**Internal Quality Assurance (IQA) Report Template**

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Dear Head of Centre/ Quality Assurance Manager.

Following an analysis of External Quality Assurance (EQA) reports, feedback from EQA’s and feedback from some centre contacts, we have decided to create an Internal Quality Assurance Report template to support your internal quality assurance systems. We recommend that this template is completed for each learner sampled for your IQA.

The expected standard for all centres is that each IQA should have a sampling plan that includes formative and summative sampling of portfolios, interviewing learners, observation of tutors and assessors and the centre should have a plan for Standardisation meetings for the qualification.

Completed forms and feedback should be shared with the tutor or assessor so they can comment on any feedback and the IQA can follow up on any areas for development and examples of good practice are shared across the relevant delivery team(s).

We recommend using this template alongside your sampling plans and that they are available to your Future Quals External Quality Assurer/Moderator as part of the EQA process

Please feel free to reformat or add any branding to this template if you so wish. As this is for your IQA any queries that your IQA’s may have should be directed to you as Head of Centre/Quality Assurance Manager.

This section of the template should be deleted before use.

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**Section A**

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| **IQA details** |
| **Name:**  |  | **Name of counter signatory if applicable:** |  |

**Section B**

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| **Qualification and sampling details** |
| **Centre Name** |  | **Centre Number:** |  |
| **Qualification Title:** |  | **Qualification Code:** |  |
| **Components/LOs sampled** |  |
| **Assessment methods sampled** | [ ]  Observation  | [ ]  Product  | [ ]  Questioning  | [ ]  Professional discussion  |
| [ ]  Learner statement  | [ ]  RPL  | [ ]  Project/Assignment  | [ ]  Simulation  |
| [ ]  Witness testimony  | [ ]  Case study  | [ ]  Other <please list>  |

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| **Assessor details** |
| **Name:** |  |
| **Qualified assessor:** | **Yes/\*No** | **CPD /Certificates checked** | **Yes/No** |
| **\*If not qualified, provide name of a qualified assessor who is countersigning and making assessment decisions** |  |

**Section C**

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| **Learners Sampled** |
| **Name** | **Learner Number** | **Accurately Assessed** | **Any plagiarism concerns** |
|  |  | **Yes/No** | **Yes/No** |
|  |  | **Yes/No** | **Yes/No** |
| **<additional lines can be added>** |  | **Yes/No** | **Yes/No** |

**Section D**

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| **IQA Feedback****To include areas for development and best practice (not expected practice), referring to learner and qualification components as appropriate** |
| **Assessor assessment planning:**  | **Consider: Are the activities interesting and engaging for learners, Is the level of activity correct, (need to think of other examples here.** |
| **Assessor assessment decisions:** | **Consider the accuracy and consistency of assessment decisions,**  |
| **Assessor feedback to learners:** | **Consider: Are any actions SMART, suitability of language, have they identified opportunities to further improve the learners** |

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| **Assessor comments on IQA feedback above** |
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**--<If more than one assessor or qualification is sampled please add the relevant boxes from Sections B and C and all of section D >--**

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| **SMART actions**  | **By whom** | **By when** | **Completion****date and IQA signature** |
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| **Signatures** |
| **IQA (to confirm feedback and actions agreed with the assessor):** |  | **Date:** |  |
| **Assessor (to confirm feedback and actions agreed):** |  | **Date:** |  |