



Action Plan

This Action Plan must be completed electronically and submitted in Microsoft Word format to regulation@sqa.org.uk by 9 November 2022.

Issue number	Detail of Issue recorded	Risk rating	Proposed action and evidence to be provided (Failure to include a description of your intended methodology AND details of the evidence that you will provide could result in your Action Plan not being approved by ACG.)	Target date for completion by awarding body ¹	Date Issue closed out by SQA Accreditation ²
1. Principle 12	Provider 1 did not record the type of identification provided by learners in accordance with awarding body requirements.	Medium	<p>Provider</p> <ol style="list-style-type: none"> By the 31st of October 2022, the provider is to supply a copy of their updated register template to ensure that they are recording the type of learner ID supplied by the learner. <p>Evidence: Updated register template.</p>	30/11/2022	30/11/2022

¹ If the awarding body believes it has completed the action prior to approval of the Action Plan by ACG, insert the considered date of completion. The date will be subject to review depending on the quality of the evidence supplied.

² Issues can only be closed out once the evidence to complete the action has been quality reviewed and the Action Plan has been approved by ACG. The period of time between ACG approval and the date the Issue is closed out is not necessarily reflective of any quality issues.

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			<p>FutureQuals</p> <p>2. By the 14th of October create and implement LEE (Learner eligibility and existence) policy and share with all providers.</p> <p>Evidence: LEE policy</p> <p>3. By the 31st of October Update certificate claims form to include a column for providers to confirm the form of ID provided.</p> <p>Evidence: Updated certificate claims form.</p> <p>4. By 30th November, check the providers revised register template to ensure it captures the required information. Providing feedback if the</p>		

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			<p>template does not meet the requirements. Evidence: Information/feedback on the register template.</p> <p>5. By 30th November update Certificate Claim Details form to include type of ID checked by providers when learners enroll on qualifications and communicate to providers.</p> <p>Evidence: Updated certificate claim details form.</p>		
2. Principles 13 and 15	According to its last external quality assurance (EQA) report (October 2021), provider 1 does not yet have Direct Claim Status (DCS) for the first aid qualifications offered and therefore would require EQA activity before certification could be claimed.	High	In January 2021, FutureQuals started to introduce changes to our quality assurance process in preparation for the implementation of our Centre Assessment Standards Scrutiny (CASS) strategy which was fully operational in quarter 3 of 2021. The initial changes in January 2021 included the introduction of the	30/11/2022	30/11/2022

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	However, since the last EQA visit, certification claims have been processed by the awarding body without any quality assurance checks.		<p>“certificate claim details” form. This form requires providers to detail the assessor and IQA for each learner for whom they are claiming a certificate.</p> <p>This information feeds into a risk rating system which also includes information on the provider and the qualification. The four elements (Assessor, IQA, Provider and Qualification) together enable the Quality Assurance team to evaluate the risk of every individual certificate claim and then decide whether an EQA sample is required before releasing the certificate.</p> <p>With the introduction of CASS elements from January 2021, the term Direct Claims Status or DCS became defunct internally, as all claims were subject to quality assurance through the risk rating system and subsequent EQA sampling where necessary. Messaging to providers regarding no longer using the term “DCS” or “Direct</p>		

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			<p>Claims Status” was given in our CASS policy, Section 9, Page 6 – “Direct claims status (DCS) no longer exists, however, the data and information previously used to award DCS can be considered when evaluating the risk rating of providers and as such, certification claims”.</p> <p>The updating of documentation to remove references to DCS is in progress, and at the time of the EQA report the template had not been updated.</p> <p>The checks that were implemented include a number previously undertaken by EQAs and include assessor and IQA checks to ensure they continue to meet the requirements for delivery of the qualification(s) as described in the qualification specification. We also review previous feedback regarding the assessor and IQA for each learner</p>		

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			<p>to ascertain whether their assessment and IQA decisions are sound, or whether concerns were raised. This would influence our decision on the level of risk and whether an EQA sample was required prior to certificates being released.</p> <p>All certificate claims that have been released since the EQA sample in October 2021 have been released in line with the evaluation of risk as described above.</p> <p>6. By 30th November 2022, send reminder to all providers about the removal of DCS and key features of CASS, including risk assessment of every certificate claim.</p> <p>Evidence: Communication to all providers.</p>		

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3. Principle 16	The complaints policy at provider 1 did not make reference to the fact that learners can escalate complaints to FutureQuals awarding body.	Low	<p>Provider</p> <p>7. By the end of October, the provider to update and supply the revised complaints policy to FutureQuals which includes</p> <ul style="list-style-type: none"> a. An escalation process within the provider should the learner not be satisfied with the initial response. b. An escalation process to the Awarding Organisation should the learner not be satisfied with the response. <p>FutureQuals</p> <p>8. By 30th November, check the providers revised policy to ensure it meets requirements. Providing feedback if the policy does not meet the requirements.</p>	30/11/2022 Extension to 31/1/2023 Extension to 28/2/2023	14/2/2023

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			9. By 30 th November, check other provider's policy to ensure it meets requirements. Providing feedback if the policy does not meet the requirements Evidence: Information about provider policies which shows that requirements have been met in terms of complaints processes.		
4. Principle 18	The Malpractice and Maladministration policy at provider 1 did not make it clear that all suspected or actual cases of malpractice and maladministration would be reported to the awarding body. Additionally, the Accreditation Auditor found other wording of the policy to be confusing.	Low	Provider 10. By the end of October, the provider to update and supply their malpractice and maladministration policy to ensure that the wording is clear and easy for learners and delivery staff to understand. 11. By the end of October update their malpractice and maladministration process to	30/11/2022 Extension to 31/1/2023	2/2/2023

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			<p>ensure timely reporting of all actual or suspected malpractice/ maladministration to FutureQuals.</p> <p>FutureQuals</p> <p>12. By 30th November, check the providers revised policy and process to ensure it meets requirements. Providing feedback if the policy and/or process do not meet the requirements.</p> <p>13. By 30th November, check other provider’s policy and process to ensure it meets requirements. Providing feedback if the policy and/or process do not meet the requirements.</p>		

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			Evidence: Information about provider policies which shows that requirements have been met in terms of malpractice and maladministration processes.		

Action Plan approved by ACG on Wednesday 16 November 2022