

Action Plan



This Action Plan must be completed electronically and submitted in Microsoft Word format to regulation@sqa.org.uk by 15 July 2020.

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. Principle 6	There is a discrepancy between the currency of documents uploaded to SharePoint and those in the <i>IMI Operating Manual</i> on the IMI website.	Low	Action: Undertake a review of all documentation on SharePoint, ensuring that they are the latest versions. <i>Evidence: review activity log</i>	31 December 2020	21/12/2020
2. Principle 10	In provider 1, the materials used to assess the numeracy Workplace Core Skill were not specifically relevant to the automotive workplace as required.	Low	Action: a) Highlight the issue to the EQA team to ensure a standard approach across the team.	31 December 2020	21/12/2020

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>b) EQA to review relevant assessment paperwork across the network and provide appropriate guidance.</p> <p>Evidence: summary of outcomes</p>		
3. Principles 12 and 10	<p>The complaints procedure in provider 2 did not reference escalation to the IMI awarding body. A similar Issue at a different provider was raised previously in the Provider Monitoring Report of 2018–19.</p> <p>Additionally, a recent <i>IMI External Quality Assurance</i> report at provider 2 had highlighted an administrative issue with the complaint procedure but had not highlighted concern with the content of the procedure.</p>	Medium	<p>Action: EQM to review centre engagement reports with EQA to establish facts to see what further action/mitigation is required to prevent a reoccurrence.</p> <p><i>Evidence: summary of outcomes</i></p>	31 December 2020	21/12/2020
4. Principles 13 and 10	<p>The appeals procedure in provider 1 did not reference escalation to the IMI awarding body.</p>	Low	<p>Action: EQM to review centre engagement reports with EQA to establish facts to see what further action/mitigation</p>	31 December 2020	21/12/2020

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	<p>Additionally, a recent <i>IMI External Quality Assurance</i> report at provider 1 had highlighted an administrative issue with the appeals procedure but had not highlighted concern with the content of the procedure.</p>		<p>is required to prevent a reoccurrence.</p> <p><i>Evidence: summary of outcomes</i></p>		
5. Principles 14 and 10	<p>The malpractice and maladministration procedure at provider 2 did not allow for suspected cases to be reported to the awarding body.</p> <p>An Issue concerning reporting procedures for malpractice and maladministration at a different provider was raised previously in the Provider Monitoring Report of 2018–19.</p> <p>Additionally, a recent <i>IMI External Quality Assurance</i> report at provider 2 had highlighted an administrative issue with the malpractice and maladministration policy but had not highlighted concern with the content of the procedure.</p>	Medium	<p>Action: EQM to review centre engagement reports with EQA to establish facts to see what further action/mitigation is required to prevent a reoccurrence.</p> <p><i>Evidence: summary of outcomes</i></p>	31 December 2020	21/12/2020

Action Plan approved by ACG on Wednesday 12 August 2020