

EQA Report for the Ongoing Compliance with Centre Approval Criteria

Centre: Essex County Fire & Rescue Service

Date: 21/02/2017

EQA: Stephen Buchanan-Lee



Type of Activity:		Please Tick ✓
Compliance Monitoring Only?	(Complete Part A Only)	
Compliance Monitoring with EQA Sampling?	(Complete both Part A and Part B)	✓

PART A:

Section One: General

Centre Details:

Centre Name	Essex County Fire & Rescue Service				
Address	London Road Rivenhall, Witham, Essex CM8 3HB				
Centre Contact Name	Wendy	Huggins y Marshall		Position	Centre Manager Centre Co-ordinator
Tel No	01376	576543		E-mail	mark.huggins@essex- fire.gov.uk
Activity Format		Visit			\checkmark
(please tick) ✓	Remote/Desk-Based				
EQA Name	Stepher	n Buchanan	-Lee		
EQA Email Address	steve.bl@hotmail.com				
EQA Tel No	07918887573				
Location of EQA Activity (if different from Address above)					
Date of Previous EQA Report	18/10/2	016			
EQA Activity (No) this year	1 2 Other - please specify:			Other - please specify:	
(1st April to 31st March) (please tick) ✓	✓				
Duration of EQA Activity (hours)	4				
	R/C Qualification(s)/Course(s) Titles				

Qualifications/Courses approved to deliver	R	SFJ Awards Level 3 Award In Initial Incident Command in Fire and Rescue Services (QCF)
(R = Regulated, C = Customised, ie ALP)	R	SFJ Awards Level 4 Award In Intermediate Incident Command in Fire and Rescue Services (QCF)
	R	SFJ Awards Level 3 Award in Using Breathing Apparatus in Fire and Rescue Responses (QCF)
	R	SFJ Awards Level 4 Award For Water Rescue Tactical Advisor (QCF)
	R	SFJ Awards Level 3 Award in Water Rescue Boat Operation (QCF)
	R	SFJ Awards Level 3 Award For Water Rescue First Responder (QCF)

(Visit only) please record below details of all centre staff present:

(if there have been any changes to Centre Staff please complete a "Changes to Centre Contacts Form" and submit with your EQA Report OR set an action point for the centre to submit the completed Form to SFJ Awards)

Name	Role / Area of Responsibility
Mark Huggins	Centre Manager / IQA
Moira Bruin	Assessor / Senior Manager
Mark Eaglestone	Learner
Karl Smith	Learner
Gavin Tripp	Assessor
Trevor Hearn	Assessor
Wendy Marshall	Centre Co-ordinator

(please add additional rows as appropriate)

Section Two: Previous EQA Action Points - please report on the progress made to meet actions/recommendations set during previous EQA:

Previous Action Ref No	A = Action R = Recommendation	Action/Recommendation	Approved Centre Criteria Ref	Origination Date	Completed ? (Y/N) (if No, action must be carried forward)	By Whom	EQA Comments/ Evidence Seen
		None					

(please add additional rows as appropriate)

Section Three: Ongoing Compliance with the Centre Approval Criteria

Please ensure you have a copy of the previous report before conducting the visit.

Mai	nagement Systems		
1	Criteria	Compliant? (Y/N/Partially)	EQA Comments: Evidence of Ongoing Compliance (please use this section to provide additional information OR where you have responded 'N' or 'Partially')
1.1	The Centre's aims and policies in relation to qualifications are supported by senior management and understood by the assessment team, including policies for dealing with malpractice, enquiries and appeals	Y	This was confirmed through a review of the centres policies and procedures along with an interview with the centre manager and senior manager present during visit.
1.2	The Centre's access and fair assessment policies and practices are understood and complied with by Learners and Assessors	Y	Confirmed through policy review and interview with Learner and Assessors.
1.3	The roles, responsibilities, authorities and accountabilities of the assessment and quality assurance teams across all assessment sites are clearly defined, allocated and understood	Y	Policies and procedures seen during the visit.
1.4	There is effective communication within the assessment team and with SFJ Awards	Y	At all times – phone, e-mail
1.5	SFJ Awards is notified of any changes which may affect the Centre's ability to meet the approved Centre criteria	Y	
1.6	Learner, employer and other feedback is used to evaluate the quality and effectiveness of qualification provision against the Centre's stated aims and policies, leading to continuous improvement	Y	Feedback is gained from all staff that are involved in the delivery of the current programmes, and also from learners. This feedback is collated and fed back into the programme delivery design as well as through standardisation meetings held by the centre IQA on a regular basis. This was confirmed through interviews with learners and delivery staff.

EQA Additional Comments (eg notable good practice, recommendations or to expand on issues found):

The centre has excellent management systems that are coordinated by the centre manager (IQA), with key communications to all tutors, assessors, and senior managers.

Res	sources		
2	Criteria	Compliant? (Y/N/Partially)	EQA Comments: Evidence of Ongoing Compliance (please use this section to provide additional information OR where you have responded 'N' or 'Partially')
2.1	Assessors and Internal Quality Assurers have sufficient time, resources and authority to fulfil their roles and responsibilities effectively	Y	This is planned and accounted for as part of their role/job description.
2.2	There are sufficient competent and qualified Assessors and Internal Quality Assurers to meet the demand for assessment and quality assurance activity	Y	Full staff list seen, with profiles on the centre web-site.
2.3	A staff development programme is established for the assessment and quality assurance team in line with identified needs	Υ	
2.4	Resource needs are effectively identified in relation to the specific qualification, and resources are made available	Y	
2.5	Equipment and accommodation used for the purposes of assessment comply with the requirements of relevant Health and Safety legislation	Y	All equipment is tested on a regular basis in line with regulatory requirements.

EQA Additional Comments (eg notable good practice, recommendations or to expand on issues found):

The centre makes good use of e-learning packages along with simulated environments (supplemented with role players) to provide realistic development, training and assessment for learners.

Lea	Learner Support						
3	Criteria	Compliant? (Y/N/Partially)	EQA Comments: Evidence of Ongoing Compliance (please use this section to provide				
			additional information OR where you have responded 'N' or 'Partially')				
3.1	Information, advice and guidance about qualification procedures and practices are provided to Learners and potential Learners	Y	Portfolio documentation was seen during the visit, and understanding confirmed through interviews with learners.				
3.2	Learners' development needs are matched against the requirements of the qualification units and an agreed individual assessment plan is established	Y	All learners are individually supported by tutors and assessors. This was confirmed through interviews with assessors and learners				
3.3	Learners have regular opportunities to review their progress and goals and to revise their assessment plan accordingly	Y	Each programme is reviewed on a regular basis to ensure that it is up to date and fit for purpose.				

3.4	Unit certification is made available to Learners	Y	If necessary – the current programmes are single unit qualifications.
3.5	Particular assessment requirements of Learners are identified and met where possible	Y	
3.6	There is an established appeals procedure which is documented and made available to all Learners	Y	Seen during the visit, and confirmed understanding through interviews with learners and assessors.

EQA Additional Comments (eg notable good practice, recommendations or to expand on issues found):

The centre treats all learners as individuals and provides a high level of support and resources to ensure that all learners have the best opportunity of achieving their full potential.

Asse	Assessment and Quality Assurance					
4	Criteria	Compliant? (Y/N/Partially)	EQA Comments: Evidence of Ongoing Compliance (please use this section to provide additional information OR where you have responded 'N' or 'Partially')			
4.1	Queries about the Qualification or Award Specification, assessment guidance or related SFJ Awards materials, are resolved and recorded	Y				
4.2	Requests are complied with from SFJ Awards or the Qualifications Regulators for access to premises, records, information, Learners and staff for the purpose of external quality assurance or other monitoring activities	Y				
4.3	Access to assessment is encouraged through the use of a range of valid assessment methods	Y				
4.4	Internal quality assurance procedures and activities are clearly documented, consistent with national requirements and ensure the quality and consistency of assessment	Y	These were reviewed during the visit, and seen to be of a very high standard. The IQA has an excellent knowledge and understanding of their role and provides excellent quality assurance processes and procedures.			
4.5	Assessment decisions and practices are regularly sampled and findings are acted upon to ensure consistency and fairness	Y	The centre has a sampling policy and process in place. This is monitored to ensure that all findings from the sampling process are used to continuously improve programme delivery and assessment.			
4.6	Assessment is conducted by qualified and occupationally expert staff	Y	CV's seen, and assessors interviewed.			
4.7	Internal quality assurance is conducted by appropriately qualified and experienced staff	Y	CV's seen, and IQA interviewed during the visit.			
4.8	The effectiveness of the internal quality assurance strategy is reviewed against national	Y				

	requirements and corrective		
	measures are implemented		
4.9	Unless a Learner chooses not to have a Unique Learner Number (ULN), arrangements are in place to obtain the ULN and a Learner record on behalf of the Learner	Y	If necessary
4.10	Where Learner consent is given, the Centre uses access to the record of the Learner's previous achievements in their Learner record to ensure that opportunities for credit transfer and exemption are maximized	Y	If necessary
4.11	The Centre has a process to identify, monitor and manage any conflicts of interest in assessment outcomes	Y	Policy and procedures are in place and monitored by the centre manager.
4.12	Actions identified by external quality assurance visits are disseminated to appropriate staff and corrective measures are implemented	Y	A programme of standardisation activities is in place to ensure that all assessment and IQA processes are up to date and fit for purpose.
4.13	The Centre has in place arrangements to ensure the confidentiality of assessment materials	Y	All portfolios are kept securely in a password protected electronic system.

EQA Additional Comments (eg notable good practice, recommendations or to expand on issues found):

There is excellent coordination by the centre manager and excellent communication between the delivery, assessment and IQA team.

Reco	rds		
5	Criteria	Compliant? (Y/N/Partially)	EQA Comments: Evidence of Ongoing Compliance (please use this section to provide additional information OR where you have responded 'N' or 'Partially')
5.1	Information supplied to SFJ Awards for the purposes of registration and certification is complete and accurate	Y	
5.2	Learner records and details of achievements are accurate, kept up-to-date and securely stored in line with SFJ Awards' requirements, and are available for external quality assurance and auditing	Y	These were all made fully available.
5.3	Records of internal quality assurance activity are maintained in line with SFJ Awards' requirements, and are made available for the purposes of auditing	Y	These were all made fully available, and seen to be of a very high standard.
5.4	The Centre's achievements are evaluated and reviewed and	Y	All achievements are reviewed and evaluated on a programme by programme

	used to inform future Centre programme developmental activity		basis. This information is collated and used to improve the delivery, assessment and IQA of all programmes.
5.5	Information and recording systems enable Learners' achievements to be monitored and reviewed in relation to the Centre's equal opportunities policy	Y	This is in line with centres policy and procedures.
5.6	The Centre has the staff, resources and systems necessary to support the assessment of units and the award	Y	The staff interviewed on the day of the visit were of a very high standard, and provided a wide range of knowledge and understanding of not only the specific subject being assessed but also high level assessment processes.
5.7	The Centre has the staff, resources and systems necessary to support the accumulation and transfer of credits, the recording of exemptions, and recognition of prior learning if applicable	Y	If necessary
5.8	Learner personal data is collected and held in accordance with the Data Protection Legislation, including the Data Protection Act 1998. Such records are held with the explicit consent of the Learner	Υ	
5.9	The Centre has in place a process to confirm the identity of Learners	Y	potion recommendations or to

EQA Additional Comments (eg notable good practice, recommendations or to expand on issues found):

The centre has an excellent approach to reporting and sharing feedback and evaluation of course delivery and assessment.

Section Four: Record of Discussions:

Discussions with Le	arners:							
Did you meet/speak with	any Learners?	Yes	No					
Pease tick ✓		V						
Learner Names:	Karl Smith, Mark Eaglestone							
The learners gave a good account of how they had been supported by assessors, and had a full understanding of the assessment process (including the appeals procedure). The learners were keen to discuss how the assessment processes had allowed them further learning opportunities and how they felt the programme had added value to their role as Incident Commanders.								
Discussions with As	sessor(s):							
Did you meet/speak with	any Assessors?	Yes	No					
Pease tick ✓		V						
Assessor Names:	Moira Bruin, Trevor Hearn, Gavin Tripp							
management systems v The assessors discusse support to learners base The assessors also sho	excellent explanation of their role, and how this linked to the within the centre. ed how they treated each learner as an individual and provided on their individual needs. ewed an excellent understanding of Incident Command, and any with other emergency services (JESIP)	ided all ned	cessary					
	ernal Quality Assurer(s):							
Did you meet/speak with	any IQA(s)?	Yes	No					
Pease tick ✓		1						
IQA Names:	Mark Huggins							
and reporting processes The IQA gave a clear ex	The IQA gave an excellent overview of the IQA arrangements at the centre, including the sampling and reporting processes and procedures. This was seen to be of a very high standard. The IQA gave a clear explanation of the monitoring and supporting arrangements for the assessors, with an overview of the standardisation and improvement processes within the centre.							

Section Five: Current Action Plan - must be Specific Measurable Achievable Relevant Time-bound

Action Ref No	A = Action R = Recommendation	Action Required / Recommendation	Approved Centre Criteria Ref	If qualification specific, please identify which qualification(s) the action/recommendation relates to	By Whom	By When
		None				

(please add additional rows as appropriate)

Section Six: Feedback to the Centre on Compliance and Quality Assurance Practices

Strengths and Areas of Notable Good Practice Identified: *Please record any examples seen below:*

The centre has set up an excellent QA process and delivery model for the running of the approved accredited programmes/qualifications.

The centre manager has provided key development to all staff, along with standardised documentation and, as the lead IQA, procedures to ensure accuracy, consistency and transparency throughout the assessment process. Assessment and IQA records were found to be of a very high standard that provided valuable outcomes for individual learners and the Service. Feedback was of a very high standard and learners were clearly motivated to further develop their knowledge, understanding and skills.

The centre manager has ensured that all programmes are linked to the continuous development and improvement of Service Delivery, with particular attention as to the further professional development (and annual re-verification) of all learners. This will ensure that competence in role can be judged and maintained throughout the learners career.

The centre has provided key information from the assessment process, and subsequent learner development, that will provide the Service with valuable opportunities to develop accurate and robust Operational Assurance.

Qualification Status: please state your recommended sanction level in the table below:

Qualification Code	Approved Qualification Title (including Level)	Current Status* (eg None, Level 1, Level 2 etc) Please refer to SFJ Awards' Sanctions Policy for rationale of levels	New Recommended Status following this EQA* (eg None, Level 1, Level 2 etc) Please refer to SFJ Awards' Sanctions Policy for rationale of levels	Action Plan Ref No (eg 1, 2 etc)
603/0588/5	SFJ Awards Level 4 Award In Intermediate Incident Command in Fire and Rescue Services	Registration Only AWS	Registration Only AWS	

(please add additional rows as appropriate)

***Key: AWS** = Awaiting Wider Sampling, Registration Only to continue; **None** = DCS, no actions; **1** = DCS; low level actions; **2** = Level 2 Sanction, no DCS; **3(a)** = Level 3 Sanction, no Registrations; **3(b)** = Level 3 Sanction, no Certifications; **4** = Withdrawal of Qualification Approval; **5** = Withdrawal of Centre Approval.

Section Seven: Risk Rating

The following factors must be considered in assessing the centre Risk Rating, based on your completion of the Ongoing Compliance with the Centre Approval Criteria (Section One) and EQA Reports since the centre's last Ongoing Compliance Monitoring Review:

Low Risk	Centre meets SFJ Awards Compliance requirements			
	Very unlikely threat to the security of assessment and quality assurance during the year			
Medium Risk	Centre substantially meets SFJ Awards Compliance requirements			
	 Possible threat to the security of assessment and quality assurance during the year 			
High Risk • Centre does not meet SFJ Awards Compliance requirements				
	Likely threat to the security of assessment and quality assurance during the year			

Use the criteria below to determine a risk rating for the Centre and recommend the monitoring actions to be taken:

	LOW	MEDIUM	HIGH
Experience	The Centre has been operating	The Centre has been operating	The Centre has been operating
	for a minimum of 12 months	for a period of between 6 to 12	for less that 6 months
		months	
Compliance with Centre Approval	All improvement actions have	There are some outstanding	There are some improvement
Criteria	been completed within the agreed	improvement actions and the	actions and the Centre is not
	timescales and there are no	Centre is adhering to the agreed	meeting the agreed timescales
	outstanding actions x	timescales	
Volume of Learners	The Centre is delivering	The Centre has registered	The Centre's Learner
	qualifications to their forecasted	Learners according to their	registrations are not meeting their
	uptake	forecasts but Learner certification	forecasts
	х	is behind forecast	

Qualification Delivery	The Centre has delivered *full qualifications which have been accredited for at least 12 months (*same or similar qualifications in	The Centre has delivered *full qualifications which have been accredited for at least 6 months. (*same or similar qualifications in	The Centre has not yet delivered any *full qualifications that have been accredited (*same or similar qualifications in
	the sector to which SFJ Awards have approved the Centre to deliver)	the sector to which SFJ Awards have approved the Centre to deliver)	the sector to which SFJ Awards have approved the Centre to deliver)
Resources	All Centre staff are appropriately qualified for the qualifications they are delivering	At least 75% of the assessment team are suitably trained / appropriately qualified for the qualifications they are delivering	Fewer than 75% of the assessment team are not yet suitably trained / appropriately qualified for the qualifications they are delivering

Outcome - Overall Risk Rating of the Centre (aggregate score): (high/medium/low)									
	High			High					
Previous Rating	Medium	V	Rating Outcome based on this EQA Activity	Medium					
(please tick)	Low		(please tick)	Low	√				

Centre Monitoring: (please state your recommendation for future centre monitoring, including the timescales) The centre should continue with a full compliance and sampling visit in 12 months time. Should the centre submit learner certification requests in the meantime, the EQA recommends that remote sampling take place with a view to providing DCS for the current Incident Command programmes. Proposed date of next EQA visit / remote activity: Centre Continued Compliance & Sampling visit —

February 2018

Direct Claims Status (DCS) Recommendation this EQA Activity:						
Qualification Code	Approved Qualification Title (including Level)	DCS Recommended? Pease tick ✓				
	No recommendations for DCS from EQA at this time, as this was the first sampling visit to the centre					

(please add additional rows as appropriate)

Declaration

☑ I confirm that I have carried out a thorough review of the Centre and the assessment practices. I have no personal interest in the activities of the Centre, or the activities which I have verified as being compliant with the guidance issued by SFJ Awards and/or the Regulatory Authorities.

EQA Signature:	Steph Buhuten
Date form completed and submitted to SFJ Awards:	28/02/2017

Completed reports must be returned electronically to the Quality Assurance Officer within 5 working days of the event taking place. Email: qateam@sfjawards.com

SFJ Awards

1st Floor, Unit C Meadowcourt Business Park 4 Hayland Street Sheffield S9 1BY

Tel: 0114 2841970

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PART B:

Section Eight: Ongoing Monitoring of Assessment and IQA practices

		Pea	nse tick ✓		EQA Comments: Evidence of Ongoing
	Yes	No	Partially	N/A	Compliance
YES = No action required PARTIALLY = Action Required NO = Immediate action required					(please use this section to provide additional information where you have responded 'N' or 'Partially' - adding any identified
					actions/recommendations to the Action Plan)
Assessment					
Learners registered with SFJ Awards prior to assessment taking place	V				
Assessment is conducted by appropriately qualified, occupationally competent assessors	1				
Learning resources used are varied, valid and	V				
appropriate to the level Evidence of Assessment Planning/Strategy	✓				
seen. Pre-delivery IQA carried out? An appropriate range of assessment methods	V				
are used	/				
Assessment tools are fit for purpose (eg have an appropriate context; written at the correct level; written in appropriate language; mapped to assessment criteria; lead to valid assessment outcomes)	V				
Assessment tools enable the learner to produce appropriate evidence to meet the criteria to which the assessment relates	V				
Authenticity assured. Opportunities for plagiarism/collusion are minimised	V				
Accurately documented feedback is given to learners (and to support assessment judgements)	1				
Standardisation of assessor decisions taking place (where there is more than one Assessor per unit)	V				
Ratio of Learners to Assessor(s) manageable and appropriate	V				
IQA					
IQA sampling of assessments and assessment decisions is thorough, planned, recorded and used to improve future assessment practice	/				
IQA strategy in place, and being followed. Reviewed regularly?	V				
IQA records are accurate, up to date and available for EQA	V				
Adequate assessment decisions are sampled to ensure the required standards are met	/				
Ratio of Assessor(s) to IQA(s) manageable and appropriate?	V				
IQA is conducted by appropriately qualified, occupationally competent assessors	V				

		Pea	ase tick 🗸		EQA Comments: Evidence of Ongoing
YES = No action required PARTIALLY = Action Required NO = Immediate action required	Yes	No	Partially	N/A	Compliance (please use this section to provide additional information where you have responded 'N' or 'Partially')
Other					
Have Exemptions, Equivalents, Credit Transfers or Recognition of Prior Learning been claimed for any learners? (If 'Yes' must be included in EQA sample)		√			No opportunities arising
Approved Reasonable Adjustments/Special Considerations to the assessment process? (If 'Yes' must be included in EQA sample)				√	
Safe and secure storage of current and completed learners' evidence until having been subject to EQA?	V				
Safe and secure storage of current and completed assessor and IQA records? Retained for at least 3 years?	V				
Staff have access to appropriate training, guidance CPD and support?	V				
Appropriate system for internally approving SFJ Awards courses/qualifications in place?	V				
Evidence of assessors taking part in internal standardisation activities/meetings?	V				
LRCs accurately completed and presented promptly for certification?	V				



Section Nine: EQA Sampling Record

Please complete a separate Record for every Qualification/Course sampled this EQA Activity

Qualification Title and No	Title	SFJ Awards Level 4 Awa Fire and Rescue Service		Qualification No	603/0588/5	
Were <u>all</u> selected sample portfolios made available for EQA activity, and sampled?	Yes	√		No of LRC-4's	No of Learners	
Please tick ✓ (if 'No', please add to EQA Report Action Plan)	No		LRC-4's	N/A	14	4

In the box below, please briefly explain your sampling strategy. You should take care to sample across all: Learners, Units, Assessment methods, Assessors, Assessment sites

A random number of portfolios were sampled based on the number of learners. Portfolios were sampled to ensure that all assessors and IQA's were sampled.

Cat**	Learner Name	Unit No.	Ass'r int'ls	Date Ass'd	OBS*	E/WT*	WQ* Please	PS*	PD/* OQ	WP*	Sampled by IQA (if Yes, enter date)	IQA init'ls	Ass'r decision agreed by	IQA decision agreed by EQA Y/N
											dato		EQA Y/N	1/IN
F	Mark Eaglestone	Single unit	MB/TH	4/11/16	х		Х		Х	Х	Y 4/11/16	МН	Υ	Y
F	James Taylor	Single unit	MB/TH	4/11/16	х		Х		Х	Х	Y 4/11/16	МН	Y	Υ
F	Karl Smith	Single unit	MB/TH	2/12/16	Х		Х		Х	Х	Y 2/12/16	MH	Y	Υ



F	David Walpole	Single unit	MB/TH	2/12/16	Х	Х	Х	Х	Y	MH	Υ	Υ
									2/12/16			

** Learner Category

N = new

M = mid programme/Qual

F = final QA

D = claimed through DCS

	Total	Number sampled
Active Assessors	3	2
Active IQAs	1	1
Current No of Registered Learners (including complete and still on programme)	14	4
Units in qualification	1	1
No of Assessment Sites	1	1

Assessment Methods Key

*Customise headings and key as appropriate

OBS = observation

E/WT = Expert/Witness Testimony

WQ = written questions

PS = Personal Statement

PD/OQ = professional discussion/oral

questioning

WP = work product

Summary of portfolio sampling and feedback, including IQA records, sampling plans, observation records and feedback to assessors Overall comments, areas for development and evidence of where EQA does <u>not</u> agree with assessment decisions

All portfolios for this programme were found to be of a high standard.

All necessary documentation was provided and all portfolios were found to valid, authentic, reliable, current and sufficient.

Certification is deemed to be 'safe' and centre need to enter the certificate claims in the Odyssey on-line system as soon as possible. The EQA will the release the certificates in the system and these will then be issued by SFJ Awards. The centre is requested to ensure that future certificate claims are entered into Odyssey before the EQA activity takes place.