



**Higher National Qualifications**

**Qualification Verification Summary Report 2019**

# **Business Management**

**Verification group: 254**

## Introduction

The following units were selected for verification:

### Business Management

- ◆ F84T 34 Managing People and Organisations (SCQF level 7)
- ◆ DG3D 35 Business Awareness and Continuing Professional Development (SCQF level 8)
- ◆ H7V4 34 Preparing to Start a Business (SCQF level 7)
- ◆ H7V5 34 Preparing a Formal Business Plan (SCQF level 7)

All of the units selected are well established and none have had revisions this session. Managing People and Organisations had guidance relating to word counts amended in 2017. Qualification verification activity during the 2018–19 academic year was undertaken mainly through visits to centres based in the UK and for some international centres. Some international centres undertook remote qualification verification by submitting electronic files for the appropriate remote verification criteria. One international centre was visited for qualification verification.

## Category 2: Resources

### **Criterion 2.1: Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.**

This criterion is not applicable for HN in the UK. For the international centres, staff were qualified, having the relevant degree qualifications, often at postgraduate level, and relevant commercial experience. While staff were qualified with regard to subject content, some international centre staff did not understand SQA assessment requirements. The turnover of staff in one international centre had been high, leading to a loss of knowledge about the requirements of SQA awards. This last point highlights a significant risk in centres that rely on small numbers of staff who are often part-time.

### **Criterion 2.4: There must be evidence of initial and ongoing reviews of assessment environments; equipment; and reference, learning and assessment materials.**

UK centres had systems to ensure ongoing reviews take place often using formal operational planning cycles incorporating a systematic periodic review of resources, equipment and course materials. Records provided and discussions with staff during visits indicated that staff regularly add and update learning materials, commonly making them accessible by VLE. In almost all cases for units in VG 254, centres used the SQA ASP, although one centre had created and used a centre-devised assessment for DG3D 35 Business Awareness and Continuing Professional Development. Minutes of course team meetings and internal verification records provided further evidence that centres are reviewing assessment environments, etc. Pre-delivery internal verification records showed checks were made on assessments for each unit. One international centre did not evidence that they had reviewed the assessment materials.

## **Category 3: Candidate support**

### **Criterion 3.2: Candidates' development needs and prior achievements (where appropriate) must be matched against the requirements of the award.**

All centres held an induction prior to the course starting. The inductions were variable in length and format, but generally covered similar topics including course and centre information, and candidate responsibilities. The application and induction processes provided centres with the opportunity to gain background information on candidates and to assess their suitability for the award applied for. Most centres interviewed potential candidates who had applied, although a small number recruited through agents and used personal statements and application forms as the basis for making entrance decisions. Those interviewing sometimes held group interviews while others interviewed applicants individually.

All centres had a system of pastoral care usually with a student advisor/mentor dedicated to groups of candidates. Some centres timetabled regular guidance slots which varied in terms of being drop-in or mandatory. In general, the support available was very good with candidates being able to gain help outside class times by email or social media or by accessing staff face-to-face. Some centres gained feedback from candidates through course committees and formal feedback forms. A small number of centres use personal development plans sometimes in the form of a PDP HN unit to help with reflection and planning learning. Some centres allowed candidates to make self-referrals to specialist support services.

### **Criterion 3.3: Candidates must have scheduled contact with their assessor to review their progress and to revise their assessment plans accordingly.**

In each centre there were timetabled teaching slots for the units within verification group 254. Assessors could be contacted out of class times often by email or social media, and were sometimes available for additional face-to-face meetings. Centres often recorded progress at regular team meetings and had referral systems when a candidate was judged as being in danger of not achieving or were falling behind.

All candidates were provided with verbal and/or written feedback that varied in length and detail. Some of the guidance and feedback was excellent and would help candidates improve future performance. Feedback is increasingly being provided in electronic format, often through a VLE or authenticity checker such as Turnitin. One international centre reported difficulty with attendance and questioned the motivation of many candidates.

## **Category 4: Internal assessment and verification**

### **Criterion 4.2: Internal assessment and verification procedures must be implemented to ensure standardisation of assessment.**

Almost all centres provided an internal verification policy and completed internal verification (IV) records and in the main adopted the SQA three-stage approach. The extent of IV varied according to the experience of the assessor, etc. Some IV records contained narrative identifying points that had required some thought, or might need explanation or require actions. Records often contained explicit actions for future implementation along with timescales. Internal verification is being increasingly used to help develop staff and assist in making consistent and appropriate professional judgements as opposed to it simply being an end of process quality confirmation. As last year, this is important because the switch in emphasis helps staff to improve standardisation and ensure that sensible assessment decisions are being made. With many centres operating across a number of sites with different staff this is a very important development. One international centre did not provide internal verification records and one did, but failed to use the process in a correct manner.

The two business planning units continue to pose challenges for staff managing the assessments and it is easy to lose control. Some staff permit candidates greater freedom in completing the business planning units than others, and that can cause problems. This is an ongoing issue that is inherent within this type of unit and centres must be aware of the difficulties particularly when offering these units for the first time, or when using new staff.

### **Criterion 4.3: Assessment instruments and methods and their selection and use must be valid, reliable, practicable, equitable and fair.**

Centres in almost all cases used SQA-devised assessments and in a very small number of cases, a locally devised version based on the SQA ASP. The assessment instruments were passed through a pre-delivery check which was recorded in an IV record. The records were variable in detail with the better ones including narrative on making assessment decisions and standardisation discussions. As last year, there were no records this session to indicate that there were problems with the SQA assessments, and they were accepted as being valid, reliable, equitable and fair. There was one instance where the currency of the assessment for DG3D 35 was questioned. One international centre did not provide internal verification records and one that did failed to correctly check the assessments they used, which were found to be inadequate. One centre mistakenly allowed a group submission for an assessment that required completion individually.

Most centres maintain a 'master folder' system, often in electronic format, which contains the key course and unit documents and records. Centres had the up-to-date unit specification for each unit and as in years past it continues to be essential that staff continue to check each year as even minor changes can affect whether the correct assessment decisions are being made. Centres that identified candidates who had a justifiable reason could have assessment conditions adapted to meet their specific needs. All centres provided access to specialist support services and diagnostic tests when required.

**Criterion 4.4: Assessment evidence must be the candidate's own work, generated under SQA's required conditions.**

Almost all centres provided their malpractice/plagiarism policy and candidates had to sign an authenticity declaration on submitting 'open-book' assessments. Details of malpractice and plagiarism were normally contained in information provided during induction, often within course handbooks. The use of Turnitin or similar checkers is now commonplace for units often allowing candidates to undertake their own authenticity checks prior to making formal assessment submissions. The move towards requiring the use of formal referencing in candidate work has continued and the use of these systems is much improved over the past few years. Turnitin is increasingly being used to provide electronic feedback as well as being used as a mechanism to encourage candidates to submit work by the deadline set. The use of Turnitin to more effectively impose deadlines is an important development. Centres also make manual checks when marking and through the internal verification process. Unit and team meeting records showed discussion takes place regarding authenticity and referencing. One international centre was inconsistent in asking for candidates to authenticate their submissions.

As in years past there were a small number of instances where copying or poor referencing was identified and dealt with in accordance with the policy in place at the centre. All evidence reviewed was generated under the conditions set by SQA for units within VG 254.

**Criterion 4.6: Evidence of candidates' work must be accurately and consistently judged by assessors against SQA's requirements.**

All except new centres are familiar with the units and the assessments for the units within VG 254. When work was judged to fall short of the required standards, candidates were asked to remediate the appropriate sections and evidence was re-assessed. Where appropriate, full re-assessment was undertaken depending on the unit and requirements of the unit as set out in the unit specification. The better use of internal verification and better understanding of standardisation has led to a better identification and consistent application of the relevant standards. One international centre misjudged the required degree of originality for one assessment. Another incorrectly accepted work for an outcome on a group basis, and one did not understand the SQA requirements for assessing unit F84T 34.

The evidence for the two business planning units (H7V4 34 and H7V5 34) had some variation in quality and in one instance was not accepted at external verification.

Assessors provided feedback on the scripts or using checklists, and a continuing trend was to use Turnitin to mark, provide feedback and check authenticity. Feedback was often detailed and of real value for candidates. Records of meetings suggest there is a growing recognition of the importance of internal verification and standardisation events/activity in arriving at sound and consistent assessment decisions.

**Criterion 4.7: Candidate evidence must be retained in line with SQA requirements.**

Almost all centres retained the candidate evidence and assessment records in line with retention of candidate evidence requirements set by SQA. Centres generally made available

their retention and data storage policy and many retain candidate evidence for a longer period than the minimum period set by SQA. One centre was required to provide further details on their retention and data handling policy. There was often a variable retention period depending on other awards offered by the centre or whether appeals were taking place. All recognised the need for security during storage and for secure disposal at the appropriate time.

**Criterion 4.9: Feedback from qualification verifiers must be disseminated to staff and used to inform assessment practice.**

Almost all centres demonstrated they have a process in place to ensure dissemination of feedback from external verification activity. In many cases, staff concerned were provided with an electronic copy of reports while also having access through the centre's management information system. Often there were entries in internal verification records and team meeting minutes showing that discussions were taking place on the feedback along with actions being set when required. In each case, there was provision within the IV system to nominate actions with timescales resulting from a qualification verification event. The communication process varies from one centre to another and there is increasing adoption of software to provide a structured and secure system for communicating and acting on verification feedback. One centre misunderstood how to assess a unit, how to implement internal verification, had experienced a high staff turnover, and failed to demonstrate effective communication.

## **Areas of good practice report by qualification verifiers**

The following good practice was reported during session 2018–19:

- ◆ Holding plagiarism workshops as part of induction.
- ◆ Better use of the internal verification process to foster good practice and assist with standardisation, in addition to being used as a basic quality check.
- ◆ Continuing to provide detailed and clear feedback allowing candidates to improve performance.
- ◆ Using Turnitin to help better manage assessment submission deadlines.
- ◆ Very clearly detailing required remediation actions using adapted checklists.
- ◆ Continued encouragement to accurately use a formal recognised referencing system combined with excellent referencing guidance.
- ◆ Excellent online resources being provided by VLE.
- ◆ Using a personal development planning unit to support reflection, better identify candidate needs and planning learning.
- ◆ Using presentations for business proposals to develop presentation and selling skills.

## **Specific areas for development**

The following areas for development was reported during session 2018–19:

- ◆ To continue to ensure that appropriate checks are made on candidate progress during the delivery and assessment of the business planning units, giving a degree of freedom to take responsibility for the candidates' own learning has to be balanced with a structured and scheduled approach to delivery and assessment. Submission of parts of the business plan in chunks against a schedule is recommended to reduce the risk of poor quality rushed work being submitted.
- ◆ More emphasis on standardisation taking place between staff and staff based in different sites. Increased effort generally reduces the risk of inconsistent and inappropriate assessment decisions being made.
- ◆ Centres with lower staff numbers must ensure that there is an effective means of ensuring new staff are trained with regard to SQA requirements when any member of staff leaves.