

Frequently asked questions section 1-9 covers audit related questions, section 10 cover more general questions.

Last updated: 28 February 2017

1. Scheduling of audits - please refer to section 1 of the NMH Provider Audit Guidance for further information.	
1.1 When will my audit be scheduled?	4 - 6 weeks in advance of the audit date scheduled for your organisation.
1.2 How will I know what 'type' of audit I am having?	The type of audit will be confirmed by DSA-QAG when booking the audit. We will confirm if you have been selected for an 'online only' or an 'onsite' audit.
2. Self-assessment form - please refer to section 2 of the NMH Provider Audit Guidance for further information.	
2.1 When is my self-assessment form due to be submitted?	<p>You will receive an audit notification from the NMH portal. The notification which will confirm the date you are required to complete your self-assessment form, and will provide you with a direct link to access the self-assessment form and guidance. You can access your self-assessment at any time and complete the form prior to the deadline date, if you wish.</p> <p>To assist you, DSA-QAG will issue you with a reminder notification 10 working days prior to your submission date.</p> <p>Failure to complete the self-assessment form by the deadline may impact your registration with DSA-QAG.</p>
2.2 What information do I need to submit with my SAF?	<p>You will need to submit a staff list, student list and a number of example documents and policy documents which are detailed in the Self-Assessment Form Guidance.</p> <p>You can review the Self-Assessment Form Guidance document within the NMH Provider Audit Guidance – Appendix A. This can be found at http://www.dsa-qag.org.uk/nmh-providers-area</p>
2.3 Should freelance staff be included on my staff list?	Yes, freelance/third party and employed (fulltime, part-time) support workers should be included on your staff list.
3. Staff and student sample selection - please refer to section 3 of the NMH Provider Audit Guidance for further information.	
3.1 How many staff samples will you select?	Using an agreed methodology with the Department for Education, DSA-QAG will select your staff samples based on the staff numbers and details recorded on your staff list.
3.2 How many student samples will you select?	Using an agreed methodology with the Department for Education, DSA-QAG will select your student samples based on the student numbers and students recorded on your student list.
4. Online audit - please refer to section 4 of the NMH Provider Audit Guidance for further information.	
4.1 How long will I have to upload my sample documents?	You will have 5 working days from receipt of the DSA-QAG request, to upload staff and student information for those selected for sample validation.
4.2 What information do I need	You will need to upload the following documents per student –



to upload if I am selected to provide student verification details online?

- Copy of the DSA2 letter (or alternative confirmation document validating the students support role, number of hours and hourly rate agreed by SFE)
- Record/confirmation of the student's first point of contact date
- Booking confirmation of the student's session (the students latest session)
- Timesheet (latest session)
- Invoice (associated with latest session)
- Record of missed sessions and any associated invoice, if applicable
- Student work plan/ILP, if applicable

You will need to upload the following staff documents –

4.3 What information do I need to upload if I am selected to provide staff verification details online?

- Evidence to support the dates for training, induction and HEI awareness
- Copies of any risk assessment raised in relation to QAF 1.13
- A copy of the CPD record
- Copies of all course/ education / degree certificates

5. Onsite audit - please refer to section 5 of the NMH Provider Audit Guidance for further information.

5.1 How long will my audit be?

For those selected for an onsite audit, your audit will vary from 0.5 – 3.5 days depending on the size of your organisation. This will be confirmed to you in your audit notification.

5.2 What will happen at the audit?

The auditor will review evidence held by your organisation to validate staff and student. Refer to 4.2 above for details of the information which will be requested on site by the auditor. The auditor will also discuss any items from the self-assessment which may require further clarification.

6. Action plan - please refer to section 6 of the NMH Provider Audit Guidance for further information.

6.1 When will I receive my action plan?

Within 7 working days of the completion of your audit.

For online only audits, this will be 7 working days following the submission of the student and staff sample data requested by DSA-QAG.

For onsite audits, this will be 7 working days from the final onsite day completed by the auditor.

6.2 What will my action plan include?

Your action plan will include the results of your audit and will provide the results for each of the three elements noted –

- Self-assessment form
- Staff sample validation
- Student sample validation

For any item identified by the auditor as requiring action, the standards will be listed and the type of non-compliance will be indicated as an 'area for improvement' or a 'No' compliance. For



further details on compliance guidance, please refer to NMH Audit Guidance v1.0, section 8, compliance definitions.

7. Action plan response - *please refer to section 7 of the NMH Provider Audit Guidance for further information.*

7.1 How long do I have to complete my action plan response?	Your action plan response should be returned within 10 working days of receipt from the NMH portal with documentary evidence. Failure to do so may impact your registration with DSA-QAG.
7.2 How long will DSA-QAG take to review my action plan response?	DSA-QAG will review your action plan response and supporting documentation within 7 working days of receipt.
7.3 What happens after I have submitted my action plan?	<p>If all points within the action plan have been addressed satisfactorily, you will receive your accreditation. This will allow you to publish the DSA-QAG accreditation logo on your website and company stationery.</p> <p>If any points remain outstanding, you will receive a 2nd action plan, which you will have a further 5 working days to respond to. Failure to do so may impact your registration with DSA-QAG.</p>

8. Compliance Definitions - *please refer to section 8 of the NMH Provider Audit Guidance for further information.*

8.1 What if I don't meet 100% compliance?	Our aim is to ensure you have appropriate systems and processes in place to deliver a support service that meets the needs of disabled students. Therefore where your compliances are in excess of 60% we will work with you to help you achieve 100%.
8.2 What if I fall below 60%?	Depending on the nature of the non-compliances you may be required to undergo a subsequent investigatory audit.
8.3 What if my support workers do not meet the mandatory criteria?	You will be expected to remove them from the support roles they are providing. You will also have your registration suspended whilst a further investigatory audit is carried out.
8.4 Can my support workers be working towards meeting the mandatory criteria?	No. They must meet the criteria for the support roles they are delivering.
8.5 What will happen if my invoices submitted to the funding body do not match the DSA2 or the student's timesheets?	We are required to inform the funding body and the Department for Education, a further investigatory audit may be required.

9. Appeals process - *please refer to section 9 of the NMH Provider Audit Guidance for further information.*

9.1 What can I do if I am not happy with the outcome of my audit?	You can appeal to DSA-QAG, by sending in your appeal in writing in the first instance to the Operations Manager.
9.2 How long will the appeals process take?	The Operations Manager will acknowledge your appeal within 2 working days and will aim to reply within 10 working days of receiving your appeal. However, we may not be able to give a full and detailed reply within this timeframe; for example, your case may require a more detailed investigation and DSA-QAG need to collate information and evidence from third parties. If this is the case, DSA-QAG will notify you of this.



If you are dissatisfied with the outcome of the appeal, you may wish to escalate this to the Chief Executive.

10. General Queries

10.1 Does the Annual Statistical Return include *all* students currently supported or only those joining since April 2016?

The annual statistics for the first submission (year 1) will include all new students from April 2016 until 31 March 2017. In year 2, the submission will include year 1 (1 April 17-31 March 18) and year 2 (1 April 16-31 March 17) students and each year this will continue to build on the total students supported throughout an academic year new and existing.

10.2 Do we have to use the ILP/Work Plan supplied in Template 6 or can we use our own, provided it captures the required information?

Providers are required to capture the information for each QAF template as a minimum. The exception is the funding body timesheet which is a mandatory standardised document which should not be altered by a provider.

10.3 How should providers action and review 3 monthly ILP/Work Plans for students are not in frequent contact?

In accordance with the standard, the provider is required to review and update the ILP/Work Plan every 3 months. A common sense approach to be taken by providers depending on the review to be carried out subject to the engagement with the student.

10.4 Missed sessions: In section 5 of the SFE guidance, DSA say, "*payment will not be made for any missed sessions occurring beyond the first 2, other than exceptional circumstances?*" What are exceptional circumstances?

The funding body have advised that exceptional circumstances are reviewed on an adhoc basis. Each provider should contact the funding body in writing with the exceptional circumstances for consideration.

10.5 Confirmation of Capacity

With regards to standard 1.9, this refers to 'unusual support' only. This is for support for a student with a specific disability where a specialised support worker may be required to provide support. Providers will be contacted by assessors when these types of anomalies occur.

10.6 Template 4: Consent for sensitive Personal processing - when should this be completed and how will DSA-QAG ensure confidentiality?

The consent for personal data is required to be completed when the provider engages services with the student. This covers the provider should the student be selected for audit purposes.

With regards to confidentiality of data, we abide by our responsibilities under the Data Protection Act; our policy is available at the bottom of our website Homepage.

10.7 What will DSA-QAG expect from HEIs whose students have some external provision?

The provider should refer to the measures noted within the standard which will be required for audit purposes.

