



# **Strategy for Centre Assessment Standards Scrutiny (CASS)**

Publication date: October 2022, Version 3, April 2024 (Review date: April 2025)

Published by the Scottish Qualifications Authority

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## Change log

Description of change	Section
All relating to the update of this CASS Strategy Version 3 April 2024	
Glossary removed and all terms explained in the text of the document	
Document re-structured into two sections covering: allowing centres to internally assess qualifications, and assessing and managing risk.	
Aspects of centre approval of particular relevance to CASS strategy stated	1.1
Section on data management follow-ups through systems verification added	1.2
Table added on the three types of qualifications covered by the strategy and the associated QA approaches	1.3
Information on qualification verification sample sizes updated	1.3
Section on unannounced visits added	1.3
Paragraph on reporting trends in incorrect resulting to the Malpractice Team added	1.4
Section on candidate malpractice added	1.4
Section on CASS Review Group updated with purpose, membership, process and actions arising from review.	2.1
Section on high risk qualifications	2.2

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## **Introduction**

SQA has always had robust processes in place to approve centres to deliver our qualifications and to quality assure on an ongoing basis our centres' delivery of internally assessed qualifications, including Ofqual regulated qualifications.

The introduction of this Centre Assessment Standards Scrutiny (CASS) strategy in 2021 enabled us to build on those processes, and, in particular, to broaden the scope of data we use to identify qualification and centre risk, and document in more detail the processes we use to mitigate against the risks we identify.

Since then, we have continued to develop our processes. This updated version of the CASS strategy reflects these developments.

# 1 Allowing centres to internally assess qualifications

## 1.1 Centre approval – systems and qualifications

To offer SQA qualifications, organisation must go through our approval process to become an approved SQA centre.

All prospective SQA centres must agree to a due diligence check. This gives us a level of assurance about a potential centre's financial viability, and its business values. A centre's delivery history provides an indication of whether it is likely to be able to deliver SQA qualifications in line with our requirements.

There are two types of approval: **systems approval** and **qualifications approval**.

**Systems approval** confirms that the centre has the management and quality assurance policies and procedures required to support the delivery, assessment and internal verification of SQA qualifications. The systems approval process will be conducted by an SQA systems approver against set quality assurance criteria.

**Qualification approval** confirms that the centre has the staff, reference materials, learning materials, assessment materials, equipment and accommodation needed to deliver, assess and internally verify the qualifications listed on their application against set quality assurance criteria and qualification-specific requirements. The qualification approval process will be conducted by an SQA qualifications approver, who will be a subject expert.

### First approval

To offer qualifications for the first time, organisations must apply for systems approval and qualification approval (for at least one qualification) at the same time and be successful in both types of approval to become an approved centre. We refer to this dual process as centre approval.

Thereafter, approved centres apply only for qualification approval to deliver further qualifications.

You can find full details of the approval process and the criteria centres are approved against in: [Systems and Qualification Approval Guide.pdf](#)

Of particular note are:

- ◆ The approval process checks on policies and procedures for recruitment and induction of suitably qualified assessors and internal verifiers and checks on the qualifications of named assessors and internal verifiers for the qualification subject to approval.

- ◆ There is also a check on procedures for reporting any conflicts of interest for assessors or internal verifiers in carrying out assessments, and how the centre will address any conflicts.
- ◆ The criteria require documented internal verification procedures with three stages: before assessment, during assessment and post-assessment review and assurance, and how these procedures will be implemented for the specific qualification. Evidence will also be required at approval of the first stage of internal verification being carried out in the centre, to ensure that assessments are valid, reliable, practicable, equitable and fair and that all assessors and verifiers are familiar with and understand national standards and the assessment instruments and methods prior to assessment taking place.
- ◆ There are checks on the physical and technical resources, accommodation and equipment required for the delivery of the qualification.

### **Post-approval actions**

**Indirect Claims Status:** When a centre has been newly approved to deliver internally assessed qualifications regulated by Ofqual, or an existing centre has been approved for new Ofqual-regulated qualifications, SQA will implement indirect claims status (ICS) for these new qualifications and inform the centre of this. The newly-approved centre cannot claim certification until it has successfully completed first qualification verification.

**Assessor and internal verifier information:** Centres are told in our initial contact with them that they must notify SQA about any changes to their SQA co-ordinator, and assessors and internal verifiers for internally assessed qualifications regulated by Ofqual on SQA Connect.

**New for old approval:** At times SQA will develop replacement or updated qualifications that are not significantly different from their predecessor qualifications. SQA will issue bulk approvals to centres who are approved for the predecessor qualifications so centres can offer these replacement qualifications without having to apply for approval.

Centres could be de-approved if there are serious concerns about their performance in delivering the qualifications or potential to do so. This may be identified for internally assessed qualifications regulated by Ofqual by the CASS Review Group (see page 13).

New centres, or centres approved to deliver a qualification for the first time, are entitled to a post-approval development visit.



## 1.2 Systems verification

Systems verification is the process by which SQA verifies that centres are managing their systems and resources to deliver our qualifications effectively.

The Senior Operations Manager: Quality Enhancement manages a team of Quality Enhancement Managers (QEMs).

The QEMs carry out systems approvals and verification, plus a wider range of responsibilities:

- ◆ development and implementation of centre guidance
- ◆ design and delivery of CPD events and webinars for centres
- ◆ publication of 'key messages' based on an annual analysis of centre compliance with systems quality assurance criteria
- ◆ standardisation relating to SQA systems verification requirements
- ◆ involvement in centre malpractice investigations

There are also a small number of appointees who also carry out systems verification and are mentored by allocated QEMs.

The QEMs and appointees must declare any conflict of interest they have with centres selected for systems verification and these centres will then be allocated to another member of the team.

Systems verification is carried out against criteria, with Red, Amber or Green (RAG) ratings for every criterion, and an overall outcome calculated using an algorithm – High/Broad/Reasonable/Minimal/No Confidence).

You can find full details of the systems verification process and criteria on our website: [Systems verification - SQA](#).

The planning of selections for systems verification is done by our Verification Planning team.

The Systems Verification Access Database Guide provides an overview of data gathered via the monitoring process and informs the planning and reporting on systems verification activities. Each centre will have a projected date for next systems verification activity based on date of approval or previous systems verification activity (outcome and date).

The projected dates for systems verification run on the following basis:

- ◆ First SV since Centre Approval – within 12 months of date of approval, if there are candidate entries.
- ◆ Where a Minimal / No Confidence outcome is reported at previous SV, within 12 months of last SV.
- ◆ Where a Reasonable Confidence outcome is reported at previous SV, within 24 to 30 months of last SV.

- ◆ Where a High or Broad Confidence outcome reported at previous SV, within 36 months of last SV.

### **Data management follow-ups**

Section 6 of the systems verification criteria focuses on data management – registration, entry and resulting of candidates for qualifications, and retention of assessment evidence and records.

SQA's Centre Support team monitors centres delivering Ofqual regulated qualifications for specific data management issues:

- ◆ certification after completion dates
- ◆ rapid certification
- ◆ not reverting to candidate home address after certification or entering alternative candidate contact details (phone number, email address)

Where a centre that is selected for systems verification is identified as repeatedly demonstrating these practices, this will be reported to the QEM to raise with the centre during systems verification in the context of the data management criteria, seek an explanation from the centre, and set required actions, if appropriate,

### **Sanctions**

Where criteria have been rated as Red or Amber, Required Actions will be set, with evidence to be submitted by a set date. SQA track and report centre performance in meeting required action dates.

Where there are serious concerns arising from the SV, or the centre fails to submit evidence against the Required Action, sanctions may be imposed, including holds on submitting entries and results and, ultimately, de-approval as a centre.

## **1.3 Qualification verification**

Qualification verification is the process we use to check that centres offering our qualifications maintain national standards in assessment and continue to have the resources in place to support qualification delivery.

Full details of our qualification verification processes and criteria can be found in [Qualification verification - SQA](#) on our website.

Our strategy encompasses three groupings of internally assessed qualifications regulated by Ofqual, with our approach to qualification verification being adapted to the approach to assessment used in each group.

<b>Qualification grouping and assessment method</b>	<b>Approach to qualification verification</b>	<b>Other factors/features</b>
<p><b>Occupational competence-based qualifications</b></p> <p>Assessment: Continuous assessment of candidates in workplace setting, using methods such as observation, product evaluation, questioning and witness testimony.</p>	<p>Qualification verification (virtual or visiting)</p> <p>Sampling of candidates' assessed work</p>	
<p><b>Professional vocational qualifications</b></p> <p>Assessment: More structured form of delivery than competence-based qualifications. Supervised assessments in controlled assessment conditions.</p>	<p>Qualification verification (virtual or visiting)</p> <p>Sampling of candidates' assessed work</p> <p>Prior verification of centre-devised assessments</p>	<p>SQA Assessment Support Packs (ASPs) or centres can use centre-devised assessments, prior verified by SQA.</p>
<p><b>Invigilated professional qualifications</b></p> <p>Assessment: Tests of knowledge, over a relatively short period of time, always involving some form of invigilation.</p>	<p>Unannounced visits, to address high risk of mode of assessment — to check on conditions of assessment for invigilated tests on SQA's e-assessment platform, <a href="#">SOLAR</a>.</p> <p>Centres must notify SQA of dates on which assessments will take place to allow planning of unannounced visits.</p>	<p>In the case of the Taxi and Private Hire qualifications in this category, one unit had a practical assessment, which is quality assured through visiting verification and sampling of candidate assessments.</p>

### **Indirect Claims Status**

In all three categories of qualification, Indirect Claim Status is applied, so that a newly-approved centre cannot claim certification until it has successfully completed first qualification verification.

Indirect Claim Status can also be re-applied if a centre is non-compliant in future verification activities.

### **Planning of qualifications verification**

Scheduling of qualifications verification activities is driven by a number of factors, including:

- ◆ date of last verification in the centre
- ◆ outcome of last verification in the centre (High/Broad/Reasonable/Minimal/No Confidence).
- ◆ other centre risk factors (see section 2.1 below)
- ◆ qualification risk factors eg:
  - new qualification
  - licence to practise qualification
  - qualifications that have been updated eg change of professional standards
  - updated mode of delivery
  - updated assessment method
  - qualifications with higher instances of malpractice
  - qualifications recognised by regulators/standards setting bodies as requiring enhanced quality assurance arrangements

All regulated qualifications are subject to qualification verification every 12 months at a minimum. Verification of Ofqual qualifications is carried out against Ofqual QCA codes. Qualification verification activity can be scheduled more frequently if risk factors indicate that it is necessary. This is done for qualification verification of Ofqual regulated qualifications by SQA's Quality Assurance Logistics Team, and projected dates for verification are recorded in a database.

### **Qualification verification structure**

The senior operations manager manages a team of Quality Assurance Logistics Officers (QALOs), who centrally manage verification planning/sampling and external verifier (EV) deployment. This team initiates verification events and monitors their progress to a conclusion.

The lead verifier leads on and develops good practice and consistency of approach to support the quality assurance of our qualifications. This is achieved with the support of a team of depute lead verifiers. The lead verifier reports to and works closely with the senior operations manager.

The senior operations manager ensures comprehensive training is carried out for all new EVs. This comprises a mix of online development and face-to-face shadowing training. EVs are then given a specific induction by the senior external verifier responsible for their verification group.

[Senior external verifiers](#) ensure that all approval and verification activities undertaken by their team of EVs are carried out in line with SQA policies and procedures. They monitor the work of each EV in their team against [key performance measures](#), which include carrying out qualification verification in line with the conditions and timescales set by SQA; writing reports to SQA's required standard; and maintaining their occupational competence and continuing professional development (CPD).

One of their key responsibilities is ensuring EVs apply a consistent approach to verifying the qualifications within their remit. This is supported by the organisation of standardisation events.

## **Understanding qualification requirements and standardisation**

EVs are allocated a verification group. All verifiers included in a verification group verify the same or associated subjects/occupational competences. As experts in their subject areas, they are contractually required to understand the structure and content of the qualifications and units they have been appointed to verify.

This level of understanding is important in informing the sample they select, and ensuring it encompasses a wide enough range of candidate evidence to form a representative sample.

Verifiers within a verification group standardise with each other throughout the year. Standardisation events — which will be twice-yearly for Ofqual qualifications from April 2024 — are chaired and led by the senior external verifier, and cover (for example) new and problematic qualifications or units, and trends in centre evidence.

The results of standardisation events are recorded in standardisation logs, and maintained for future reference by the verifier group (to support consistency of approach). SQA at times refers to standardisation logs to answer internal and external queries.

Senior external verifiers review the findings from standardisation events, and from a sample of completed verification reports, on an annual basis. They compile an [evidenced-based report](#) (example) which is published on relevant SQA websites. Centres and SQA use the report for quality improvement purposes.

## **Sampling of assessments**

The specific sampling approach for each centre is documented for qualification verification in the CASS database by a Quality Assurance Logistics Officer and then made available to the External Verifier via the Sampling Control Document (SCD).

## **Identifying the scope of unit samples**

A systematic approach to sampling ensures all components (units) of an Ofqual qualification is verified within a five-year time frame.

The period of time since the previous verification event is considered, highlighting any new and certificated units from group awards (GAs) as well as current open entries. Previously verified units are factored into calculations to inform the selection of an appropriate unit sample.

**Certificated units:** The verification of certificated units from Ofqual qualifications offers EVs the chance to verify complete candidate evidence/achievement and final assessment and IV decisions.

**Open entries:** The verification of open unit entries allows the verification of candidate evidence at various stages of progress as well as the ongoing verification of assessment decisions.

The sample will always include new assessors and internal verifiers and those not yet qualified.

The choice of units to be sampled considers the breadth and number of units each assessor is profiled to assess.

The external verifier uses the information provided by the QALO to plan their verification activity with the centre. From information provided by the centre, they will also consider in picking their sample:

- ◆ coverage of all assessment sites
- ◆ candidate cohorts and modes of study (eg full-time, part-time, sessional, roll-on/roll-off)
- ◆ any changes in assessors or internal verifiers reported in the planning process by the centre
- ◆ opportunities to observe assessment

During an event, if the EV has concerns about the evidence they have sampled not meeting the national standard, they can request to see additional units or evidence to help them corroborate their findings.

### **Sample size**

Sample sizes and their composition are determined by external verifiers, in line with guidance from QA Logistics, including set sample sizes, as follows:

Number of candidates	Number of candidates to be included in sample
Up to 50	6
50 – 100	7
100 – 200	8
200 – 300	9
300 – 400	10
400 – 500	11
500 plus	12

The samples are recorded in QV reports. External verifiers have the opportunity to ask for an additional spontaneous sample if they feel it is required.

### **Outcomes of qualification verification**

Qualification verification provides confirmation to centres and SQA that assessors are applying the qualification requirements for assessing candidates' performance accurately and consistently in line with national standards.

Centres are informed of the verification decision at the end of a verification event. The subsequent verifier report confirms:

- ◆ required actions and/or sanctions (where applicable)
- ◆ any recommendations to enhance existing arrangements
- ◆ areas of good practice

A red, amber, or green (RAG) rating is applied to each quality assurance criterion in light of the verification decisions that have been reviewed. Amber and red ratings mean that required remedial actions are agreed with the centre, and, where appropriate, a sanction is also applied.

Quality assurance criteria covering the following are high impact rated:

- ◆ selection and use of assessment methods
- ◆ authenticity of candidate evidence
- ◆ accurate assessment of evidence

The RAG rating then triggers an algorithmic calculation of the outcome rating for each of five categories that the quality assurance criteria fall under. The five outcome ratings are:

- ◆ High Confidence
- ◆ Broad Confidence
- ◆ Reasonable Confidence
- ◆ Minimal Confidence
- ◆ No Confidence

Where the outcome rating confirms higher levels of risk, required actions are applied with associated completion timescales. A short timescale is applied to the required actions, minimising quality assurance risks. The EV reviews evidence submitted by the centre and can either sign off on the actions or escalate the issue.

Any required action will apply to the whole cohort of candidates, not just to those in the sample — for example, all candidates who may have been incorrectly assessed must be re-assessed.

Centres that have been non-compliant will be re-selected for verification when new entries are submitted.

Any trends in non-compliance across a qualification or subject area will be reported to the relevant Qualifications Development team.

### **Unannounced visits**

For qualifications with invigilated online assessments, we have introduced enhanced quality assurance arrangements.

Unannounced visits are carried out by external verifiers to check that the required conditions of assessment are being met, including authentication of candidate identity prior to assessment.

Full details of requirements can be found in the [Qualification Quality Assurance Criteria](#), Appendix A - ***Enhanced guidance to centres on managing assessment conditions*** and on the QA pages of the SQA website with links to the form for centres to notify SQA of planned assessment dates and the subject-specific guidance.

Centres delivering assessments for these qualifications must advise SQA a minimum of five working days prior to the assessment taking place by completing a form on the website [Enhanced quality assurance arrangements – SQA](#)

It is essential that the centre includes the specific time that the assessment is taking place. No candidate information is required when completing the form.

Assessments can only take place if SQA has been notified. Failure to notify us could result in sanctions being imposed on the centre.

## **Sanctions**

Where there are concerns about assessment standards, the EV, through established processes, can advise SQA to apply two sanctions:

- ◆ an immediate hold on the certification of the qualification or units
- ◆ a period of indirect claims status

## **Revocation of certification**

If this relates to qualifications or units that have already been certificated, and the quality assurance criteria concerning assessment have been given a 'red' status, the EV will ask SQA to revoke the relevant candidate certificates.

The Data Management Team will then recall certificates from centres and candidates.

## **1.4 Malpractice**

### **Centre malpractice**

Malpractice reported to SQA by centres, verifiers or others is dealt with by SQA's Malpractice Team. Once suspected malpractice has been investigated and a conclusion is reached, this information is shared with the Verification Planning Team, who then factor this information into their selection reports, making the relevant information available to verification teams.

SQA's Malpractice webpage [Reporting malpractice concerns - SQA](#) covers the definition and examples of candidate and centre malpractice, as well as information and contact details should centres need to report suspected malpractice to SQA.



We ask our centres to take steps to prevent and manage any occurrences of malpractice or maladministration. These are set out in our qualification and systems verification guidance documents, which all SQA staff, verifiers and centres have access to.

Centres are required to develop suitable policies and procedures to reduce the risks associated with malpractice and maladministration. To aid policy and procedure development, we provide centres with comprehensive guidance and templates. The content and implementation of the policies and procedures are checked through systems verification.

Centres must ensure that work considered for assessment and verification is the named candidate's own work. Evidence generated by candidates that is not directly authenticated (for example through direct assessor observation) must be subject to authenticity checks. Some centres use plagiarism detection software. (This is checked through Quality Criterion 4.4 in qualification verification.)

The Centre Support team monitors requests from centres for changes to candidate results which have been incorrectly submitted by the centre. These will normally be dealt with prior to certification through established processes, but any trends arising from individual centres are reported to the Malpractice Team to investigate for any underlying systemic maladministration or malpractice.

### **Candidate malpractice**

Candidate malpractice cases in vocational qualifications reported by centres, external verifiers or others, are dealt with by the Verification Planning team. The Quality Enhancement Managers who carry out systems verification may be involved in SQA-led investigations, if it is not appropriate for the centre to carry out its own investigation. Malpractice panels consider the investigation reports and decide on the outcome and any action to be taken.

### **Certification revocation**

If it is established through centre and/or candidate malpractice investigations and panel considerations that candidates have been incorrectly certificated, the Centre Support team will be asked to revoke the certificates issued during the period of time affected by the malpractice.

## 2 Assessing and managing risk

As described in section 1, a range of risk factors are used to inform the planning of both qualifications verification and systems verification.

In addition, data on centre risk factors is collated and any issues of concern regarding individual centres are reported to the monthly meetings of the CASS Review Group.

### 2.1 CASS Review Group

#### Purpose

The CASS Ofqual Centres Risk Assessment Review Group meets monthly to review the information gathered about centres delivering Ofqual regulated qualifications and agree and record quality assurance approaches and other mitigating control measures to address risks identified through the scrutiny of this information.

The Review Group also monitors the effectiveness of these measures and agree any further action required.

#### Membership

Head of Operations (HN&VQ) (Chair)  
Senior Operations Manager: Quality Enhancement  
Senior Operations Manager: Quality Assurance Planning  
Senior Operations Manager: Quality Assurance Logistics  
Senior Operations Manager: Centre Support  
National Manager: Business Development and Customer Support (Rest of UK)  
Representative of Qualifications Development/Qualifications Portfolio Management  
Representative of Regulatory Compliance Team

#### Communication and reporting

The CASS Review Group reports to the Senior Compliance Team.

#### Risk factors

The centre risk factors collated for the CASS Review Group are:

- ◆ qualification verification outcomes
- ◆ systems verification outcomes
- ◆ malpractice
- ◆ data management (candidate contact details, certification after completion date, rapid certification, trends of inaccurate resulting)
- ◆ spikes in entry numbers
- ◆ approvals for new qualification types, qualification sectors
- ◆ recent changes – to the centre, SQA co-ordinator
- ◆ bad debt
- ◆ other soft intelligence

These are analysed in advance of the meetings and any concerns about a centre flagged for discussion.

The centre risks are considered in the context of the risk level of the qualifications that the centres deliver.

Actions that can be taken as a result of the identification of centre risk include:

- ◆ Enhanced quality assurance (qualifications or systems verification).
- ◆ Bringing forward qualifications or systems verification dates.
- ◆ Referral to Business Development to further investigate the situation in a centre.
- ◆ Additional support provided to the centre (eg for a new SQA co-ordinator).
- ◆ Application of sanctions eg holds on entries and results, Indirect Claims Status, de-approval to offer particular qualifications, de-approval as an SQA centre – this may be as a result of review of a range of risks, rather than sanctions placed following individual verification activities.
- ◆ Referral to centre malpractice.

The CASS Review Group will monitor the ongoing situation with centres identified as high risk, note resolution of issues, and make decisions on standing down or escalating sanctions.

## **2.2 High risk qualifications**

Professional licence to practise qualifications that have on-demand assessment and require invigilation have specific quality assurance arrangements (unannounced visits) to address the inherent risks of this type of assessment. All other qualifications are monitored for high levels of malpractice and non-compliances from quality assurance, and verification plans may be adjusted as a result of this.