

# INSPECTION REPORT

## Midland Technical Services

13 June 2001



ADULT LEARNING  
INSPECTORATE

## Grading

Inspectors use a seven-point scale to summarise their judgements about the quality of learning sessions. The descriptors for the seven grades are:

- *grade 1 - excellent*
- *grade 2 - very good*
- *grade 3 - good*
- *grade 4 - satisfactory*
- *grade 5 - unsatisfactory*
- *grade 6 - poor*
- *grade 7 - very poor.*

Inspectors use a five-point scale to summarise their judgements about the quality of provision in occupational/curriculum areas and in New Deal options. The same scale is used to describe the quality of leadership and management, which includes quality assurance and equality of opportunity. The descriptors for the five grades are:

- *grade 1 - outstanding*
- *grade 2 - good*
- *grade 3 - satisfactory*
- *grade 4 - unsatisfactory*
- *grade 5 - very weak.*

The two grading scales relate to each other as follows:

SEVEN-POINT SCALE	FIVE-POINT SCALE
grade 1	grade 1
grade 2	
grade 3	grade 2
grade 4	grade 3
grade 5	grade 4
grade 6	grade 5
grade 7	

## Adult Learning Inspectorate

The Adult Learning Inspectorate (ALI) was established under the provisions of the *Learning and Skills Act 2000* to bring the inspection of all aspects of adult learning and work-based training within the remit of a single inspectorate. The ALI is responsible for inspecting a wide range of government-funded learning, including:

- work-based training for all people over 16
- provision in further education colleges for people aged 19 and over
- the University for Industry's *learnirect* provision
- adult and community learning
- training given by the Employment Service under the New Deals.

Inspections are carried out in accordance with the *Common Inspection Framework* by teams of full-time inspectors and part-time associate inspectors who have knowledge of, and experience in, the work which they inspect. All providers are invited to nominate a senior member of their staff to participate in the inspection as a team member.

## Inadequate provision

A provider's provision will normally be deemed to be less than adequate where

- one third or more of published grades for occupational/curriculum areas and New Deal options are judged less than satisfactory, or
- leadership and management are judged to be less than satisfactory

The final decision as to whether the provision is inadequate rests with the Chief Inspector of Adult Learning. The overall judgement as to whether the provision is adequate or inadequate is included in the summary section of the inspection report.

## **SUMMARY**

### **The provider**

Midland Technical Services, known locally as Midland Training Services, is a limited company based in Birmingham. It provides training in care and early years care for young people on modern apprenticeships and other work-based training programmes. Customer service training was not inspected as there are only six trainees on a residual contract finishing their qualifications.

### **Overall judgement**

The quality of the provision is not adequate to meet the reasonable needs of those receiving it. More specifically, the work-based training for young people in care and early years care is unsatisfactory and the leadership and management of the company are very weak.

### **Work-based learning for young people**

There are 24 foundation modern apprentices, 36 advanced modern apprentices and 24 trainees on other work-based learning programmes. Of these trainees, 54 are taking national vocational qualifications (NVQs) at levels 2 or 3 in care and 30 are taking NVQs at levels 2 or 3 in early years care. No one has completed a foundation or advanced modern apprenticeship at Midland Technical Services. On the other work-based training programmes the achievement rate since 1997 is 46 per cent, which is less than satisfactory. Trainees benefit from the regular visits trainers make to their workplaces. Training facilities and resources are less than satisfactory. Key skills training is poorly linked to the occupational training. Trainees and employers do not understand the relevance of key skills to their work. Initial assessment is poor and it is not used effectively to develop individual training plans or to plan trainees' subsequent training and assessment. The assessment practices are inadequate and the NVQ criteria are applied inconsistently by different assessors.

### **Leadership and management**

The leadership and management of Midland Technical Services are very weak. The company is too reliant on informal procedures and internal communications are ineffective. There is no co-ordination between the training provided by employers and that provided by the company's trainers. Midland Technical Services does not set standards for the training sessions which its staff give in the workplace. The quality of some training is unsatisfactory. There are no formal monitoring procedures for equal opportunities. No attempts have been made to recruit more men into the care training. Data collection is minimal and information which is collected is not

effectively used to help managers make decisions. Internal verification lacks rigour and is unsatisfactory. The company's quality assurance policy does not explain how its quality assurance systems relate to trainees. Quality assurance procedures are given to the staff who have not been involved in drawing them up and do not understand them. There is no constant process of self-assessment to bring about continuous improvement.

## GRADES

Health, care & public service	4
Contributory grades:	
Work-based learning for young people	4

Leadership and management	5
Contributory grades:	
Equality of opportunity	5
Quality assurance	5

## KEY STRENGTHS

- frequent and effective workplace visits by trainers

## KEY WEAKNESSES

- poor achievement rates
- inadequate initial assessment
- poor management of training
- inadequate quality assurance
- inadequate use of data to bring about continuous improvement

## OTHER IMPROVEMENTS NEEDED

- better induction process
- wider participation in self-assessment

## THE PROVIDER AND ITS CONTEXT

1. Midland Technical Services (MTS) was established in 1977 as a technical, management and training consultancy to the National Health Service, the private health and social care sector, local authorities, commerce and industry. In 1984 it became a limited company. It now operates and is known locally as Midland Training Services. It is based at the Highcroft Hospital site in Erdington, in the north of Birmingham. Trainees are recruited from across Birmingham and neighbouring towns. MTS occupies two small premises, one of which contains the training centre, the other the administration offices. The buildings are due to be demolished when the hospital site is redeveloped in December 2001 and MTS intends to find new premises nearby. MTS employs 13 staff, of whom eight are directly involved in training, assessment or internal verification activities. Currently, MTS trains 36 advanced modern apprentices, 24 foundation modern apprentices and 24 trainees working towards NVQs on other work-based training programmes. Employed trainees receive all their training in the workplace, with MTS's staff visiting employers' premises approximately every three weeks. Unemployed trainees are found work placements by MTS and attend weekly training sessions at the MTS training centre. Employed trainees can also attend the MTS training centre, which some choose to do in their own time. There are also six trainees finishing off their customer service training, which MTS was contracted to provide by the local training and enterprise council (TEC) before its abolition. This training was not inspected.

2. The training is funded through the Birmingham and Solihull Local Learning and Skills Council. In April 2001, the unemployment rate in Birmingham was 5.9 per cent, much higher than both the West Midlands average of 3.9 per cent and the national average of 3.3 per cent. Birmingham has substantial minority ethnic communities, which account for 21 per cent of the population. In September 2000, the proportion of school leavers in Birmingham achieving five or more general certificates of secondary education (GCSEs) at grade C and above was 40.8 per cent, compared with the national average of 49.2 per cent.

## THE INSPECTION

3. A team of four inspectors spent a total of 11 days at MTS during June 2001. They interviewed 44 trainees, 21 of MTS's staff and 15 workplace supervisors or employers. They also visited 19 workplaces and observed and graded six training sessions. Inspectors examined a range of documents, including 28 trainees' portfolios of evidence, 39 trainees' records, policies and procedures and minutes of meetings. They studied internal and external verification records and MTS's self-assessment report, which was prepared in December 2000 and updated in January 2001.

Grades awarded to learning sessions

	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Total
Health, care & public service	0	1	0	2	2	1	0	6
<b>Total</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>0</b>	<b>6</b>

## OCCUPATIONAL AREAS

### Health, care & public service

Grade 4

Programmes inspected	Number of learners	Contributory grade
Work-based learning for young people	84	4

4. There are 24 foundation modern apprentices, five of them working towards NVQs in early years care and 19 taking NVQs in care. There are 36 advanced modern apprentices, 12 working towards NVQs in early years care and 24 taking NVQs in care. All modern apprentices are training in five key skills as part of their modern apprenticeship framework. On the NVQ training there are 13 trainees working towards NVQs in early years care and eleven working towards NVQs in care. Trainees are referred to MTS by their employers or the careers service. All applicants are interviewed by a member of MTS's staff, when basic information about their previous experience, education and occupational interests is collected. Unemployed trainees complete an initial assessment at the MTS training centre and MTS helps them to find work placements. In their first two to four weeks they are assessed to determine which type of training and occupational area best meets their needs. Employed trainees take an initial assessment in their own time and return it to MTS for marking. Employed trainees receive an induction to the training programme from MTS's staff at their workplace, while those on work placements go to the MTS training centre for their induction. Trainees are helped to choose appropriate NVQs for the type of care establishment they work in. They work in establishments including residential care homes for older people, nursing homes or private day nurseries, or as classroom assistants in primary schools. A few trainees work in residential care establishments for people with mental illness. MTS has seven full-time and one part-time staff providing the care and early years care training. Most carry out training, assessments and reviews of trainees' progress. Two staff members are responsible for developing specific aspects of MTS's work, such as key skills training. There are five tutors, seven qualified assessors, four qualified internal verifiers and three trainers qualified to teach key skills at levels 2 and 3. Two of the trainers do not have teaching or training qualifications. MTS currently uses five work-based assessors.

The following tables show the achievement and retention rates available up to the time



of inspection.

Work-based learning for young people								
Foundation modern apprenticeships (FMA)								
	1997-98		1998-99		1999-2000		2000-01	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Number that started			30		48		28	
Still in training			0	0	3	6	21	75
FMA framework completed			0	0	0	0	0	0
NVQ level 2 completed			23	77	30	62	2	7

Work-based learning for young people								
Advanced modern apprenticeships (AMA)								
	1997-98		1998-99		1999-2000		2000-01	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Number that started	40		54		62		39	
Still in training	0	0	0	0	2	3	34	87
AMA framework completed	0	0	0	0	0	0	0	0
NVQ level 2 completed	22	55	12	22	24	39	0	0
NVQ level 3 completed	13	32	24	44	15	24	1	3

NVQ Training								
NVQ Training								
	1997-98		1998-99		1999-2000		2000-01	
	Number	Per cent	Number	Per cent	Number	Per cent	Number	Per cent
Number that started	59		34		49		18	
Still in training	0	0	2	6	7	14	15	83
Individual learning plan completed	33	56	21	62	9	18	0	0
Left without completing individual learning plan	26	44	10	29	33	67	0	0
NVQ level 2 completed	15	25	12	35	6	12	0	0
NVQ level 3 completed	18	31	10	29	3	6	0	0

## STRENGTHS

- frequent and effective workplace visits

## **WEAKNESSES**

- poor achievement rates
- inadequate key skills training and assessment
- inadequate initial assessment
- weak assessment practices

## **OTHER IMPROVEMENTS NEEDED**

- better induction process

5. Trainees value the workplace visits by MTS staff, which take place at least every three weeks. During these visits the trainees' progress is reviewed and employers are informed about this. Most visits are on a one-to-one basis, enabling staff to give individual support to trainees. Trainees can discuss both their practical skills and the theory components of the NVQs and agree work to be done. The visits can also include assessments. Personal relationships between MTS staff, trainees and employers are good. Some MTS staff have counselling qualifications and are able to provide skilled pastoral care. MTS also has good links with community health counselling services, for more complex matters affecting trainees.

6. Achievement rates are poor. No modern apprentices have achieved the whole modern apprenticeship framework since MTS started recruiting modern apprentices in 1997. No trainees have achieved any key skills units. On the advanced modern apprenticeship care programme, 77 per cent of apprentices since 1997 have left the training without completing it. On the advanced modern apprenticeship in early years care, 71 per cent of apprentices have left early without completing their training. There have been 97 foundation modern apprentices in care training with MTS since 1998, of whom 67 per cent left the programme early without achieving all their aims. There have been too few foundation modern apprentices in early years care since 1999 to make judgements on achievement and retention. The NVQ trainees do not follow key skills training. The achievement rate of NVQs on these programmes is less than satisfactory. MTS does not know what the early leavers have gone on to do next.

7. Key skills training and assessment is inadequate at MTS, a weakness which is recognised in the self-assessment report. A project manager was appointed in autumn 2000 to rectify this. One-to-one key skills training has recently been introduced. Thirty modern apprentices have now completed approximately half of the key skills requirements. However, they do not understand the connection between key skills in application of number or information technology and their own jobs. They have poor access to computer facilities at their workplaces. Employed trainees also have difficulty finding time to use the computer facilities at the MTS training centre, so their

achievement of key skills is hindered. Employers have a poor understanding of key skills and their relevance to care work. MTS's staff have not encouraged trainees to gather key skills evidence at the same time as they collect evidence for their NVQs. However, this is now being done retrospectively, as MTS staff are looking through trainees' NVQ portfolios for appropriate evidence which could also count towards their key skills requirements. MTS has registered some trainees with the awarding body for the incorrect levels of key skills to complete their modern apprenticeship frameworks. Some trainees' individual training plans also have incorrect key skills recorded. Copies of the modern apprenticeship frameworks are not available in the training centre.

8. Initial assessment of trainees is inadequate and does not help to ensure that trainees are given appropriate training. The process of initial assessment is different for employed and unemployed trainees. The process lacks rigour, with employed trainees taking the assessment papers home to complete. Some training activities start before the results of initial assessment are known. For example, trainees were asked to read sections from the induction handbook before MTS knew anything about each trainee's reading ability. Insufficient information is gathered about trainees' abilities and prior experiences to make sure that they have appropriate support. Decisions about the choice of training for each trainee are often made before the results of the initial assessments are known and MTS staff members give different answers about who makes these decisions and what information they are based on. Some trainees are on inappropriate training because MTS did not have enough places on suitable training programmes when the trainees started. The courses are monitored with the intention that MTS will move trainees to an appropriate course when they can. Employers are not involved in the selection of optional units for the different qualifications.

9. The assessment practices are inadequate and do not sufficiently involve trainees. Early years care trainees in particular, take little responsibility for building their own NVQ portfolios. This weakness is recognised by MTS, which has recently made some changes to training packs which each trainee uses, in the hope of improving this. The assessments which are based on trainees' everyday work are not recorded sufficiently clearly. Different assessors apply the NVQ assessment criteria differently. Assessors do not receive enough support or opportunities to share good practice effectively. A new assessment process was approved by the external verifier during a visit the week before the inspection started.

### Poor Practice

*All trainees who work with children are required to have police checks. MTS do not have procedures to carry out these checks for trainees who are not employed or procedures to assure that employers carry out the checks for their employed trainees.*

*During an MTS training session at a care home, the trainer/assessor did not pick up as poor practice the fact that medication was left out in the resident's bedroom when the room was unlocked. When this was later discussed, it was stated that this was quite usual.*

## LEADERSHIP AND MANAGEMENT

## Grade 5

10. MTS is led by its managing director, who plays an active role in many aspects of the government-funded training which MTS offers. All members of staff report directly or indirectly to him. There are two staff teams, one for training and assessment activities and the other for administration. In addition to government-funded training, MTS offers private training and consultancy services. There have been a number of recent staff changes, with some new staff joining MTS to carry out specific projects. Job descriptions are currently being revised. MTS has an equal opportunities policy and a quality assurance policy. The self-assessment report was completed by the managing director with contributions from the staff. It was written in December 2000 and updated the following month.

### STRENGTHS

- good support for new staff in training and assessment

### WEAKNESSES

- ineffective internal communications
- poor management of training
- poor equal opportunities procedures
- inadequate quality assurance
- inadequate use of data to bring about continuous improvement
- inadequate internal verification

### OTHER IMPROVEMENTS NEEDED

- better staff training opportunities
- wider participation in self-assessment

11. MTS has introduced a system of observing staff training and assessment activity in the last 18 months. Staff are observed by an experienced and more senior member of staff carrying out training both in the workplace and the training centre. Detailed written feedback is given on their performance. These observations have concentrated on the newer members of staff.

12. MTS holds a variety of different meetings, including staff meetings, training-programme review meetings, assessors' meetings and internal verification meetings. Although meetings are used to provide information for staff, there is insufficient clarity about the topics to be covered at each meeting. Minutes of meetings are very brief and they do not give sufficient information about what was discussed in the meeting to be helpful to those who were unable to attend. Action decided on at the meeting is not clearly recorded, nor is it clear who is responsible for each action or when the action has to be taken. Staff understand their own responsibilities, but not those of their colleagues

who are also dealing with the same trainees. MTS's trainers, for example, do not understand the initial assessment process. There is little discussion of MTS's overall direction and staff have little understanding of its current objectives and targets.

13. The overall management of training is poor. In the workplace, some employers provide additional training courses for their staff; others do not. There is no co-ordination between the training provided by employers and that provided by MTS. There is no systematic monitoring of the on-the-job training provided by employers. MTS does not set standards for the individual training sessions which MTS staff provide in the workplace. Some employers do not allow trainees to go to their training sessions. MTS has dealt with this problem by arranging for some training sessions to take place in the evenings. This means that trainees are receiving training in their own time, often after a day's work. The teaching observed by inspectors was mainly satisfactory. However, training sessions in some nurseries and care homes are conducted in inappropriate surroundings, often with little space. Some training sessions take place inappropriately in corridors, residents' bedrooms and in the same room as children playing. In the MTS training centre, training takes place in a room with insufficient privacy. Training sessions are interrupted by the telephone, the door bell and members of staff walking through the room to other parts of the building.

14. Staff have undertaken a number of training courses. These include assessors' qualifications, food hygiene training and workshops organised by the local TEC. Only senior members of staff have qualifications in teaching or training.

### **Equality of opportunity**

**Contributory grade 5**

15. MTS's equal opportunities policy does not refer to legislation about equal opportunities. Information about trainees in terms of their gender, ethnicity and any disability is compiled and analysed. MTS compares its performance against other local training organisations, but the results of this are not used to increase the number of trainees from under-represented groups, such as the number of men in care training. Staff have not received recent training in equal opportunities, nor is it a standard agenda item for meetings. The MTS training centre is on the ground floor, with easy access for people with mobility difficulties.

16. Trainees lack awareness of equal opportunities. Induction documents on the subject are brief and MTS fails to reinforce and relate equal opportunities to situations which the trainees may encounter at work. For example, the NVQ unit which relates to equal opportunities is introduced late in the training programmes and the trainees' progress reviews do not cover equal opportunities matters. There is no formal monitoring of equal opportunities in work placements, or of how trainees are protected from harassment there, although MTS's staff visit the work placements frequently to see if there are any problems. MTS's staff do not have systematic updating or training about equal opportunities. MTS has basic complaints and harassment procedures.

**Quality assurance****Contributory grade 5**

17. MTS's quality assurance policy does not cover the quality of training. There are no procedures to ensure that staff deal with trainees consistently throughout their training. There are no written procedures about the quality of training sessions. The procedure for reviews of trainees' progress is brief. It concentrates on ensuring that the reviewer discusses NVO progress with the trainee and then completes the relevant documents. It does not cover the wider purpose of review meetings or specify how the review should be conducted. Recently, a member of the quality assurance operation team has begun observing the training staff's work. This has concentrated on newer members of staff and only when they conduct group-training sessions. There has been minimal observation of one-to-one training sessions, which is the main method of training used. There are few opportunities for MTS's staff to share good practice.

18. Trainees and workplace supervisors are asked to complete questionnaires evaluating their training experience and contact with MTS each year. The questions ask trainees to rate how happy they are with different aspects of their training. However, the evaluation sheets do not ask trainees and supervisors to specify which training courses they are involved in. It is not possible, therefore, to identify to which training the questionnaire answers refer. No questionnaires have been completed since June 2000. Although MTS collates the results of these surveys they are not analysed to see which aspects of training need to be improved.

19. Internal verification in early years care and education training has recently been changed to make it more thorough. However, trainees' portfolios all contain similar evidence and are kept in the MTS training centre, rather than with the trainee. Trainees do not manage their own portfolios and cannot explain how their evidence relates to the requirements of their NVO. All recording of evidence and assessments is done by MTS's assessors at the training centre as there is not enough time to do this with trainees. Assessment itself is inadequate, with some poor record-keeping, although a new assessment system has recently been introduced. Until March 2001, portfolios were not internally verified until the trainee had completed all units of their NVO; then three units of each trainee were internally verified. It is still impossible to tell from the trainees' portfolios which units have been internally verified as all records of this are kept separately by the internal verifier. There is only one internal verifier for the early years care programme. MTS's internal-verification procedures for care programmes changed while the inspection was taking place. MTS's staff had the new procedures explained to them but were not involved in making decisions about the changes. Neither internal-verification system is sufficiently structured and rigorous and assessors are not able to share ideas and learn from each other.

20. MTS's collection and use of data are inadequate. There has been no analysis of data for the contract year which finished at the end of March 2001. The most recent analysis of data relates to training in the year 2000. Trends are not identified to be used as part of a process of continuously improving performance or the quality of training. There are no targets set for improvements. Any health problems trainees have are recorded on a health declaration form but this information is not monitored.

## MIDLAND TECHNICAL SERVICES

21. The self-assessment report was compiled following consultation with MTS's staff. Feedback from trainees and employers or work-based supervisors was not referred to, nor was any data used to help develop the report. The report failed to recognise most of the weaknesses identified during the inspection.