Action Plan

This Action Plan must be completed electronically and submitted in Microsoft Word format to regulation@sqa.org.uk by 03 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. Principles 7 and 13	Providers 1 and 3 had not received their external quality assurance (EQA) reports according to awarding body timescales, despite repeated requests to the awarding body. A similar Issue was raised in the 2018–19 Provider Monitoring Report. SafeCert must ensure that EQA reports are received by providers according to timescales and must ensure that communication in this regard is actioned.	High	We have had EQA illness recently which has caused delays to reports being sent out. We have however updated the EQA report so it can now be fully completed online. This means that reports will have instant access for both EQAs and SafeCert, so we can more quickly respond to any issues, as well as get the EQA reports sent to centre more quickly.	28 Feb 2023	24/2/2023

[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.

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]
			Evidence to be submitted: 1.) EQA Standardisation Meeting and training event on completing EQA reports online 2.) Access to EQA online report system to view example online report and action points. 3.) Report from Nov to Jan 31 of all EQA visits and details of visit date and EQA report sent to centre date to prove system is operation and working to key dates as stated		
2. Principles 7, 9 and 12	Staff at providers 1 and 3 stated that they have been instructed by SafeCert that it is an awarding body requirement that trainers/assessors for first aid qualifications must retake a trainer/assessor qualification every three years. Staff at provider 2 stated that they were advised the three yearly	Low	We have a 3 year period on the Trainer/Assessor certification but we advise centres that they can either renew the certification at the end of the 3 years or show from CPD that they are still current.	28 Feb 2023	23/2/2023

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]
	requalification was not necessary. The Accreditation Auditor cannot find where this requirement is stated to providers 1 and 3, is detailed in awarding body documentation. SafeCert must ensure that any awarding body requirement to retake a trainer/assessor qualification every three years is stated in its documentation and that this is communicated consistently to providers.		We will update all centres with Newsletter on current requirements for the trainer/assessor qualification as well as CPD requirements. Evidence to be submitted: 1.) Newsletter sent to all centre 2.) Statement on Trainer/Assessor IQA CPD certificate expiry periods and place in Centre Handbook. "**We have a 3 year period on the Trainer/Assessor IQA certification but we advise centres that they can either renew the certification at the end of the 3 years or show from CPD evidence that they are still current.**"		
3. Principle 14	Providers 1 and 2 had listed protected characteristics in their equal opportunities policies but had omissions.	Low	Newsletter sent to all centres with request for action to update and send in copies of the equal	28 Feb 2023	23/2/2023

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]
	SafeCert must ensure that its providers' equal opportunities policies include all protected characteristics, where listed.		opportunities policies. We will provide a list of protected characteristics that centre must check their policies and send updated policy with all characteristics included. We will also conduct an EQA standardisation meeting to include checking policies at centres. Evidence to be submitted: 1.) Newsletter sent to all centre. 2.) Sample of updated equal opportunities policies from 5 centres 3.) EQA Standardisation Meeting Minutes on checking policies at centres		
4. Principle 16	The complaints policies at providers 1 and 2 did not reference appropriate escalation.	Low	Newsletter sent to all centres with request for action to update and send in copies of the complaints policies. We will provide reference to	28 Feb 2023	23/2/2023

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]
	SafeCert must ensure that provider policies reference appropriate escalation of complaints to the awarding body and to SQA Accreditation as the regulator.		escalation of complaints to SQA Accreditation that centre must check their policies and send updated policy with all references included. We will also conduct an EQA standardisation meeting to include checking policies at centres. Evidence to be submitted: 1.) Newsletter sent to all centre. 2.) Sample of updated complaints policies from 5 centres 3.) EQA Standardisation Meeting Minutes on checking policies at centres		
5. Principle 18	The Malpractice and Maladministration policy at provider 2 did not reference the fact that all suspected and actual cases of malpractice and maladministration would be referred to the awarding body.	Low	Newsletter sent to all centres with request for action to update and send in copies of the malpractice and maladministration policy. We will	28 Feb 2023	23/2/2023

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]
	SafeCert must ensure that its providers' Malpractice and Maladministration policies reference appropriate escalation to the awarding body.		provide reference to the need to reference suspected or actual cases of malpractice or maladministration and appropriate escalation to awarding body. We will also conduct an EQA standardisation meeting to include checking policies at centres. Evidence to be submitted: 1.) Newsletter sent to all centres 2.) Sample of updated Malpractice and Maladministration policies from 5 centres 3.) EQA Standardisation Meeting Minutes on checking policies at centres		

Action Plan approved by ACG on 09 November 2022