

Internal Quality Assurance Policy

Policy Name: Internal Quality Assurance Policy

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| Date policy written/amended | Amended/written by | Authorised by | Next review due |
| 28/08/2022 | Sarah Cox | Board of Directors | August 2023 |
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**Purpose/Scope**

**Aim**

**To ensure that:**

* Assessment is accurate, consistent, current, timely, valid, authentic and to Awarding Body standards.
* Assessment instruments are fit for purpose.
* To ensure that internal quality assurance is valid, reliable and covers all assessors and programme activity.
* Assessment is part of an audit trail of learner achievement records.
* To ensure that there is accurate and detailed recording of internal verification decisions.
* Feedback is provided to inform centre quality improvement.
* To ensure that the internal verification procedure is open, fair and free from bias.

 Definitions/Terminology

* **Internal Verification:** A centre devised quality assurance process which assures the assessment against the accrediting body unit grading criteria and that the assignments are fit for purpose.
* **External Verification:** A regular process operated by the awarding body and used to check centre assignments and assessment against accrediting body standards. Internal verification processes and centre resources are reviewed and reported upon.
* **Sample of Learner Work:** External verification is based upon the scrutiny of assessed learner work. The volumes of samples required is prescribed by the external verifier and varies according to numbers of learners and sector programmes a centre operates.

**Responsibilities:**

* **Quality Nominee (Lucie Larke):** Ensures that centre internal verification and standardisation processes operate, and acts as the centre coordinator for external verification between the awarding body and course teams. The QN ensures External Verifier reports are monitored and any remedial work carried out.
* **Internal Verifier (IV):** A Lecturer/assessor able to verify assessor decisions, and validate assignments. The internal verification records findings, gives assessor feedback, and oversees remedial action.
* **External Verifier (EV):** The EV verifies the quality of the centre’s assessment and internal verification.
* **Staff Briefing:** All assessors and IV’s require periodic briefing on accrediting body processes.
* **Verification schedules:** Annually agreed to cover all assessors. Assessment schedules should be drawn up and monitored through the year.
* **Internal verification of assignments:** Carried out before use to ensure that they are fit for purpose, and that any recommendations are acted upon.
* **Internal verification of learner work:** Should verify a sufficient proportion of student work to ensure the security of the standard of assessment. Assessors do not internally verify their own work. Assessor feedback and support should be given by the Internal Verifier. The process does not involve the learner.
* **IV records:** Are correctly maintained in a secure place for 3 years after certification. Centres should use standard forms for the process: see awarding body web sites.
* **Links:** Internal verification processes need to articulate with appeals processes, and authenticity of learner work requirements.
* **External Verification:** Centres need to have in place monitoring and review procedures for external verification outcomes. Procedures are required to deal with actions required by the EV.

**Procedures:**

The Melton Learning Hub has procedures in place to:

* Ensure that all centre assessment instruments are verified as fit for purpose.
* An appropriately structured sample of assessor work from all programmes, sites and teams are verified, to ensure centre programmes conform to the awarding body standards and external verification requirements.
* Plan an annual internal verification schedule, linked to assignment plans.
* Define, maintain, and support effective internal verification roles.
* Ensure that identified staff will maintain secure records of all internal verification activity
* Brief and train staff of the requirements for current internal verification procedures.
* Promote internal verification as a developmental process between staff.
* Provide standardised internal verification documentation
* Use the outcome of internal verification to enhance future assessment practice.

**Procedures:**

* **Addressing Assessor malpractice:** The Melton Learning Hub will seek to minimise Assessor malpractice by:
	+ Ensuring that Staff Induction and updating include Awarding Body requirements and processes and procedures
	+ Using robust internal verification and audited record keeping.
	+ Auditing learner records, assessment tracking records and certification claims.
* **Definition of Malpractice by Centre Staff:** This list is not exhaustive and other instances of malpractice may be considered by this centre at its discretion:
	+ Improper assistance to candidates
	+ Inventing or changing marks for internally assessed work (coursework or portfolio evidence) where there is insufficient evidence of the candidates’ achievement to justify the marks given or assessment decisions made.
	+ Failure to keep candidate coursework/portfolios of evidence secure.
	+ Fraudulent claims for certificates.
	+ Inappropriate retention of certificates.
	+ Assisting learners in the production of work for assessment, where the support has the potential to influence the outcomes of assessment, for example where the assistance involves centre staff producing work for the learner.
	+ Producing falsified witness statements, for example for evidence the learner has not generated.
	+ Allowing evidence, which is known by the staff member not to be that of the learner, to be included in a learner’s assignment/task/portfolio/coursework.
	+ Facilitating and allowing impersonation.
	+ Misusing the conditions for special learner requirements, for example where learners are permitted support, such as an amanuensis. Support is permissible up to the point where it has the potential to influence the outcome of the assessment.
	+ Falsifying records/certificates, for example by alteration, substitution, or by fraud
	+ Fraudulent certificate claims, that is claiming for a certificate prior to the learner completing all the requirements of assessment.

**Dealing with malpractice**:

* To deal with possible cases of malpractice the Centre will conduct an investigation in a form commensurate with the nature of the malpractice allegation. The Manager will support such an investigation and all personnel linked to the allegation. It will be dealt with through the Staff Disciplinary Policy and Procedures:
If after investigation the Assessor is found to have committed malpractice the accrediting body will be informed of the malpractice or attempted acts of malpractice, which have compromised assessment. The awarding body will advise on further action required

**Guidance on Formative Assessment and Internal Moderation**

* Formative Assessment is an integrated element of the Assignment format.
All staff will use the prescribed format for Assignments of each examining body.
The learners will receive clear feedback and be directed as to what needs to be achieved to improve the work submitted
* **Formative assessment** Formative assessment involves both the assessor and the student in a process of continual review of progress and takes place prior to summative assessment. Students are provided with formative feedback on their draft evidence or performance and are empowered to act to improve their performance.
* **Summative assessment** Summative assessment is carried out in order to make final judgements about the students’ performance in relation to the assessment criteria of each unit. It is the definitive assessment and recording of the learner’s achievement and will be conducted to national standards. Assessors will only record the evidence that supports the assessment decisions against the unit assessment criteria.