessible to all assessment staff at their induction, and they will confirm this via completion of the induction checklist. This will also be accessible as part of the resources available to staff online via access to the HPP and stored within the staff resource section. This can then be accessed at any time.

Young people (candidates) will also have the ability to view and discuss this procedure when signing up to complete the House Project Programme.

Candidates' personal information

LHP staff (assessors) will submit the following data relating to young people (candidates) onto the Outcomes and Learning Framework (OLF) which will be populated over from OLF onto HPP:

- full name
- date of birth
- gender
- home address
- Scottish Candidate Number (SCN) (if known by the candidate)

Young people (candidates) will be known to LHP staff (assessors) as they will be open to the Local Authority. This detail can be accessed via Local Authority records. Young people will apply to be part of the House Project and this information can also be confirmed with them then which will be at the start of their completion of the HPP.

Should any personal details change, it is important to ensure that these are updated on OLF as soon as possible. If any young person (candidate) knows their SCN, they can search their details on SQA Connect and update their personal details (supported by LHP staff) on there too.

Protecting candidate data

NHP complies with the General Data Protection Regulations (from May 2018). You can access our privacy statement [here](#). This policy explains:

- Information relating to GDPR compliance.
- How personal information is stored and how this is stored securely.

Any personal data will be sent to SQA for the purposes of entering young people for an SQA qualification, certification and of maintenance of their record of attainment.

You can read SQA's privacy statement [here](#).

Managing, registrations, entries and results on SQA Connect

Checking Scottish Candidate Numbers (SCNs)

Young people may already have an SCN if they have undertaken an SQA qualification at a school, college, or with a training provider. If they know their SCN, these will need to be documented by LHP staff (assessors). If they cannot remember it, LHP staff can check for an existing SCN on Connect using their personal details.

If a candidate does not have an SCN, the NHP can allocate one to them using SQA Connect.

SQA's system will automatically check for duplicate candidates records during the registration process and NHP will be notified if a match is found.

In term of responsibility:

- LHP staff (assessors) are responsible for checking SCNs.
- The NHP is responsible for allocating new SCNs and adding young people onto SQA Connect.

This will be done once a young person has applied and has been interviewed to be part of the House Project and only when LHP staff are confident that they intend to complete the House Project Programme.

Registering new candidates with SQA

Any young people (candidates) must be registered with SQA Connect if they have never been registered with SQA before. This will be done once a young person has applied and has been interviewed to be part of the House Project. Adding young people (candidates) onto SQA Connect will be overseen by the SQA Coordinator, but LHP staff (Assessors) will provide this information.

Unit and group award entries

It is the responsibility of LHP staff (assessors) as to who starts working with the House Project and who will be completing HPP. All young people (candidates) who secure a place on the House Project will be submitted for the HPP award.

The completion dates for this may vary, although this usually takes place through completion of group sessions over a 6-9 month period.

It is the responsibility of LHP staff (assessors) for checking entry information and the responsibility of SQA Coordinators and NHP Administrators for submitting entry information using SQA Connect.

The NHP administrator/SQA Coordinator is responsible for checking on SQA Connect to ensure that NHP is approved to offer the units and group awards and that the award has not finished or entered its lapsing period.

Candidate Results

In the first instance, the LHP staff (assessors) will subject candidates results. They will sign off all submissions on the online HPP portfolio, before signing off individual completed units via their log-in on SQA Connect.

These submissions will then be subject to verification by Practice Leads (Internal Verifiers) prior to submission, again via SQA Connect.

Upon sign-off of each completed section of HPP, young people will receive a notification via their online portfolio informing them of the sign-off.

Data Cleansing

It will be the responsibility of LHP staff (assessors) to maintain data accuracy and communicate changes to young people (candidates) details.

It will be the responsibility of the SQA Coordinator and NHP Administrator to ensure that any staffing changes are communicated to SQA via the completion of new Assessor forms.

When young people (candidate) entries reach their completion date, LHP staff will review whether they are resulted or withdrawn, or if they require an extension, the completion date is extended for the group award. This will remain under review.

Keeping records

Retention of candidate evidence

Young peoples (candidates) evidence will be obtained, in a retrievable format, in line with SQA requirements https://www.sqa.org.uk/sqa/files_ccc/SQA_Evidence_retention_requirements.pdf or until the young person's 25th birthday.

This is stored securing on the HPP database, which is accessible via password and two factor authentication.

Upon completion of the HPP award, LHP staff (assessors) will download and save a copy of the online portfolio for young people within their local authority records. After reaching 25, NHP will fully obfuscate any HPP data relating to young people (candidates). This will be the responsibility of the NHP Administrator, Coordinator or Internal Verifiers.

Assessment, internal verification and candidate records

NHP will retain the following records for a minimum of one calendar year following the completion of qualifications:

- a list of candidates registered with SQA for each qualification offered in the centre
- details of candidate assessment, including the name of the assessor, location, date and Outcome. This will be logged on candidates HPP portfolio.
- internal verification activity which will be logged on young people's HPP online portfolio.
- certificates claimed.

These records will be stored in a retrievable format and can be made available to SQA quality assurance staff on request.

Retention of evidence and records in cases of appeal or suspected malpractice

- Following an appeal against an internal assessment result, NHP will retain records, including all materials and candidate evidence, until the appeal has been resolved.
- Following an investigation into suspected malpractice, NHP will retain all related records, documentation and evidence for three years.
- Following an investigation involving a criminal prosecution or civil claim, NHP will retain all records, documentation and evidence for six years after the case and any appeal has been heard.