

1.3.10 Internal Verification

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Policy area:	1.3 Assessment of Learners
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Council:	
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Review Date:	

Purpose

The purpose of this procedure is to detail how KWETB ensures that all learners have experienced fair and consistent assessment and that all assessment activities have been carried out correctly.

Scope

This procedure applies to all FET Provision and FET Provision-Second Providers. There is an integrated single policy, with integrated procedures for FET Provision and FET Provision-Second Providers denoted in sections;

- **Roles and Responsibilities**
- Preparing for Internal Verification
- Sampling Strategy and Verification of Results
- Documenting and Evidencing the Internal Verification Report
- Verifying Assessment Procedures
- Verifying and Confirming Assessment Results
- Irregularities and Action Required
- Concluding the Internal Verification



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Roles and Responsibilities

The Internal Verifier

- Roles
 - For FET provision, the number of Internal Verifiers is identified based on the number of awards being submitted for certification. For FET Provision-Second Provider, internal verifiers are required to check all results within the programme.
 - Internal Verifiers should not have taught or assessed the award being verified in the relevant cycle.
 - Co-ordinators can participate in Internal Verification.
 - It is recommended that a number of individuals in larger centres are involved in conducting Internal Verification.
 - o Co-ordinators will be requested to complete a list of Internal Verifiers.
 - Co-ordinators must upload completed Internal Verification Reports to the OneDrive folder shared by QA office. This must be according to the deadline set out for the specific certification period.
- Responsibilities of Internal Verifiers
 - Systematically check that assessment procedures have been followed.
 - Check that all assessment procedures have been applied.
 - Monitor assessment results using the sampling strategy agreed.
 - Produce an internal verification report.

<u>The task</u>

- Systematic check to verify assessment results before submission for certification. It is at the discretion of the centre as to when the IV takes place.
 - Where learners are entered for certification, all portfolios containing assessment evidence for all associated minor awards are available.
 - Learning has been assessed using the techniques, instruments and criteria indicated in the validated programme leading to the award.
 - Evidence is presented as per the techniques specified in the Award Specification and using appropriate assessment instruments.
 - Assessment evidence is signed by learners indicating that it is their own work.
 - Procedures in relation to assessment deadlines, compassionate consideration, reasonable accommodations and assessment malpractice have been followed.
 - Assessment results are available and recorded for each learner.
 - Marks are totalled and percentage marks are calculated correctly and are transferred from learner evidence to marking sheets/provisional results sheets accurately.
 - The percentage marks and grades awarded are consistent with QQI grading bands and other relevant awarding bodies criteria.

• The internal verifier initials and dates the provisional results sheet and portfolios where they have been internally verified, in the bottom right hand corner of each document.

Procedure - 1.3.10 Internal Verification

Pre	eparing for Internal Verification:
1	For FET Provision, the Co-ordinator should ensure that each online submission through OneDrive or ePortfolio includes the Authentication Report (QBS Result Sheet) by Minor Award Result Sheet(s).
	For FET Provision, the Co-ordinator should sign the QBS Result Sheet to confirm that all details are correct.
	For FET Provision-Second Providers, the Programme Manager should submit the F12 Course Summary Assessment Sheet and Results Approval Form to the Training Standard Office.
2	The Programme Co-ordinator should ensure the Programme Descriptor and Component Specification are uploaded/submitted and made available to the Internal Verifier.
3	For FET Provision, the Co-ordinator should ensure that all assessment instruments and related documentation are uploaded/submitted and made available to the Internal Verifier. These include assessment brief(s), examination(s), marking scheme(s), model answers, assessment marking scheme, assessment marking sheets.
	For FET Provision-Second Providers, the Programme Manager should ensure that the relevant AIS and learner instructions is also be submitted and made available to the Internal Verifier.
4	For FET Provision, the Co-ordinator should ensure that the Assessment Plan and if relevant, the QQI Exemption Claim form are uploaded/submitted and made available to the Internal Verifier.
	For FET Provision-Second Providers, the Programme Manager should ensure that Assessment records i.e. notification of Assessment (F11), seating plans, attendance records are submitted and made available to the Internal Verifier.
5	The Programme Co-ordinator should ensure that the learner evidence is uploaded/submitted and made available for each learner presenting.
6	The Programme Co-ordinator should ensure that feedback to Learner(s) is uploaded/submitted and made available to the Internal Verifier.
The	e Programme Co-ordinator should ensure that:

Dates are assigned when Internal Verification will occur, taking into consideration the deadline for submission of Internal Verification reports as set out in KWETB Certification Schedule which is generated by the QA/TSO office.

Internal Verifiers are advised of their role – major/minor award(s) to the be internally verified and the sampling strategy to be applied.

For FET Provision-Second Providers, Contracted Training and Community Training provide their own Internal Verification, which is 100% sampled.

All documentation/IT access for the Internal Verification process is available for the Internal Verifier.

Dates are agreed for completion of Internal Verification.

For FET Provision-Second Providers, this is set out in F01 form.

Internal Verifiers should be issued with correct version of KWETB Internal Verification Report template.

All staff with a role in Internal Verification may avail of training that is provided by the QA team.

Sal	mpling Strategy and Verification of Assessment Results
1	For FET Provision-Second Providers, the TSO should select the assessment to be verified by carrying out FO1 Internal Verification on the Conduct of Assessment. For FET provision, the Co-ordinator should apply KWETB's Internal Verification sampling strategy to determine the correct sample size. The 'number sampled; column in the Internal Verification report should be completed. When sample is applied, the learners sampled should be identified in the sampling strategy section by using learner initials and grade achieved. (see Appendix 1 for FET Provision Sample
2	 Strategy to be applied). The sampling strategy should include: All fields of learning All class groups All major and minor awards All new Learning Practitioners All Learning Practitioners delivering a programme new to them Any awards where issues arose in the previous certification period

Do	ocumenting and Evidencing the Internal Verification Report		
1	For FET provision, the Co-ordinator or nominated person responsible should		
	complete Part 2 - Monitoring Assessment Procedures (Reasonable Accommodations,		
	Compassionate Considerations, Assessment Malpractice, in advance of the Internal		
	Verification.		
	The Internal Verifier should complete Part 1 and Part 3 of the IV Report.		
2	The Internal Verifier should complete all sections of the Internal Verification report.		
	A tick should be entered under yes/no in the verification items. This should include		
	the accessibility to online videos/skills demonstrations/YouTube etc. The Internal		
	Verifier should verify that the assessment evidence matches the requirements set out		
	in the award specification, and validated programme.		
	The Internal Verifier should identify any errors or omissions, these should be		
	documented within the 'Internal Verification Action Points arising. These should be		
	documented in a clear and factual manner, identifying relevant component code and		
	title. This report will be used to assist with any follow-up actions required and used as		
	a platform for informing External Authenticator of any issues arising.		
	a plation for informing External Authenticator of any issues ansing.		
	For FET Provision-Second Providers, the Contracted and Community Providers should		
	carry out Internal Verification and upon completion they should submit the IV report		
	to the TSO as part of the overall Assessment Pack.		
	to the 150 as part of the overall Assessment Pack.		
3	The Internal Verifier should ensure that all required documentation is signed and		
5	dated by Learning Practitioner and learner.		
4	Once any correctional action has taken place, the Internal Verifier should print and		
-	sign and date the Internal Verification Report.		
	The Co-ordinator should print and sign and date the Internal Verification Report.		
	For FET Provision-Second Providers, the Contracted and Community Providers should		
	submit the IV report to TSO as part of submission pack.		

Ve	rifying Assessment Procedures
1	For FET provision the Internal Verifier should ensure that the IV report verifies:
	 All assessment procedures have been adhered to.
	Learning has been assessed using the techniques, instruments and criteria
	indicated in the validated programme.
	 Assessment results are documented and recorded accurately.
	For FET Provision-Second Providers, the Internal Verifier should ensure that the IV report verifies:

•	All assessment procedures have been adhered to (resources, location,
	security).
•	IV for the Assessment event (instructions, if approved – learner supports were
	in place.
•	IV during Assessment (supervision, instructions, breach of assessment noted).
•	IV of Assessment documentation / records (anomalies identified, storage of
	records, previous continuous improvements / actions implemented.

Ve	rifying and Confirming Assessment Results
1	The Internal Verifier should ensure that all folders are present and correspond with the Authentication Report (QBS) by Learner Group by Minor Award Results Sheet.
	For FET Provision-Second Providers, the Internal Verifier should ensure that all folders are present and correspond to the F12 Course Summary Assessment Sheet and Results Approval Form.
2	Levels 1,2,3 are graded as successful. There is no adding up of marks.
	For Levels 4,5,6 the Internal Verifier should add up marks that the learner has achieved and confirm that marks are totalled, and percentage marks are calculated correctly and are transferred from learner evidence to marking sheets/provisional results sheets accurately. The Internal Verifier should confirm that all Learner Summary Sheets correspond with Authentication Report (QBS).
	For FET Provision-Second Providers, the Internal Verifier should confirm that all Learner Summary Sheets correspond with F12 Course Summary Assessment Sheet.
3	The Internal Verifier should ensure that borderline grades are checked thoroughly, and if a grade change is required, the folder should be returned to the Learning Practitioner for correctional action and should be reviewed and correctional action should be documented in the Internal Verification Report.

Irregularities and Action Required

For FET provision, the Co-ordinator should facilitate the Internal Verifier in dealing with any irregularities / omissions identified.
 For FET Provision-Second Providers, the Contracted and Community providers should correct irregularities/omissions prior to submission; however, Contracted and Community providers should keep the TSO informed throughout the process.

2	The Internal Verifier should be aware of the procedures in place to notify appropriate staff (Co-ordinator or Learning Practitioner) to carry out corrective action and to ensure it is implemented before signing off on the Internal Verification report.
3	The Internal Verifier should be aware of the procedures in place to notify appropriate staff (Co-ordinator or Learning Practitioner) to carry out corrective action and to ensure it is implemented before signing off on the Internal Verification report.
4	The Co-ordinator or nominated responsible person should ensure that the Learning Practitioner is aware of any errors or omissions well in advance of the External Authentication process in order to carry out corrective action in a timely manner.
5	The Internal Verifier should ensure that learner assessment feedback, both summative and formative is available for each learner.
6	 Where the Internal Verifier detects transcription errors from the Summary Results sheet to the QBS/F12 then the Internal Verifier should consult with the Learning Practitioner to confirm and rectify the result as soon as possible. The internal verifier should identify totalling errors. A totalling error occurs where: A mark has been totalled incorrectly on learner evidence The total mark awarded on an Assessment Sheet is incorrect. For FET provision, Learning Practitioner can correct this in eportfolio platform using different colour pen to identify. This should be recorded on Internal Verification corrective action.
7	Where signatures are missing, the Internal Verifier should contact the Learning Practitioner to amend. This should be noted on the Internal Verification report.
8	The Internal Verifier should record all corrective action on the Internal Verification report.
9	The Internal Verifier should ensure that all corrective action takes place before Internal Verification report is presented for External Authentication.

Int	Internal Verification Sample Review Process	
	This process is carried out in FET Provision. The Sample Review Process is carried out by the QA person responsible.	
	The sample Review Process is carried out by the QA person responsible.	
1	For each certification period, only centres that are submitting for online EA will be included in the sampling process.	
2	The designated person with responsibility for QA authentication should select two centres on a sampling basis from each of the six certification periods.	

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3	The designated person with responsibility for QA authentication should notify the Co- ordinator in advance of review.
4	The Co-ordinator should upload all IV and EA documentation as per KWETB Certification Schedule.
5	The IV review should be carried out by the designated person with responsibility for QA authentication.
6	 The designated person with responsibility for QA authentication should sample the following: - One minor award from a major award One minor award from a major award will be sampled across two centres submitting in a certification period. All sections of the IV report are completed. All new Learning Practitioner have been included in the centres sampling. All new programmes have been included in the centres sampling. If issues identified in previous certification period, this component is included in the centres sampling. Checking and monitoring all aspects of assessment practices which include: - Correct KWETB and QQI logos are used where appropriate (the QQI logo should not appear on briefs, exams etc.,) Appropriate assessment techniques and related documentation was used by the Learning Practitioner and were in line with requirements for the minor award specification. Dates information was provided to learners in relation to learner supports Learner marks are totalled, and percentage marks calculated correctly. Learner marks are transferred correctly from learner evidence to learner marking sheet to QBS result sheet /RCCRS A result is recorded for all learners listed on the QBS Result Sheet. Assessment evidence is available for all learners listed on the QBS Result Sheet. The recording on the IV report if there were irregularities identified, including notifying Learning Practitioners and taking corrective action. All IV reports are signed and dated by relevant person(s).
7	<u>Feedback to centres</u> The designated person with responsibility for QA authentication should ensure that each centre participating in the IV sample review receives feedback. The designated person with responsibility for QA authentication should file the reports and recommendations which may lead to future development of training. Where appropriate, the QA person responsible should give a summary of the IV sample review quarterly to the QA subgroup.

Со	oncluding the Internal Verification	
1	For FET provision, The Co-ordinator should ensure that the signed and dated Internal Verification report is uploaded to shared folder in OneDrive.	
	For FET Provision-Second Providers, the Contracted and Community Providers should ensure that the signed and dated Internal Verification report is submitted as part of the training pack submitted to the Training Standards Office.	

Link to other Policies/Procedures

2.2.4	Academic Integrity and Assessment
2.2.5	Reasonable Accommodation
2.2.6	Compassionate Consideration in Assessment
1.3.7	Security of Assessment Materials
2.2.4	Academic Integrity and Assessment

Resources

Internal Verification Report Template (FET Provision)
<u>Sampling Strategy</u>
IV Sample Process (FET Provision)
Sample IV Checklist (FET Provision)
 F01 Internal Verification Report (FET Provision-Second Providers)







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