



Guidance for External Verifiers (China) 2018

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Part A: Understanding the verification process

1 SQA

1.1 Introduction to this document

This document has the following sections:

- ◆ General Introduction to the SQA and the External Verifier (EV) role for China
- ◆ Outline of the modes of verification
- ◆ Preparing and planning for your verification activity
- ◆ Carrying out your verification activity
- ◆ Communicating your decision
- ◆ Completing your verification activity

The structure of this document is designed to help take you through the verification process step by step.

1.2 Introduction to SQA quality assurance verification for China

Qualification verification is the process by which SQA ensures that centres are assessing their candidates in line with national standards, and that assessment decisions comply with SQA's Quality Assurance Criteria. External Verifiers are experienced subject experts who are appointed by SQA to undertake qualification verification on SQA's behalf.

This guidance has been developed for external verifiers undertaking verification activity in China. Two types of verification activity are employed across the China portfolio: remote verification and visiting verification (see [section 2](#) for more detail). It is worth noting that for 2018–19 a major change to the verification selection process in China is that units will be selected by group award. This will not change the verification criteria, which you will find in [Appendix 6](#).

This document will discuss the requirements of each type of verification activity. There are process maps and visuals to detail the step-by-step processes involved. There is also a page of useful contacts and a glossary, which should help you navigate your verification journey. This guidance and all the supporting documentation relating to the processes for external verification can be found on the Quality Assurance Appointee website.

1.3 SQA's values

The role of the External Verifier demands a high level of skill, knowledge and consistency, along with a willingness on your part to perform to the best of your ability. It is your responsibility to operate in line with SQA's values. SQA's three corporate values define the way SQA staff work with each other, their customers, partners, stakeholders and the wider public. SQA's values are:

- ◆ Trusted
- ◆ Progressive
- ◆ Enabling

Knowing what the corporate values are will help you understand how SQA wishes to engage with you in your role, and how SQA would like you to engage with colleagues and centre staff when carrying out your role.

Trusted: You use open and honest communication with SQA staff, colleagues and centre staff. You follow the agreed procedures laid down by SQA staff to ensure a standardised approach to verification is maintained.

Progressive: You view new and unfamiliar approaches to assessment with an open mind, whilst ensuring quality is maintained. You believe that creativity should be seen not as a threat to quality assurance, but an opportunity for improving on existing practice.

Enabling: You understand that by working in partnership with SQA centres you will achieve common goals of excellence and consistency in assessment. You maintain a professional approach at all times, regardless of the challenges you might face in carrying out your work.

There is a shared responsibility between you as an external verifier and SQA to ensure you are prepared to undertake your role. SQA will train you and then keep you up-to-date with qualification verification policies and procedures via information on web pages and periodic e-mailed updates and through providing opportunities for discussion through standardisation meetings and/or discussion forums.

You have a responsibility to prepare yourself as an external verifier to carry out your role. This is an ongoing responsibility, as verification procedures continue to evolve and there are always aspects of your professional practice that require development. Good CPD planning can assist you with this process. Templates and guidance can be found on the Quality Assurance appointee web pages.

1.4 Essential information

The list below covers what we consider to be essential sources of information you should be in possession of prior to conducting verification activity (although there will be some variations in emphasis between verification groups). This information will be covered in one or more phases of your induction.

Sources of essential information

- ◆ SQA's Quality Assurance Criteria: requirements and guidance (Part B of this document)
- ◆ Roles and responsibilities of assessors and internal verifiers
- ◆ The Unit/standards and Evidence Requirements you will be verifying (some of these materials may sit on SQA's secure site)
- ◆ Documents describing conditions for assessment; Assessment Strategy/Unit specifications/Arrangements documents/ Group Award Strategy documents (HN & SQA Advanced Diplomas)
- ◆ SQA-devised assessment recording materials (including shell portfolios, evidence trackers)
- ◆ SQA-devised support materials (such as Assessor Guides/Candidate Support Packs, CASPS, Understanding Standards and other exemplification materials).
- ◆ Minutes and standardisation log of past External Verifiers group standardisation meetings
- ◆ National standards in assessment, internal verification and external verification
- ◆ SQA's appeals process
- ◆ Requirements for information management, data protection and confidentiality
- ◆ The requirements of the assessment environment including health and safety obligations
- ◆ China newsletters
- ◆ Previous QVSRs

1.5 Outline of the verification process for China External Verifiers

The process map in [Appendix 1](#) provides a high level outline of the qualification verification process for China.

1.6 Explaining the external verifier role

Your verification responsibilities commence when you accept the role of external verifier with SQA. You will, of course, be given appropriate support in assisting you to evolve in this role.

As part of your responsibilities you are required to have an in-depth understanding of all documentation, duties, tasks and procedures associated with the verification area for which you have responsibility. This understanding will come from a combination of:

- ◆ induction training
- ◆ field support (eg accompanied visits)
- ◆ SQA's quality assurance appointee web pages
- ◆ research/study
- ◆ ongoing SQA staff support
- ◆ support from senior external verifier and/or experienced external verifier colleague

All external verifiers have a duty to understand the requirements of their role. You can find an outline of these and further information about the role on our [QA appointee web pages](#). This guidance document will also provide you with foundation knowledge, but at times you may need to access more information. The [QA appointee web pages](#) and the SharePoint (China) site are gateways for you to access all the other information, should you require it. [Appendix 4](#) has a page of useful contacts for you to use.

New External Verifiers will have a three-phase induction with SQA. The phases are: modules on assessment and internal verification; attending a face-to-face induction workshop on external verifier practice; and finally, taking part in a more individually-focused external verification induction managed by your senior external verifier/senior without portfolio.

You are required to maintain an up-to-date understanding of qualification verification and how it relates to the subjects you verify. You can find SQA's policy and procedures on maintaining CPD and recording it (this is a contractual requirement) on the appointee management website.

All external verifiers must be registered on our Quality Assurance Management System (QAMS) to receive notifications of verification activity. If you are not currently registered, please go to [QAMS Registration Page](#) and follow the online registration process.

The information we provide will support you in your verification duties, but you need to understand and apply it. Centres should be confident that the information and advice they are being given is accurate, up-to-date and consistent across all centres, and that they will be treated fairly and consistently by each external verifier they deal with. From the verifiers' perspective, well-informed external verifiers tend to be more confident because they feel:

- ◆ assured that the advice and support they are giving is correct and up-to-date
- ◆ secure in the knowledge that their decisions and feedback are based on known SQA policy and procedures

This is why it is important, and beneficial, to keep up-to-date with ongoing developments in SQA's quality assurance. We communicate these SQA website updates, on the [QA appointee web pages](#), SharePoint, e-mails or periodic updates.

To access the full Quality Assurance Criteria electronically, please visit the QA pages of SQA's website, [QA appointee web pages](#) (also see [Appendix 6](#)). You can also access SQA's *Guide to Assessment, Internal Verification: A Guide for Centres offering SQA qualifications* and the *IV Toolkit for HN* on the general SQA website.

2 Preparing and planning for verification activity

2.1 The verification timetable and allocations

When all verification activity has been planned for the forthcoming academic session, QA Logistics Officers will create a customised Verification Timetable for each centre, covering all planned verification activity for the year ([Appendix 3](#)). This document outlines all the verification activity for the academic session and will be e-mailed to centres for quick and easy reference.

Allocating verification activity

QA Logistics Officers allocate all verification activity through the QAMS system. They are responsible for co-ordinating all verification events, working closely with the external verifiers and the centres to ensure evidence is available, appropriate travel arrangements are booked and that both centres and external verifiers understand exactly what is required for the verification activity to take place.

SQA has introduced significant changes to verification planning and selections in China for session 2018–19. This is as a result of feedback from centres, external verifiers and our ongoing evaluation of how we deliver Quality Assurance activity for our centres in China.

Important points to note are:

- ◆ Verification activity will take place in China from Nov-June.
- ◆ Verification selection will be determined by Group Award not verification group, therefore all units to be verified will be contained within the specified Group Award.
- ◆ A new feature of the 2018–19 verification activity is the verification of evidence by group award. This means that candidate samples will be linked to group awards. Where the outcome of the unit verified is not compliant, a wider sample of candidates, across alternative group awards may be requested.
- ◆ Selection of units to be verified and the mode of verification activity applied is made using a risk based approach.
- ◆ All remote verification evidence will be uploaded to SharePoint by China centres.
- ◆ While the quality assurance criteria are not changing, they will now being split and verified in different ways – verifiers for individual units will continue to verify criteria relating to assessment instruments, approaches and judgements and the qualifications of the staff delivering the units. However other criteria relating to the implementation of processes across a whole group award will be considered separately – for ease of reference, the term “generic criteria” will be used to describe these criteria throughout this document. The documentary evidence for these will be asked for only once for each group award selected for verification and one External Verifier will review this evidence and decide on the outcomes (see [Appendix 6](#) for the split of the criteria).

2.2 Remote verification

General information

Some verification does not depend on a visit to centres. 'Remote verification' is any verification activity that takes place in a location other than the centre.

Remote verification is made up of three different types of verification activity: remote verification of 'generic' criteria; remote verification; and remote central verification activity for graded units. You can find more information on criteria involved in the three types of remote verification in [Appendix 6](#).

Before remote verification activity takes place, the QA Logistics Officers will confirm these things with the centre's SQA Co-ordinator:

- ◆ the quality assurance criteria to be verified
- ◆ the group award and the units to be verified
- ◆ the date when evidence will be uploaded to SharePoint

This information will be shared with the centre via the verification timetable ([see Appendix 3](#)), which is e-mailed to the centre by the QA Logistics Officer at the start of the session.

Remote verification of generic criteria

Generic Criteria will be verified across the selected group award(s) (please see [Appendix 6](#) for a breakdown of all the criteria considered under the 'Generic' banner). The verification activity and requirements will be communicated through the Verification Timetable as mentioned above. This activity is planned and co-ordinated by the QA Logistics Officer, and allocations will be made through QAMS — you should accept or reject within 10 days. The breakdown of the criteria and evidence to be verified will be recorded on the Verification Timetable ([Appendix 3](#)) which is sent to the centres.

Remote verification

Criteria will be verified remotely using the same group awards that were verified in the generic criteria activity. All remote verification activity is planned and co-ordinated by the QA Logistics Officer. The breakdown of the criteria and evidence to be verified will be recorded on the Verification Timetable ([Appendix 3](#)) which is sent to the centres.

Central verification for graded units

Central verification is an event involving a group of verifiers undertaking verification activity in a location that is separate to the centre. This model has many advantages for verifiers as they have the opportunity to work as part of a team whilst carrying out verification activity. Central verification is currently used for verification of graded units in Higher National qualifications and it may also be used to verify other Higher National Units. Moving forward,

the verification of graded units may be undertaken as a group (as detailed above) or it may be merged with remote verification activity and undertaken throughout the year.

Where central verification has been confirmed as the mode of verification activity, centres will not be expected to provide the same level of evidence as would be expected during visiting verification. As a minimum requirement, they will be asked to provide evidence in relation to the criteria mapped to the central verification activity, the details of the evidence to be submitted and a blank Verification Sample Form for graded units (to be printed and completed by the centre for each unit selected for verification).

2.3 Visiting verification

SQA may determine that the appropriate mode of verification is a visit to a centre. Here, your role is to visit the centre and review the units linked to the group award selected for verification and provide tailored support where agreed in advance.

You need to prepare for verification visits to help ensure they run as smoothly as possible. The breakdown of the criteria and evidence to be verified will be recorded on the verification timetable. An element of visiting verification will focus on some additional support that the centre may require. Areas to be discussed will be identified by the QA Logistics Officer in collaboration with the centre, but could include:

- ◆ Help with a prior verification issue.
- ◆ Support with an outstanding agreed action.
- ◆ Follow up from remote verification issues.
- ◆ Delivery or assessment issues.

The external verifier and the QA Logistics Officer will meet to plan the visit, discuss the evidence to be reviewed and explore the additional support requirements — this meeting should take place at least two to four weeks before the visit.

Before the visit, your QA Logistics Officer will confirm with the centre's SQA Co-ordinator:

- ◆ The assessment location to be visited.
- ◆ The planned date(s) of the visit, as they may take place on more than one day.
- ◆ Group award and unit selections for verification.
- ◆ A draft agenda for the visit including additional support areas to be discussed.
- ◆ Visiting verification quality assurance criteria and evidence to be provided.

Creating the visit plan for visiting verification activity

The visit plan for visiting verification will be created manually and in collaboration with the assigned QA Logistics Officer, who will have already had a discussion with the centre. It will include information on the criteria, and the group awards and units to be verified.

Important points to note:

- ◆ When visiting verification is required, the QA Logistics Officer will schedule a meeting to discuss the visit plan and agenda for the visit. Thorough visit planning allows you to

gather important information prior to a visit and helps formulate an informed approach to qualification verification for each centre.

- ◆ This discussion will include an outline of any developmental support that the QA Logistics Officers have identified as necessary and have discussed with the centre.
- ◆ This visit plan will be sent as a Word document to the centre via the China Mailbox and loaded up on SharePoint.

3 Carrying out the verification activity

3.1 Remote verification overview

Unlike visiting verification, which usually takes place on one or two days, the stages of remote verification can happen over several days, eg e-portfolios may be made available to you over a three-day period where you access the portfolios each day for one or two hours at a time, or you may look at all evidence at one time. Evidence availability dates and access will have been decided with SQA, and evidence will be uploaded to the China operations SharePoint site.

At the end of the remote verification activity, you may have some questions you will wish to ask the centre. These discussions should be planned in advance to ensure availability of staff. The format of your discussions may be by:

- ◆ Telephone, where each discussion taking place is on a one-to-one basis.
- ◆ Tele-conference, where discussions with a number of assessors and verifiers and the centre's SQA Co-ordinator can take place at the same time.
- ◆ Video conferencing using applications such as Skype.
- ◆ E-mail.

After, or as part of, discussions, you should communicate your verification decision in relation to each criterion and each category, just as you would at the end of visiting verification. The report should be completed and submitted to SQA on QAMS.

3.2 Visiting verification

At the start of the session, the QA Logistics Officer will gather information on your availability for China visiting verification activity. Before visiting verification takes place, the visit plan for the visit will have been completed in collaboration with the QA Logistics Officer and sent to both the External Verifier and the centre. This is the primary tool used to plan and prepare the visit, and should ensure that your verification visit is well structured and focused. When carrying out a visit to a centre, it is important to consider:

- ◆ The appropriate forms — eg previous reports, Outcome of Verification Activity Form (Previously known as Summary of Agreed Actions form).
- ◆ Outcome rating pad to be issued at end of verification activity.
- ◆ QA Logistics Officers have made all relevant travel arrangements and you have a confirmed itinerary.
- ◆ The address of the site you are visiting (there could be a number of sites/campuses).
- ◆ You have contact numbers with you just in case you are delayed.
- ◆ The weather forecast — informing centre of possible delays and contingencies.
- ◆ You have your SQA Identification Badge with you.
- ◆ You are appropriately dressed for business.
- ◆ Local customs/traditions (ie dress codes, times of prayer, etc) — it is important to observe these.

Agreeing the agenda and running order of the visit

At the beginning of a visit it is important to ascertain and agree the agenda for the day or days. This scene-setting opportunity also gives the centre an opportunity to discuss any issues they might have prior to the verification visit getting under way. This enables you (and the centre) to plan time effectively.

The visit plan is a good place to start discussing the arrangements the centre has put in place in relation to:

- ◆ The sites/locations to be visited.
- ◆ The sampling of evidence, related to the group awards selected — accessibility and location (rooms).
- ◆ Availability of assessors, internal verifiers and candidates for interview (it is best to fit around assessor/verifier work schedules rather than them fitting around yours).
- ◆ Access to procedures and records of implementation.
- ◆ Observation of live assessments (if applicable and agreed during the planning process).
- ◆ Domestic arrangements — location of fire exits and toilets, lunch arrangements.
- ◆ The information that will be provided during the feedback session.
- ◆ Who will be available at the end of the visit for feedback.

This year, we will be offering development support, where needed, to centres in China as part of visiting verification. Note – this support will be included within existing visiting verification charges billed to the centre and should not be confused with development visits, which are a separate activity and cost. The development issues to be tackled will previously have been discussed with the centre and the QA Logistics Officer.

The developmental needs of the centre should form part of your pre-visit meeting with the QA Logistics Officers. Issues to be discussed could range from support with a prior verification request to support with a delivery or assessment issue. Once the agenda has been agreed it is best to discuss the running order of the visit. The running order of a visit can't be prescribed as it depends on a number of factors.

Conducting interviews with assessors/verifiers/candidates

Interviews with assessors and verifiers gives you a valuable insight into how assessment and internal verification takes place, and allows you an opportunity to find out information that can't readily be found from looking at records of evidence and assessment. Interviews also allow you to raise any queries you have with assessors/verifiers in relation to evidence that has been sampled.

The [National Occupational Standards](#) for Learning and Development include standards on which assessor/verifier practice (and therefore qualifications) is based:

- ◆ Page 29, the assessment (standard 9)
- ◆ Page 35, the internal verification (standard 11)

Example areas for discussion with assessors/verifiers:

- ◆ Internal verification, assessor support, candidate induction
- ◆ How standardisation is achieved
- ◆ Maintaining CPD
- ◆ Ensuring access to assessment
- ◆ How the review process works

Interviewing candidates, individually or in groups, is valuable from the point of view of ascertaining the support they receive and how procedures are applied from their perspective. For all candidates, regardless of the type of qualification they are undertaking, interviews (face to face or by using technological means) should be an integral part of verification.

3.3 Judging evidence in relation to each SQA quality assurance criterion

Once you have conducted all planned verification activities you will be in a position to make a judgement in relation to each criterion. Your judgements will result in you providing feedback (covered in the next section) in relation to four main categories:

- a) The identification of good practice
- b) Making recommendations
- c) Agreeing action points
- d) Judging the sufficiency of evidence

Identifying good practice

It is important that when you carry out sampling and other verification activities you identify good practice where it exists. Centres like to be recognised for the procedures and/or practices they have adopted that more than meet standard requirements (that is what makes it good practice). Good practice is that which goes beyond normal and expected practice and effort. For example:

Criterion 2.1: Maintaining records of assessor/verifier competence is a requirement for assessors/verifiers. However, if assessor/verifier records not only show copies of certificates and experience, but also show plans for identifying and prioritising development needs for each qualification area, this could be an example of good practice.

Criterion 4.2: Maintaining documented assessment procedures is a requirement for all centres. However, if those records show assessor(s), who through their continued efforts have exemplified practice that stands out — eg maintained comprehensive records of progress reviews or feedback, this would constitute good practice.

Criterion 4.6: Assessors must make accurate and consistent judgements — this is expected practice. However, if for example the centre frequently uses a number of different standardisation approaches/exercises to support assessors in the judgements they make, then this would constitute good practice.

It is important that where good practice exists, it is commented on and included in your report. It is likely that almost all centres will at least have some good practice that can be identified.

If good practice that you picked up on during previous visits still exists, it is still acceptable to comment on it.

Making recommendations

Unlike agreed action points (see next subsection), a recommendation is a suggestion that is given to help enhance a centre's performance in relation to one or more quality assurance criteria where the centre already shows compliance. Centres do not need to act upon recommendations.

Examples of recommendations could include for example, alternative ways of:

- ◆ identifying and recording CPD
- ◆ matching candidate development needs
- ◆ documenting assessment plans, recording evidence, referencing
- ◆ disseminating action points

Agreeing action points

Action points do need to be acted upon, and are given when an external verifier has judged there to be: 1) insufficient evidence; or 2) little or no evidence.

Green — sufficient evidence — this means that the centre has provided evidence that fully meets the criterion (no action points required).

Amber — insufficient evidence — this means the centre can provide some evidence in support of the criterion (required action point(s) will be set).

Red: little or no evidence — this means that evidence provided by the centre falls well short of meeting the criterion (Required action point(s) will be set).

Judging the sufficiency of evidence

Deciding on the sufficiency of evidence for qualification verification can be likened to making an assessment decision. Once you have enough evidence you can declare that the standard has been met. The same principle applies to SQA's Quality Assurance Criteria: you are looking for evidence to show that the centre meets each criterion.

A 'green' rating means that the centre has provided evidence that fully complies with the criterion in question. In terms of amber and red ratings, you have to decide, for each criterion, whether the sum total of available, relevant evidence is insufficient, very little, or non-existent.

Green

Fully compliant

Amber

↑ Not quite enough evidence
↓ More than just a little evidence

Red

↑ Little evidence
↓ No evidence

In Part B of this document, each criterion has a Support Information section. Under this heading you will find Examples of Evidence. The evidence in this box may not exactly match the name(s) given to the evidence provided by the centre. In this situation, it is important that you keep an open mind in terms of what is possible, and bear in mind that different names are often used for things that perform the same function, eg Personal Development Plans/Personal Action Plans/Appraisal Forms/Performance Reviews.

4 Communicating the verification decision

4.1 Explaining your verification decision

It is imperative that before you make a final decision relating to a criterion in terms of sufficiency of evidence, you have in your possession all the relevant information relating to that criterion. If a decision of 'insufficient evidence' or 'no/very little evidence' is being made, it will be assumed that you have already considered all possible sources of evidence and where possible, have talked with those concerned to check all avenues have been covered. If you have any concerns regarding evidence availability please contact your QA Logistics Officer who will liaise with the centre directly.

For visiting verification, having made a decision in relation to each criterion, you should explain your decision, the category outcome ratings and advise the centre of the potential sanctions that can be placed by SQA, it is important to discuss your rationale for making these judgements, to relevant centre staff. It is important that the centre fully understands how you came to make the decision. During the planning session for the visit, the QA Logistics Officer will advise the units, the criteria, any outstanding actions that you will need to provide feedback to the centre on.

The following stages can be applied when delivering feedback:

- Identify** all evidence sources, to ensure you sample all available evidence
- Explore** your thoughts, concerns, ideas with those concerned (this gives centre a chance provide additional information/evidence or confirm its totality)
- Decide** make an informed decision

Centre staff should be encouraged to ask questions to clarify any points during this period of communication. In some instances, centres may challenge your verification decision. This only happens on rare occasions but, if it does, it is important that you can justify your decision, giving the centre a clear rationale for the decision you have made.

4.2 Agreeing clear action points

When centres are given action points they must be written based on the SMART objectives principle. This means that action points must be:

- Specific** Centres should be clear in terms of the action they need to take to close-off the action point.
- Measurable** How will SQA or the centre know that the action point has been met and what will be the measure of success?

Achievable The centre must have sufficient time in which to achieve the agreed action. Please factor in the time it takes for SQA to receive, process and edit the report and send it to the centre.

Relevant The action must directly relate to the criterion.

Time bound Agree a specific date for the action to be completed by.

Where your verification decisions result in the centre being given a required action in relation to a specific criterion, the required action should be communicated verbally and in writing for each criterion using the Outcome of Qualification Verification Activity form. This should be signed by the SQA Co-ordinator or centre representative and yourself before the end of the visit.

If there are a number of 'ambers', and certainly if there are any 'reds', you should ask for the SQA Co-ordinator to be present at the feedback session and they should also sign the Outcome of Verification Activity Form. If the centre does not agree with your decisions and will not sign the form, you must contact the Quality Assurance Logistics team who will get in touch with the centre to discuss.

You should give a copy of the Outcome of Qualification Verification Activity Form to the SQA Co-ordinator/representative, and you should keep a copy. The communication of the verification decision normally constitutes the last part of the verification visit.

It is understood that the duration of a visit will vary depending on a number of factors. A single centre visit could take anywhere between three hours and three days.

4.3 Planning to deliver balanced feedback – visiting verification

Once you have completed each of your sampling/verification activities you will be in a position to communicate your verification decisions on each criterion and the overall outcome for each category to relevant centre staff.

It is important that feedback is given in a place where it cannot be overheard by those not directly involved in the visit. Confidentiality must be a prime consideration.

It is important that the feedback given to centre staff covers positive comments relating to the criteria you felt were met as well as comments relating to good practice, recommendations and agreed action points (where applicable). In other words, your feedback should be balanced.

Where you have given agreed action points it is important that the actions don't become the only focus of the feedback session. Where the centre has provided sufficient evidence (which should be common for most criteria and for the majority of visits) their efforts in providing sufficient evidence should be recognised. It is just as important that they know why the evidence you have sampled has been deemed 'green' as it is in relation to those you have deemed 'amber' or 'red'.

It is recommended that some time is taken between making your decision and delivering feedback. Well-structured and balanced feedback is more likely to be better understood, have more of an impact and be more likely to be received in the vein that it is meant if it has been thought through and can be justified.

No specific guidance can be given on the time that should be given to the provision of feedback, however, there is generally a recognition that time spent on this phase is time well spent if the efforts of all concerned are to be given the appropriate level of importance and value.

It is also important to remember that centres value the knowledge and expertise of external verifiers, so please take the time to provide centres with feedback and support.

There is an investment in time and effort by:

- ◆ Each centre in reaching the point of providing you with all of the assessment and verification records/materials for your visit.
- ◆ You in organising the visit, planning it, conducting it, and writing up reports.
- ◆ SQA in managing and quality controlling the external quality assurance process.

The investments by all concerned culminate in the outcome of the verification visit therefore, the communication of the visit outcome, carried in the detail and quality of the feedback you provide, is of vital importance to SQA and its centres for each visit carried out.

5 Completing the qualification verification report

5.1 The stages of completing your qualification verification report

This last section covers general guidance on completing the qualification verification reports. It does not go into detail as to how each section of the report should be completed as this is available as a demonstration on SQA's Quality Assurance appointee web pages.

Depending on how verification activity is allocated you may be asked to complete more than one QV QAMS report (refer to Appendix 7 for a sample breakdown of reports by group award and also refer to [Appendix 6](#) for the breakdown of criteria).

Essentially, a QV report will need to be completed for each group award under generic criteria and a QV report for each remote verification activity. For visiting verification the report content will be determined by the plan i.e. the units selected for verification and any outstanding agreed actions relating to previously undertaken generic and remote activity and any development requirements.

The report content should match your feedback

Your report should not hold any surprises. If you have fed back that the centre is making accurate assessment decisions they will expect to see this in your report.

Agreed action points should not be altered or extended post-visit after feedback has been given and agreed, so it is imperative that there is clarity in agreed actions in both verbal feedback and the report. If a report is not clear before issuing to a centre, the QA Logistics Officer will be in touch to discuss.

Writing clear action points

	Criteria	Impact	Compliance Level	Comments	Required Action	Evidence Type/required by date
2.1	Verifiers must be competent to assess and	High	Amber	Centre records do not adequately demonstrate that verifiers have sufficient knowledge and skills to assess qualifications relating to the qualifications being assessed.	Centre to provide details of staff qualifications in relation to the SVQ in Health Care as detailed within the	Electronic 30 August 2017

The action is time-bound and the achievement date specific, selected from SQA's list of Required Action completion dates. 'The required action is achievable in terms of what is to be done and by what date.'

Specifies the action to be taken by the centre, allowing the centre and SQA to measure successful achievement. The required action is relevant to the criterion.

When centres are given action points they must be written based on the SMART objectives principle as described on page 144. The example above is an agreed action from a qualification verification report.

Where a number of action points have been identified, there should be only one agreed date by which all actions have to be achieved.

Centres might have to be reminded at this point that they should submit electronic evidence for each non-compliant criteria to [SharePoint](#) rather than to the external verifier. This ensures that actions can be tracked by SQA.

The box at the end of the Qualification Verification report titled 'Feedback to ASV' should be used for reporting to SQA on any issues of concern that do not fall under the qualification verification criteria, eg entries not reflecting actual live candidates, the content of internal verification procedures not meeting SQA requirements (although implemented as written), safety or access concerns at assessment sites. These issues may be escalated within SQA, or referred to systems verification.

Recording decisions that you can justify

As the focus on qualification verification is based on establishing sufficiency of evidence in relation to each criterion, you are looking for evidence of what the centre is actually doing to show they comply. The comments section of your report relating to each criterion should include the sources of evidence you have found in justifying your verification decision.

Naming staff and candidates in reports

It is permissible to name centre staff, eg assessors, internal verifiers and SQA Co-ordinators in visit plans and qualification verification reports. For data protection reasons it is not permissible to mention the names of candidates. However, you can identify candidates by their SCN.

Reports should be written professionally

Reports should be written in clear and concise language avoiding the overuse of technical jargon.

Before submitting your report to SQA, check it for overall cohesiveness and clarity and accuracy, spelling and grammar. The following SQA publication can assist you with report writing: http://www.sqa.org.uk/files_ccc/WritingForSQAA-ZV6.pdf

5.2 Carrying out a final check and submitting your report to SQA

It is advisable to write your report as soon as possible after the visit when the details are still fresh in your mind. SQA guidelines state you must complete and submit your report within five working days of the visit taking place. The qualification verification report must be an accurate reflection of the feedback given during the verification activity. Guidance on how to complete the Visit Report can be found on SQA's [QA appointee web pages](#).

You can use the following points to check if your report is completed satisfactorily:

1. Comments justify the criteria compliance level, ie Red, Amber, Green
2. Comments relating to a criterion accurately match that criterion.
3. Comments do not conflict with any other comments in the report or any of SQA's requirements.
4. Report content is accurate in relation to the s being verified.
5. Good practice is about more than routine practice, and therefore comment is not expected per criterion.
6. A recommendation is not a required action (centres do not have to act upon a recommendation, but required actions must be addressed). If an action is required, this would constitute an Amber or Red.
7. Action points are SMART. When agreeing completion dates, realistic timescales are factored in.
8. If re-assessment is required, time may firstly be needed to develop another assessment instrument.
9. Appropriate SQA codes are used for the Awards/Units being verified. (Generic qualification abbreviations can be used for Assessor/Verifier Awards/Units eg D32, A1 etc as per External Verifier guidance.)
10. The report has been checked for spelling, grammar, punctuation and 'flow' — it makes sense, and it reads well.

5.3 After submitting your report to SQA

All qualification verification visit reports are authorised by your Senior Verifier before being sent to the centre. The Senior Verifier may require you to make changes to your report, in which case you will receive an e-mail notifying you of the required changes.

Once the Senior Verifier has approved your report, they will submit it to the Quality Assurance Logistics Team, who will determine the level of sanction, if applicable, and send it to the centre as a pdf file.

Please note that the service level agreement (SLA) for a qualification verification report to be issued to a centre is 15 working days from the visit date, so all reviews and sign offs must take place within that timeline.

5.4 Evidence review

If your report included agreed action points, an evidence report will be generated detailing the actions and deadlines for the centre to send the evidence.

SQA will contact the centre 10 working days before the agreed action date to remind them that they have outstanding actions. SQA will send an additional reminder five working days before the agreed action date. Where evidence is not received by the agreed action date, SQA will determine the next steps in relation to evidence review and action dates. Where no evidence is received by the agreed action dates, SQA will issue an updated Evidence Report with increased outcome rating and/or increased sanctions, providing the centre with a further agreed action date.

On receipt of the evidence associated with the agreed action point(s) from the centre, SQA will forward on the evidence to you for your review and signpost you to the location of your original qualification verification report for you to update.

Service level agreements for evidence review are the same as for completing the Qualification Verification Report. Your evidence review will also be subject to Senior Verifier sign-off. Guidance on how to complete the evidence review report can be found on the [QA appointee web pages](#).

5.5 Centre feedback on the visit

The centre will be sent a link to a Centre Feedback form with the report of the visit. You should encourage the SQA Co-ordinator to complete this feedback and send it to SQA, as this will provide you with valuable information to confirm that your verification practice is effective or to form a basis for making future improvements.

5.6 Appeals

If a centre disagrees with SQA's decision on the outcome of qualification verification, required actions and/or sanctions placed as a result, it can appeal. You should advise the

representatives of the centre about this at the feedback session. Full details of the appeals procedure are available in [The Appeals Process: Information for centres](#).

5.7 Electronic housekeeping

Verifiers have a duty of care in the way they use and dispose of information provided to undertake qualification verification activity including verification visit plans, reports and candidate lists. Once visits are complete and the report has been submitted and signed off (with any action points cleared, where appropriate), External Verifiers should remove any personal or sensitive data relating to the visit from personal computers or data sticks.

Part B: SQA's Quality Assurance

Criteria: requirements and guidance

The resource is designed to:

- ◆ Promote transparency and consistency in the interpretation of criterion requirements.
- ◆ Allow access to essential information quickly — it is deliberately not too wordy, but provides hyperlinks for further reading where more information is sought.
- ◆ Allow information to be accessed for each criterion — the resource mirrors the categories of the Verification Visit Report.
- ◆ Provide SQA requirements and guidance on each criterion — making a clear distinction as to what is a requirement and what is purely guidance.

Example of criterion with explanation of layout

Criterion	Initial and ongoing reviews, assessment procedures, equipment, learning and materials.
Awarding body requirements	Initial reviews must take place before the assessment of a qualification(s) begins to ensure all of the appropriate resources are in place. Ongoing reviews of resources are required thereafter to ensure resources continue to meet requirements.
Impact rating	High
Rationale for criterion inclusion	Reviews are firstly important in ensuring resources appropriately meet requirements. On a second level, reviews can ensure improvement.
Support information	
Guidance on evidencing the criterion	Centres will differ in terms of how and when they carry out ongoing reviews. This may happen every time a new cohort of candidates commences a specific programme. For roll-on/off programmes, where individual candidate enrolment and qualification i... may be scheduled to happen eg annual... It is the verifier's role to look at the evidence. Verifiers will look at the procedures and the reviews under a separate criterion (2.3).

Examples of evidence	Evidence of initial and ongoing reviews, which could include planned/scheduled reviews.
Additional sources of information	<p>Review is mentioned in the first and second phases of the 'three phases of internal verification' in Part A of this guidance.</p> <p>Internal Verification Toolkit on the Quality Assurance page of SQA's website.</p>

The verification criteria

Category 2: Resource management	
The centre procedures for managing resources must be documented, implemented and monitored to meet SQA requirements.	
Criterion 2.1	Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.
Awarding body requirements	<p>Assessors and internal verifiers must have the required up-to-date occupational experience and/or subject understanding, and, where stipulated, relevant qualifications and CPD. Where these requirements exist, they will be stipulated in one of the following: Assessment Strategy, Unit specification, operational handbook, Arrangements document/Group Award Strategy document.</p> <p>If there are no specific assessor verifier occupational/subject experience/CPD stipulated in Awarding/Regulatory Body documents, this criterion will be marked 'Not Verified' (NV) in the Qualifications Verification Report.</p> <p>Assessors and verifiers of regulated qualifications must achieve a relevant assessor/verifier qualification within 18 months of starting to practise where no alternative timescale is stated in an Assessment Strategy.</p> <p>Assessors and internal verifiers for regulated qualifications must undertake relevant continuing professional development activities, and keep records of this.</p>
Impact rating	High
Rationale for criterion inclusion	To ensure the validity and integrity of the s offered by SQA, it is important that assessors/internal verifiers have the appropriate qualifications and occupational competence in relation to the qualifications they are assessing/verifying.
Support information	
Guidance on evidencing the criterion	For regulated qualifications (S/NVQS and QCF/RQF Units), assessors and verifiers are not required to re-qualify if they already have relevant qualifications such as D32/33/A1/A2 Units/TQFE or D34/V1. All assessors/verifiers of regulated qualifications should, however, show they are 'working in line' with current national standards in assessment/verification. Refer to Additional sources of information for the guidance note from SQA

	<p>Accreditation. Centres can use SQA's CPD Toolkit (optional) to help show assessors/verifiers are 'working in line'. Refer to additional sources of information.</p> <p>RQF assessors/verifiers can either hold or work towards a nationally recognised assessor/verifier qualification. This is not a mandatory requirement unless specified in an RQF Unit Specification. Alternatively, competence in assessment or internal verification can be demonstrated by:</p> <ul style="list-style-type: none"> ◆ holding other qualifications that include relevant and sufficient assessment or verification components, or/and ◆ providing evidence of having successfully practised as an assessor and/or verifier of awarding organisation qualifications <p>Customised Awards: There are a number of options open to assessors/verifiers of these Awards. For more information, refer to SQA's Customised Awards Services.</p> <p>This SQA quality assurance criterion will also be covered during Systems Verification, where policies and procedures will be checked.</p>
Examples of evidence	<p>Where a qualification requirement, records of relevant occupational/subject experience, CPD records, copies of certificates.</p>
Additional sources of information	<p>The following guidance is available to centres:</p> <p>'Assessor and Internal Verifier qualifications: a quick reference guide'</p> <p>SQA Accreditation Statement on Assessor and Verifier Competence</p> <p>The National Occupational Standards for Learning and Development includes assessment and internal verification standards 9 and 11 on which Assessor/Verifier qualifications are based.</p> <p>This link provides guidance to centres on choosing an appropriate Assessor or Internal Verifier.</p> <p>A CPD Toolkit can be accessed on SQA's quality assurance appointee website.</p>

Criterion 2.4	There must be evidence of initial and ongoing reviews of assessment environments; equipment; and reference, learning and assessment materials.
Awarding body requirements	Initial reviews must take place before the assessment of a qualification(s) begins to ensure all of the appropriate resources are in place. Ongoing reviews of resources are required thereafter to ensure resources continue to meet requirements.
Impact rating	High
Rationale for criterion inclusion	Reviews are firstly important in ensuring resources appropriately meet requirements. On a second level, reviews can aid quality improvement.
Support information	
Guidance on evidencing the criterion	<p>The scheduling and carrying out of reviews is part of a centre's procedures, ensuring resources are checked ahead of assessment and reflected upon at appropriate points thereafter for quality improvement purposes.</p> <p>Centres will differ in terms of how and when they schedule reviews. This may happen every time a cohort of candidates commence and/or complete a specific programme. For roll-on/off programmes, where individual candidate enrolment and certification is continuous, the review may for example be scheduled to happen annually.</p> <p>Reviews of resources will also be triggered by:</p> <ul style="list-style-type: none"> ◆ changes to the qualifications being offered where resources will be required to support the introduction of new or revised units/awards ◆ feedback highlighting the need for updating resources, which may come from internal comments or reviews/IV or external quality assurance visits <p>Systems Verifiers will look at the procedures and mechanisms for managing reviews, encompassing the types of arrangements described above. This will be checked under a separate criterion (2.3). It is the verifier's role to look at the evidence of systematic review taking place.</p> <p>As part of the review process, centres should ensure that all candidates undertaking an SQA qualification have equal access to available resources across all assessment sites.</p>
Examples of evidence	Pre-delivery/assessment checks, course/programme reviews, action logs, minutes of meetings with review as a discussion item.

	<p>Site checklists, or equivalent documents, may be considered as evidence of initial and on-going reviews of assessment sites not owned or managed by the centre.</p> <p>Evidence of initial and ongoing reviews, could include planned/scheduled reviews.</p>
<p>Additional sources of information</p>	<p>An Internal Verification Toolkit is available on the Quality Assurance page of SQA's website.</p>

Category 3: Candidate support

Candidates are supported and guided through the qualifications for which they are entered.

Criterion 3.2	Candidates' development needs and prior achievements (where appropriate) must be matched against the requirements of the award.
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Awarding body requirements	In terms of prior achievement, candidates must meet any entry requirements set by SQA or the approved centre, and where applicable, be in a position to be assessed in accordance with the relevant Assessment Strategy, Unit specification, operational handbook, Arrangements document/Group Award Strategy document.
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Impact rating	Medium
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Rationale for criterion inclusion	Identifying development needs and prior achievement helps ensure a more targeted approach is taken in helping candidates achieve their qualifications.
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Support information

Guidance on evidencing the criterion	<p>This criterion relates to identifying the prior achievements and development needs of candidates before or at the start of their units/qualifications.</p> <p>The identification of prior achievement helps ensure candidates satisfy any entry requirements and helps determine whether or not any previously gained skills and/or knowledge can provide valid evidence towards the assessment of the units/awards the candidate wishes to achieve.</p> <p>It is also important to identify candidates' development needs in relation to the units/awards they wish to achieve to help put in place arrangements for development ahead of assessment.</p> <p>It may be that the results of this identification process may range from 'no/very little development' required to 'significant development' required. 'No/very little development' can be appropriate for example where SVQ candidates have enough experience and competence to go straight to assessment for the majority or all of the units for which they are enrolled.</p> <p>In the case of taught programmes, such as those associated with HN and NQ units/awards (this can also apply to some VQ programmes), the general development needs of candidates are</p>
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	usually matched against unit/award requirements at the programme/course design stage, and then factored into the learning, teaching and assessment plans and progress reviews.
Examples of evidence	SVQs- Personal Development Plans, Action Plans, (development section of Assessment Plans). HNs/NQs – Learning, Teaching and Assessment Plans, Individual Learning Plans, Progress Reviews.
Additional sources of information	The Guide to Assessment provides more information on formative assessment which is related to candidate development needs.

Criterion 3.3	Candidates must have scheduled contact with their assessor to review their progress and to revise their assessment plans accordingly.
Awarding body requirements	None in addition to the wording of the criterion.
Impact rating	Medium
Rationale for criterion inclusion	It is important that assessors maintain regular contact with candidates throughout the life of their qualification so that progression can be monitored and timely information and effective support provided.
Support information	
Guidance on verifying the criterion	<p>Centres may use other terms for assessment plans such as assessment schedules or Learning Teaching and Assessment plans.</p> <p>Maintaining contact is a key assessor responsibility, the purpose being to review candidate progress and achievement in relation to where they are within the assessment process.</p> <p>Effective contact should provide the necessary opportunities to help candidates understand the evidence required for assessments including advice/support on the gathering and/or production of assessment evidence.</p> <p>Contact should allow for assessment plans to be adjusted/revised in order to ensure that the next stages in assessment remain clear.</p> <p>This process could be in relation to Outcomes/Units/evidence or/and in relation to the overall qualification.</p>
Examples of evidence	Any relevant documentation that shows progress reviews have taken place such as assessment plans, assessment schedules, learning, teaching and assessment plans, progress reviews, contact logs, action plans.
Additional sources of information	Review is linked with the updating of assessment plans, which is an integral part of the assessor's role as defined in the Assessment Standard (9), given in the National Occupational Standards for Learning and Development .

Category 4: Internal assessment and verification

The centre's internal assessment and verification procedures must be documented, implemented and monitored to meet qualification and SQA requirements.

Criterion 4.2	Internal assessment and verification procedures must be implemented to ensure standardisation of assessment.
Awarding body requirements	None in addition to the wording of the criterion.
Impact rating	Medium
Rationale for criterion inclusion	This criterion is about assessors and verifiers applying their centre's assessment and verification procedures consistently, in full and effectively.

Support information

Guidance on evidencing the criterion	<p>The verifier will sample a range of assessment practice in relation to documented assessment procedures to measure consistency.</p> <p>The term 'assessment procedure' covers the assessment cycle and generally includes assessment planning/scheduling, judging evidence, referencing/mapping, re-assessment, recording assessment decisions, giving feedback, review.</p> <p>Clear referencing/mapping is necessary in order to make evidence trackable – otherwise, it can be difficult for the verifier to ascertain how assessment judgements have been reached.</p> <p>The term 'verification procedure' generally includes planning, sampling, making verification decisions, review.</p> <p>These procedures are included in National Occupational Standards — all assessors/verifiers of regulated s should practise in line with those standards. Refer to Additional sources of evidence.</p> <p>Centres are required to document their assessment and verification policies and procedures. Systems verifiers will look at these written policies and procedures and whether they meet SQA requirements.</p> <p>The role of the verifier is to focus on the centre's implementation of these policies/procedures. However, if the verifier identifies any concerns about the content of a centre's assessment/ IV policies or</p>
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	<p>procedures, they will flag this up in their report so that the issue can be referred to a Systems Verifier to follow-up.</p> <p>There are some assessment procedures that are specific to particular qualifications. They are covered under 'Conditions of assessment' under Criterion 4.4</p>
Examples of evidence	The completion of records showing assessors/verifiers consistently follow their centre's assessment/verification procedures.
Additional sources of information	<p>Refer to guidance in Criterion 4.6 regarding SQA's three stages of internal verification.</p> <p>The following documents are also useful reference documents:</p> <p>Guide to Assessment includes guidance on the assessment process for SQA Units</p> <p>Internal Verification: A Guide for Centres offering SQA s</p> <p>Internal verification: A Guide for Centres offering Ofqual Regulated Qualifications includes the purpose and function of internal verification</p> <p>Internal Verification Toolkit on the Quality Assurance page of SQA's website</p> <p>The National Occupational Standards for Learning and Development includes the assessment standard 9 and internal verification standard 11 on which Assessor/Verifier qualifications are based.</p>

Criterion 4.3	Assessment instruments and methods and their selection and use must be valid, reliable, practicable, equitable and fair.
Awarding body requirements	<p>This criterion requires assessment instruments/methods to be appropriately selected (prior to assessment), and used (during assessment).</p> <p>All instruments/methods selected and used must meet the quality assurance principles of validity and reliability etc. The abbreviated meaning of the quality assurance principles are:</p> <p>Valid — Appropriate assessment methods/ instruments have been applied.</p> <p>Reliable — Clearly-defined standards of performance were used during assessment.</p> <p>Equitable — Assessment is accessible to all candidates who have the potential to be successful in it.</p> <p>Fair — Assessments have been objectively devised/selected and are free from barriers to achievement. Assessment practice must ensure all candidates have equal opportunities to succeed.</p> <p>Practicable — Assessments have been carried out efficiently and effectively.</p> <p>The above principles are described in full in SQA's Guide to Assessment. Refer to link in Additional sources of evidence.</p> <p>To support validity in assessment, centres must ensure access to SQA's secure site remains restricted to approved personnel only.</p> <p>SQA or centre-devised assessments must be securely stored.</p>
Impact rating	High
Rationale for criterion inclusion	This criterion is about how a centre demonstrates its selection and use of assessment methods/instruments to ensure validity, reliability, equitability and fairness in assessment.

Support information

Guidance on evidencing the criterion

Methods of assessment, as described in SQA's Guide to Assessment, 'fall into the three categories of observation, product evaluation and questioning'. There are numerous methods of assessment available for centres to use under each of these categories.

In relation to regulated qualifications, the range of methods that can be used in assessments are usually defined in the Unit specification and/or Assessment Strategy. They will also, where applicable, detail where methods such as simulation are permissible/not permissible.

The verifier in this context is checking the assessors'/verifiers' selection and use of methods in line with the requirements of the S/NVQ/QCF/RQF qualifications being assessed.

For HN/NQ qualifications, assessment methods are the basis on which instruments of assessment (referred to in the Guide to Assessment simply as 'assessments') are chosen. Some HN assessments are SQA-devised — all centres have access to these on SQA's secure site under 'Assessment Exemplars/Assessment Support Packs'.

The centre may choose to use SQA's assessments or use their own. Where centres use their own, it is strongly recommended that assessments are submitted to SQA for prior verification. Refer to Additional sources of information.

Selection: regardless of whether assessments are SQA-devised or centre-devised, they should be subject to the centre's system of internal verification before qualifications are delivered. Similarly, the approach to assessing regulated qualifications should be understood and agreed by all assessors/verifiers prior to assessment taking place.

Methods (or in the case of HN/NQs, assessments) must be selected and used in a way that ensures they are a true measure of the candidate's skills and/or knowledge. This helps give assessment its validity and reliability. The centre's standardisation arrangements can support these assessment principles very well by ensuring at the outset, and on an ongoing basis, assessors/verifiers have a common understanding of how methods/assessments are to be applied.

The approaches to assessment used should not impose any unnecessary barriers to individual candidates undertaking the assessments, and appropriate adjustments should be made,

	<p>where this can be done without affecting the integrity of the assessment.</p> <p>Refer to 'Assessment Arrangements' link in Additional sources of information.</p>
Examples of evidence	Documented evidence of methods/instruments having been selected and applied.
Additional sources of information	<p>SQA's Guide to Assessment includes more detailed information on the principles of assessment and selecting and using suitable methods and assessments.</p> <p>Information on prior verification</p> <p>The selection of assessment methods/instruments forms part of first phase of the 'three phases of internal verification' in Part A of this guidance.</p> <p>SQA Assessment Arrangements web page</p>

Criterion 4.4	Assessment evidence must be the candidate's own work, generated under SQA's required conditions.
Awarding body requirements	Centres must ensure that the evidence on which the assessment decision is made solely belongs to the candidate under assessment. Assessors are only able to make accurate assessment decisions, if this is the case.
Impact rating	High
Rationale for criterion inclusion	Determining the authenticity of each candidate's work is of prime importance in ensuring the integrity of their achievement.
Support information	
Guidance on evidencing the criterion	<p>Ensuring only the work of each submitting candidate is considered for assessment is a key centre responsibility. For some qualifications, there is a requirement to carry out identity checks prior to examination/assessment.</p> <p>Candidates should be informed of the requirement to provide only authentic evidence. The responsibility for providing this information could involve one or more people/departments.</p> <p>Evidence generated by candidates not directly authenticated through for example direct assessor observation, should be subject to proportional authenticity checks, which may comprise comparison checks against previous submissions, questioning and witness testimony. Many centres use plagiarism detection software.</p> <p>Specific arrangements/conditions are included in Unit specifications, Arrangements documents/ Group Award Strategy documents. Where applicable, they detail the conditions of assessment. For HNs they might be supervised assessment, invigilated and other examination conditions such as open-book or closed-book assessment. There may be specific requirements for e-assessment.</p> <p>For regulated qualifications, the condition for candidate achievement usually requires evidence to be generated in the candidate's workplace. Conditions might also comprise use of realistic working environments and/or use of simulation, which if applicable, will normally be detailed in the Assessment Strategy and/or Unit Specification.</p> <p>Assessors/verifiers should apply their centre's policy and procedures if they suspect or discover evidence that is not authentic. If malpractice is suspected, the centre should take the necessary steps to resolve the situation. System Verifiers look at these policies/procedures when they</p>

	carry out centre visits. Malpractice includes plagiarism, copying and personation.
Examples of evidence	Induction checklists, portfolio disclaimers, checks on assessment conditions, testimonial evidence, use of plagiarism software.
Additional sources of information	SQA's Your Coursework web page covers information widely available to centres and candidates on topics such as plagiarism and collusion.

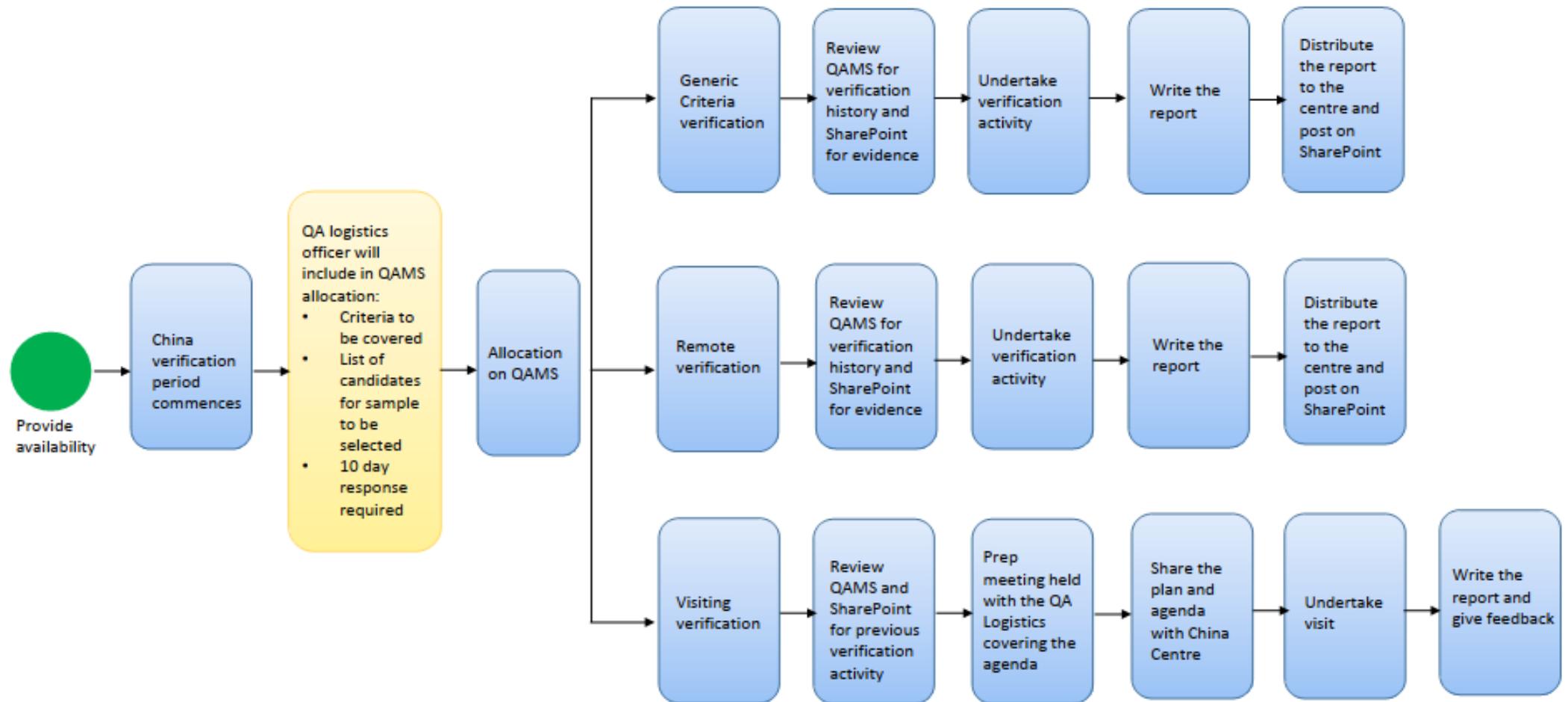
Criterion 4.6	Evidence of candidates' work must be accurately and consistently judged by assessors against SQA's requirements.
Awarding body requirements	None in addition to the wording of the criterion.
Impact rating	High
Rationale for criterion inclusion	Accuracy and consistency in making assessment judgements not only ensure integrity in SQA qualifications, but help ensure that final assessment decisions made and communicated to candidates are fair.
Support information	
Guidance on evidencing the criterion	<p>Accuracy and consistency are achieved when all assessors have the same clear interpretation of the standards they are assessing and the type, quality and quantity of evidence that can be expected for assessments to be deemed successful/complete.</p> <p>The IV sampling of assessment decisions during assessment (and not just at the end of the assessment process) can help support consistent decision-making.</p> <p>In support of ensuring consistency in assessment, standardisation is of key importance for assessors/verifiers. It provides a forum for raising and resolving issues and it supports everyone in making accurate and consistent judgements/decisions in relation to evidence.</p> <p>The three phases of internal verification (section 6.5) that SQA requires centres to build into their IV system give centres appropriate and timely opportunities for standardisation. For example:</p> <p>Before assessment begins for new qualifications, assessors and verifiers have opportunities to agree methods/instruments of assessment, assessment approaches and assessment materials. This is also a requirement of the approval process.</p> <p>During assessment, periodically throughout the life of the qualification, assessor/verifier collaboration and agreement can provide effective support for all team members — especially beneficial for new assessors/verifiers.</p> <p>After assessment, during a process of review, assessors and verifiers can collectively reflect on the overall effectiveness of the assessment process for a particular qualification with a view to taking action/making recommendations in order to improve practice.</p>

	Whenever standardisation takes place, whether through physical meetings or by electronic means (discussion forums, e-mail exchange, webinars, tele/video conferencing, etc), the outcomes of the process should be recorded through, for example, minutes of meetings and/or a continuous standardisation log.
Examples of evidence	Any assessment and internal verification documentation that records accurate and consistent assessment decisions being made.
Additional sources of information	<p>There are examples of different types of standardisation exercise on page 4 of SQA's Internal Verification: A Guide for Centres offering SQA s and on page 5 and 6 of SQA's Internal verification: A Guide for Centres offering Ofqual Regulated s.</p> <p>There is an Internal Verification Toolkit on the Quality Assurance page of SQA's website. https://www.sqa.org.uk/sqa/74678.6226.html</p>

Criterion 4.7	Candidate evidence must be retained in line with SQA requirements.
Awarding body requirements	SQA requires centres to retain all candidate evidence for the Group Award/Units until at least three weeks after the official completion date. However, if the initial contact for the session is made by the External Verifier before three weeks after the completion date, all candidate evidence must be retained until after the verification visit has taken place.
Impact rating	High
Rationale for criterion inclusion	<p>SQA requires that candidate assessment evidence is retained by centres for defined periods for the purposes of internal and external verification, and in case of any resulting queries, candidate internal assessment appeals or suspected malpractice.</p> <p>This requirement provides verifiers with an opportunity to sample the optimum amount of evidence during a centre visit. Sampling will focus mainly on current 'live' candidate evidence, but may also include some past completed assessment evidence.</p>
Support information	
Guidance on verifying the criterion	<p>Evidence of centres meeting this criterion should derive from the access they allow verifiers to information prior to the visit and then during the visit.</p> <p>The need for evidence to be retained for verification purposes should not be confused with SQA's Retention Policy, which is about specific assessment records and is looked at by Systems Verifiers. Refer to Additional sources of information.</p>
Examples of evidence	The selected candidate evidence (pre-selected and on-site selected) available for verification.
Additional sources of information	SQA's Retention Policy for SQA centres (which Systems Verifiers look at).

Criterion 4.9	Feedback from verifiers must be disseminated to staff and used to inform assessment practice.
Awarding body requirements	None in addition to the wording of the criterion.
Impact rating	Medium
Rationale for criterion inclusion	If the results of verification are made known to all relevant centre staff, this helps affirm what the centre is doing well as well as highlighting areas for improvement
Support information	
Guidance on verifying the criterion	<p>Centres must provide evidence of having disseminated the feedback contained in verifier reports, in a systematic way, and wherever there are required actions, having agreed how they will be met, and who will be responsible for taking the required actions.</p> <p>Centres may use meetings to disseminate feedback and/or circulate External Verifier Reports to the relevant assessors/verifiers.</p> <p>Methods of dissemination will be dependent on each centre's arrangements. These arrangements will usually have a degree of flexibility to take account of report content, eg the amount and nature of the action points/feedback given on a visit, but should not just be ad hoc.</p> <p>Verifier reports can be a useful source of information when it comes to conducting reviews of resources (see Criterion 2.4).</p>
Examples of evidence	Evidence of feedback being disseminated to staff and evidence of it has been used to update/improve assessment practice.

Appendix 1: Process map



Appendix 2: SQA Verification Glossary

Term	Meaning	Definition
EV	External Verifier	Any externally contracted SQA staff
SEV	Senior External Verifier	Oversees External Verifiers
DLV	Deputy Lead Verifier	Oversees SEVs
SWP	Senior Without Portfolio	Provides support to a range of External Verifiers – non subject specific
SV	Systems Verification	Process of checking quality and robustness of centre systems
QV	Qualification Verification	Process of checking quality and robustness of qualification delivery within centres
PV	Prior Verification	Process of support for centres to help them get ready to be an SQA centre
IV	Internal Verification	Term given to when internal centre assessor's verify assessments
QA	Quality Assurance	SQA Dept. which ensures quality of qualification delivery
QAV	Quality Assurance Verification	Overarching title given to all Quality Assurance activity – whether systems or qualification based
QAMS	Quality Assurance Management System	Electronic system for managing Quality Assurance activity
QM	Qualification Manager	
QO	Qualification Officer	
QEM	Quality Enhancement Manager	Focuses specifically on systems verification
QAL	Quality Assurance Logistics	SQA QA Dept. ensuring Quality Assurance activity delivery
CPDR/ CPD	Continuing Professional Development (Record)	
DBV	Double Bank Visit	Supported EV visit for new External Verifiers – supported by SEV/SWP
DBR	Double Bank Report	Report produced by SEVs re: External Verifier performance
QASP	Quality Assurance Support Pack	
AM	Appointee Management	SQA HR Dept for EVs/SEVs/DLVs/SWP
	SharePoint	SQA online Info centre
	Group Award	Overarching qualification (HND, HNC, for example)

Appendix 3: Verification timetable

NAME OF CENTRE

Verification Timetable Session 2018–19

Please find below a summary of your allocated verification activity for the forthcoming session 2018–19.

- This document is for reference only
- A 'live' version will be uploaded to your SharePoint site - ensure you check this document regularly as it will advise you of any changes to your planned verification activity
- If you would like to discuss this further, please contact your Quality Assurance Logistics Officer via the China Mailbox; china.mailbox@sqa.org.uk or get in touch with the China Manager, Jimmy Zhang, Jimmy.Zhang@sqa.org.uk

Activity 1	
Group Award:	
Generic Criteria:	
Verification type:	
Submit evidence to SharePoint by:	

Activity 2	
Group Award:	
Generic Criteria:	
Verification type:	
Submit evidence to SharePoint by:	

Activity 3	
Group Award:	
Unit Codes:	
Criteria being verified:	
Verification type:	Remote
Submit evidence to SharePoint by:	

Activity 4	
Group Award:	
Unit Codes:	
Criteria being verified:	
Verification type:	Remote
Submit evidence to SharePoint by:	

Activity 5	
Group Award:	
Unit Codes:	
Criteria being verified:	
Verification type:	Visit
Submit evidence to SharePoint by:	

Activity 6	
Group Award:	
Unit Codes:	
Criteria being verified:	
Verification type:	Visit
Submit evidence to SharePoint by:	

SYSTEMS VERIFICATION (if applicable):

Please be advised that you may also receive a systems verification visit throughout this academic session – your Quality Enhancement Manager will be in touch to confirm specific arrangements around these visits, where necessary.

ANY ADDITIONAL INFORMATION:

Timetable produced by:	
Date:	

Appendix 4: Support for External Verifiers

Source of support	Nature of support
Quality Assurance Logistics Officers Contact details: Tel: 0141 500 5928 E-mail: gav@sqa.org.uk	Information relating to organising and conducting verification events/visits and monitoring of Quality Assurance activity and practice
Quality Assurance Management System (QAMS) http://theia.sgameet.net/qa/qat.nsf	The QAMS system will allow you to view and monitor your allocated activity. SEVs will also be able to monitor the activity of the External Verifiers they have responsibility for. QAMS will also issue e-mail alerts to External Verifiers where they are reaching deadlines within Service Level Agreement (SLAs) for each stage of the Qualification verification process. The QAMS Guidance document is available via Quality Assurance appointee website.
SQA's Quality Assurance appointee web pages for qualification verification https://appointees.sqa.org.uk/ https://www.sqa.org.uk/sqa/80476.8372.html Contact details: Tel: 0141 500 5928 E-mail: gav@sqa.org.uk	Template forms, information about qualification verification policies and procedures
Deputy Lead Verifier (DLV) Senior External Verifier(SEV)(SEV)/colleague, SQA specific web pages or Qualifications Development Team	DLV mentor and support an allocated number of SEVs while undertaking their roles in supporting External Verifiers. Information and advice about your subject area(s) relating to the standards/Units/ evidence you are verifying and the quality monitoring of Visit Reports
Quality Enhancement Managers Contact details: Tel: 0141 500 5189 E-mail: asv@sqa.org.uk	For information relating to the systems requirements for approved centres
Appointee Management Contact details: E-mail: am@sqa.org.uk	For information on verifier qualifications, CPD requirements and courses that can help you develop your knowledge and skills as a Qualification Verifier
Business Development Managers Contact details: Tel: 0345 279 1000 Tel: 0303 333 0330 E-mail: mycentre@sqa.org.uk	For information relating to specific centre approval queries

Appendix 5: Conducting sampling activities — sampling of incomplete unit evidence

SQA's guidance states:

There should be enough evidence available to enable you to make an informed decision and for centres to gain enough valuable feedback on the assessment of the standards/Outcomes.

This means that centres do not have to have completed units, although some completed units are desirable as part of the sampling mix. The evidence does, however, have to be in sufficient quantity across the Awards/Units being verified and include at least some assessment decisions to warrant a visit from a Qualification Verifier. The sufficiency of the evidence can be ascertained by asking the centre appropriate questions about the evidence and its stage of completeness at the planning stage.

Verifying evidence not yet internally verified

It is not essential for the Qualification Verifier to sample internal verification decisions on completed units on each visit to a centre. However, it is important that where verification decisions on completed Units are available that those decisions are sampled.

Where verification on completed units is not available, evidence of planned and/or ongoing verification must be sampled. These verification activities are included in the three phases of verification described previously.

Three phases of internal verification

SQA promotes a three-phase model of internal verification, which means that there are a number of opportunities to sample different aspects of the verification process on each visit. Those phases are:

- before assessment
- during assessment
- after assessment

Before assessment — this would include checking/agreeing the interpretation of assessment materials, and requirements; agreeing how assessment should proceed and checking resources are up-to date and sufficient. This should naturally happen for new Awards, and in some centres before a new qualification block/semester runs. Evidence supporting this phase may also include a verification schedule, strategy or plan showing proposed verification activities for various Awards/Units (plans may also be in relation to each assessor for VQs).

During assessment — this can be further categorised into ongoing and final verification.

Ongoing verification helps keep things on track and informs the internal verifier as to the quality of assessment coming through. This 'dipping-in' process helps identify where additional assessor support may be required. This phase is especially important where new Units are being offered and/or where assessors are assessing Units for the first time. Final verification is related to checking the quality of final assessment decisions on completed Outcomes/Units.

After assessment — this encompasses the review and evaluation of the overall assessment process with a view to continuous improvement in relation to Awards/Units. This will normally involve the review of previous assessment and verification decisions, processes, practices and resources. Reviews will normally take account of views from verifiers (internal and external), candidates and employers.

The referencing of evidence to standards

Referencing helps SQA External Verifiers navigate evidence efficiently, enabling verification to be carried out in a time effective way. In this respect, referencing should be clear, but not so detailed that the time spent on it is disproportionate in relation to other core assessment activities.

The degree and detail of referencing will largely depend on the approach taken by the centre, for example the degree of holistic assessment taking place and the quantity of evidence being referenced.

Assessments that are carried out holistically (assessment of activities that span a number of different Outcomes/Units) are encouraged by SQA as they can make the assessment process more meaningful for candidates and help avoid over-assessment. Refer to SQA's [Guide to Assessment](#), page 11.

The referencing of evidence spanning a number of Units/Outcomes can however be challenging as Units/Outcomes are not distinctly covered on an individual Outcome/Unit basis. In this situation, the verifier may have to spend more time locating evidence, especially where the Unit/Outcome evidence they are looking for has been combined with Unit/Outcome evidence belonging to another SQA verifier group. In this circumstance, the verifier should only focus on locating evidence relating to Outcomes/Units they have been assigned to verify.

It is important to remember that **it is not the External Verifiers role to advocate that centre's use any one particular assessment recording system**. The verifier can of course comment and advise on the quality of the recording system, eg comment on its fitness to accurately record, reference and track evidence.

Referencing shows the link between evidence and assessment decisions, therefore has benefits for candidates collecting evidence in terms of tracking their own progress and achievement. For assessors, referencing allows the tracking of evidence that has been assessed and accepted, aiding forward planning.

Referencing should be an agreed responsibility between assessor and candidate — there are no set rules. It is important that candidates are not overwhelmed with referencing responsibilities as their main priority is that they have the necessary skills and knowledge to meet the standard being assessed.

Upfront evidence profiling can assist with the referencing process — ie pre-stating where within a file/portfolio evidence such as candidate reports and observation reports, etc can be found. Where evidence profiling is used, checking is still required to ensure accurate referencing. Ultimately, the end responsibility for ensuring clear and accurate referencing to the standards lies with the assessor.

Electronically recorded evidence

Evidence that has been recorded electronically (computer files/ e-mail, etc) and includes candidate evidence such as answers to questions, digital audio/video recording files, personal accounts and professional discussion, must be subject to the same levels of security and access as hard-copy evidence. This helps ensure, but does not guarantee, that the evidence submitted remains the candidate's own work.

Many centres use electronic portfolios (e-portfolios). Where this is the case, users (candidates, assessors and internal verifiers) are normally given personal identification codes which allow an appropriate level of individual access. This type of system allows each user's work to be recognised and traced — a distinct advantage when assessing and quality assuring evidence.

Centres using electronic evidence are not required to use e-portfolios but their use is recommended. In all circumstances, where electronic evidence is being used, centres must ensure the evidence submitted by candidates:

- ◆ is received securely by the appropriate designated centre staff
- ◆ cannot be altered by others — candidates must be able to protect/lock their evidence before they submit it
- ◆ is stored securely in a restricted access file throughout assessment and until the completion of the assessment and quality assurance processes

As with conventional signatures, assessors and verifiers must be able to signify in a legitimate way that they have confirmed assessment/verification decisions. This could be done by the assessor/verifier using a code — ie using an appropriate password, PIN number, electronic signature or symbol, or any combination of these. Whatever code is used, it must be secure and only be available for use by the assessor or verifier it belongs to, just as a hand-written signature would be.

Where centres can demonstrate the above requirements in their electronic system, External Verifiers should not also require centres to print off hard copies of assessment/verification records.

Appendix 6: Quality assurance criteria

Generic verification qualification criteria China

Criteria	Impact rating	Suggested evidence
2.4 There must be evidence of initial and ongoing reviews of assessment environments; equipment; and reference, learning and assessment materials.	High	Evidence of initial and ongoing reviews which could include: <ul style="list-style-type: none"> ◆ policy and procedures for conducting reviews ◆ dates of planned and completed reviews ◆ records of reviews and their outcomes ◆ examples of quality improvements made as a result of review ◆ pre-delivery/assessment checks ◆ Course/programme reviews, action logs, minutes of meetings with review as a discussion items ◆ Site checklists, or equivalent documents, may be considered as evidence of initial and on-going reviews of other campuses
3.2 Candidates' development needs and prior achievements (where appropriate) must be matched against the requirements of the award.	Medium	Learning, Teaching and Assessment Plans, Individual Learning Plans, Progress Reviews.
3.3 Candidates must have scheduled contact with their assessor to review their progress and to revise their assessment plans accordingly.	Medium	Any relevant documentation that shows progress reviews have taken place, such as records of individual tutorial sessions, assessment plans, assessment schedules, learning, teaching and assessment plans, progress reviews.
4.2 Internal assessment and verification procedures must be implemented to ensure standardisation of assessment.	Medium	The completion of records showing assessors/verifiers consistently follow their centre's assessment/verification procedures.
4.4 Assessment evidence must be the candidate's own work, generated under SQA's required conditions.	High	Evidence of assessors and/or internal verifiers confirming candidates work is authentic, induction checklists, checks on assessment conditions, use of plagiarism software
4.7 Candidate evidence must be retained in line with SQA requirements.	High	Candidate evidence available for qualification verification.
4.9 Feedback from qualification verifiers must be disseminated to staff and used to inform assessment practice.	Medium	Evidence of feedback being disseminated to staff and evidence that it has been used to update/improve assessment practice.

Visiting verification qualification criteria China

Criteria	Impact rating	
2.1 Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.	High	Where a qualification requirement, records of relevant occupational/subject experience and qualifications, which must be in English or be accompanied by an English transcript. Records of continuing professional development, also in English.
4.2 Internal assessment and verification procedures must be implemented to ensure standardisation of assessment.	Medium	The completion of records showing assessors/verifiers consistently follow their centre's assessment/verification procedures.
4.3 Assessment instruments and methods and their selection and use must be valid, reliable, practicable, equitable and fair.	High	Documented evidence of methods/instruments having been selected and applied.
4.6 Evidence of candidates' work must be accurately and consistently judged by assessors against SQA's requirements.	High	Assessment and internal verification records showing accurate and consistent assessment decisions being made.

Remote verification qualification criteria China

Criteria	Impact rating	
2.1 Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.	High	Where a qualification requirement, records of relevant occupational/subject experience and qualifications, which must be in English or be accompanied by an English transcript. Records of continuing professional development, also in English.
4.2 Internal assessment and verification procedures must be implemented to ensure standardisation of assessment.	Medium	The completion of records showing assessors/verifiers consistently follow their centre's assessment/verification procedures.
4.3 Assessment instruments and methods and their selection and use must be valid, reliable, practicable, equitable and fair.	High	Documented evidence of methods/instruments having been selected and applied.
4.6 Evidence of candidates' work must be accurately and consistently judged by assessors against SQA's requirements.	High	Assessment and internal verification records showing accurate and consistent assessment decisions being made.

Appendix 7: Reporting by Group Award

Verification Activity No.	Group Award selected	Unit to be verified	Mode of verification	Report required?
1.	Business (B) GE7X16 Travel & Tourism (TT) GG2716	N/A	Remote – generic	1 x report for GE7X16 (B) generic 1 x report for GG2716 (TT) generic
2.	Business (B) GE7X16	F84K35 (VG142) F84M34 & F84R35 (VG266)	Remote activity	1 x report for VG142 (GE7X16) (B) 1 x report for VG266 (GE7X16) (B)
3.	Travel & Tourism (TT) GG2716	F84M34 (VG266) D75X34 (VG288)	Remote activity	1 x report for VG266 (GG2716) (TT) 1 x report for VG288 (GG2716) (TT)
4.	Business (B) GE7X16 Travel & Tourism (TT) GG2716	F7J834 & F7J635 (VG258) (B) F7J735 (VG254) (B) F6VY34 (VG192) DK0733 (VG192)	Visiting verification	1 x report for GE7X16 (VG258) and (VG254) 1 x report for GG2716 (VG192)
			Total Reports:	Business = 4 reports Travel & Tourism = 4 reports