

Action Plan

This Action Plan must be completed electronically and submitted in Microsoft Word format to regulation@sqa.org.uk by 25 March 2019.



Issue number	Detail of Issue recorded	Risk rating	Proposed action and evidence to be provided <small>(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.)</small>	Target date for completion by awarding body ¹	Date Issue closed out by SQA Accreditation ²
1. Principles 6, 7 and 14	Provider staff indicated to the Accreditation Auditor that FutureQuals had not imposed any sanctions after a malpractice investigation. A Level 1 sanction had in fact been imposed but the wording of the <i>FutureQuals Sanctions policy June 2017</i> is not clear in this regard. Additionally, the terminology of 'recommendations' used in the malpractice/maladministration review form (Form M3) from the awarding body to the provider was not accurate, as these were in fact actions which had to be completed.	Medium	Sanctions Policy, M1, M2 & M3 forms to be reviewed and amended where necessary to make clearer that a level 1 Action Plan is a Sanction and these Actions must be completed. If not then the level of Sanction will be elevated in accordance with the policy.	31 st March 2019	14/5/2019

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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	Secondly, despite its best efforts, the provider could only provide the Accreditation Auditor with some of the malpractice investigation records. The <i>FutureQuals Malpractice and Maladministration policy September 2017</i> is not clear on how long records should be retained in this regard.		To also make clear that records must be held and be available for three years. Evidence: Revised sanctions policy and associated forms (M1, M2 & M3).		
2. Principle10	The correct unit specifications were not used in the assessment of one cohort of candidates for First Aid at Work at SCQF Level 6, R539 04.	Low	To remind our Approved Centres (Providers) through a Newsletter and other means of communication, such as our Website or Social Media that Specifications must always be accessed via our Website and not from their own archives so to ensure the most up to date is used.	30 th June 2019 Extension 31 August 2019 31 October 2019	31/10/2019

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			<p>The compliance of such to be monitored through any EQA activity.</p> <p>Evidence:</p> <ol style="list-style-type: none"> 1. Newsletter 2. Other communication methods (Website, Social Media) 3. Sample EQA report showing that correct specifications have been checked at EQA visit 		

Action Plan approved by ACG on 01 May 2019