



QA of DSA Needs Assessment Report

- Pilot Analysis Report

OWNER:	DSA QAG
VERSION:	2.0
STATUS:	Final

Contents

1	Background	4
1.1	Introduction.....	4
2	Pilot Centres.....	4
2.1	Sample band	5
2.2	Pilot data	6
3	Quality assurance team.....	7
4	Quality assurance indicators criteria	7
5	Pilot end to end process.....	8
6	Audit outcome letter & action plan.....	8
7	Analysis of outcomes from quality assurance and validation	9
7.1	Centre disclosure	9
7.2	Course information.....	9
7.3	Background information	10
7.4	A-1 Disability information	10
7.4.1	A-2 Details of previous DSA assessment/previous support	10
7.4.2	A-3 Course details.....	11
7.4.3	A-4 Higher education provider support / reasonable adjustments.....	11
7.5	Effects of disability and recommendations	12
7.5.1	B-1 Equipment previously used/currently in use	12
7.5.2	B-2-1 - Research and reading	13
7.5.3	B-2-2 - Writing and reviewing academic work	14
7.5.4	B-2-3 - Note-taking in lectures and seminars.....	15
7.5.5	B-2-4 - Managing time and organising work	16
7.5.6	B-2-5 - Access to and use of technology.....	17
7.5.7	B-2-6 - Practical sessions, placements, field trips and additional course activities	18
7.5.8	B-2-7 – Examinations and timed assessments	19
7.5.9	B-2-8 - Social interaction and communication	20
7.5.10	B-2-9 - Travel and access to higher education environment.....	21
7.5.11	B-2-10 - Additional information.....	22
7.6	Summary and costs	23
7.6.1	Hardware	23
7.7	Costs	24
7.7.1	Equipment allowance - summary of specialist equipment quotes	24

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 2
--------------------------	----------------------------	------------------------	------------------	--------------------------	-----------------

7.7.2	Non-medical Helpers Allowance (NMH)	25
7.7.3	Summary of costs	25
7.8	HEP support / reasonable adjustments	25
7.8.1	D-1 Higher education provider support	25
7.9	Contact details	26
7.9.1	Specialist equipment	26
7.10	General QA errors	27
7.10.1	Spelling errors	27
8	Areas with highest compliance rates	28
9	Areas with lowest compliance rates	28
10	Scoring guide	29
11	Assessors guidance	29
12	Review of audit tools	29
13	Feedback from pilots	29
14	Overall conclusion	30
15	Next steps	30
Appendix 1 – Pilot Centre Outcome Analysis Table		31
Appendix 2 – Assessor Outcome Analysis Table		35
Appendix 3 - DfE Quality Assurance Indicators Criteria for QA of Needs Assessment Reports.		38

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 3
--------------------------	----------------------------	------------------------	------------------	--------------------------	-----------------

1 Background

DSA-QAG's proposal to the Department for Education (DfE) in September 2017, outlined the quality assurance process to be introduced by DSA-QAG to administer quality checks for needs assessment reports, and the timelines for the implementation of an online needs assessment report system. The proposal also included setting up a pilot project to trial the QA review process before implementation with assessment centres to coincide with the 2018 - 2019 audit cycle which commences in November 2018.

For the pilot project, assessment centres were invited to volunteer to participate. DSA-QAG had aimed for between 10 to 15 centres to become involved with a range from private and HEP based centres who conducted low (less than 500), medium (501-1000) and high (1001-1500) assessment volumes. This was to ensure that we had a range of all business models to test the process.

The introduction of the quality assurance of needs assessment reports by DSA-QAG following the DfE's mandate, is to cover the needs assessment report content, the recommendations put forward by the needs assessor for the student, validating that the report could be read as a stand-alone document, demonstrating the impact of the student's condition on their ability to study, an understanding of the requirements and demands of the course, and a commitment to the provision of cost-effective solutions for each student within the parameters of DSA funding as set out by DfE.

The needs assessment report would also be reviewed to validate that the needs assessor has demonstrated an analysis of all the strategies available to the student and a clear decision-making process for the strategy ultimately selected for recommendation.

1.1 Introduction

This report will provide details of the areas which allowed the pilot centres to participate and for DSA-QAG to administer the project. It also provides the analysis of the outcomes for the pilot centres and the needs assessors involved. As this was the first attempt at carrying out a quality assurance of needs assessments, there were many challenges for those involved which ranged from establishing and agreeing the initial DfE audit criteria to be followed, developing the QA guidance document, and scoring guide with IAC and NNAC input to be adhered to by the QA Team, and for the QA Team to review significantly varying compilations of needs assessment reports from the pilot centres. Within the report the following items will be covered –

- Pilot centres and key data
- Quality assurance team
- DfE quality assurance indicators criteria
- Pilot end to end process
- Pilot audit outcome
- Pilot centre feedback
- Analysis of the needs assessment reports quality assured
 - ❖ Organisational
 - ❖ Needs Assessors

2 Pilot Centres

Following the call for volunteers to take part in the pilot exercise, 10 centres were selected to participate. The centres covered a range of business models. Within the volunteers the Chair of the National Network of Assessment Centres (Nottingham University Access Centre) and

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 4
--------------------------	----------------------------	------------------------	------------------	--------------------------	-----------------

the Lead Representative for the Independent Assessment Centres (Central London Assessment Services) were amongst the volunteers. The pilot centres are listed below –

Centre	HEI Based	Private	Region
AbilityNet DSA Assessment Centre- Brighton		✓	South East
Access2Learn DSA Centre		✓	Greater London
ATOP Ltd		✓	North West
Central London Assessment Services (CLASS)	✓		Greater London
Hull Assessment Centre	✓		Yorkshire & Humberside
Iona Kent and South East Assessment Centre		✓	South East
Newport Assessment Centre		✓	Wales
Nottingham University Access Centre	✓		East Midlands
Staffordshire Regional Access Centre	✓		West Midlands
WSDAC Ltd		✓	West Midlands

2.1 Sample band

Each pilot centre was requested to provide the total number of needs assessors (employed and freelance) for their centre, and Student Finance England only funded assessments carried out in the previous 12 months from their audit date.

From the information submitted, DSA-QAG selected the sample size using the table below, to determine the sample size required for each centre.

An equal proportion of samples was selected for the total number of assessors (including centre managers who carried out assessments) for each centre. For example, for a sample size of 20, with an assessment team of 4, this equated to 5 samples per assessor across the specialist disability types each assessor undertook assessments. This allowed the QA Team to review a range of reports for each assessor.

Band	Samples	Band	Samples
1-100	5	1401-1500	75
101-200	10	1501-1600	80
201-300	15	1601-1700	85
301-400	20	1701-1800	90
401-500	25	1801-1900	95
501-600	30	1901-2000	100
601-700	35	2000-2500	125
701-800	40	2501-3000	150
801-900	45	3001-3500	175
901-1000	50	3501-4000	200
1001-1100	55	4001-4500	225
1101-1200	60	4501-5000	250
1201-1300	65	5001-5500	275
1301-1400	70	5501-6000	300

The samples reviewed for each assessor ranged from 1* – 10. Following the pilot exercise, DSA-QAG will be reviewing and potentially applying a maximum number of samples reports

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 5
--------------------------	----------------------------	------------------------	------------------	--------------------------	-----------------

per assessor ensuring the range of the disability types for each assessor are selected. The reason for capping sample reports, is a trend of non-compliance will normally have been established within the first few samples reviewed, we have deemed 5 - 6 reports as a reasonable maximum number of samples per assessor.

For the sample of 10 reports reviewed, the trend did not reveal any further information had a reduced number of samples been reviewed.

(*Note: The sample of 1 was due to a new member of an assessment team with low volume assessments. In addition, the centre advised that student consent had only been confirmed for a single report for the needs assessor.)

2.2 Pilot data

During the pilot, a total of 79 needs assessors were involved from the 10 pilot centres. A total of 324 needs assessment reports across all disability types were reviewed.

Number of Assessors	Freelance Assessors (included in total number of Assessors)	Needs Assessment Reports Reviewed
79	61	324

The review of needs assessment reports covered all disability types and is outlined in the table below displaying the breakdown of the disability type, the total number of sample reports, the average time per report and the review timings collated by the QA Team.

DSA-QAG had based, on guidance from IAC and NNAC, that 1.5 hours was a realistic period to review a needs assessment report. This was validated by the pilot analysis, with 1:28 hours recorded as the average time taken per needs assessment report. The table below provides information of the disability types reviewed, the total number of samples per disability type, and the overall resource time and average time for each disability.

Disability Type	No. samples	Total time (per NAR/per disability)	Average Time
SpLD	68	98:20	01:26
AS	33	48:35	01:28
HI	28	44:15	01:34
VI	19	27:40	01:27
MH	57	81:14	01:25
Mob	29	42:46	01:28
Multiple	57	86:19	01:30
Unseen	7	11:20	01:37
Longstanding Illness	26	37:50	01:27
Total	324	478:19	01:28

In addition, an analysis was carried out for the QA review process timescales, as noted in table 1. The range of the QA review time per needs assessment report was calculated from 45 minutes through to 3 hours 30 minutes. The timing range was dependent on the report content from minimal information through to extensive information which varied considerably across the assessors involved in the exercise.

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 6
--------------------------	----------------------------	------------------------	------------------	--------------------------	----------

Table 1

Review Type	Time Taken
QA of NAR	479 hours
QA Range	45 mins – 3 hours 30 mins

A similar analysis was carried out for the peer review process timescales as noted in table 2. The range of the review time was calculated from 25 minutes through to 1 hour 10 minutes and as noted above was dependent on the report content.

Table 2

Review Type	Time Taken
Peer Review	289 hours
Peer Review Range	25 mins – 1-hour 10mins

3 Quality assurance team

To allow DSA-QAG to undertake the quality assurance pilot project, a new quality assurance team was recruited and established with two Quality Assurance Executive Officers in our London office. The team's background included previous experience as a DSA officer for Student Finance England, a quality assurance officer for a registered assessment centre, and a needs assessor. This was an invaluable range of knowledge for the QA team to carry out the quality assurance role.

In addition, the Peer Review of the QA Team was conducted by the NNAC Chair, offering their vast knowledge and experience of the assessment process for consistency across all pilot centres.

4 Quality assurance indicators criteria

The quality assurance of the needs assessment reports was carried out in accordance with the quality assurance indicators criteria issued by the DfE in March 2018, refer to Appendix 3 for the full criteria.

The QA criteria was developed and established with input from IAC, NNAC and DSA-QAG.

The fundamental principle of the audit criteria is to ensure, *“The Needs Assessment Report (NAR) should be a stand-alone document that can be read and understood by a non-specialist. It should be clear in presentation, grammatically correct, free from jargon and all acronyms explained.”*

The audit criteria was then developed into a QA scoring guidance by DSA-QAG, in consultation with both IAC and NNAC.

Within the audit criteria a new section, *Student Summary*, has been introduced by the DfE for the new cycle. This item was not measured during the pilot project but is included in the new online NAR system.

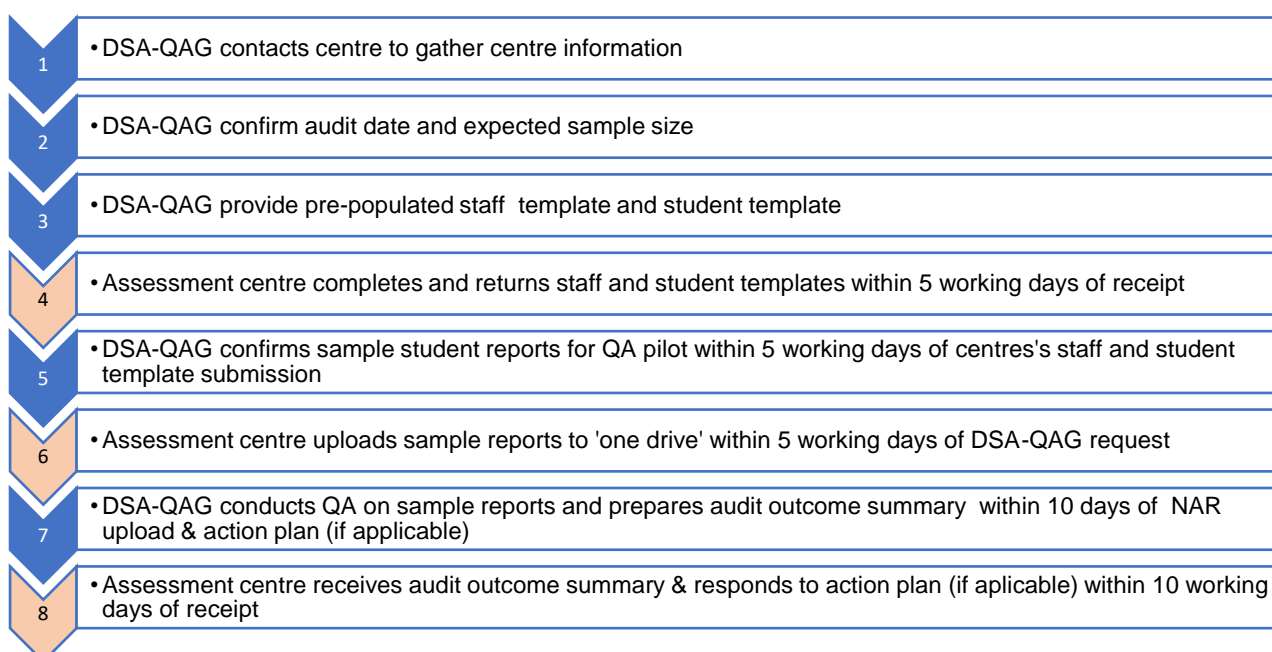
The purpose of the student summary as defined by DfE is *“This is the ‘Student Summary’ not for anyone else so should be written from a layperson’s perspective. This might be something that the student might wish to share with the provider, HEP DO or lecturers if they do not want to share the DSA2 letter or the full NAR. It could also help some students articulate why they are having particular support.”*

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 7
--------------------------	----------------------------	------------------------	------------------	--------------------------	----------

5 Pilot end to end process

The pilot ran over a seven month period from initial pre audit contact with the pilot centres in April 2018 through to issuing the audit outcome letters in October 2018. The diagram below outlines the end to end process adopted for the pilot project.

For steps 1 to 6, the processes and timescales were achieved by both the pilot centres and DSA-QAG. With regards to steps 7 and 8, the timescales were extended for a number of reasons, for example, DSA-QAG had to seek further clarification from DfE, IAC and NNAC on the QA of specific items of the audit criteria which were challenging for the QA Team to score. Following these discussions and further consultation, the QA Team carried out a further review of reports following the outcome which extended the review and peer review process. The extended time to produce the audit outcome was communicated to the pilots.



6 Audit outcome letter & action plan

Each pilot centre has been issued with an audit outcome letter which provided the overall analysis for the centre and the assessment team. In addition, an audit action plan was issued which provided detailed results for each section and sub section of the needs assessment report for the centre. Similarly, the results for each needs assessor involved in the pilot detailed information for each section and sub section of the needs assessment report. This allowed each centre to view their overall compliance, to identify any training areas for their assessment team and to identify any supplementary or specific training areas for a needs assessor(s).

The compliance threshold used for the pilot was 70%. For any section or subsection of the needs assessment report which fell below 70%, this was indicated to the centre manager via a traffic light red highlight within the reports.

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 8
--------------------------	----------------------------	------------------------	------------------	--------------------------	-----------------

To assist each pilot centre, a post pilot call was conducted to discuss the audit documentation and to ensure that there was a clear understanding of the information provided.

7 Analysis of outcomes from quality assurance and validation

The following information provides an illustration of each section of the audit summary and the reference to the corresponding section within the needs assessment report. Where the assessor did not meet the requirements of the section of the needs assessment report, they would be scored as non-compliant.

7.1 Centre disclosure

Needs assessment centres must disclose any conflict of interest, where an organisation has a direct business relationship with another organisation registered to provide services to DSA funded students, which must be clearly indicated within the disclosure section of the needs assessment report.

Across all pilot centres, the following table summarises the compliance outcome.

	Min	Average	Max
Centre Disclosure	63%	91%	100%

As indicated in the table above, the scores across the pilot centres range from the lowest only declaring a conflict in two thirds of their reports, with an average of 91% through to full compliance. This indicates an area for improvement for some of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 25% (2 assessors excluded the conflict of interest in 3 out of 4 reports selected for QA) through to an average across all assessors of 93%. For some of the assessors (6 scoring 70% or less) there are significant areas for improvement. However, it should be noted that 63 of the 79 assessors achieved full compliance

	Min	Average	Max
Centre Disclosure	25%	93%	100%

7.2 Course information

The validation of this section includes reviewing of, the name of the Higher Education provider, the course details, the length of study and the course language.

	Min	Average	Max
Course Information	100%	100%	100%

As noted in the scores above, the centres involved in the pilot demonstrated full compliance with the requirements for this section.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, all of the assessors achieved full compliance

	Min	Average	Max
Course Information	100%	100%	100%

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 9
--------------------------	----------------------------	------------------------	------------------	--------------------------	----------

7.3 Background information

This section within the report requires the assessor to record information on the student's disability; details of previous DSA assessments or support, their course information; support provided by higher education providers or reasonable adjustments in place at the student's intended institution.

7.4 A-1 Disability information

This section should include information on the student's disability and how it affects them. In addition, any medical evidence which supports the student's disability should be recorded within this section.

	Min	Average	Max
Disability Information	89%	97%	100%

As indicated in the table above, the outcomes across the pilot centres range from the lowest at 89%, an average of 97% through to full compliance. The high compliance rates indicate that most of the pilot centres are providing sufficient information on the student's disability.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 50% (2 assessors both provided limited information regarding the student's disability in 1 out of 2, and 2 out of 4 reports respectively) through to an average across all assessors of 95%. For some of the assessors there are areas for improvement. However, it should be noted that 65 of the 79 assessors achieved full compliance

	Min	Average	Max
Disability Information	50%	95%	100%

7.4.1 A-2 Details of previous DSA assessment/previous support

This section within the needs assessment report requires the assessor to provide full details of any previous assessment or support, any strategies the student may have used to date in previous schooling and any non-DSA funded support they may have received in the past.

	Min	Average	Max
Details of previous DSA assessment/previous support	5%	53%	75%

The compliance ranged from the lowest compliance of 5%, an average of 53% and a maximum compliance of only 75%. The compliance was measured on the basis of the assessor providing sufficient information to confirm details of any previous DSA assessments, or support had been gathered.

With a range of 5% and average of 75%, this is an area for **significant** improvement for all of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (13 assessors provided no information regarding any previous DSA assessment or previous support.)

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 10
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

through to an average across all assessors of 55%. For some of the assessors (43 scored less than 70% compliance), there are areas for significant improvement.

	Min	Average	Max
Details of previous DSA assessment/previous support	0%	55%	100%

7.4.2 A-3 Course details

The Needs Assessor should be able to demonstrate some level of research into the students' course, for example having extracted information from the HEP website or having contacted the HEP for information about the course.

	Min	Average	Max
Course Details	20%	72%	100%

The compliance ranged from the lowest compliance of 20%, an average of 72% through to full compliance. The compliance was measured by ensuring the course location, course activities and method of assessment had been explicitly stated by the assessor.

With a range of 20% and average of 72%, this is an area for **significant** improvement for some of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (15 assessors provided no information regarding the course location, course activities and the method of assessment.) through to an average across all assessors of 67%. For some of the assessors there are areas for significant areas for improvement. However, it should be noted that 40 out of 79 assessors achieved full compliance.

	Min	Average	Max
Course details	0%	67%	100%

7.4.3 A-4 Higher education provider support / reasonable adjustments

The Needs Assessor should be able to demonstrate some level of research into the support available for disabled students, for example having extracted information from the HEP website or having contacted the Disability Department at the HEP for information.

	Min	Average	Max
Higher education provider support / reasonable adjustments	0%	64%	100%

The compliance ranged from the lowest compliance of 0%, an average of 64% through to full compliance. The compliance was measured on the basis of the assessor clearly indicating the support available at the HEP, including reasonable adjustments.

With a range of 0% and average of 64%, this is an area for **significant** improvement for some of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (23 assessors provided no information regarding higher education provider support or an indication of

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 11
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

reasonable adjustments) through to an average across all assessors of 60%. For some of the assessors, (35 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 38 out of 79 assessors achieved full compliance.

	Min	Average	Max
Higher education provider support / reasonable adjustments	0%	60%	100%

7.5 Effects of disability and recommendations

This section within the report requires the assessor, through discussions with the student, to consider the nature of the student's disability and the impact of the student's disability on their ability to undertake their chosen course. The assessor must analyse the student's previous educational experience and the effectiveness of any existing strategies (including any previously awarded DSA funded strategies). This should include detailed descriptions of the barriers to learning identified as a result of the student's condition and the analysis of any previous support strategies discussed. If there are no identified barriers or any existing strategies to overcome these, this must be explicitly stated within the report. The outcome in each section, with the exception of B-1, is shown for both **key impacts** and **recommended strategies**.

7.5.1 B-1 Equipment previously used/currently in use

Assessors should record the details of any equipment or devices that the student currently has including: computer, smart phone or tablet computer. They must include details of the specification/age/CPU benchmark check on the student's own computer and must conclude if the computer is suitable to run any recommended assistive software for the duration of the student's course.

	Min	Average	Max
Equipment previously used/currently in use	15%	47%	87%

The compliance ranged from the lowest compliance of 15%, an average of 47% through to a maximum of 87%. The compliance was measured on the details of equipment used (computer and smartphone) being listed and confirmation that the equipment (computer) is sufficient/insufficient to run Assistive Software.

With a range of 15% through to a maximum of 87%, this is an area for **significant** improvement for all of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (20 assessors provided no information regarding equipment previously used or evidence of completing the benchmark test) through to an average across all assessors of 44%. For some of the assessors, (57 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 13 out of 79 assessors achieved full compliance.

	Min	Average	Max
Equipment previously used/currently in use	0%	44%	100%

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 12
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

7.5.2 B-2-1 - Research and reading

Assessors should clearly indicate how the student's specific difficulties in conducting research and reading impacts on their learning. The report must be based on the discussion with the student themselves, detailing any existing strategies they have employed to aid their research and reading. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	60%	79%	100%
Recommended Strategies	21%	40%	69%

7.5.2.1 Key impacts

The compliance in the above table ranged from the lowest compliance of 60%, an average of 79% through to full compliance. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with research and reading.

With a range of 60% through to a maximum of 100%, this is an area for improvement for some of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (3 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 75%. For some of the assessors, (30 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 39 out of 79 assessors achieved full compliance.

	Min	Average	Max
Key Impacts	0%	75%	100%

7.5.2.2 Recommended strategies

The compliance rate for recommended strategies ranged from 21%, an average of 40% through to a maximum of 69%. Compliance was measured on the following areas:

- sufficient information recorded as to whether alternative strategies had been explored and information to validate that the demonstration of assistive software had been undertaken during the Needs Assessment to demonstrate how the Assessor arrived at the best package of support for the student.
- sufficient disability related justification for the recommended strategies.
- recommended strategies which fell inside of the parameters of DSA Funding as set out by DfE and specialist support strategies inside of the primary parameters of DSA Funding.

With a range of 21%, an average of 40% and a maximum of 69% this is an area for **significant** improvement by all of the pilot centres.

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 13
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (27 assessors provided insufficient information on recommended strategies to aid the student with research and reading) through to an average across all assessors of 34%. For most of the assessors, (63 achieved 70% or less compliance) there are areas for significant improvement.

	Min	Average	Max
Recommended strategies	0%	34%	100%

7.5.3 B-2-2 - Writing and reviewing academic work

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with writing and reviewing academic work for strategies to be identified and recommended. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	43%	68%	100%
Recommended Strategies	0%	36%	56%

7.5.3.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 43%, and average of 68% through to full compliance. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with writing and reviewing academic work.

With a range of 43% and an average of 68%, this is an area for improvement for some of the pilot centres. Of the 10 pilot centres, 5 scored greater than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (11 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 57%. For most of the assessors, (48 achieved 70% or less compliance) there are areas for significant improvement.

	Min	Average	Max
Key Impacts	0%	57%	100%

7.5.3.2 Recommended strategies

The compliance rate for recommended strategies ranged from 0%, an average of 36% through to a maximum of 56%. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 0%, an average of 36% and a maximum of 56% this is an area for **significant** improvement by all of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (24 assessors provided insufficient information on recommended strategies to aid the student with writing

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 14
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

and reviewing academic work) through to an average across all assessors of 38%. For most of the assessors, (63 achieved 70% or less compliance) there are areas for significant improvement.

	Min	Average	Max
Recommended strategies	0%	38%	100%

7.5.4 B-2-3 - Note-taking in lectures and seminars

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with note-taking during lectures and seminars and recommend strategies to be adopted. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	47%	65%	100%
Recommended Strategies	29%	72%	100%

7.5.4.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 47%, an average of 65% through to full compliance. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with note-taking during lectures and seminars.

With a range of 47% and an average of 65%, this is an area for improvement for some of the pilot centres. Of the 10 pilot centres, 7 scored less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (7 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 57%. For most of the assessors, (45 achieved 70% or less compliance) there are areas for significant improvement.

	Min	Average	Max
Key Impacts	0%	57%	100%

7.5.4.2 Recommended strategies

The compliance rate for recommended strategies ranged from 29%, an average of 72% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 29%, an average of 72% and a maximum of 100% this is an area for **significant** improvement for some of the pilot centres.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (9 assessors provided insufficient information on recommended strategies to aid the student with note-taking during lectures and seminars) through to an average across all assessors of 62%. For a number of the assessors, (37 achieved 70% or less compliance) there are areas for

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 15
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

significant improvement. However, it should be note that 26 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	0%	62%	100%

7.5.5 B-2-4 - Managing time and organising work

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with managing their time and organising their work and recommend strategies to be adopted. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	38%	57%	100%
Recommended Strategies	56%	89%	100%

7.5.5.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 38%, an average of 57% through to full compliance. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with managing their time and organising their work.

With a range of 38% and an average of 57%, this is an area for **significant** improvement for some of the pilot centres. Of the 10 pilot centres, 8 scored less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (10 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 50%. For most of the assessors, (55 achieved 70% or less compliance) there are areas for significant improvement.

	Min	Average	Max
Key Impacts	0%	50%	100%

7.5.5.2 Recommended strategies

The compliance rate for recommended strategies ranged from 56%, an average of 89% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 56%, and an average of 89% this is an area for improvement for some centres. 9 out of the 10 centres achieved a compliance of more than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 25% (2 assessors provided insufficient information on recommended strategies to aid the student with managing their time and organising their work) through to an average across all assessors of 92%. For a number of the assessors, (9 achieved 70% or less compliance) there are areas

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 16
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

for significant improvement. However, it should be noted that 62 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	25%	92%	100%

7.5.6 B-2-5 - Access to and use of technology

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with accessing/using technology and recommend strategies to be adopted. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	0%	37%	75%
Recommended Strategies	33%	66%	100%

7.5.6.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 0%, an average of 37% and a maximum of 75%. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with accessing or using technology.

With a range of 0%, an average of 37% and a maximum of 75%, this is an area for **significant** improvement for some of the pilot centres. Of the 10 pilot centres, 9 scored less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (37 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 32%. For most of the assessors, (59 achieved 70% or less compliance) there are areas for significant improvement.

	Min	Average	Max
Key Impacts	0%	32%	100%

7.5.6.2 Recommended strategies

The compliance rate for recommended strategies ranged from 33%, an average of 66% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 33%, and an average of 66% this is an area for **significant** improvement for some centres. 6 out of the 10 centres achieved a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (9 assessors provided insufficient information on recommended strategies to aid the student with accessing or using technology to aid their study) through to an average across all assessors of 67%. For a large number of the assessors, (32 achieved 70% or less compliance) there

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 17
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

are areas for significant improvement. However, it should be noted that 26 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	0%	67%	100%

7.5.7 B-2-6 - Practical sessions, placements, field trips and additional course activities

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with accessing practical sessions, placements, field trips and additional course activities, and recommend strategies to be adopted. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	61%	81%	94%
Recommended Strategies	85%	95%	100%

7.5.7.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 61%, an average of 81% through to a maximum compliance of 94%. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with accessing practical sessions, placements, field trips and additional course activities.

With a range of 61%, an average of 81% and a maximum of 94%, this is an area for improvement for some of the pilot centres. Of the 10 pilot centres, 8 scored more than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (3 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 80%. For a number of assessors, (22 achieved 70% or less compliance) there are areas for significant improvement.

	Min	Average	Max
Key Impacts	0%	80%	100%

7.5.7.2 Recommended strategies

The compliance rate for recommended strategies ranged from 85%, an average of 95% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 85%, and an average of 95% this is an area for improvement for some centres. 10 out of the 10 centres achieved a compliance of more than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (1 assessor provided insufficient information on recommended strategies to aid the student with accessing practical sessions, placements, field trips and additional course activities.) through to an

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 18
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

average across all assessors of 94%. For a small number of the assessors, (4 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 65 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	0%	94%	100%

7.5.8 B-2-7 – Examinations and timed assessments

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with examinations and timed assessments. This section must explicitly state whether the student has any exams on their course. Within this section, the assessor should not make prescriptive recommendations for exam support this is for the HEP disability advisor and the student to discuss. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	45%	65%	94%
Recommended Strategies	90%	98%	100%

7.5.8.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 45%, an average of 65% through to a maximum of 94%. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with examinations and timed assessments.

With a range of 45%, an average of 65% and a maximum of 94%, this is an area for significant improvement for some of the pilot centres. Of the 10 pilot centres, 6 scored less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (5 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 61%. For most of the assessors, (43 achieved 70% or less compliance) there are areas for significant improvement. Only 16 assessors achieved maximum compliance.

	Min	Average	Max
Key Impacts	0%	61%	100%

7.5.8.2 Recommended strategies

The compliance rate for recommended strategies ranged from 85%, an average of 95% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 90%, and an average of 98% through to full compliance, this is an area for improvement for some centres. 10 out of the 10 centres achieved a compliance of more than 70%.

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 19
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 50% (1 assessor provided insufficient information on recommended strategies to aid the student with examinations and timed assessments in 2 out of 4 reports) through to an average across all assessors of 97%. For a small number of the assessors, (4 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 70 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	50%	97%	100%

7.5.9 B-2-8 - Social interaction and communication

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with social interaction and communication. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	40%	69%	85%
Recommended Strategies	65%	92%	100%

7.5.9.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 40%, an average of 69% through to a maximum of 85%. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with social interaction and communication.

With a range of 40%, an average of 69% and a maximum of 85%, this is an area for **significant** improvement for some of the pilot centres. Of the 10 pilot centres, 5 scored less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (3 assessors provided no information on existing strategies used by the student) through to an average across all assessors of 64%. For most of the assessors, (42 achieved 70% or less compliance) there are areas for significant improvement. Only 19 assessors achieved maximum compliance.

	Min	Average	Max
Key Impacts	0%	64%	100%

7.5.9.2 Recommended strategies

The compliance rate for recommended strategies ranged from 65%, an average of 92% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 65%, and an average of 92% this is an area for improvement for most centres. 9 out of the 10 centres achieved a compliance of more than 70%.

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 20
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 25% (1 assessor provided insufficient information on recommended strategies to aid the student with social interaction and communication.) through to an average across all assessors of 95%. For a small number of the assessors, (6 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 68 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	25%	95%	100%

7.5.10 B-2-9 - Travel and access to higher education environment

This section within the report requires the assessor to identify the student's existing strategies, the impact of the student's disability and difficulties encountered with travel and access to higher education environment. This section should include challenges the student may have with shared accommodation, including having access to en-suite facilities. Any recommendations for travel must also clearly indicate if the student is in receipt of other benefits, e.g. DLA/PIP. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	77%	90%	100%
Recommended Strategies	71%	85%	100%

7.5.10.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 77%, an average of 90% through to a maximum of 100%. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student's disability impacted their experience, to support their difficulties, with travel and access to the higher education environment.

With a range of 77%, an average of 90% and a maximum of 100%, this is an area for improvement for some of the pilot centres. Of the 10 pilot centres, 3 scored full compliance.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (1 assessor provided no information on existing strategies used by the student) through to an average across all assessors of 88%. For a small number of assessors, (10 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 52 assessors achieved maximum compliance.

	Min	Average	Max
Key Impacts	0%	88%	100%

7.5.10.2 Recommended strategies

The compliance rate for recommended strategies ranged from 71%, an average of 85% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 71%, and an average of 85% this is an area for improvement for most centres. Only 1 out of the 10 centres achieved full compliance.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (2 assessors provided insufficient information on recommended strategies to aid the student with travel and access to the higher education environment) through to an average across all assessors of 85%. For a small number of the assessors, (15 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 50 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	0%	85%	100%

7.5.11 B-2-10 - Additional information

This section within the report requires the assessor to provide additional information on impacts that have not been covered in the previous sections of the report. In addition, the recommended strategies must be based on the information provided in the key impacts. The assessor must not remove this section from their final report and should indicate “Not applicable” in order that confirmation has been provided that this section has been considered. The table below indicates the compliance for both the key impacts and recommended strategies.

	Min	Average	Max
Key Impacts	56%	86%	100%
Recommended Strategies	55%	75%	100%

7.5.11.1 Key impacts

For key impacts, the compliance ranged from the lowest compliance of 56%, an average of 86% through to a maximum of 100%. The compliance was measured on the assessor providing sufficient information in respect of whether the student had existing strategies or how the student’s disability impacted their experience, to support their difficulties, this relates to additional information which is not covered in any of the previous sections.

With a range of 56%, an average of 86% and a maximum of 100%, this is an area for improvement for some of the pilot centres. Of the 10 pilot centres, 2 scored full compliance.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (4 assessor provided no information on existing strategies used by the student) through to an average across all assessors of 85%. For a small number of assessors, (13 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 55 assessors achieved maximum compliance.

	Min	Average	Max
Key Impacts	0%	85%	100%

7.5.11.2 Recommended strategies

The compliance rate for recommended strategies ranged from 55%, an average of 75% through to full compliance. Compliance was measured on the basis of the criteria noted at 7.5.2.2.

With a range of 55%, and an average of 75% this is an area for improvement for most centres. Only 1 out of the 10 centres achieved full compliance.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (7 assessors provided insufficient information on additional strategies to aid the with their study.) through to an average across all assessors of 78%. For a small number of the assessors, (19 achieved 70% or less compliance) there are areas for significant improvement. However, it should be noted that 48 assessors achieved full compliance.

	Min	Average	Max
Recommended strategies	0%	78%	100%

7.6 Summary and costs

For each recommendation made by the assessor in previous sections of the report, each item must be clearly listed. However, items which are supplied as standard, free of charge or as part of a package would not be expected to be listed. These items then form the basis of the quotations and costs which are indicated in section 6 of the report. The compliance for each of the items is based upon the recommendations made by the assessor.

Across all pilot centres, the following table summarises the compliance outcome for each of the items within this section.

	Min	Average	Max
Hardware	35%	65%	87%
Software	53%	89%	100%
Non-Medical Helper support	72%	88%	100%
General allowance	33%	86%	100%
Travel allowance	97%	99%	100%

7.6.1 Hardware

The compliance rate for hardware ranges from the minimum of 35%, an average of 65% through to the maximum compliance of 87%. On the basis of these outcomes there are significant areas of improvement for most centres. There was 7 out 10 centres who achieved a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (6 assessors did not list all of the hardware recommended or listed hardware where there was no recommendation) through to an average across all assessors of 66%. For a number of the assessors (35 scoring less than 70%) there are significant areas for improvement. However, it should be noted that 31 assessors achieved full compliance

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 23
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

	Min	Average	Max
Hardware	0%	66%	100%

For the remaining items listed, with a range of outcomes there are areas of improvement required for most centres.

7.7 Costs

From the list of recommended items in Section 5 of the report, C-1, there should be corresponding quotes or prices shown. For example, where hardware or software has been recommended there should be three corresponding quotes from DSA-AG registered ATSPs, where non-medical help has been recommended, there should be two quotes per support role identified, with the costs taken matching those held within the DSA-QAG register of NMH providers. The compliance for each of the items is based upon the recommendations listed in section C-1.

Across all pilot centres, the following table summarises the compliance outcome for each of the items within this section.

	Min	Average	Max
Equipment allowance - summary of specialist equipment quotes	45%	71%	94%
Ergonomic / Specialist items quote / reimbursements	97%	99%	100%
1. Non-Medical Helpers Allowance (NMH)	0%	61%	100%
2. Non-Medical Helpers Allowance (NMH)	56%	79%	100%
3. Non-Medical Helpers Allowance (NMH)	88%	95%	100%
4. Non-Medical Helpers Allowance (NMH)	95%	100%	100%
Colour sensitivity / Asfedic tuning	94%	99%	100%
General allowance	86%	94%	100%
Needs Assessment Report	92%	99%	100%
Accommodation	98%	100%	100%
Travel allowance	84%	96%	100%
Mileage costs	98%	100%	100%
C-3 Summary of costs	0%	37%	68%

7.7.1 Equipment allowance - summary of specialist equipment quotes

The compliance rate for equipment allowance quotes ranges from the minimum of 45%, an average of 71% through to the maximum compliance of 94%. On the basis of these outcomes there are significant areas of improvement for some of the centres. There were 4 out of 10 centres who achieved a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (14 assessors did not provide quotes which reflected all of the equipment listed, or where the quotation from the ATSP contained inaccuracies) through to an average across all assessors of 65%. For a number of the assessors (33 scoring less than 70%) there are significant areas for improvement. However, it should be noted that 35 assessors achieved full compliance

	Min	Average	Max
Equipment allowance - Summary of specialist equipment quotes	0%	65%	100%

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 24
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

7.7.2 Non-medical Helpers Allowance (NMH)

The compliance rate for non-medical helper allowance quotes ranges from the minimum of 0%, an average of 61% through to full compliance. On the basis of these outcomes there are significant areas of improvement for some of the centres. There was 4 out of 10 centres who achieved a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (13 assessors provided inaccurate rates for the NMH support roles) through to an average across all assessors of 70%. For some of the assessors (29 scoring 70% or less) there are significant areas for improvement. However, it should be noted that 39 assessors achieved full compliance

	Min	Average	Max
Non-Medical Helpers Allowance (NMH)	0%	70%	100%

7.7.3 Summary of costs

The compliance rate for the summary of costs ranges from the minimum of 0%, an average of 37% through to a maximum of 68%. On the basis of these outcomes there are significant areas of improvement for all of the centres. There was 10 out of 10 centres who achieved a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (20 assessors reports had errors in all of the fields in the summary table.) through to an average across all assessors of 47%. For most of the assessors (56 scoring 70% or less) there are significant areas for improvement. Only 11 assessors achieved full compliance

	Min	Average	Max
Summary of costs	0%	47%	100%

7.8 HEP support / reasonable adjustments

In some cases, where appropriate, the Needs Assessor may contact the Disability Department at the HEP to discuss support for the student, including exam adjustments, however these are the responsibility of the HEP and should not be prescriptive in this section of the report. In addition, the Needs Assessor may signpost the student to the HEP. The compliance for each of the items is based upon the information provided in the report by the assessor.

Across all pilot centres, the following table summarises the compliance outcome for each of the items within this section.

	Min	Average	Max
D-1 Higher education provider support	18%	79%	100%
D-2 Examinations and assessment	15%	88%	100%
D-3 Other advice and guidance	83%	97%	100%

7.8.1 D-1 Higher education provider support

The compliance rate for higher education support ranges from the minimum of 18%, an average of 79% through to full compliance. On the basis of these outcomes there are

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 25
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

significant areas of improvement for some of the centres. There was 3 out of 10 centres who achieved a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 0% (12 assessors who did not provide sufficient information on the HEP support.) through to an average across all assessors of 79%. For some of the assessors (18 scoring 70% or less) there are significant areas for improvement. However, it should be noted that 59 assessors achieved full compliance.

	Min	Average	Max
Summary of costs	0%	79%	100%

For the remaining items listed, with a range of outcomes there are areas of improvement required for most centres.

7.9 Contact details

In all cases, the correct contact details for the funding body and those who are providing quotes should be included within this section of the report. It should be noted that with the introduction of the online needs assessment portal, contact details will be automatically populated for the funding body and the organisation when selected by the needs assessor.

Across all pilot centres, the following table summarises the compliance outcome for each of the items within this section.

	Min	Average	Max
Funding body name	100%	100%	100%
Specialist equipment	50%	94%	100%
Ergonomic equipment	97%	99%	100%
Non-Medical Help	83%	96%	100%
Taxi providers	95%	99%	100%
Higher Education Provider	97%	100%	100%

7.9.1 Specialist equipment

The compliance rate for contact details for specialist equipment ranges from the minimum of 50%, an average of 94% through to full compliance. On the basis of these outcomes there are areas of improvement for some of the centres. There was only 1 out of 10 centres with a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

As shown in the extract below, the range of compliance varied from 25% (1 assessor who did not provide sufficient contact information for the supplier of specialist equipment.) through to an average across all assessors of 97%. For some of the assessors (3 scoring 70% or less) there are significant areas for improvement. However, it should be noted that 72 assessors achieved full compliance.

	Min	Average	Max
Summary of costs	25%	97%	100%

For the remaining items listed, with a range of outcomes there are areas of improvement required for most centres.

7.10 General QA errors

This section includes spelling, grammatical errors, instances where the students name has been incorrectly referenced and where the gender referred to is incorrect, for example, he when it should be, she.

Across all pilot centres, the following table summarises the compliance outcome for each of the items within this section.

	Min	Average	Max
Spelling Errors	6%	34%	87%
Incorrect Name	81%	93%	100%
Incorrect Gender	63%	90%	97%
Quotes attached	95%	99%	100%

7.10.1 Spelling errors

The compliance rate for reports with spelling or grammatical errors ranges from the minimum of 6%, an average of 34% through to the maximum compliance of 87%. On the basis of these outcomes there are areas of significant improvement for most of the centres. There was 9 out of 10 centres with a compliance of less than 70%.

Extract from Assessor Analysis (Appendix 2)

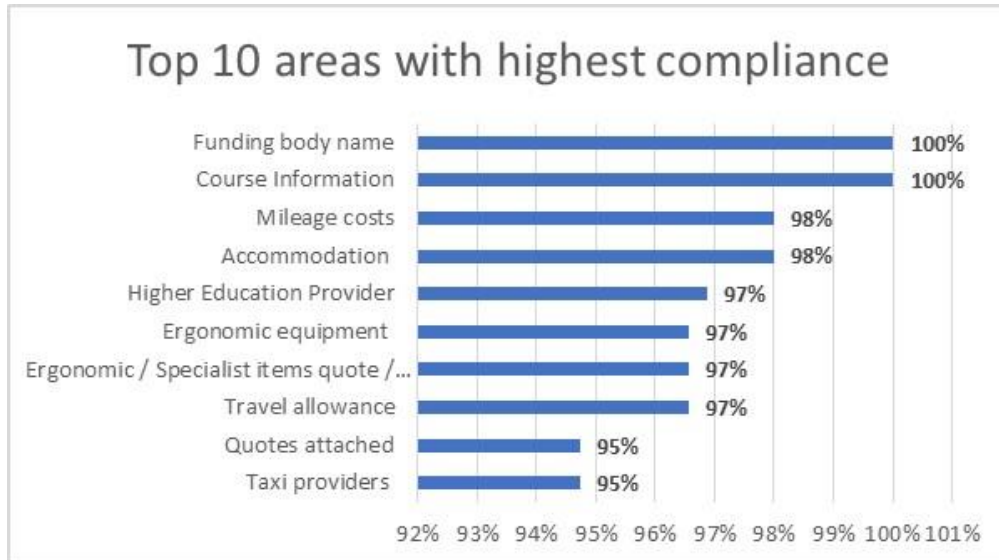
As shown in the extract below, the range of compliance varied from 0% (36 assessors whose reports contained 1 or more spelling or grammatical errors.) through to an average across all assessors of 28%. For most of the assessors (67 scoring 70% or less) there are significant areas for improvement. It should be noted that only 5 assessors achieved full compliance.

	Min	Average	Max
Summary of costs	0%	28%	100%

For the remaining items listed, with a range of outcomes there are areas of improvement required for most centres.

8 Areas with highest compliance rates

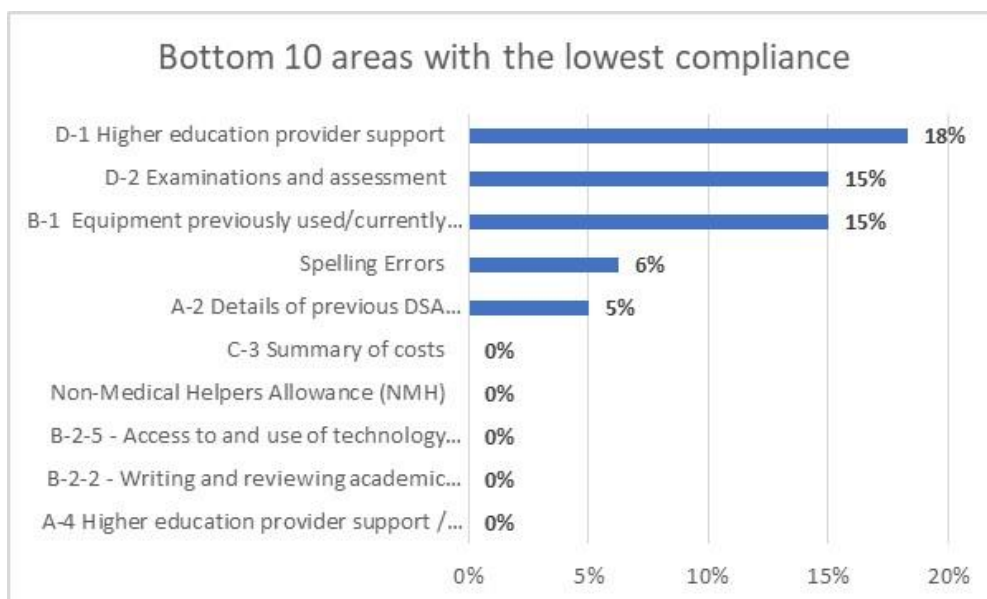
The graph shown below illustrates the top 10 areas for the pilot centres as a group where the compliance rate was at its highest.



Whilst these areas are noted as being the highest compliance, the importance within the needs assessment reports are not significant and will not impact on the student's award.

9 Areas with lowest compliance rates

The graph shown below illustrates the bottom 10 areas for the pilot centres as a group where the compliance rate was at its lowest and where significant areas of improvement are required.



Some of the areas identified above highlight significant omissions from the needs assessment report, for example –

- assessors failing to assess the key impacts of accessing and using technology
- assessing the support provided at the HEP
- or the reasonable adjustments which are in place at the HEP

These examples can impact on the student's study and delay any ultimate support awarded. These items also create additional work for the funding body when having to pend a student's needs assessment report whilst seeking missing or clarification(s) from the assessment centre.

10 Scoring guide

To ensure a consistent approach was applied to each needs assessment report, and to assist the quality assurance executive officers, a detailed guidance of how to review and score each report was developed. As noted previously, this guidance had significant input from both IAC and NNAC.

As a result of the peer review process, the scores were further refined to provide additional clarity and how they were then to be applied. Going forward the scoring guidance will be further refined, in consultation with IAC and NNAC, to ensure the quality assurance team have reflected feedback received through the peer review process and any changes applied to the DfE guidance following the pilot exercise.

11 Assessors guidance

With the introduction of the online needs assessment report portal, a guidance document has been produced to provide assistance to needs assessors when completing their report.

This guidance document details to the assessment team and QA staff, the information to be recorded in the NAR, in accordance with the DfE's audit criteria and reflects any lessons learned through the pilot project.

The guidance will indicate to assessors the details expected in each field of the online needs assessment report, taking in to account current DfE and SFE guidance. With this guidance and the training being delivered by the DSA-QAG team on use of the online NAR portal, significant improvements in compliance is expected.

12 Review of audit tools

DSA-QAG developed internal audit tools to assist the pilot project, these tools were refined and updated throughout the pilot project. With the application of these tools, large volumes of data were analysed and reduced some of the manual workload of producing the audit and assessor summaries. Following a review of the lessons learned, the audit tools are being updated and will improve the overall efficiency, from collecting samples through to producing the final audit summary.

13 Feedback from pilots

At the end of the pilot project and following the issue of the pilot audit outcome and action plan to the pilot centres, DSA-QAG set up a survey to collect feedback from each pilot centre. The purpose of seeking feedback was to allow DSA-QAG to refine the internal processes adopted by DSA-QAG and the external processes adopted by the pilots. This information will provide DSA-QAG with the opportunity to review and revise audit documentation prior to the launch of the QA of needs assessment schedule.

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 29
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

We would like to acknowledge that without the volunteer centres we would not have been able to test the audit criteria and the audit tools. We would also like to thank the pilots for their valued contribution and patience whilst DSA-QAG worked through the needs assessment QA data and analysed the significant amount of information to produce each centre's audit outcome and action plan documentation.

14 Overall conclusion

The overall conclusion is that the pilot project provided valuable information to allow the refinement of the quality assurance process. The guidance for the QA team and assessors and the tools required to complete the audit project are in place and this would not have been possible without the pilot centres.

For assessors there are significant areas where the information being recorded on the needs assessment report needs to be reviewed and the guidance, as issued by SFE, must be adhered to at all times.

The audit highlighted many areas for significant improvement and it is vital centres ensure that their own internal QA process is fit for purpose. Currently, there is no mechanism in place to confirm that the reports submitted for QA have been approved by SFE, therefore some of the issue being highlighted may have been addressed. Further discussion will be required with SFE to ascertain the approval status of reports submitted for quality assurance.

15 Next steps

For non-compliance areas identified within this report, each centre manager must ensure that they invest time with their assessment team and QA personnel, to address the items highlighted. They must ensure their assessment team implement the audit criteria guidance to meet and comply with the DfE NAR audit criteria.

The new audit process and the introduction of the QA of NARs will challenge some of the custom and practice which has grown within the assessment centre and needs assessor group. For example, standard levels of support hours being recommended where there is no obvious justification identified in the recommended strategies.

The DSA-QAG QA team will begin the planning and scheduling of the QA of NAR process, to commence in January 2019, including the phased rollout of the online NAR portal.

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 30
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

Appendix 1 – Pilot Centre Outcome Analysis Table

The percentages displayed below indicate the compliance for each centre and the minimum, average and maximum across all of the centres. Compliance rates of 70% and below are indicated in red. The pilot centres have been randomly and anonymously displayed for the purpose of the analysis (e.g. C1, C2 etc.).

Keys: KI = Key Impacts and RS = Recommended Strategies.

	C1	C2	C3	C4	C5	C6	C7	C8	C9	C10	Min	Avg	Max
SECTION 1: Assessment Information													
Centre Disclosure	63%	100%	100%	100%	89%	98%	100%	100%	63%	95%	63%	91%	100%
SECTION 2: Course Information													
Course Information	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
SECTION 3: Background Information													
A-1 Disability information	100%	93%	90%	89%	100%	97%	100%	100%	97%	100%	89%	97%	100%
A-2 Details of previous DSA assessment/previous support	75%	69%	38%	60%	53%	57%	33%	75%	69%	5%	5%	53%	75%
A-3 Course details	88%	97%	26%	78%	84%	58%	100%	94%	72%	20%	20%	72%	100%
A-4 Higher education provider support / reasonable adjustments	81%	86%	19%	68%	71%	25%	0%	100%	91%	95%	0%	64%	100%
SECTION 4: Effects of disability and recommendations													
B-1 Equipment previously used / currently in use	63%	62%	40%	52%	24%	48%	50%	87%	25%	15%	15%	47%	87%
B-2-1 - Research and reading – KI	88%	76%	71%	60%	76%	75%	100%	94%	78%	75%	60%	79%	100%
B-2-1 - Research and reading – RS	69%	34%	21%	22%	29%	28%	33%	69%	53%	45%	21%	40%	69%
B-2-2 - Writing and reviewing academic work – KI	81%	72%	50%	43%	53%	58%	100%	94%	47%	80%	43%	68%	100%

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 31
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

	C1	C2	C3	C4	C5	C6	C7	C8	C9	C10	Min	Avg	Max
B-2-2 - Writing and reviewing academic work - RS	56%	28%	45%	18%	55%	37%	0%	56%	47%	15%	0%	36%	56%
B-2-3 - Note-taking in lectures and seminars - KI	69%	69%	55%	49%	58%	48%	100%	75%	47%	75%	47%	65%	100%
B-2-3 - Note-taking in lectures and seminars - RS	94%	76%	67%	29%	58%	60%	100%	100%	66%	70%	29%	72%	100%
B-2-4 - Managing time and organising work - KI	44%	45%	52%	49%	47%	47%	100%	56%	38%	90%	38%	57%	100%
B-2-4 - Managing time and organising work - RS	56%	90%	95%	97%	89%	93%	83%	100%	94%	95%	56%	89%	100%
B-2-5 - Access to and use of technology - KI	63%	55%	21%	18%	50%	27%	0%	75%	28%	35%	0%	37%	75%
B-2-5 - Access to and use of technology - RS	75%	66%	67%	63%	76%	77%	33%	100%	50%	50%	33%	66%	100%
B-2-6 - Practical sessions, placements, field trips and additional course activities - KI	94%	90%	86%	69%	61%	85%	83%	87%	78%	80%	61%	81%	94%
B-2-6 - Practical sessions, placements, field trips and additional course activities - RS	94%	97%	95%	92%	89%	85%	100%	100%	94%	100%	85%	95%	100%
B-2-7 – Examinations and timed assessments - KI	94%	45%	62%	51%	63%	53%	83%	81%	72%	45%	45%	65%	94%
B-2-7 – Examinations/ timed assessments - RS	100%	100%	90%	95%	100%	93%	100%	100%	97%	100%	90%	98%	100%
B-2-8 - Social interaction and communication - KI	75%	66%	81%	40%	58%	72%	83%	69%	59%	85%	40%	69%	85%
B-2-8 - Social interaction and communication - RS	94%	97%	98%	98%	89%	83%	100%	100%	100%	65%	65%	92%	100%
B-2-9 - Travel and access to higher education environment - KI	100%	83%	95%	77%	87%	83%	100%	100%	88%	90%	77%	90%	100%
B-2-9 - Travel and access to higher education environment - RS	94%	90%	83%	83%	71%	75%	100%	94%	88%	75%	71%	85%	100%
B-2-10 - Additional information - KI	94%	90%	90%	78%	76%	78%	100%	56%	94%	100%	56%	86%	100%
B-2-10 - Additional information - RS	100%	90%	88%	75%	55%	63%	67%	56%	94%	60%	55%	75%	100%

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 32
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

	C1	C2	C3	C4	C5	C6	C7	C8	C9	C10	Min	Avg	Max
SECTION 5: Summary and costs													
Hardware	69%	59%	67%	62%	47%	77%	83%	87%	63%	35%	35%	65%	87%
Software	94%	93%	90%	82%	53%	93%	100%	100%	91%	95%	53%	89%	100%
Non-Medical Helper support	75%	72%	88%	85%	84%	100%	83%	100%	88%	100%	72%	88%	100%
General allowance	100%	97%	95%	89%	82%	98%	33%	81%	100%	85%	33%	86%	100%
Travel allowance	100%	97%	100%	98%	100%	98%	100%	100%	100%	100%	97%	99%	100%
SECTION 6: Costs													
Equipment allowance - Summary of specialist equipment quotes:	88%	45%	45%	54%	84%	57%	83%	81%	94%	80%	45%	71%	94%
Ergonomic / Specialist items quote / reimbursements:	100%	97%	100%	98%	97%	98%	100%	100%	97%	100%	97%	99%	100%
1. Non-Medical Helpers Allowance (NMH)	81%	28%	90%	72%	87%	78%	100%	31%	41%	0%	0%	61%	100%
2. Non-Medical Helpers Allowance (NMH)	75%	79%	93%	75%	74%	70%	100%	100%	56%	70%	56%	79%	100%
3. Non-Medical Helpers Allowance (NMH)	88%	90%	98%	97%	95%	98%	100%	100%	94%	90%	88%	95%	100%
4. Non-Medical Helpers Allowance (NMH)	100%	100%	100%	100%	100%	100%	100%	100%	100%	95%	95%	100%	100%
Colour sensitivity / Asfedic tuning:	94%	100%	95%	100%	100%	100%	100%	100%	97%	100%	94%	99%	100%
General allowance	88%	86%	86%	91%	92%	100%	100%	100%	97%	100%	86%	94%	100%
Needs Assessment Report	100%	97%	100%	98%	92%	100%	100%	100%	100%	100%	92%	99%	100%
Accommodation	100%	100%	98%	100%	100%	100%	100%	100%	100%	100%	98%	100%	100%
Travel allowance	94%	97%	95%	97%	97%	100%	100%	84%	97%	100%	84%	96%	100%
Mileage costs	100%	100%	98%	100%	100%	100%	100%	100%	100%	100%	98%	100%	100%

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 33
--------------------------	----------------------------	------------------------	-------------------------	--------------------------	------------------

	C1	C2	C3	C4	C5	C6	C7	C8	C9	C10	Min	Avg	Max
C-3 Summary of costs	50%	17%	67%	55%	45%	68%	0%	44%	19%	0%	0%	37%	68%
SECTION 7: HEP support / reasonable adjustments													
D-1 Higher education provider support	94%	90%	93%	92%	55%	18%	100%	50%	100%	100%	18%	79%	100%
D-2 Examinations and assessment	94%	97%	98%	86%	97%	95%	100%	100%	100%	15%	15%	88%	100%
D-3 Other advice and guidance	100%	100%	88%	97%	100%	100%	83%	100%	100%	100%	83%	97%	100%
SECTION 8: Contact details													
Funding body name	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Specialist equipment	50%	93%	100%	100%	100%	98%	100%	100%	97%	100%	50%	94%	100%
Ergonomic equipment	100%	97%	100%	100%	100%	98%	100%	100%	100%	100%	97%	99%	100%
Non-Medical Help	100%	83%	93%	97%	100%	95%	100%	100%	100%	95%	83%	96%	100%
Taxi providers	100%	97%	100%	100%	95%	100%	100%	100%	100%	100%	95%	99%	100%
Higher Education Provider	100%	100%	100%	100%	100%	100%	100%	100%	97%	100%	97%	100%	100%
SECTION 9: General QA Errors													
Spelling Errors	6%	48%	17%	14%	26%	32%	50%	87%	22%	35%	6%	34%	87%
Incorrect Name	81%	86%	98%	94%	95%	92%	83%	100%	100%	100%	81%	93%	100%
Incorrect Gender	63%	86%	95%	95%	95%	93%	83%	94%	97%	95%	63%	90%	97%
Quotes attached	100%	100%	100%	100%	95%	100%	100%	100%	100%	100%	95%	99%	100%

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 34
--------------------------	----------------------------	------------------------	-------------------------	--------------------------	------------------

Appendix 2 – Assessor Outcome Analysis Table

The percentages displayed below indicate the consolidated minimum, average and maximum compliance for each assessor. Compliance rates of 70% and below are indicated in red.

Key:

KI = Key Impacts and RS = Recommended Strategies.

	Min	Avg	Max	Assessors achieving	
				Min Score	< 70%
SECTION 1: Assessment Information					
Centre Disclosure	25%	93%	100%	2	6
SECTION 2: Course Information					
Course Information	100%	100%	100%	79	0
SECTION 3: Background Information					
A-1 Disability information	50%	95%	100%	2	8
A-2 Details of previous DSA assessment/previous support	0%	55%	100%	13	43
A-3 Course details	0%	67%	100%	15	29
A-4 Higher education provider support / reasonable adjustments	0%	60%	100%	23	35
SECTION 4: Effects of disability and recommendations					
B-1 Equipment previously used/currently in use	0%	44%	100%	20	57
B-2-1 - Research and reading - KI	0%	75%	100%	3	30
B-2-1 - Research and reading - RS	0%	34%	100%	27	63
B-2-2 - Writing and reviewing academic work - KI	0%	57%	100%	11	48
B-2-2 - Writing and reviewing academic work - RS	0%	38%	100%	24	63
B-2-3 - Note-taking in lectures and seminars - KI	0%	57%	100%	7	45
B-2-3 - Note-taking in lectures and seminars - RS	0%	62%	100%	9	37
B-2-4 - Managing time and organising work - KI	0%	50%	100%	10	55
B-2-4 - Managing time and organising work - RS	25%	92%	100%	2	9
B-2-5 - Access to and use of technology - KI	0%	32%	100%	37	59
B-2-5 - Access to and use of technology - RS	0%	67%	100%	9	32
B-2-6 - Practical sessions, placements, field trips and additional course activities - KI	0%	80%	100%	3	22
B-2-6 - Practical sessions, placements, field trips and additional course activities - RS	0%	94%	100%	1	4
B-2-7 – Examinations and timed assessments - KI	0%	61%	100%	5	43
B-2-7 – Examinations and timed assessments - RS	50%	97%	100%	1	4
B-2-8 - Social interaction and communication - KI	0%	64%	100%	3	42
B-2-8 - Social interaction and communication - RS	25%	95%	100%	1	6
B-2-9 - Travel and access to higher education environment - KI	0%	88%	100%	1	10

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 35
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

	Min	Avg	Max	Assessors achieving	
				Min Score	< 70%
B-2-9 - Travel and access to higher education environment - RS	0%	85%	100%	2	15
B-2-10 - Additional information - KI	0%	85%	100%	4	13
B-2-10 - Additional information - RS	0%	78%	100%	7	19
SECTION 5: Summary and costs					
Hardware	0%	66%	100%	6	35
Software	0%	85%	100%	2	12
Non-Medical Helper support	25%	87%	100%	2	12
General allowance	0%	89%	100%	3	11
Travel allowance	75%	99%	100%	1	0
SECTION 6: Costs					
Equipment allowance - Summary of specialist equipment quotes:	0%	65%	100%	14	33
Ergonomic / Specialist items quote / reimbursements:	75%	99%	100%	4	0
1. Non-Medical Helpers Allowance (NMH)	0%	70%	100%	13	29
2. Non-Medical Helpers Allowance (NMH)	25%	78%	100%	3	26
3. Non-Medical Helpers Allowance (NMH)	50%	96%	100%	1	4
4. Non-Medical Helpers Allowance (NMH)	90%	100%	100%	1	0
Colour sensitivity / Asfedic tuning:	67%	98%	100%	2	3
General allowance	0%	92%	100%	2	9
Needs Assessment Report	0%	98%	100%	1	1
Accommodation	75%	100%	100%	1	0
Travel allowance	50%	97%	100%	1	1
Mileage costs	75%	100%	100%	1	0
C-3 Summary of costs	0%	47%	100%	20	56
SECTION 7: HEP support / reasonable adjustments					
D-1 Higher education provider support	0%	79%	100%	12	18
D-2 Examinations and assessment	0%	92%	100%	3	7
D-3 Other advice and guidance	25%	97%	100%	1	4
SECTION 8: Contact details					
Funding body name	100%	100%	100%	79	0
Specialist equipment	25%	97%	100%	1	3
Ergonomic equipment	75%	100%	100%	1	0
Non-Medical Help	33%	96%	100%	1	4
Taxi providers	75%	99%	100%	3	0
Higher Education Provider	75%	100%	100%	1	0

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 36
--------------------------	----------------------------	------------------------	-------------------------	--------------------------	------------------

	Min	Avg	Max	Assessors achieving	
				Min Score	< 70%
SECTION 9: General QA Errors					
Spelling Errors	0%	28%	100%	36	67
Incorrect Name	33%	93%	100%	1	6
Incorrect Gender	25%	92%	100%	1	8
Quotes attached	50%	99%	100%	1	1

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 37
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

Appendix 3 - DfE Quality Assurance Indicators Criteria for QA of Needs Assessment Reports.

1. The Needs Assessment Report (NAR) should be a stand-alone document that can be read and understood by a non-specialist. It should be clear in presentation, grammatically correct, free from jargon and all acronyms explained.
2. The NAR should demonstrate the impact of the student's disability on their ability to study their specific chosen course, at their specific chosen Higher Education Provider (HEP).

The assessor needs to demonstrate their understanding of how the student's disability manifests itself in this specific case and produce a bespoke NAR that focusses on how X disability affects that student's learning. While there should be a clear and personalised general description of the student's disability/SpLD and relevant information from the Educational Psychologist or GP's evidence if available, the emphasis should be on how that student with X disability will integrate into Y HEP.

3. The NAR should show an understanding of the requirements and demands of the course. This should be evidenced by demonstrating that the assessor has researched, and recorded the disability support provision at the chosen university, the demands of the course and provided links to the information they have accessed.

If the information that the assessor requires is not readily available on the HEP's website they should evidence that they have contacted the HEP disability officer, course leader or other person in the HEP with knowledge of the course and the HEP support available for disabled students.

In cases of complex multiple disabilities contact with the HEP should always be made. This will also enable the assessor to recommend support that will align with anything already provided by the HEP.

4. The assessor should demonstrate how they have arrived at the best package of support for that student.

For example, 'the student has X disability. In their case, this means that the student has difficulty with Y and Z. I have seen evidence from 1, 2, and 3 that supports what the student is telling me' This would also mean that both Student Finance England (SFE) and the assessor would know if they both have the same evidence and are drawing the same conclusions.

The NAR should show the process by which the assessor reached the decision to make the recommendations they have made:

For example, 'Strategies X, Y, and Z might be useful for a student in this circumstance, but Y is the most appropriate because...' It would also enable the assessor to say why X, Y and Z might be appropriate but they have chosen different option W, and give the reason why. There should be a record of why the assessor has decided what to recommend and justify why, if applicable, they have chosen not to recommend the most cost-effective product. The assessor would not have to demonstrate all available strategies to the student but clearly justify why the recommended strategy was the most appropriate. The assessor should explain why they have recommended the hours of support and explain why the student might not take up the full recommendation if applicable. For example, a student with mental

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 38
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------

health difficulties might have been awarded three hours of specialist mentor per week but might at times only take up two hours and 'bank' the remaining hour to draw on at times when increased support would be beneficial or may not require them at all.

5. The NAR should show the date of the interview, the date that the assessment was completed, and the date the NAR was submitted.

6. There should be a range of statements for each score against each area of quality measured. Not just a score of for example 1-5.

7. Student Summary Needs Assessors should show evidence that the student has been verbally advised why their support package has been tailored the way it has and how it is envisaged this will work in their learning environment. Assessors should reiterate this in the NAR at C-1 by including a written explanation for the student to refer to. This will enable students, who might arrive at their HEP several months after their assessment, to have a clear point of reference, written in an understandable way, explaining why and what support they have been given which they might wish to share with their HEP.

If the assessor has completed the NAR with full information required, then a brief student summary should not be difficult or time consuming. The department is looking for a short paragraph that sums up why the student has been given particular support and how it is expected to help them with their course.

This is the 'Student Summary' not for anyone else so should be written from a layperson's perspective. This might be something that the student might wish to share with the provider, HEP DO or lecturers if they do not want to share the DSA2 letter or the full NAR. It could also help some students articulate why they are having particular support.

8. When recommendations are made for conditions outside those accepted by the funding body additional and appropriate evidence should be provided when making the recommendation to support the claim.

(DfE 23/03/18)

Owner: DSA-QAG	Date: 20/11/2018	Version: 2.0	Status: Final	QA of NAR Pilot Analysis	Page 39
--------------------------	----------------------------	------------------------	------------------	--------------------------	------------------