

## Action Plan



This Action Plan must be completed electronically and submitted in Microsoft Word format to [regulation@sqa.org.uk](mailto:regulation@sqa.org.uk) by 16 August 2018

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 <sup>1</sup>	Date Issue closed out by SQA Accreditation <sup>2</sup>
1. Principle 10	The CPD (Continuous Professional Development) records at the provider do not meet the awarding body's requirements.	Medium	Review of GQAs written requirements to take place at the next scheduled Technical Meeting with CPD monitoring by EQAs to ensure requirements within Approved Centres are discussed in detail. Minutes of next scheduled Technical Meeting to be provided. EQA monitoring report for GQA SVQ centres to be provided (scheduled visits mid-October 2018)	30/10/2018	26/10/2018

<sup>1</sup> 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.

<sup>2</sup> 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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2. Principle 5, 13	The provider's appeals procedure does not contain appropriate reference to SQA Accreditation and does not clearly communicate which awarding body candidates have the right to appeal to.	Low	Centre Appeals and Grievance procedures reviewed – Stage 4 and 5 are misleading. EQA to follow-up and clarify. Amended policy to be provided to SQA Accreditation	30/10/2018	26/10/2018
3. Principle 14	The provider's malpractice policy does not define maladministration	Low	EQA to discuss defining maladministration within centre devised policies. Amended policies to be provided to SQA Accreditation.	30/10/2018	26/10/2018
4. Principle 15	The provider is entering candidate details into the registration of another awarding body to generate a unique identifier for the registration of candidates on GQA systems.	Medium	This issue is something that we were unaware of and will speak to the Approved Centre about. It is not a mandatory registration requirement, with the GQA Approved Centre Agreement indicating that the SCN should be entered "if appropriate". EQA monitoring report to be provided for October 18 detailing discussion.	30/10/2018	6/12/2018

Action Plan approved by ACG on 01/08/2018