

## 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 11 October 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	<p>Provider 1 had three assessors for its SVQ qualifications but there was no evidence of the required workplace./job shadowing in accordance with the <i>IMI Automotive Retail Sector Assessment Strategy for Scottish Vocational Qualifications (SVQs), 2016</i>,</p> <p>Additionally, a recent external quality assurance visit conducted at the provider had checked staff competence but had not recorded any concerns with regard to insufficient evidence of work shadowing for assessors.</p>	Medium	<p><b>Action:</b></p> <ul style="list-style-type: none"> <li><b>a) Check the requirements stated in the SVQ assessment strategy.</b></li> <li><b>b) Recommunicate these requirements to centres.</b></li> <li><b>c) Recommunicate these requirements to EQA team.</b></li> <li><b>d) Sample EQA activity over a period of 6 months</b></li> </ul> <p><i>Evidence: communications to centres / EQA team, summary of EQA sampling.</i></p>	31 July 2019 <b>Extension to 30 September 2019</b>	20/9/2019

<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 11	The <i>IMI Equality and Diversity policy, October 2017</i> gives providers information on protected characteristics in relation to provider policies but only some characteristics are listed.	Low	<b>Action: revise and amend policy.</b>  <i>Evidence: updated policy.</i>	31 Mar 2019	19/3/2019
3. Principle 12	The complaints policy in provider 2 did not reference escalation to the awarding body or SQA Accreditation as the regulator, contravening both awarding body and regulatory requirements.	Low	<b>Action:</b> <ul style="list-style-type: none"> <li>a) <b>communicate policy requirements to centres and EQA team.</b></li> <li>b) <b>Revise EQA sampling of quality management systems from 18mth and 36mth visits to every 12 months.</b></li> <li>c) <b>Sample EQA activity over a period of 6 months.</b></li> </ul> <i>Evidence: communication to centres / EQA's, revised EQA approach and summary of EQA sampling.</i>	31 July 2019 <b>Extension to 30 September 2019</b>	20/9/2019

<p>4. Principle 14</p>	<p>The malpractice and maladministration policy at provider 2 did not ensure that suspected cases of malpractice and maladministration would be reported to the awarding body, contravening both awarding body and regulatory requirements.</p>	<p>Medium</p>	<p><b>Action:</b></p> <ul style="list-style-type: none"> <li><b>a) communicate policy requirements to centres and EQA team.</b></li> <li><b>b) Revise EQA sampling of quality management systems from 18mth and 36mth visit to every 12 months.</b></li> <li><b>c) Sample EQA activity over a period of 6 months.</b></li> </ul> <p><i>Evidence: communication to centres / EQA's, revised EQA approach and summary of EQA sampling.</i></p>	<p>31 July 2019 <b>Extension to 30 September 2019</b></p>	<p>20/9/2019</p>
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Action Plan approved by ACG on 24/10/2018