

SQA Accreditation Regulatory Principle Consultation

We asked, you said, we did

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Introduction

SQA Accreditation's Regulatory Principles (RPs) were introduced in 2011 and were last reviewed in 2014. It has now been over nine years since their introduction and implementation, and the time was right to undertake a review of the principles in their entirety. We wanted to ensure that the RPs remained fit for purpose and continued to meet the needs of all our stakeholders. We ran a short survey on the current RPs in August and September 2019 to gather feedback on the current principles to ensure that stakeholder thoughts were captured as part of any review. The project team has reviewed all comments that were made, and these were incorporated where appropriate. A first draft of the new RPs was approved by our Accreditation Committee on 28 January 2020.

Shortly after this, due to the COVID-19 pandemic, awarding bodies (ABs) requested, via the Federation of Awarding Bodies (FAB), a reduction of the regulatory burden and a delay of the final changes consultation until August 2020. This document gives an overview of the consultation, the commentary we received and what we have done to address the feedback on the proposed changes.

Overview of the consultation results

The consultation launched on 21 August 2020 at 9 am and closed on 20 November 2020 at 5 pm. At the launch of the consultation, we had 37 approved ABs delivering accredited qualifications.

We received 16 responses to the consultation, which represents 43% of the ABs we regulate.

One response was a combined submission made by FAB after their Regulatory Impact Group (RIG) event on the 2 October 2020, which was attended by several of our approved ABs. Some members of the RIG also made their own responses to our consultation. Two further responses were from individuals who were not representing currently approved ABs.

Of the responses received, 49% were either broadly positive or neutral about the proposed changes. This left 51% of comments which needed consideration.

The RP project group reconvened on 3 December 2020 and have met regularly to discuss the feedback.

This document sets out the high-level feedback themes in each area and how we have decided to address the views provided.

The section: ‘About SQA Accreditation’

Feedback on this section of the RPs related mainly to text and presentation. Where comments such as this have been made throughout the consultation feedback, we have addressed these.

There was a comment on the support of potential new ABs through the approval process. This feedback concerned the potential for a conflict of interest in terms of internal staff involved, and us potentially supporting one applicant organisation more than another. We have considered this and note that we have clear processes in place to review potential ABs against our various regulatory requirements. This includes being able to meet our general approval requirements before we invite a potential organisation to explore the next steps. We appreciate that we expect a lot of time and effort to be put into our approval requirements and of course we are mindful not to waste anyone’s time if our general approval requirements are not met. It may be at this stage that we decline to progress an application further.

We align ourselves to the requirements of [Scotland's Economic Strategy](#)¹ and, as such, the qualifications that fall under the Scottish Government’s [key growth sectors](#).² We make this clear on our website under [Becoming an awarding body](#)³ and therefore we may prioritise applications on this basis — which we also make clear.

In addition, we recognise that some organisations may need more support in meeting our requirements initially, depending upon their size, resources, and so on. However, we would not seek to preclude any organisation from working towards meeting our approval requirements on this basis. We consider this to be a fair and proportionate way in which to manage applicant organisations towards approval.

Finally, we would like to highlight that it is not the individuals involved in the processing of the application who would make any approval decision. Approval decisions are made by the Accreditation Co-ordination Group (ACG) who are independent of the application process.

The section: ‘Regulatory Activity’

In instances when we refer to ourselves as ‘SQA Accreditation’, it is in relation to specific policies, otherwise, in this section, we refer to what ‘we’ do. There were some comments seeking to add in additional activities that may also be undertaken, however, having considered these as being part and parcel of the higher-level bullet points already set out within this section, we considered that it was better to omit these to ensure the document remains as succinct as possible. There were also some comments querying our

¹ <https://www.gov.scot/publications/scotlands-economic-strategy/>

² <https://www.gov.scot/publications/growth-sector-statistics/>

³

https://accreditation.sqa.org.uk/accreditation/Awarding_Body_Approval/Becoming_An_Awarding_Body

longstanding terminology in relation to ‘audits’, ‘issues’ and ‘recommendations’. We are not seeking to adopt any new terminology as part of this review.

There was a comment made about the ‘back and forth’ nature of agreeing issues and reporting. We will not change any reporting processes as part of this review because all issues, reports and plans must be approved by ACG, who are independent of any audit. In addition, we think it is only fair to allow ABs time to consider any issues and how they wish to address them, rather than apply any undue pressure to respond immediately post-audit. We think this approach allows all parties to consider the appropriateness of any actions and allows the AB the right of reply if they are unhappy with anything.

One respondent queried how we follow the principles of ‘Better Regulation’ and what this was. To clarify, these principles; proportionate, consistent, targeted, transparent and accountable stem from various legislation. In Scotland, that is the Regulatory Reform (Scotland) Act 2014⁴ and UK-wide that is the Legislative and Regulatory Reform Act 2006⁵. The principles applied are the same. As the regulator for vocational qualifications for Scotland, we follow these Better Regulation principles.

To clarify, we stand by the statement that we ‘endeavour to keep the identities of providers anonymous [...] however we reserve the right to disclose [...] where there are serious issues and/or concerns’. This has always been our approach and will not change. We would like to reiterate that our principles could apply to issues that are identified at providers from the perspective that we would expect to see AB policies, processes and procedures embedded when undertaking our provider monitoring visits. However, any arising issues would not be for the provider to address directly with us, given it is the AB’s responsibility to ensure that their providers are following AB instructions/agreements. This is what helps retain compliance with our RPs.

As per the commentary throughout the consultation feedback, we have removed the ‘business activities’ and ‘awarding activities’ subheadings. We have also taken on board the suggestion to add in some detail to this section around our directives and the Accreditation Licence, which also must be adhered to in conjunction with the RPs.

Feedback throughout the consultation referred to the use of ‘must’ and ‘should’ within the supplementary information. We agree that this can be confusing in terms of what is required to ensure compliance and, as such, we have taken the opportunity to update this section under ‘How the Regulatory Principles work’ which we hope makes our principle-based approach clearer:

‘Each principle includes the word ‘must’ in that the overarching principle must be able to be demonstrated. However, we will not prescribe exactly how this could be achieved or provide examples, as this will vary from organisation to organisation depending upon several factors including size and resources. There is supplementary information accompanying each of the principles. This is provided to help organisations to meet the principle. You should

4 <https://www.legislation.gov.uk/asp/2014/3/contents>

5 <https://www.legislation.gov.uk/ukpga/2006/51/contents>

understand the supplementary information and the Regulatory Principles holistically — that is as two parts of one entity.'

We think that using a principle-based approach allows for holistic interpretation rather than a 'one size fits all' approach. Therefore, throughout the supplementary information, we have further reviewed the use of the words 'must' and 'should' to ensure their appropriateness and, where possible, we have removed this terminology to leave it open for ABs to consider how they do, would, could or should meet the principle itself. However, we still acknowledge that there are some things that we expect an awarding body to do.

Regulatory Principle 1

There were some comments from ABs requesting examples within the supplementary information. As previously advised, we are principle-based and would not do this. Similar requests were made against the other RPs.

Based upon your feedback, we have moved the requirement to appoint an Accountable Officer into the high-level principle and removed any contextually inappropriate use of the word 'must' within the supplementary information.

As suggested, we have also gone on to define 'reportable incident' within our [online glossary of terms and definitions](#)⁶ and we have removed the section within the supplementary information about informing us of significant changes of control, as this would fall within the scope of a reportable incident.

We hope these changes have further streamlined this RP and made our requirements clearer.

Regulatory Principle 2

With this RP we have expanded our meaning of 'consider SQA qualifications and Scotland'. We accept your comment around better differentiating ourselves from SQA awarding body. We are not the awarding body — we are SQA Accreditation. This is something we recognise as being difficult in terms of distinction and terminology. As such, we have changed this point to 'consider how accredited qualifications are suited to the needs of the Scottish education and training environment'. This now refers more generally to qualifications that we have accredited, and hopefully provides better clarity in terms of the environment within which we regulate. We think it is appropriate for ABs to consider our education and qualification market. This may or may not require any additional work in terms of documented business planning specifically for Scotland, but it certainly requires consideration, and sector support would be key.

There was a comment related to what we meant in terms of 'protect business interests'. We mean that care is fostered for the organisation and its objectives and that this is managed accordingly. We have left this general. We do not want to provide examples, as business

⁶ https://accreditation.sqa.org.uk/accreditation/About_Us/Glossary_Terms_and_Definitions

interests can include many things from finance to intellectual property rights, data integrity/security and so on. As a principle-based regulator, we will try to avoid being prescriptive whenever possible.

There were a few comments from ABs about overlap here with other RPs. Please note that there can be overlap between other RPs and that that is intended, as contextually similar points within the supplementary information can be applicable across several RPs. We have added a comment about this under 'How the Regulatory Principles work'. Similar comments were made against the other RPs regarding overlap.

The word 'should' in the supplementary information has been removed and everything has now been bullet-pointed and slightly re-arranged.

Regulatory Principle 3

Here, we have removed the word 'should' in the supplementary information and in terms of the last sentence, we have changed the 'should' to 'must'.

We have removed the example and further bullet-pointed 'robust recruitment practices' based on your feedback. We have also removed the sentence about managers and directors as some found it confusing and we agree that this is covered by the first bullet point, 'effective leadership'.

There was a comment made about possibly not being able to meet this principle over the course of a period of time, in that a serious situation could impact on resources. As a principle-based regulator, any situation like this would be taken account of by the holistic way in which we apply the RPs. Audit for us is not a tick-box exercise. It may be that a principle cannot be met, and an issue is raised, however, we would always work with an AB by monitoring and reviewing action plans.

There were a few comments about our use of the word 'effective' in the sentence 'effective number of staff'. We have replaced this with 'effective and appropriate staffing levels' meaning the right staff in the right place at the right time.

A query was raised as to why we had mentioned providers within the supplementary information in relation to CPD records. This is something which we have identified as being a recurring issue across approved ABs when conducting provider monitoring visits. The issue being lack of CPD relevant to occupational competence and key staff roles at providers. It is a noticed trend, and it is something that we would like to ensure all approved ABs are aware of. We think that having this distinct within this principle (and other RPs) will help provide more focus in this area. We have added in the word 'checks' as this is something that we would expect an AB to check as part of its ongoing QA activities.

There was a query about how an AB could demonstrate that it was 'conducting its operations ethically'. In the process of approval of the revised principles this was discussed by our Accreditation Committee, and a decision was made to remove this wording and to refer to

the [Fair Working Criteria](#)⁷ to provide a more specific context, however, again it should be noted that the supplementary information should be used holistically.

⁷ <https://www.gov.scot/publications/fair-work-first-guidance-support-implementation/>

Regulatory Principle 4

This is a new RP.

Here, we have removed the examples as per your feedback and our preferred position.

Some further minor tweaks were made around the use of terminology, including the removal of the word '*major*' and substituting the word 'prevent' with 'mitigate'. We accept that not all incidents can be prevented.

Regulatory Principle 5

We have removed 'SQA' when referring to our accredited qualifications as this was confusing. Comments highlighted that respondents thought we meant SQA awarding body when referring to 'SQA accredited qualifications'. That was not the intention, however, we thought that to write 'SQA Accreditation accredited qualifications' was too much.

Across all of the RPs document, we will only refer to 'accredited qualifications' in the context of the fact that we have accredited them.

We acknowledge there is some overlap with the new RP 7 here, which was intended, however in order to get the context correct, and based on your feedback, we have changed the format of this RP to bullet points. We have also changed the last two bullet points to refer more to the provision of accurate information about accredited qualifications, rather than their promotion.

There were some queries about the use of the word 'appropriate' and what 'reference [...] accredited qualifications and SQA Accreditation' would look like. We have considered this and decided that would be for ABs to demonstrate. Ultimately, we accredited your qualifications and regulate them and our ABs accordingly. We would expect there to be some reference to ourselves in terms of them being Scottish qualifications, and guidance for learners in terms of any recourse due to dissatisfaction.

Regulatory Principle 6

This principle was broadly accepted by ABs that provided feedback. There were some comments about the links with RP 2 and again, as advised, there will be links between some principles.

There was a comment made about what is meant by the terminology 'regular'. This is for the AB to define and explain because what is regular for a large organisation might not be the same for a smaller organisation.

We accept that the use of the 'appropriate members of staff' is not entirely clear and we have changed this to 'members of staff with the appropriate level of authority'.

Regulatory Principle 7

There were a few queries around the wording of the supplementary information in this principle, in terms of its context not being clear. There were also some comments indicating a feeling that the old principle supplementary information was clearer. As such, we have revisited the wording in the supplementary information and updated it to bullet points to better-align it with the old wording.

There was a comment made, which came from the FAB event, about ABs being expected to actively promote accredited qualifications to grow their business. We are of the view that it is not inherently about promoting SQA Accreditation, rather that stakeholders have awareness of our role and the fact that the qualifications that ABs are offering to learners are accredited and regulated — a sign of quality. We think that there is merit in ABs highlighting anything that signifies quality in their offerings. We hope that the subtle change in wording of the supplementary information has addressed this.

Regulatory Principle 8

There was a comment made that third party access can only be given with consent of the third party. We accept this, but it would be the ABs responsibility to make clear our involvement with the qualifications in any contractual arrangements from the outset. We appreciate that some elements of service delivery may be contracted out, however, maintaining compliance with the RPs is the responsibility of the AB.

Regulatory Principle 9

There was quite a bit of feedback around the inclusion of ‘staff occupational records’ within the high-level principle. It was felt that it did not sit comfortably here. We have revisited this point and we agree. This is one area where we think that this is satisfactorily covered within new RP 3 and, as such, we have removed this.

There was also reference to the fact that we have mentioned ‘relevant legislation’ here as well as in RP 3. Therefore, we have changed this RP to explicitly reference data protection, as this is within the context of this RP and compliance with UK GDPR and the Data Protection Act 2018 is a legal requirement.

We have broadened out the scope of the first bullet point in the supplementary information as some ABs thought there were many ways in which good document management could be achieved and demonstrated. We are aligned with not prescribing examples and, as such, we have changed this.

Finally, we have better-referenced providers within the supplementary guidance as we have specified providers in the high-level principle.

Regulatory Principle 10

This is a new RP. Old RP 9 has been split into new RP 10 and RP 11. Some feedback queried our rationale for doing this. It is because we have identified the older RPs as consistently generating issues given their very broad scope. We considered that if we were to tease out the detail into two principles, we might uncover more granular detail which could provide greater insight into any issues raised.

We agree with the feedback that development should come before review and as such, in the final RPs document, you will notice that we have swapped the order of 10 and 11 to align with this. RP 11 is now RP 10 and vice-versa.

In terms of changes to the supplementary information, we have re-ordered the statements into a more cohesive flow as some of the feedback suggested.

Regulatory Principle 11

In the final RP document, this will now be RP 10 in order for development to come before review, as per the feedback we received.

We have made a few changes to this RP based on feedback regarding rewording for greater clarity and we have also done some re-ordering.

One comment queried what we meant by 'earliest opportunity' in terms of qualifications withdrawals. We should add that this has now been removed from this RP and moved to RP 4. We suggest this is the point at which an AB starts to consider withdrawing an accredited qualification.

It should be noted (as per one query) that credit rating is only mandatory for SVQs, but we would actively encourage ABs to undertake it for other types of qualifications that they may also bring forward for accreditation.

Regulatory Principle 12

With this principle, there was some confusion about our use of the word 'functions' in the principle itself. Having reflected on this, we agree with the comments made and have removed this word.

There were comments noting the overlap with RP 1 and, as per our previous comments, we accept that there can and will be overlap between the principles.

We have provided greater clarity with the bullet point in the supplementary information where we refer to 'systems', as there was some uncertainty as to what we meant. We mean remote and online systems.

There was a comment made about the bullet point mentioning direct claims status now being non-compliant in England. The query was whether ABs should adopt different approaches

for centres in Scotland and if this is fair. We are of the view that as this is an area that is devolved, it would be up to approved ABs to decide if it is fair or applicable in their own individual circumstances. As the regulator for Scotland, we still accept direct claim status.

There were some comments made about the fact that the supplementary information covered some practices which may not apply to all ABs, for example, exams. We appreciate this is the case, and it is quite difficult to have principles that can be applicable in all scenarios, hence our holistic approach. However, we have specifically split out the bullet points about exams for those ABs that use them.

There was also feedback that the use of the word ‘assessment’ across the RPs was too broad. We are not sure that we can address this. Assessments across a broad range of accredited qualifications will be broad, and all aspects of assessment are important. Again, the principles are intended to be used and applied holistically.

Regulatory Principle 13

With this RP, we have made some minor changes which we hope makes it clearer.

There were some queries about what we meant within the individual bullets under the supplementary information and we will try and explain each one separately here:

- What do we mean by ‘the strategy and management of risk at provider level’?
 - We mean how provider risk is managed and it also ties into the third bullet point about type and frequency of EQA and IQA. This is for ABs to determine. There was also another comment on this point about this being an AB issue and not a provider issue. We would like to think that providers would consider their own risk in terms of the expectations of their ABs. We have amended this bullet point to ‘management of provider risk’.
- What do we mean by ‘conditions of assessment’?
 - We mean the rules and approach to the assessment, including the assessment environment.
- What do we mean by ‘staff involved’?
 - We mean anyone involved with the QA-accredited qualifications.

There were some comments made about overlap with other RPs, but we accept that there will be.

Regulatory Principle 14

As per comments made, we have updated this RP to include delivery.

There was some feedback which highlighted that some were unsure about what we meant by the last bullet point in the supplementary information in terms ‘vulnerable to discrimination’ and we agree that this was not clear. We have now amended this to ‘safeguards the interests of vulnerable groups’ in reference to children and protected adults. In Scotland, the relevant act that would apply would be the Protection of Vulnerable Groups

(Scotland) Act 2007⁸ and for UK-wide, it would be the Safeguarding Vulnerable Groups Act 2006⁹.

There was some concern raised within the feedback received that because this RP now includes providers, it would prove burdensome in terms of ABs having to educate and upskill providers in this area. However, we feel that this is going to be more about agreeing expectations and communicating these clearly between parties.

Again, there were some comments made about overlap with other RPs, but we accept that there will be.

Regulatory Principle 15

There were suggestions from some feedback on this principle that it would be better to revert back to the old version of the principle which combined both registration and certification. We have reviewed this and agree, as a lot of the content in the new RP 15 was in fact more applicable to the proposed new RP 16 for certification. There is a lot of over overlap. Therefore, we have made the change to revert back to use of the old RP 15.

'The awarding body must have effective, reliable and secure systems for the registration and certification of learners.'

The supplementary information from the proposed changes have been retained but combined, and some minor rewording done so that it flows better.

We had some feedback that the proposed changes around this RP posed the greatest concern among ABs, specifically in relation to candidates being 'contactable'. We are aware that some ABs devolve responsibility for holding candidate data down to approved centres via centre agreements, however, we do view this as a risk towards the integrity of the qualifications and the interests of the learners for a number of reasons. We have provided some scenarios below:

- Where the structure of a learner's qualification was incorrectly interpreted by an AB, resulting in the learner underachieving, and having to be re-assessed and the current certification voided. The provider with the details is closed; no records are available.
- The provider is suspected of malpractice in its delivery and/or assessment of accredited qualifications and the AB needs to conduct a private investigation requiring initial direct communication and evidence from learners without interference from the provider.
- The qualification title or level is incorrect on the learner's certificate. The certificate must be recalled but the provider has since closed or moved to another AB and

⁸ <https://www.legislation.gov.uk/asp/2007/14/contents>

⁹ <https://www.legislation.gov.uk/ukpga/2006/47/contents>

therefore is potentially unable or unwilling to fulfil the data request.

- A provider closes immediately with no notice to the AB. The AB is unable to reach the learners to assess their progress and carry out their duty of care to the candidates and transfer them to another appropriate provider to prevent loss of learning and progression.

The scenarios outlined above are not exhaustive.

We are currently looking into this concern in more detail and we will be conducting a business regulatory impact assessment in order to inform a final decision. We have also shared our thoughts and concerns above with the other UK regulators.

Regulatory Principle 16

[Combined with RP 15 so no longer exists.]

One comment was made in the feedback here about the requirement that registration and certification systems allow accredited qualifications to be clearly and uniquely identified. The comment was made in reference to certificates being distinct but what we actually meant was that qualifications we have accredited can be identified within the system.

Again, the supplementary information has now been moved and combined into RP 15.

Regulatory Principle 17

[Now RP 16.]

There were only a few comments in relation to the changes set out in this RP and they were regarding whether it was our role to request that ABs and providers reference the SPSO appropriately. We are of the view that, given that public bodies in Scotland must comply under legislation with the SPSO model complaints handling process, this should be signposted where appropriate.

We will be reviewing the directive in relation to complaints handling in line with the introduction of the revised RPs.

Regulatory Principle 18

[Now RP 17.]

We have reviewed the first paragraph and removed references to the word ‘services’. We agreed with feedback that this is quite broad, and it is more succinct to refer to having a process to ‘handle appeals against decisions’.

Regulatory Principle 19

[Now RP 18.]

There was a query raised in the feedback under this RP about whether or not action plans developed by ABs to implement preventative and/or corrective action would be subject to our review. We are of the opinion that it is for ABs to develop and manage these, however, we may seek to have sight of more detail if an issue is identified in this area.

There was commentary made that reporting suspected malpractice could be burdensome for ABs and is not required by other regulators. This caused us some concern and our query would be whether it is burdensome because it happens often? In light of this, our preference is to retain the current position to ensure oversight of any potential areas of concern.

There was a query in relation to our use of the word ‘preventative’ across the last three RPs. We would again point to the fact that the desired result of corrective action is to prevent recurrence in any case, and as such, the terms can work hand in hand, but we appreciate this is not always the case. Here, we would reiterate the holistic way in which we apply the RPs.

The section: ‘Any other comments’

Throughout the feedback, there was mention of aligning other SQA Accreditation documents. It should be said at this point that all documents which relate to the application of the RPs, such as directives and guidance notes, will be reviewed to align with the new version of the RPs in advance of their introduction.

We accept the comment about conflicting definitions of ‘conflict of interest’ in the glossary. We have addressed this and we will be removing the glossary from the final version of the RPs. Aligned to this, we have created a [master glossary](#)¹⁰ of all terminology used by SQA Accreditation, which is now available on our website.

There was a summative comment from FAB as to the rationale for the proposed changes. We would like to highlight that the changes form part of a review to ensure that the RPs remain current and fit for purpose, and we have consulted at each stage with surveys for stakeholder thoughts and feedback. We hope that this document in itself will help to provide some comfort that we are listening and taking all views on board. We have heeded the feedback around the change that seems to have caused the most concern — holding candidate contact data — and we are looking at this in more detail.

Finally, we would like to clarify that there will be no change to our approach to public reporting.

¹⁰ https://accreditation.sqa.org.uk/accreditation/About_Us/Glossary_Terms_and_Definitions

Mapping from old to new RPs

Within the consultation feedback, requests were made to map out the changes from old to new. We hope the below diagram helps to demonstrate the changes more visually.

Old RP	Mapping	New RP
1. The awarding body shall have clearly defined and effective governance arrangements.	1 to 1	1. The awarding body must have an accountable officer and demonstrate that it has clearly defined and effective governance arrangements.
2. The awarding body shall ensure it has the necessary resources to effectively carry out its operational functions to meet regulatory requirements.	2 to 3	2. The awarding body must demonstrate clearly defined business planning processes which show evidence of management commitment and decision making and ongoing review.
3. The awarding body shall have clearly defined business planning processes which show evidence of management commitment, decision making and ongoing review.	3 to 2	3. The awarding body must have the necessary resources to effectively carry out their operational functions to meet regulatory requirements.
4. The awarding body shall continually review the effectiveness of its business services, systems, policies and processes.	4 to 6	NEW 4. The awarding body must demonstrate an effective approach to the identification and management of risk.
5. The awarding body shall provide clear information on its procedures, products and services and ensure that they are accurate and appropriate to SQA accredited qualifications.	5 to 5	5. The awarding body and its providers must provide clear information on their procedures, products and services and ensure that they are accurate and appropriate to accredited qualifications.
6. The awarding body and its providers shall maintain accurate documents, records and data.	6 to 9	6. The awarding body must continually review the effectiveness of its services, systems, policies and processes.
7. The awarding body shall have effective arrangements for communicating with its staff, stakeholders and SQA Accreditation.	7 to 7	7. The awarding body must have an effective approach for communicating with its staff, stakeholders and SQA Accreditation.

Old RP	Mapping	New RP
8. The awarding body shall ensure that SQA Accreditation is granted access to all information pertaining to SQA accredited qualifications.	8 to 8	8. The awarding body must ensure that SQA Accreditation is granted access to all information relating to accredited qualifications.
9. The awarding body shall ensure that it has robust systems and processes for the identification, design, development, implementation and review of qualifications, which meet the needs of users. (became new 10 & 11)	9 to 10 & 11	9. The awarding body and its providers must maintain accurate documents, records and data.
10. The awarding body shall ensure that it has the necessary arrangements and resources for the effective delivery, assessment and quality assurance of SQA accredited qualifications. (became new 12 & 13).	10 to 12 & 13	10. The awarding body must ensure that its systems and processes for the identification, design, development, implementation and review of qualifications and assessments are fit for purpose.
11. The awarding body shall ensure that its qualifications and their assessment are inclusive and accessible to learners.	11 to 14	11. The awarding body must ensure that its qualifications portfolio is effectively managed, maintained and reviewed.
12. The awarding body and its providers shall have open and transparent systems to manage complaints.	12 to 16	12. The awarding body and its providers must ensure that they have the necessary arrangements and resources required to manage and administer qualification delivery and assessment.
13. The awarding body and its providers shall have clear, fair and equitable procedures to manage appeals.	13 to 17	13. The awarding body and its providers must ensure that they have systems and processes which ensure the effective quality assurance of accredited qualifications.
14. The awarding body and its providers shall ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.	14 to 18	14. The awarding body and its providers must ensure that its qualifications and their delivery and assessment are fair, inclusive and accessible to learners.
15. The awarding body and its providers shall have effective, reliable and secure systems for the registration and certification of learners.	15 to 15	15. The awarding body must have effective, reliable and secure systems for the registration and certification of learners.

Old RP	Mapping	New RP
		16. The awarding body and its providers must have open and transparent systems, policies and procedures to manage complaints.
		17. The awarding body and its providers must have clear, fair and equitable systems, policies and procedures to manage appeals.
		18. The awarding body and its providers must ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.

Next steps

SQA Accreditation would like to thank you all for your detailed and comprehensive feedback on our proposed changes. The final version of the RPs was approved by Accreditation Committee on 27 April 2021.

We have now published the new RPs and there will be a period of transition from the old principles to the new principles, which will be six months in duration. Where ABs are scheduled to be audited in this financial year, they can choose to be audited against the old 2014 version of the principles or the new 2021 version of the principles up to 31 October 2021.

After 1 November 2021, all future planned audits will be against the new RPs.