IMPACTFUL GOVERNANCE
Community Interest Company

Imapactful Governance Internal Quality Assurance (IQA) Strategy & Policy 2023

Welcome to Impactful Governance, the purpose of Impactful Governance Internal quality assurance is to establish a systematic monitoring od the quality assessment to make sure that it is consist, fair, reliable across all assessor and qualifications run by Impactful governance.

Key roles of the team involved in IQA are:

CEO – Chief Executive Officer	Andrew Waite
CEM – Contracts and Exams Manager	Alex Oliveira
HBDO – Head of Business Development and Operations	Andrew Waite
QAM – Quality Assurance Manager	Alex Oliveira
IQA – Internal Quality Assurer	Veronica Garbett
T/A – Tutor/Assessor	Bev Nickson

In identifying the strategy. All the following should be considered:

-Size of sample needed to ensure reliability
-Assessors Numbers, experience, caseload, and location
-Range of assessments sites, satellites
-Candidates' cohorts e.g., full time/part time, different employees, different program start dates, particularly focusing on problem unit.

The objectIQAes of the strategy are.

To implement a quality verification system.
To ensure quality at all stages of the learner journey.
To implement sampling plans with planned frequency of verification.
To evaluate the effectiveness of the training learners, undertake with Impactful Governance and their employers.
To identify the development needs of assessors through the internal verification process.
To promote and facilitate employer engagement.
To ensure good communication with learners and awards bodies.

Communication

We aim to ensure effective communication between employers and assessors as we see this as a vital part of the development of and progress of our learners. We will ensure that:

Assessors' updates learner/employers on their progress at the end of each assessment/visit whenever possible.

Employers are consulted with and contribute to learner reviews
Assessors have additional formal and informal meetings with employers as and when required.

Standardization meeting will take place bimonthly (where applicable) to ensure consistence of the assessment process and understanding of the standards. Standardization will provide continuous professional development and to give feedback following external verification visits. It builds on and incorporates the standards laid down by the relevant regulatory arrangements, Joint Awarding Organisation Guidance (JAG) on Internal Verification and QCA qualifications standards and guidance (Qualifications only). It involves the monitoring of the Assessor and Trainer decisions and the provision of any necessary support, including sampling and standardisation arrangements. It requires the direct observation of Assessors and Trainers and the review of occupational competence. Comments on lack of occupational competence will be referred to a line manager for action.

The Contracts and Exams Manager (CEM) is responsible for monitoring and reporting progress against the relevant quality standards, assisted by the Quality Assurance Manager (QAM). The Chief Executive Officer (CEO) and Head of Operations (HBDO) are also responsible for the selection of Assessors, Trainers and Facilitators; input from the QAM should be sought if necessary regarding occupational competence.

The QAM will require sufficient time to devote to quality assurance responsibilities. This must be agreed with the line manager.

Where the term IQA is used, it also encompasses quality assurance, moderation and due diligence for all programmes and delivery, across the team.

Occupational Competence of Assessors and Internal Quality Assurers.
IQAs have to meet any requirements for occupational expertise (competence and qualifications, D34/V1/TAQA/IQA) as specified within the relevant assessment strategy before commencing their role. If they are not qualified then an occupationally competent and qualified IQA must check, authenticate and countersign decisions made by uncertified IQA's. This must not be merely a signature at the bottom of the assessment decision. The decision should be fully agreed and appropriate developmental feedback provided by the QAM. IQA's should ideally achieve appropriate IQA qualifications within 6 months of commencing the role, but must achieve within 12 months.
Assessors must hold appropriate assessor qualifications (D32/33/A1, TAQA) as specified by the regulatory authorities within 6 months of commencing their role and meet any requirements for occupational competence, as specified by the appropriate Sector Skills Council (SSC) or Sector Skills Body (SSB) before commencing their role e.g. having held a post for a minimum of one year within the last five years, which involved performing the duties or activities defined in the standards.

Ongoing occupational competence must be maintained and logged as part of their CPD File (see sample in appendices). In the absence of specific guidance contained in the qualification's assessment strategy occupational competence can be maintained by a variety of methods.

As a guide, two of the following should be completed within each 12 month period.
•   Relevant work placement
•   Job shadowing
•   Technical skills update training
•   Attending relevant courses
•   Studying units of the QCF and completing assignments
•   Study related to the industry e.g. reading trade magazines and articles
•   Collaborate with awarding body (NCFE) or representative industry organisation
•   Other occupational activity agreed by the NCFE or representative industry organisation.

Team meetings will be used to:
-Review strategy
-Review development needs
-Review employer needs.
-To discuss and monitor policies and procedures.
-To discuss any changes in paperwork to ensure consistency.
-To give regular updates on the performance of Impactful Governance-Community Interest Company.

One to One line anger and assessor meetings will be used to:
-Reviews and record learner progress.
-Updates Th planner records.
-Discuss and resolve any issues or difficulties.

Internal Quality Assurance

The internal verifier is at the heart of the quality assurance, both within the national and framework and quality of management system of impactful Governance. The role in terms of managing assessment so it consistently meets the national standards, is central to maintaining public confidence.
Internal verification is an ongoing process, therefore regular activities will talk place interim reports completed for each activity. The internal verification will be the driver for quality assurance and will:

-Verify Planning and assessment.
-Observe assessor performance.
-Provide continuous professional development.
-Develop and share practices.
-Manage the quality of the award.
-Identify development needs.
-Support and develop assessors.
-Follow a planned sampling assessment.
-Audit employer satisfaction.
-Audit learner satisfaction.
-Review progress.
-Liaise with external agencies.
-Maintain accurate records.

The internal verifiers are a key driver in managing risk and ensuring that when certification is claimed for a candidate has reached the national standards. Internal verifiers for Impactful Governance must be competent in the qualification and have the appropriate experience.

Internal Quality Assurance Role

This involves the following areas of responsibilities:

Verifying Assessment
This requires the IQA to:
Ensure consistence and reliable assessment and internal verification decisions
Monitor the quality of assessment and highlight problems trends and developments needs pf the assessors.

There Three standards to verifying assessments:
-Sampling assessments.
-Monitoring assessment practices.
-Standardizing assessment judgments.

Sampling

The sampling strategy will vary according to several factors including:

-The length of time Impactful Governance has been delivering the program.
-The length of the qualification has been running.
-The risk rating of assessors which will depend on their length of time with the organization and their experience and knowledge.
-The complexity and needs of each individual program.
-Awarding body guidance.

The frequency of the Internal Quality Assurance is for the Lead Internal Quality Assurance for each qualification and manager to decide but should not compromise standards. However, the aim should be to put in place a process that will provide regular feedback to assessors, facilitate assessors' induction, training, and development, and endure the maintenance of consistently high standards. Impactful Governance will adopt an internal system that requires the sampling of all assessors not necessarily all candidates. The sample will be based on assessed work from a minimum of 30% but to 100% of candidates per assessor. 100% sample will be appropriate of the overall number are small, assessors are inexperienced pr new to the organization or while a team is building up expertise in the assessment requirements of the new qualifications or qualifications are new to Impactful Governance.
Once the team becomes mores experienced, it will be sufficient to take smaller samples of the assessment decision taken by each assessor.

Internal Quality Assurance will follow a set plan that meets the requirements the awarded body to apply the principles of **Camera.**

-Candidate
-Assessor
-Method of assessment
-Evidence
-Registration
-Achievement

The sampling plan will monitor the assessment decisions for all units by using interim and summative sampling. The plan will include the sampling of different methods across units to ensure consistency. Internal Quality Assurance will ensure that problem units are sampled across all assessors t provide comparisons regarding the methods of evidence used and the decisions recorded, the plan will be used as a full working document and all IQA will be recorded. To ensure the sharing of the best practice and its development, optimum use will be made verification within will take place throughout the assessment process.

Impactful Governance assessors will be rated as Red, Amber, or Green and sampling frequency and quantity will be determined by each assessor's training. Rating will be determined using the following criteria.

Red assessors
 -Unqualified assessors
-All assessors who join Impactful Governance regardless of experience until such time as their first completed portfolio has received 100% verification and internal Verifier with the quality and consistence of assessment and the completion of assessment paperwork.
-Any qualified assessors who has significant actions arising from internal Quality Assurance activity on 3 or more consecutive occasions (NB it will be for the lead internal Quality Assurance for the relevant qualifications to determine what constitutes a significant action).

Amber Assessors

-Recent qualified assessors
-Any qualified assessors who has significant actions arising from internal verification activity on 2 consecutive occasions. (NB it will be for the lead internal verifier for the relevant qualifications to determine what constitutes a significant action).

Green Assessors

Assessors with substantial experience who have demonstrated their assessment practice leads to either no or minor actions after internal verification activity.

Sampling sizes

When carrying out sampling activities

1-Internal Quality Assurance will demonstrate awareness of fairness, safety, confidentiality, and security when selecting monitoring samples.

2-The quality of assessment planning and feedback will be revied and evaluated.

3-The range of assessment methods used to include observation of performance will form a major part of the review.

4-All IQA activity will be recorded, and a feedback/actions report will be issued.

5-IQA activity will identify any training needs and development plans will be put in place as required.

6-Verifiers will monitor learner progress and satisfaction either through face to face or telephone/ Zoom/ or other technology means where appropriate.

7-Verifiers will authorize internal certification units and recommend awarded certification.

Sampling Strategy

RED:
An assessor who has not achieved their A1 award will be 100 % second lined assessed by a qualified assessor. (Verification will take place sampling of the qualified assessor as per their RAG rating)
Red an assessor, recently qualified or an assessor new to the company (100% sampling until 1 portfolio has been completed and the verifier considers the assessor to be applying good practice).

AMBER:
An assessor holding their D32/D33/A1 qualification and has worked for the company for six months who demonstrates consist good practice. (40 to 50 sampling until if the Verifier considers that assessment practice is good, and all assessment paperwork used is appropriate.

Green:
 An experience assessor who has worked for the company for ore than six months who demonstrates good practice. (30% sampling).
The % of sampling will reduce as the assessors are more experienced but if problems arise the % sampling will increase to reflect individual assessor practice.

To support RED and AMBER Assessors, mentoring with named internal verifier will be available if required.

Timing of Verification:

Where 100% sampling is taking place, portfolios should be initially verified by end of the second assessment visit with frequency of future verification activity dependent on the results of initial verification. (It will be for the Sectors verifiers for each qualification to agree the frequency and timing of verification activity). In addition, all assessors should be assessed as per their rating and not less than once a month. Ass part of the evaluation of the assessor performance, a direct observation will take place a minimum annually.

Monitoring assessment practice.

This is necessary:

To ensure the national standards of assessment are adhere to by all Assessors.
To identify problems or areas where assessors required advice/development.
To ensure candidates are aware of and satisfied with the assessment process.
To ensure that employers are satisfied with Impactful Governance and support is given the assessors.

Monitoring assessments includes the internal verification records completed with each assessor, feedback from candidates and evaluation aspects of the performance.

Internal standardization:

The simplest means of completing a standardization review is to collate copies of evidence and portfolio presented to unit accreditation and ask the assessor to decide based on what is in front of them. It is also helpful to ask them to note any queries they may have further information needed.

In additional Internal Verifiers must provide guidance at intervals to endure messages are reinforced.
The aim should be to put in place procedure that will provide ongoing feedback to assessors.
This will be dependent on:

1-The skills and experiences of Internal Verifiers.
2-How long the center has been ruing the qualification.
3-How long the qualification has been available.

If actions to adjust assessment is necessary, a plan should be in place to endure that this is completed before External verification takes place. The external verifier may wish to see this as part of their monitoring role.

Developing and supporting assessors:

The Internal Verifier must make sure that all Assessors in Impactful Governance have:

-A full induction into the company processes and systems.
-A copy of assessment materials.
-appropriate resources/equipment facilities to undertake the assessment process.
-Access to the guidance and National standards documents.
-Access to appropriate training and support

Ensuring Quality within the Learner Journey:

Ensuring quality within the learner journey will help to ensure that learners are fully supported throughout their qualification, thus minimizing's early leavers and non-completers. In additional to the verification of the assessment process, verifiers will be required to monitor and evaluate:

-The quality of the initial sigh up process.
-Learner inductions including the completed ILPs.
-Learner reviews.

At the end of each monitoring activity and feedback will be generated with actions/suggestions for improvements. all actins identified will be followed up with the agreed time frame.

External verifier:

The External Verifier first port of call is the internal verifier, who will be expected to have a range of information in hand:

-Number of current, registered candidates per subject/level.
-Candidate Centre enrolment and awarding body registration details.
-Assessors details.
-Candidate special assessment requirements.
-Candidate support resources available.
-Assessment sites.
-Satellite partnerships arrangements.
-Internal Verifier sampling strategy.
-Internal Verifier records including feedback to assessor, discussions with candidates records of claims for certifications.

Role Summary:

Internal Quality Assurance will be responsible and accountable for:

-Managing the system of assessment- from assessment planning, through to marking and recording assessment decisions, as required by the awarding body.
-Maintaining accurate and verifiable candidate assessment and achievement records as required by the awarding body.
-Ensuring that hey comply with and promote equality of opportunity and diversity of Learners.

Planning Internal Quality Assurance

1.   All internal quality assurance (IQA) must be planned in advance. Work should be planned and prioritised and deadlines managed and met. Each IQA or Internal Quality Assurance Co-ordinator (IQAC) (if more than one IQA on any one programme) will set a minimum of 1 day per month (unless employed full time in this role) for the IQA of assessment practice, including portfolio sampling, observation of Assessors, Trainers, Facilitators and support staff and interview of learners and employers. These dates will be planned on a 3 month rolling basis or in accordance with contract and delivery plans in advance. QA must include observation of all components of the learner journey.

2.   IQA is based on the identification of risk; an effective sampling plan that takes into account all the variables, and covers every learner, assessment method, assessor, and evidence will minimise the amount of portfolio sampling required. It is important

that IQAs take a holistic view of the whole assessment process. The sampling plan should take into account experience or otherwise of the delivery teams, new and innovative ways of assessment, difficulties with particular evidence, introduction of new standards, the cohort of learners and the uniqueness of the assessment location and with internal quality assurance happening on an ongoing basis allows for effective sampling that is not limited to the portfolio.

3.   Planning should be about being proactive and spending time in the assessment environment with the assessor, delivery team, learners and employers. Generally the focus should be on observation of assessment practice rather than portfolio evidence. This provides opportunity for sampling and identifying future development and support required by the assessor.

4.   Portfolios, (traditional or electronic) for all learners, must have planned interventions by the IQA, based on their local risk assessment, strategy and sampling plan. This could include initial, interim (mid-programme) and final IQA. Interim IQA enables the IQA to pick up problems at an early stage to avoid the possible situation of turning down final decisions. It also highlights individual assessors and training team members need for support or training, thus developing the team. Interventions may include observations and candidate interviews.

5.   Assignments and formal testing are subject to the quality assurance process, and as such an effectively planned intervention should take place that clearly distinguishes between learning/practice and the assessment process.

6.   IQA of formal testing is likely to be through observation or candidate interview. Testing should be sampled at least twice annually depending on the number of invigilators and sites. Work based sites must form part of this planning. Over a period of time all must be sampled.

7.   Where a qualification does not require portfolio evidence to be produced i.e. assignment only, a single intervention will suffice but must demonstrate over a period of time interventions at all stages of the process.

8.   The planning of the interventions should include sampling the whole process including Initial Assessment, induction, review of progress and any formative and summative assessment decisions.

9.   The IQA will plan when portfolios are to be brought in/sampled for IQA based on the learner's start and projected end date and length of programme e.g. for Apprentices this would be the nearest dates to 4, 8 and 12 months.

10.   Assessors/lead trainers are responsible for ensuring that all portfolios, regardless of progress, are available for IQA on their due dates. In exceptional circumstances assessors may be given up to five days from this date to produce the requested portfolios, but only in agreement with their line manager. This is not applicable to electronic portfolios housed on One File.

11.   Where the assessor is not yet qualified to either the relevant standard, assessment decisions will be checked, authenticated and countersigned by an occupationally competent and qualified assessor. This cannot be the IQA. The IQA will be responsible for arranging this process. The IQA must sample an increased ratio of assessment decisions for uncertificated and new delivery team members.

12.   Once an assessor is qualified, the IQA will use their judgement and experience to set the appropriate sample for the next six months.

13.   All previously qualified assessors that are new to Impactful Governance will initially require a higher percentage of units/evidence to be internally quality assured. An IQA observation must take place within two months of starting assessing. Further observations may be necessary until the assessor is meeting the standards required.

14.   IQA's will observe all qualified assessors assessing a learner a minimum of twice yearly. Unqualified assessors will be observed on a monthly basis during their first six months of training and on a bi-monthly basis thereafter until qualified. Where observation of the assessment process establishes Red practice, another observation should be planned within four weeks. Orange practice should be re-observed within eight weeks.

15.   IQA's should be available for additional verification and support outside of the planned dates.

16.   Moderation of set assignments should be planned to agree the standardisation of work produced and assessment decisions.

Internal Quality Assurance Practice

1.   Where no specific local customer sampling strategy is evident, individual IQA's are responsible for determining their own sampling strategies for quality assurance based on the age and complexity of the qualification and any particular difficult units or evidence within it, and also the training delivery team's individual competence and experience. This will also be informed by the MI reports. Sampling may be raised or lowered accordingly but a written justification must be maintained in the IQA files.

2.   IQA's are responsible for processing information, including MI data, on assessment decisions to inform management decisions, and to provide information and feedback for external audit requirements. (see Appendices for example forms) The key responsibilities are: -

•   Planning, tracking and verifying assessment
•   Supplying assessors/lead trainers and directors with up to date   information advice and support
•   Monitoring assessors/training team continuous professional development
•   Managing the quality of assessment delivery, and standardising assessment practice

3.   IQAs are responsible for monitoring equality of opportunity of access to assessment.

4.   Identification of slow completion through effective tracking is the key to success. Slow completion may be due to assessment opportunities not being available or weak assessment/action planning.

5.   The main part of the IQAs role is to look at evidence presented and decide if it meets the national standards ensuring, validity, reliability, sufficiency, currency and

authenticity. Valid, Authentic, Relevant, current and sufficient (VARCS) The IQA should look for HOW the decision was reached. They should not second line assess it.

6.   The IQA will record the verification intervention (portfolio, observation or interview) on the appropriate IQA record. Adequate, relevant and constructive feedback must be given and recorded, so that the assessor is in no doubt of what is required of them, and when it has to be completed by (SMART Targeting). Copies of these are maintained on file and are available for audit purposes.

7.   The IQA will monitor the action points and record when the action has been completed. Any concerns or queries that cannot be resolved between the IQA and assessor are to be referred to the appropriate party. HR issues through Grievance Policy and Procedure. Delivery standards issues, through the Appeals Procedure.

8.   A clearly identified audit trail should be provided on any work that has had an assessment decision made on it (paper versions) i.e. all evidence must be signed and dated by the IQA in a different colour pen to that of the assessor.

9.   A copy of all IQA records, assessment plans, records of assessment decisions and the matrix/summative record sheets must be kept in a secure environment in the Centre for three years following certification. Exam records will be archived for 6 years. These will be maintained electronically within One File portfolio as required. They will be used by the IQA and/or the External Quality Assurer (EQA) to assist in any decision regarding achievement.

10.   Observation of assessors/lead trainers, a key component of the strategy, must include talking to the learner and employer. In addition, 15% of an assessor's learners should be interviewed in each twelve-month period. These should be selected at random but must include new starters as well as those progressing through their qualifications. The interviews must be recorded, and stored securely - uploaded onto One File once it is in place. Interviews may also take place by telephone.

11.   Where issues are identified the IQA will make a return visit or telephone/skype call to ensure that it has been resolved satisfactorily.

12.   IQA's are responsible for providing guidance and support to assessors to ensure they do not discriminate against a learner either intentionally or inadvertently. They will check that assessors are aware of the flexibility required to meet a learner's particular assessment requirements.

13.   On-going guidance and support provided should be recorded on the IQA support log.

14.   Quarterly Standardisation Meetings will be held between the QAM, CEM, relevant assessors/tutors and IQA's to discuss criteria and scheme requirements and to ensure standardisation of practice. These meetings must be minuted; a copy to be filed in IQA file. The QAM is responsible for ensuring that assessment practice does not introduce requirements that are not included in the national standards.

15.   There should be a clear audit trail to show where any paper portfolios are, once received from the learner. Completed portfolios once internally quality assured, may be returned to the learner but the learner must be aware it could be called back for scrutiny until after the next EQA visit. ("An External Quality Assurer may wish to see a portfolio after the learner has been awarded a certificate, on the next centre visit, but not thereafter".) These must be stored securely. The portfolio remains the learner's property and effort must be made to return it e.g. recorded letter saying that the portfolio will be destroyed on --/--/-- (3 months), if not collected before.

16.   All claims for certification must be authorised by an appropriately qualified and occupationally competent IQA. "The IQA has overall responsibility to ensure the validity of all certificate claims made for the awards they verify." IQA's must not verify their own assessment decisions.

17.   Standardisation of IQA practice will take place at a national level through timetabled meetings and networking.

18.   Externally set testing or examinations will be invigilated as per JCQ regulations and Key Skills Tests and any additional QCDA and awarding organisation requirements. The checklist should be attached to the list of candidates undertaking the test and retained in a secure place.

19.   IQA's are responsible for notifying the QAM of any changes to the original scheme approval e.g. changes to assessor/IQA team in order that they can notify the awarding organisation.

20.   IQA's are responsible for ensuring that information relating to certification is submitted to the central operations and Due Diligence for updating the MI system. This includes portfolios and IQA report records.

21.   The QAM is responsible for liaising with IQA's to effectively plan the EQA visit using the MI data. Any difficulties in complying with the visit scheduled date must be communicated to the CEM and CEO.

22.   The QAM is responsible for agreeing any innovative approaches to assessment practice with the relevant EQA and ensuring the EQA is sufficiently familiar with the technology/systems being used or recommended.

Planning for an External Quality Assurance Reviews and/or Audit

The key activities of the IQA role in external quality assurance are to:
•   identify how internal assessments will be checked externally and the information needed for this purpose.
•   plan, collect and analyse information on internal assessment decisions.
•   agree the timing and nature of external verification arrangements.
•   give supporting background information to external verifiers about the assessment process
•   explain any issues raised by external verifiers and give them supporting information, as necessary.
•   raise concerns and disagreements about external audit decisions in a clear and constructive way
•   refer any questions or concerns, which could not be dealt with internally, to the awarding body
•   give assessors feedback on external verification decisions.
•   ensure that external verification decisions are included in internal reviews of procedures.

The external quality assurance planning is undertaken jointly by the CEM and QAM. Many of the external review/audit requirements are managed by the CEM.

Key information is updated on an ongoing basis and stored securely on the Impactful Governance cloud for ease of access to key members of the Impactful Governance team. This information includes all the current Impactful Governance Policy documents; Programme Reviews; IQA activity reports; standardisation meeting minutes, team meeting minutes, claims and reports, etc.

Our approach to review/audit requests is one of responsiveness and transparency. We endeavour within 3 working days to action all requests for review/audit information. As completed learner portfolios/workbooks are stored securely off-site, we endeavour to provide these within 5 working days.

The role of the QAM in the review/audit process is to support our training delivery and assessors in planning and preparing for reviews and observations. The QAM will attend all reviews, observations and audits where possible. If not available, the CEO will attend.

The QAM is responsible for preparing Self-Assessment Review documents for reviews/audits. This are reviewed by the CEO before being submitted to the external party.

RAG Rating

🟥	100%	**Newly qualified Assessors** **New qualification/programme** **Assessors in Training** **Assessors with development objectives**
🟧	50%	**Qualified/Experienced Assessors** **Assessors with development objectives**
🟩	30%	**Fully qualified and competent** **Long term Assessors** **No development objectives identified**

Example of RAG rating sample plan

Month	J	F	M	A	M	J	J	A	S	O	N	D
Rating/review	🟩	🟩	🟩	R	🟧	🟧	🟩	R	🟩	🟩	🟥	

Date of last review	January 2023
Date of next review	December 2023
Date it was first implemented	October 2017
Author(s)	Directors
Audience	All Directors, Consultants, Employees, Vvolunteers and Stakeholders.
Other relevant policies and/or procedures	Conflicts of Interest Policy, Data Retention, Whistle Blowing policy, Disciplinary policy.
Where it is saved	www.ig-CIC.org.uk