



# **Audit Meeting Report**

Awarding body: Central YMCA Qualifications

Date of audit: 16 February 2011

## Note

Confidential or commercially sensitive information gathered during SQA Accreditation monitoring activities is treated in the strictest confidence. However:

- ◆ The findings of this report will be presented to SQA's Accreditation Committee and made available to colleagues from the Department for Children, Education, Lifelong Learning and Skills (DCELLS), the Council for the Curriculum, Examinations and Assessment (CCEA) and the Office of Qualifications and Examinations Regulation (Ofqual), with a view to informing future accreditation and re-accreditation submissions by the awarding body.
- ◆ The report will be published on SQA Accreditation's website.

Please note that SQA Accreditation monitoring activity is conducted on a sampling basis. As a consequence, not all aspects of an awarding body's performance in quality assurance, contract compliance, implementation, awarding of certificates, and fee arrangements have been considered in this report to the same depth.

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# Executive summary

## Purpose and scope of audit

This was the first audit of Central YMCA Qualifications (CYQ) since it was approved as an awarding body by SQA Accreditation. The audit was designed to review, evaluate and document Central YMCA Qualifications' strategies, policies and procedures and ensure compliance with SQA's Accreditation's *Awarding Body Criteria* (2007).

As this was a full audit of CYQ, all criteria were included within the scope of the audit.

## Background

CYQ was approved by SQA Accreditation as an awarding body during 2010. CYQ is a nationally recognised awarding body dealing with qualifications in personal training and health and fitness. CYQ is currently working towards ISO 9001 standard and is expecting to have the status by the end of 2011.

## Audit outcome

As a result of the audit and post audit activities, one non-compliance has been recorded and three observations were noted.

The one non-compliance and three observations form the CYQ action plan: February 2011.

## Awarding body feedback

CYQ staff found the audit very useful in terms of measuring their compliance with SQA Accreditation's *Awarding Body Criteria* (2007).

## **Statement of Excellence 1: Governance and leadership**

'The awarding body has effective governance, leadership and management, which supports the delivery of SQA accredited qualifications. The awarding body's strategic aims, objectives and policies are appropriate and are understood by all who refer to them.'

### **Key Goal 1: The awarding body has robust and transparent governance arrangements**

#### **Findings**

CYQ is part of Central YMCA which has several functions and subsidiaries. The awarding body's governance is clearly defined and separate from any other commercial activity. CYQ has provided details of its organisational structure and relevant committees.

The governance and day to day operation of CYQ is overseen and monitored by the Independent Committee. The Independent Committee was put in place to ensure that the awarding body has procedures in place to operate effectively and to manage any conflict of interest. Terms of Reference for the Independent Committee have been provided and the Audit Team have reviewed minutes from several meetings which contain reference to SQA Accreditation and activities in Scotland.

#### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 1. No non-compliances have been recorded and no observations noted.

### **Key Goal 2: The awarding body's leadership is effective**

#### **Findings**

CYQ has well defined hierarchical structures for management and reporting and has adequate business planning in place. CYQ undertakes reviews of its performance on a yearly basis via its annual reviews and stakeholder feedback.

The awarding body has provided evidence of relevant quarterly operational update reports to demonstrate that it is taking informed decisions and that these are linked to the business objectives. Details of SQA Accreditation activity, including approval and the audit, are announced within the updates.

CYQ has just finalised its *Self Assessment and Annual Review Report 2009/2010* which analyses performance against a range of indicators including governance, content and design of qualifications, registration/certification, and customer service.

## **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 2. No non-compliances have been recorded and no observations were noted.

## **Key Goal 3: The awarding body has an effective business planning process**

### **Findings**

CYQ has continually been working towards the objectives contained within the *Departmental Plan 2008–2013*. The strategic objectives within the plan are linked to the organisation's overall vision and mission, namely for a change in health attitudes and behaviour through advocacy, education and direct delivery. A *Marketing and Communications Plan (SQA)* was also developed to outline CYQ's marketing tactics and communications following approval by SQA Accreditation.

Underpinning the strategic objectives is the CYQ mission to raise standards through the delivery of qualifications that are quality assured. The awarding body has five objectives which are clearly sub-divided into activities. These in turn have outcomes, Key Performance Indicators (KPIs), business owners and target dates.

The progress of the KPIs is reported quarterly and from April 2011, a new KPI report will be introduced to show how the organisation is meeting targets in a clearer manner than the current reporting method. It is recommended that this is a focus for future audit activity.

CYQ provided the Audit Team with minutes from the monthly operations meetings which show issues linked to the business plan and the actions against these assigned to individuals with completion dates. The actions show that CYQ is looking at a range of its business activities and planning on an ongoing basis.

## **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 3. No non-compliances have been recorded and no observations were noted.

## **Statement of Excellence 2: Quality enhancement**

'The awarding body has developed and implemented a robust quality framework that ensures a quality product is delivered to the candidate. The awarding body and its staff are committed to a quality culture of continuous improvement through review and evaluation.'

### **Key Goal 4: The awarding body has a culture of continuous quality improvement**

#### **Findings**

The CYQ senior management team hold monthly meetings and carry out an annual review in order to evaluate the quality and standard of their business operations. Financial performance, planning, qualification delivery, governance and operations are included as part of the review. Quarterly meetings also take place to support the self assessment process.

As stated previously, the awarding body carries out an annual review. CYQ also carries out customer satisfaction surveys and as a result of these has implemented a Customer Care Improvement Plan which will be used to improve the business. The Audit Team was sent a copy of this post-audit.

CYQ carries out a yearly review of its standard operating procedures and is currently working towards ISO 9001 status. The Operations Manager will be responsible for the work leading up to the initial audit.

The awarding body also obtains regular feedback from centres and hosts centre update events. CYQ also attended the recent Scottish Learning Festival to increase its brand awareness and sends a monthly e-bulletin to all centres.

#### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 4. No non-compliances have been recorded and no observations were noted.

### **Statement of Excellence 3: Administration and support**

'The awarding body's administrative and support arrangements have been designed to reduce bureaucracy, are responsive to stakeholders' needs and are cost effective. The awarding body continually reviews its qualification provision to ensure it has, and deploys, sufficient resources for the administration and support of its qualification provision.'

### **Key Goal 5: The awarding body has robust systems in place for the management of the service it offers**

#### **Findings**

CYQ has recently had a review of its organisational structure in order to streamline operations across the awarding body whilst ensuring that business objectives can still be achieved.

A new Operations and Systems Manager post has been created which will oversee IT across CYQ, and a new Technical Manager role will concentrate on CYQ's existing qualifications and look at new opportunities for the awarding body.

The Head of Qualification Development is leaving shortly. There will be a handover to the renamed post of Senior Qualifications Manager to ensure continuity.

For Scottish centres, CYQ will use two of its existing External Verifiers and split the workload between both. The External Verifiers are currently covering Northern Ireland and the north west and north east of England. All staff are given a formal induction to CYQ when joining and are offered opportunities where possible to develop their knowledge and skills in line with CYQ objectives.

#### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 5. No non-compliances have been recorded and no observations were noted.

### **Key Goal 6: The awarding body has an effective communications strategy that supports its awarding body activities**

#### **Findings**

The Audit Team discussed the number of centres that CYQ has in Scotland and the number of those who are currently offering SQA accredited qualifications.

Prior to the audit, the Audit Team had used the CYQ website to review the number of centres that CYQ had in Scotland and had observed that it was unclear why they were not offering the SQA accredited versions of their qualifications.

CYQ has acknowledged that it is unsure as to the exact reasons why, however, it may well be that the changeover to SQA accredited qualifications will take some time. The Audit Team suggested that CYQ use its External Verifiers and any other means to establish the underlying reasons.

The Audit Team also suggested that there is a role for CYQ to carry out in raising the awareness and profile of the Scottish qualifications. The Audit Team do however accept that it may well be down to the qualifications being new but CYQ should encourage its Scottish centres to move to the Scottish awards as there are no fundamental differences. Similarly any new centres should be encouraged to seek approval for SQA accredited qualifications.

CYQ may wish to produce a mapping of the qualifications and show where they sit on the UK frameworks to demonstrate the comparability across the UK frameworks. The situation should be monitored for the time being. **Observation 1 refers.**

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 6. No non-compliances have been recorded and one observation was noted.

### **Observation 1**

CYQ is not certain of the reasons why centres have not sought approval for the SQA accredited qualifications.

## **Key Goal 7: The awarding body has systems and procedures for the approval of centres**

### **Findings**

Part of CYQ's original awarding body approval was to demonstrate that there was coverage of *SQA Accreditation's Centre Approval Criteria (2005)*. A mapping of this with CYQ's own criteria and documentation was supplied and the Lead Auditor was happy that there was adequate coverage.

Since accreditation, only one centre has come forward to offer SQA accredited qualifications. CYQ issued a press release to all its Scottish centres following accreditation so they believe that all centres are fully aware of the situation. The one centre that has come forward for approval underwent a desk audit as part of the approval process.

CYQ requires all approved centres to agree to its Terms and Conditions (T&Cs). The T&Cs cover roles and responsibilities for areas such as approval, external verification, registration, certification, direct claim status and sanctions. All centres

are required to agree to the T&Cs at the time of approval and are monitored by CYQ on an ongoing basis for compliance via the External Verifier.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 7. No non-compliances have been recorded and no observations were noted.

### **Key Goal 8: The awarding body has a customer service statement and identified service levels**

#### **Findings**

CYQ's customer service statement is freely available on their website. Fees can also be obtained from the site. The awarding body has specified timescales for all relevant areas such as certification, appeals, reasonable adjustments and enquiries.

CYQ has recently commissioned its *Customer Care Improvement Plan*. The final report highlights customer issues and expectations of the awarding body. It has a set of conclusions and recommendations and action plans as a result of suggestions from both staff and external stakeholders.

CYQ is currently producing a new Customer Charter. This has not been finalised and at the time of the audit was not available for the Audit Team to review. A copy of this will be forwarded to SQA Accreditation when it is finalised and it is recommended that it is reviewed in detail during future audit activity.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 8. No non-compliances have been recorded and no observations were noted.

### **Key Goal 9: The awarding body has open and transparent procedures for complaints and appeals**

#### **Findings**

The awarding body's procedures for complaints and appeals are freely available on their website. The Audit Team confirmed that there had been no complaints or appeals regarding SQA accredited qualifications since approval.

The procedures cover all complaints about administration, administrative support, verification services, supporting resources and training provided by CYQ, including any allegations of discrimination and harassment.

Where appropriate, complainants are entitled to an appeal which will be dealt with by the Chair of the Independent Committee. As part of CYQ's conditions of approval,

the awarding body was required to reference SQA Accreditation as a point of contact and both policies for complaints and appeals now contain this.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 9. No non-compliances have been recorded and no observations were noted.

### **Key Goal 10: The awarding body has an effective system for the registration and certification of candidates**

#### **Findings**

The Audit Team met with the CYQ member of staff responsible for registration and certification. The Audit Team were aware that the CYQ qualification had been SCQF credit rated as part of an exercise by the Sector Skills Council, SkillsActive.

The sample certificate which was shown to the Audit Team on the day did not contain reference to the credit and level and it was agreed that this data needs to appear on the certificate. It was also noted that centres' names appear on certificates and this is not allowed by SQA Accreditation. **Non compliance 1 refers.**

CYQ acknowledge there is work to be done on the certificate; however they are confident that their system is able to accommodate the changes being suggested by SQA Accreditation without any major alteration.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 10. One non-compliance has been recorded and no observations were noted.

#### **Non-compliance 1**

The CYQ certificate requires further change to include reference to SCQF levels and the removal of centre names.

### **Key Goal 11: The awarding body has implemented a diversity and equality strategy**

#### **Findings**

The Audit Team reviewed the *CYQ Diversity and Equality Policy* prior to the audit and was satisfied with the content. The policy is freely available on the CYQ website.

## **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 11. No non-compliances have been recorded and no observations were noted.

## **Key Goal 12: The awarding body has a policy and procedure for malpractice and/or maladministration**

### **Findings**

The Audit Team reviewed CYQ's malpractice procedure prior to the audit and had no issues with the content. The Audit Team established on the day of the audit that there have been no cases of malpractice for the SQA Accredited qualifications. The procedure is freely available for download from the CYQ website.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 12. No non-compliances have been recorded and no observations were noted.

## **Key Goal 13: The awarding body provides clear written guidance for awarding body representatives and prospective or approved centres and their staff**

### **Findings**

The Audit Team had time to review all of CYQ's standard policies and procedures from the website; new documents and updated versions of those were already held centrally prior to the audit.

CYQ documentation is of a high standard. Key documents such as policies and procedures are easily found on the CYQ website which is easy to navigate. CYQ has adapted some of its publications since approval, however, there has not been a great deal of change required.

The Audit Team were clearly able to see examples of the areas where CYQ has created separate areas to show the SQA accredited qualifications separately and relevant details for individual qualifications.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 13. No non-compliances have been recorded and no observations were noted.

**Key Goal 14: The awarding body has a record retention policy that takes into account any regulatory or statutory requirements**

**Findings**

CYQ has guidance on the length of time that centres must retain evidence. It is made clear to centres that assessment records must be retained for at least one year following completion of the qualification. The centre must also retain records of those involved in the assessment and appropriate dates of assessment.

**Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 14. No non-compliances have been recorded and no observations were noted.

## **Statement of Excellence 4: Qualification development and design**

‘The awarding body has demonstrated that it has appropriate experience and ability to design, develop and deliver qualifications. The awarding body assessment methods are rigorous but have sufficient flexibility to ensure that their requirements can be met cost effectively and in a variety of different circumstances. Copies of the awarding body’s assessment methodology and guidance are made available to all those who may wish to use them.’

### **Key Goal 15: The qualification and associated structure has been designed to ensure it is appropriate and meets the needs of the occupational sector**

#### **Findings**

SkillsActive is the Sector Skills Council (SSC) for the sector and has developed shared Units in collaboration with other awarding bodies. CYQ has adopted these Units for its qualifications in personal training and fitness instructing, and as such the qualification has been developed by the SSC. CYQ has been involved with the SSC in the design of the qualifications and is part of SkillsActive’s Qualification Review Group.

CYQ does have a Decision Making Framework which is a process to assess the viability and appropriateness of any potential projects or qualifications. Details of this were made available to the Audit Team prior to the visit.

The CYQ website contains quite comprehensive information regarding the SQA accredited qualifications including structures, assessment and fees. The Audit Team had noted that the site did not contain run out periods for the SQA Accredited qualifications. **Observation 2 refers.**

#### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 15. No non-compliances have been recorded and one observation was noted.

#### **Observation 2**

CYQ does not list details of the qualification run out periods.

## **Key Goal 16: The awarding body has designed an assessment methodology that is fit for purpose**

### **Findings**

The CYQ qualifications are assessed by multiple choice questions which are set by the awarding body and project work which is internally marked by centres and subject to external moderation by CYQ.

CYQ carries out statistical analysis on a quarterly basis to determine how questions are performing. CYQ is looking to expand its question paper bank. Multiple choice question papers are randomly generated but CYQ records which questions/paper a candidate undertook so it does not duplicate this for re-sits.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 16. No non-compliances have been recorded and no observations were noted.

## **Key Goal 17: The awarding body submits timely and detailed qualification submissions**

### **Findings**

CYQ currently has no submissions pending with SQA Accreditation or any near to re-accreditation. The Audit Team did take time to discuss any other qualifications that CYQ may bring to SQA Accreditation in future.

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 17. No non-compliances have been recorded and no observations were noted.

## **Key Goal 18: The awarding body's assessment methods produce results that are authentic, reliable and consistent**

### **Findings**

As mentioned, CYQ has clearly defined assessments for its accredited qualifications. The multiple choice aspect of the qualifications are administered and marked by CYQ and the internal elements such as practicals, worksheets and coursework are internally assessed by centres.

Syllabuses for each qualification are available for download from the CYQ website and these specify the course arrangements in more detail. The multiple choice tests can be taken at the centre or by e-assessment. CYQ has confirmed that it follows the *Regulatory Principles for e-assessment* document produced by the UK Regulators.

CYQ has produced *Roles and Responsibilities for Invigilators* which outlines the conditions for examinations and identity checks for candidates. The *External Assessment Procedure* contains guidance on the procedures for centres wishing to arrange external assessment at their centre and appropriate candidate to staff ratios as well as general conduct arrangements including layout of the venue.

Comprehensive awarding body guidance has been produced for online and written examinations, however, post-audit it was noted that that the quality assurance statement on the CYQ website should be updated to include the role of SQA Accreditation. **Observation 3 refers.**

### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 18. No non-compliances have been recorded and one observation was noted.

### **Observation 3**

The awarding body's statement on its quality assurance arrangements should be updated to include the role of SQA Accreditation.

## **Statement of Excellence 5: Assessment and verification**

'The awarding body's methodology for assessment and verification is rigorous and has been designed to ensure that only those candidates who have shown competence are awarded a certificate. The awarding body only deploys personnel that are qualified and competent.'

### **Key Goal 19: The awarding body ensures its approved centres have access to appropriately qualified personnel for the range of qualifications they are approved to deliver**

#### **Findings**

CYQ has produced very clear guidance entitled *Criteria for the Appointment of Tutors, Assessors and Internal Verifiers*. This defines the acceptable qualifications for all those involved in the assessment and internal verification process as well as timescales for achievement.

CYQ also has similar criteria for External Verifiers (EVs). All EVs are bound by CYQ's Code of Practice which outlines the relevant competence and qualifications that they should have.

All EVs are required to attend an induction to CYQ and accompany the Lead External Verifier or Regional Verifiers as part of their induction and must achieve the relevant qualification within 12 months. EVs must also attend two training events each year and maintain records of their continuing professional development (CPD). The Audit Team reviewed CPD files for both EVs covering Scotland on the day of the audit.

#### **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 19. No non-compliances have been recorded and no observations noted.

### **Key Goal 20: The awarding body's systems and procedures for the appointment, training, registration, deployment and monitoring of external verifiers are effective and robust**

#### **Findings**

CYQ will be using two EVs to cover Scottish centres. The existing EVs have been with CYQ for a number of years and currently cover Northern Ireland and the north east and north west of England.

The Audit Team met with CYQ's Lead Verifier to discuss the procedures for external verification. All CYQ centres receive at least one EV visit per year. The Audit Team were shown the most recent reports for the one approved centre.

CYQ EVs must also be shadowed by the Lead External Verifier at least once per year. The Audit Team were also able to verify that both the EVs that CYQ will be using to cover Scottish centres had been accompanied within the last year. The Audit Team were also shown the CPD logs for both EVs and were able to confirm that both held appropriate qualifications as specified by CYQ for the post of External Verifier.

## **Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 20. No non-compliances have been recorded and no observations were noted.

## **Key Goal 21: The awarding body has systems and procedures for monitoring the quality and consistency of assessment provided at any location. These systems must ensure that assessment is uniformly systematic, valid and to the defined standard**

### **Findings**

The CYQ system operates a standard QA model of Assessor, Internal Verifier and External Verifier. Centres are visited a minimum of once per year and the records for the one approved Scottish centre showed that it was due a visit shortly, however it had not yet been externally verified for any SQA accredited qualifications as it had only recently been approved.

The external verifier reports measure ongoing compliance with CYQ's Terms and Conditions and raise any action points with details of actions. Given that no centres have had an EV visit yet, it is recommended that this is reviewed during future audit activity.

The Audit Team were sent the last two external verification reports for the approved Scottish centre post audit. From the evidence that has been supplied, it is clear that sufficient monitoring activity is being carried out within CYQ's specified timescales and that actions from previous EV visits are being reviewed at subsequent EV visits as well as in the interim.

CYQ carries out risk assessment for its centres including an initial assessment of the centre against CYQ's own approval criteria and has a system of sanctions in place if these are required. The centre's compliance with CYQ's criteria is measured on an ongoing basis. CYQ also monitors the competence of staff involved in assessment and verification, and the systems that centres have in place to support delivery of

CYQ qualifications. The CYQ External Verifier Risk Assessment Toolkit was sent to the Audit Team post-audit.

**Conclusion**

The evidence available confirms that CYQ continues to meet the requirements of the criteria under Key Goal 21. No non-compliances have been recorded and no observations were noted.

## **Conclusion**

This was the first audit of Central YMCA Qualifications and the Audit Team was provided with full access to the awarding body premises, staff and documentation.

From the evidence that the Audit Team has reviewed, they are satisfied that CYQ has the systems and resources to offer a high level of service for qualifications which have robust quality assurance. The Audit Team would like CYQ to raise the profile of its SQA accredited qualifications and was reassured by the messages from CYQ senior staff that this will be a priority. The Audit Team would also like to thank CYQ staff for their involvement and co-operation before, during and after the audit.

# Appendices

# Appendix 1: Current year non-compliances, observations and action plan

## Non-compliances

A non-compliance will be recorded where the Lead Accreditation Auditor finds evidence that the awarding body fails to meet any of *Awarding Body Criteria (2007)* or any of the conditions attached to qualification accredited by SQA Accreditation at the time of accreditation. When recording any non-compliance, the Lead Accreditation Auditor will agree the action to be taken by the awarding body and a timetable for resolving the issue.

Non-compliance recorded	Agreed action and date	Key Goal/ criterion	Risk rating
1. The CYQ certificate requires further change to include reference to SCQF levels and the removal of centre names.	CYQ must forward a sample certificate to SQA before any Scottish certificates are issued by 30 April 2011. The sample certificate should include the credit and level of the Units and qualification.  <b>Closed out 31 May 2011</b>	10.3	1

## Observations

An observation will be noted to ensure that any recommendations agreed during the audit are recorded for future reference. As observations are recorded for awarding body consideration only, it is not necessary to agree a timescale to resolve the observation in the awarding body action plan.

**Once agreed, the action plan is signed by representatives from both SQA Accreditation and the awarding body and will inform the agenda for the next annual audit meeting.**

Observations noted	Action recommended	Key Goal/ criterion
1 CYQ is not certain of the reasons why centres have not sought approval for the SQA accredited qualifications.	CYQ may wish to establish why centres operating in Scotland have not moved over to the SQA Accredited qualifications.	Key Goal 6.2
2 CYQ does not list details of the qualification run out periods.	CYQ may wish to make reference to the appropriate run out periods for SQA accredited qualifications.	Key Goal 15
3 The awarding body's statement on its quality assurance arrangements should be updated to include the role of SQA Accreditation.	CYQ may wish to update its quality assurance statement to reflect the role of SQA Accreditation.	Key Goal 18

## Appendix 2: Risk rating of non-compliances

SQA Accreditation assigns a risk rating to each non-compliance recorded as a result of an awarding body audit or through our centre monitoring activity. The table below illustrates how the rating for a non-compliance is assigned, and identifies the possible impact of the non-compliance on qualifications and/or the learner.

The assignment of a risk rating allows an awarding body to target their resources to areas that have been identified as having a major impact. The risk rating also allows SQA Accreditation to target its resources to support awarding bodies in improving their performance.

Rating	Risk	Impact of non-compliance
1	Very low	The non-compliance is likely to cause minimal concern and would not threaten the integrity of the qualification or impact adversely on the learner. Any overall effect is likely to be small scale and/or localised, rather than widespread. The issue identified is unlikely to recur once resolved and no long lasting damage would be anticipated.
2	Low	The non-compliance is of low impact but of sufficient importance to merit intervention, with a low threat to the systems or procedures associated with the qualification and/or impact on the learner. Disruption may not just be localised but more widespread and would possibly cause residual damage; however, this could be easily corrected without further consequence.
3	Medium	The non-compliance could potentially damage the credibility of the qualification and/or be detrimental to the learner. There may be some impact to the systems or procedures that support the qualification or the operational effectiveness of the awarding body.
4	High	The non-compliance could have a high impact on the integrity and reliability of the qualification or the effective operation of awarding body as a whole if corrective action is not quickly taken. There is a high probability that the qualification and/or learner will be negatively affected.
5	Very high	The non-compliance will have a serious impact on the integrity and reliability of the qualification or the effective operation of the awarding body if corrective action is not immediately taken. There is a very high probability that the qualification and/or learner will be negatively affected.

In assigning a risk rating, each non-compliance is considered on its own merit, taking account of the context in which it was identified.

## Appendix 3: Table of awards

### Accredited qualifications currently offered

Award title	Level	Code	Accreditation date	Re-accreditation date
Certificate in Personal Training	SCQF level 6	R082 04	23 June 2010	31 December 2013
Certificate in Fitness Instructing	SCQF level 5	R083 04	23 June 2010	31 December 2013

## Appendix 4: Approval and accreditation conditions

A condition will be recorded at the time of approval of the awarding body or at the time of accreditation for an SQA accredited qualification. A condition is recorded when SQA's Accreditation Co-ordination Group finds evidence that the awarding body does not fully meet SQA's *Awarding Body Criteria* (2007).

Condition	Agreed action and date	Comments
a) Update the Terms of Reference supplied to SQA Accreditation within 3 months of the date of approval.	3 months from the date of approval	Closed out prior to audit.
b) Include references to SQA Accreditation on its website where Ofqual is mentioned or refer to the 'appropriate Regulatory Authority' within 5 months of the date of approval. Similarly, publications reflect SQA Accreditation as the regulator in Scotland and differences with regard to qualification titles must be noted.	5 months from the date of approval	Closed out prior to audit.
c) Refer to CYQ Quality Assurance Statement, CYA must include SQA Accreditation specifically or amend this to make reference to 'the appropriate Qualification Regulator' within 3 months of the date of approval.	3 months from the date of approval	Closed out prior to audit.
d) Produce a mapping of its requirements for centre approval against the Centre Approval Criteria (2005) is carried out. A report should be submitted to SQA Accreditation within 5 months of the date of approval.	5 months from the date of approval	Closed out prior to audit.

e) Update the Terms and Conditions to include SQA Accreditation or amend them to take reference to 'the appropriate Qualification Regulator' within 3 months of the date of approval.	3 months from the date of approval	Closed out prior to audit.
f) Update its policies for appeals for learners and centres and also its complaints procedure to take account of Criteria 9.1.4 within 3 months of the date of approval.	3 months from the date of approval	Closed out prior to audit.
g) Refer to the registration process, this must be updated to include Scottish qualifications, however it may be easier for CYQ to make this generic for any type of qualification within 3 months of the date of approval.	3 months from the date of approval	Closed out prior to audit.
h) Refer to the Reasonable Adjustments document, this must be amended to include the appropriate Scottish accredited title (e.g. remove the level) or made more generic within 3 months of the date of approval.	3 months from the date of approval	Closed out prior to audit.
i) Refer to the Malpractice Procedure, this must be updated to include reference to SQA Accreditation within 3 months of the date of approval.	3 months from the date of approval	Closed out prior to audit.

## Appendix 5: List of documents reviewed pre- audit and post-audit

Document title	Date of issue	Version number	Comments
Central YMCA Qualifications (CYQ) Departmental Plan 2008–13	September 2010		
CYQ Annual Review 2008–09	27 April 2009		
CYQ Self Assessment and Annual Review Report 2009–10	1 July 2010		
Customer Care Improvement Plan			
CYQ Terms and Conditions			
Centre Approval Application			
Record Keeping Guidance			
CYQ Independent Committee Terms of Reference	March 2010		
Reviewing and Improving Performance	February 2010		
Organisational chart			
CYQ EV Qualifications Summary			
QRG minutes			
Understanding the UK Health and Fitness education market and the opportunities for CYQ to grow	June 2009		
Malpractice procedure			
Job descriptions			
SkillsActive awarding body forum meeting minutes			
Customer service statement and provision			
Centre Appeals Procedure			
Learner Appeals Procedure			
CYQ Diversity and Equality Policy			
Reasonable Adjustments and Special Consideration Procedure			

<b>Document title</b>	<b>Date of issue</b>	<b>Version number</b>	<b>Comments</b>
CYQ Decision Making Framework			
External Verifier Reports			
External Verifier CPD			Viewed at audit
CYQ External Verifier Risk Assessment Report			
Centre Management Systems Report			
CYQ Evaluation Report			
CYQ External Verifier Risk Assessment Toolkit			
Sample certificate			
Scheduling e-assessments SOP	January 2011		
Allocating Assessments SOP	January 2011		
Receiving Marking and Distributing Theory Papers SOP	September 2010		
Marketing and Communications Plan (SQA)			
CMT Operational Update	October 2010 January 2011		
CYQ Operations Meeting Actions	January 2011 February 2011		
CYQ Independent Committee agenda minutes			
CYQ External Verifier Report and Risk Assessment Checklist		V2.5	
CYQ Standardisation Training and Syllabus Support Days			
EV Visits SOP	July 2009		
Syllabus — Certificate in Fitness Instructing			
CYQ Criteria for the Appointment of Tutors, Assessors and Internal Verifiers			
External Verifier Handbook	2008		

## Appendix 6: Signatures of agreement to action plan

For and on behalf of Central YMCA  
Qualifications:

Signature

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Designation

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Date

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For and on behalf of SQA Accreditation:

Signature

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Designation

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Date

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