U'HI SHETLAND

Audit and Verification Activity 2023/2024

| Date | Subject | Type of | Mode | ode Contact | | Outcomes | |
|--------------|--|--------------------------|--------------|-----------------|-----------------------------|--|---|
| | | Scrutiny | utiny | UHI Shetland | Verifier | Actions | Good Practice |
| Sept 2023 | Seafish | External Verification | In Person | Laura Burden | Lee Haigh | | The college in Scalloway is a shining example of good management providing an excellent learning environment. |
| | | | | | | | The college has approvals from a number of other awarding bodies, e.g.MCA, RYA and SQA, this along with Seafish, helps to ensure that standards are maintained to the highest level at all times. |
| | | | | | | | It was a pleasure to visit UHI Shetland, keep up the excellent work, well done. |
| Sept 2023 | Learning and Developmen t | External Verification | Virtual | Vicki Nairn | Heather Fotheringh am | High Confidence in the maintenance of SQA standards within this verification group on all criteria assessed. I provided feedback to the centre on the quality of the Workplace Assessor and Internal Verifier portfolios. The delivery team over the 13 partners work well together and there is a firm, fair and full-proof approach to ensuring assessor-candidates and verifier candidates work to gather robust evidence of performance, knowledge and evidence requirements. | Following on from the above comments re Shetland - 'I would suggest if this system continues that all evidence is numbered as outlined in the portfolio of contents. Also, that the evidence matrix should reflect performance, knowledge and evidence requirements to ensure completeness.' Consider these comments to standardise recording of assessment decisions. |
| Sept 2023 | SVQ Hospitality and Professional Cookery | External Verification | Virtual | Laura Burden | Vanessa Lawrance | High Confidence in the maintenance of SQA standards within this verification group on all criteria assessed. | To make clear folders for each candidate and relabel the scanned documents to ensure they are matched to the relevant candidate for both evidence and unit record. Submit evidence to SQA. |

| Oct | Healthcare | External | Virtual | Susan | Marion | The centre has excellent | To make clear folders for each candidate and relabel the scanned documents to ensure they are matched to the relevant candidate for both evidence and unit record. Submit evidence to SQA. Unit records to have candidate name on them or the file to be labelled clearly so they can be identified - Associated evidence to be labelled clearly so they can be easily mapped to the relevant unit record for the candidate. Confirmation that the actions raised by the IV have been completed. Submit this evidence to SQA. Associated evidence to be labelled clearly so they can be easily mapped to the relevant unit record for the candidate. Confirmation that the actions raised by the IV have been completed. Submit this evidence to SQA. Associated evidence to be labelled clearly so they can be easily mapped to the relevant unit record for the candidate. Confirmation that the actions raised by the IV have been completed. Submit this evidence to SQA. To confirm the procedure that is followed (and documented in a policy) for the dissemination of QV reports. Submit this evidence to SQA. Approved to assess and internally verify in line with |
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| 2023 | Support GL41 23 HC6J 04 HD10 04 HC7H 04 HD18 04 HC7J 04 HC5Y 04 HD3D 04 HC62 04 GL3Y 23 HD4E 04 | Verification | | Menary | Gates | partnership/professional relationships within the SVQ Teams of both Moray College and Orkney College. Internal Verification for the two specific units applied for in this approval process will be undertaken by IVs within Moray College and Orkney College who meet the requirements of the Assessment Strategy for the award units. The centre has robust internal assessment and verification procedures which will ensure 100% Internal Verification as these are new units within the award. Good evidence of | the requirements of the qualification. |
| | HD3T 04 HC5M 04 | | | | | standardisation has been provided by the centre in support of this approval process. | |

| | HDOW 04 HC95 04 HD0G 04 HC8V 04 HC64 04 HD45 04 HD3D 04 HC62 04 HC61 04 | | | | | The Learning Assistant ePortfolio system automatically retains the candidate evidence for a year following resulting of completion of the award with SQA. This is in excess of the requirements set down by SQA. The Centre is considered to have the potential to deliver the qualification satisfactorily and may enter candidates immediately. | |
|-------------|---|--------------------------|---------------|-----------------|-------------------|---|---|
| Nov 2023 | SQA Systems Verification | External Verification | In- Person | Laura Burden | Fiona McKenzie | The professional discussion we had was focused on the chosen sample of criteria provided to you in a planning email, prior to my visit. I had ensured I had chosen all criteria that you had rated amber, to further understand the reasoning behind your decisions. Discussion on these areas confirmed that your initial ratings were based on some of the structural and procedural changes you have been diligently working through since your phoenix merger of three organisations, back in 2021. I was satisfied by evidencing what you had in place, that you are fully meeting the quality assurance standards under systems verification, and by SQA. This allowed us to agree on amendment to these criteria from amber to green: 1.4, 4.8 and 6.3, which is noted throughout your report. I was extremely impressed by the methods you utilise in your candidate and staff induction, and your effective review and feedback, and have noted this as good practice for both these criteria. You have one required action for 6.2 following discussion and review of some of your data. I would like to commend you on the detailed and methodical work you are doing in this area, and there certainly is improvement in your numbers | Data on candidate entries submitted by centres to SQA must accurately reflect the current status of the candidate and the qualification. |

| Nov 2023 | ECITB Validation visit | External Verification | In Person | Howard Thomson | Martin Barton | of entries past their expected end dates. I concluded from my sample, and discussion had on the day, that the remaining fully compliant criteria were safe to remain so, as per your completed Self-Assessment. Final Comment: May I take this opportunity to thank you Laura, for your preparation, kind hospitality, and frank and open discussion on the day. I would also like to express my thanks to Gemma and Kevin, whose contributions were extremely informative, and helped me gain perspective on your organisation as a whole. I was very impressed by the systems you have in place to ensure consistent, quality delivery of your qualifications, and I was extremely encouraged to hear about how you gather and analyse feedback, from both staff and your students. | The auditor would like to thank Howard and UHI for accommodating this visit and the previous induction session. The MO would like to commend the provider for their support for the programme and for the good communication with this Monitoring Officer since being allocated. The Monitoring Officer (MO) has found on both visits the group to be enthusiastic and engaging. In 1-1 interviews it is obvious they are finding the programme to be challenging and enjoyable. The scholars also reported that sessions proceed as planned and that their timetable and the assigned tutors have been stable throughout. The MO conducted a walktbrough observation of the group narticipated |
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| | | | | | | | reported that sessions proceed as planned and that their timetable and the assigned tutors have been |

| | | | | | | scholars work and it is obvious there is a well planned programme in place. Attendance overall is good; however, one scholar is proving to be unreliable and is at risk. Howard has identified the scholar to be at risk and is currently embarking on a range of interventions including parental. It is noticeable to the MO that there has been very little employer engagement at this provider which has lead to many of the previous cohort progressing out of the ECI from 1-1 interviews there is a danger that this trend with the current cohort unless addressed by the ECITB. Two of the scholars unfortunately undersized themselves when ordering PPE. The MO has subsequently placed a reorder for these two. |
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| April 2024 | Business and Administrati on GM26 23 SCQF 7 GM27 24 SCQF 9 GM25 25 SCQF 11 | External Verification | Virtual | Laura Burden | Caroline McFarlane | |
| 15 th May 2024 | Care and Child Care | External Verification | Visit | Laura Burden | Maxine McBrier | |

| Recommendations | Good Practice |
|---|---------------|
| Complete the review process underway in relation to the Shetland UHI Credit Rating | |
| Programme policy and forward a copy to SCQFP once finalised/ paperwork to support | |
| 4 stages of credit rating. | |
| Ensure the paperwork used within the credit rating process clearly captures the 4 | |
| stages noted (writing, credit rating, vetting and final sign off) and the decisions are | |
| clear to both an internal and external reader. | |
| Ensure the number of years (lifecycle) allocated to the credit rated programme at | |
| point of approval is clearly recorded within the paperwork. | |
| Incorporate annual monitoring and programme review activity within the policy | |
| document and that corresponding paperwork is in place to support both activities. | |
| Consider how credit rated programmes that fall outwith the usual cycle of annual | |
| curriculum review activity will be annually monitored. | |
| Advise SCQFP if the proposed decision to centralise the recording of all certificates for | |
| credit rated programmes goes ahead. | |
| Separate the History of Shetland in 100 sites programme entry on SCQF database into | |
| 2 separate records Part 1 and Part 2. | |
| Revisit the certificate and decide on whether the use of 'rated' needs to be | |
| supplemented to read credit rated or simply removed. | |
| Update the SCQF Database as follows: | |
| Update the record for the Movie Maker for iPads programme as soon as | |
| possible. | |
| • Review the Recording Petty Cash Transaction programme as soon as possible | |
| and update the record on completion. | |
| Check the full title of Introduction to Knitting Skills programme has been | |
| input correctly. | |
| Revisit the two college certificate programmes Managing Heritage and Shetland's | |
| Archaeological Monuments being advertised on the college website at SCQF level 6 as | |
| these do not appear on the SCQF database. | |

| Recommendations | Good Practice |
|---|---------------|
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'We acknowledge that there is a challenge of legacy practice post-merger. We | |
| are working to continue to improve consistency through staff development and the | |
| removal of historic policy storage areas. We continue to work on improving | |
| consistency across the organisation and ensuring a practical review schedule | |
| following our Phoenix model merger. We will continue to further develop our Quality | |
| Matters intranet area. A schedule for review of policies and procedures linked to the | |
| contents list to be provided to Quality Improvement Committee and approved yearly | |
| by committee at the start of the academic year.' | |
| Noted in the 'areas for continuous improvement' within your Centre self-assessment, | |
| quote 'Conduct a Quality Assurance session on the termly Staff Development days to | |
| share updates and reminders. Implement an annual audit of compliance for record | |
| keeping with the most up to date versions of processes and pro-formas. Investigate | |
| the option to promote new policies when they are uploaded to the Intranet/Share- | |
| point through the use of automatic alerts.' | |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Complete current review and standardisation of all job descriptions ensuring | |
| that relevant requirements are included. Review, and update where necessary, | |
| partnership agreements to ensure explicit reference to quality related | |
| responsibilities.' | |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Implement a register of incidents.' | |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Implement a register of incidents (appropriately anonymised) outlining how | |
| they have been managed.' | |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Continue to encourage student engagement with college committees.' | |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Unfortunately, we do not have student representatives identified in all areas | |
| of the organisation. Continue to work with the student association and to actively | |
| encourage student participation in feedback opportunities. It is clear that post- | |
| merger there are some variations in the way that the module feedback system is | |
| being implemented. The sample size and forms being utilised vary somewhat. As | |
| such, there is an action here to standardise and simplify our student feedback | |
| mechanism. The system could be made more accessible and efficient by moving to a | |
| standardised online system which automatically provides a summary document | |

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| where it is appropriate for student groups, and by clarifying the feedback sampling requirements.' | |
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| Noted in the 'areas for continuous improvement' within your Centre self assessment, quote 'Ensure JDs for new assessors state the requirement for maintaining a record of continuous professional development as well as undertaking it. Advise line managers to update this phrase in extending JDs with current assessors at appropriate review opportunity. Current JDs/PS for assessors note that they must undertake required training and qualifications relevant to the role, and that an assessor qualification is desirable for employment, but it doesn't specify the specific qualification and in what timeframe on the JD/PS. This is discussed in detail at interview and offer stage; however future JD/PS to state this more definitively.' Noted in the 'areas for continuous improvement' within your Centre selfassessment, quote 'Run sessions on this at Staff Development Days. Introduce a specific handbook for assessors and verifiers of regulated qualifications.' | Good practice noted by SV – you have robust procedures around how you support your staff joining your organisation, embedded within your structured training and development you provide. You explained how you maintain a monthly probationary period assessment with all new staff for the first 6 months, and I could see example of this and comment and discussion had. You ensure that all staff obtain the qualification required for what they are delivering, this from TQFE, Teaching in Scotland's Colleges or the L&D assessor/verifer awards. You have training request forms for staff to submit, a staff development tracker, allowing close support for all of your staff through their professional development and learning. Good practice noted by SV - although this criterion was not sampled at this visit, the professional discussion and evidence provided for criterion 2.1 very much links with your staff induction processes, and so I feel it is fair to mention this as good practice under this criterion also, see comments under 2.1. |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, quote 'Currently checking and updating of existing materials/resources is conducted within the academic section. Consider implementation of a robust internal audit procedure of cross checking between sections and reporting to QIC.' Noted in the 'areas for continuous improvement' within your Centre self assessment, quote 'Make Site Selection Checklists a standing agenda item on QIC.' | |
| | In your Centre self-assessment, you recognise as an area of good practice, quote 'Recorded presentations gives students flexibility to (re)view them at a convenient time.' Good practice noted by SV - Initially, we talked at length about your schools programmes, and the successes and positive response you have from this work. You explained how you use an interview process, as your courses are often over subscribed, and this ensures that you get the right candidates on the right courses, with a high success rate and high satisfaction. You provided statistics on your success and satisfaction rates, at 97%. You explained how your staff attend the schools for delivery, and that your courses do not impact on timetabled subjects, so school students can choose these options freely. It is extremely encouraging to see how you have adapted to feedback, and incorporated this into your practice to meet the needs of your students. I certainly agree that your noted good practice, in the flexibility of what you offer and deliver, shows good practice, but also your preplanning interview stages and pre-induction which you employ in your school- based delivery, ensuring a high success and satisfaction rate is worthy of recognition. |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, quote 'Increase the number of assessments which undergo Prior verification through | |

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| SQA. Implement a more formal process for progression boards for FE courses. | |
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| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Undertake a QIC overseen audit of master folders to cleanse data no longer | |
| required post merger. Training session for staff development day. | |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Audit of archived material to ensure timely evidence destruction in line with | |
| requirements.' | |
| Noted in 'action plan (to address amber or red rating)' within your Centre self- | |
| assessment, quote 'Add as standing agenda item to QIC to ensure tracking of any new | |
| appeals (sufficiently anonymised). | |
| Noted in your self-assessment as your action plan, quote 'Complete review and | |
| updating of registry policies and procedures. Ensure comprehensive training and | |
| dissemination of updates. Continue to seek support from experienced registry teams | |
| to ensure that candidate records continue to be appropriately processed whilst | |
| building resilience in the new team. Implement Key Dates document. Move all | |
| academic sections to resulting by lecturers directly through UHI records. Formal FE | |
| Progression Boards.' | |
| Noted in the 'areas for continuous improvement' within your Centre self assessment, | |
| quote 'Consider implementing tracking spreadsheet or location of work form.' | |

| Recommendations | Good Practice |
|-----------------|--|
| | The MO felt safe at all times and the welding area which was the venue for the |
| | walkthrough observation is of particular note being self-contained with local area |
| | extraction and air fed masks which is exemplary practice. |
| | Not checked at this visit, however Howard stated the college have a standardised |
| | version and from 1-1 discussions and the walkthrough it was evident the sessions are |
| | planned. In addition the MO gathered evidence of effective sequencing in the |
| | programme |
| | The workshop is suitable for the size of the cohort |
| | No seating required for practical session |
| | Excellent facility and equipment |
| | Local area ventilation and air fed welding shields. Well-lit welding area |
| | The welding area appears to be a recent development and is in excellent condition |
| | The MO believes the welding area is of high quality and highly conducive to |
| | good learning. |