



# **Guidance on Qualifications Verification for Verifiers**

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# Introduction

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. Qualification verifiers are experienced subject experts who are appointed by SQA to undertake visiting qualification verification on SQA's behalf.

This guidance is mainly for qualification verifiers who are engaged in visiting qualification verification activity to quality assure Higher National (HN), Vocational Qualifications (VQ), Regulated Qualification Framework units (RQF), Customised Awards (Cu), and National Qualifications other than new National Courses (NQ). However, other modes of qualification verification activity are also detailed in this guidance, and further information is available on SQA's appointee website.

The guidance has been developed as a reference resource for those who are new to verification and for those who are already established in the verification role. The focus is on core verification procedures and practice. Additional information is provided through web links.

This document and its appendix are also available to all SQA centres.

Please note that all supporting documentation relating to the processes for qualification verification can be found on the QA Appointee website.

## Structure of this document

This document has two parts:

Part A covers qualification verification processes and practice.

Part B provides specific guidance on each quality assurance criterion for qualification verification, including:

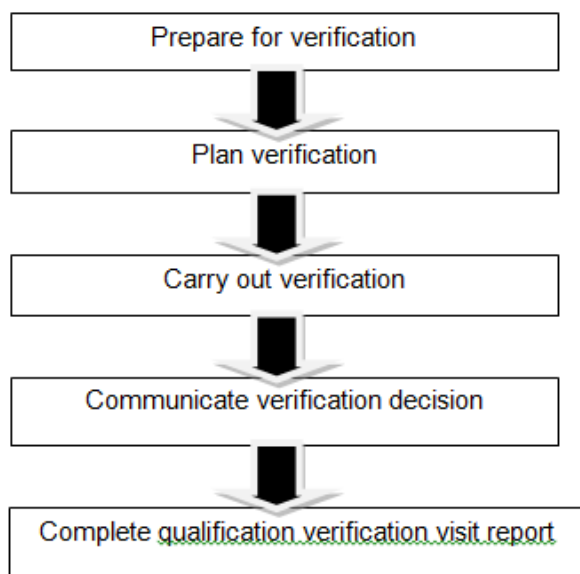
- ◆ the rationale for inclusion of the quality assurance criterion in qualification verification
- ◆ specific SQA requirements relating to the criterion
- ◆ guidance on evidence requirements
- ◆ additional sources of information and guidance available from SQA

# Part A: Qualification verification processes and practice

This section of the guidance has been arranged in five main sections, mirroring the stages of the verification process.

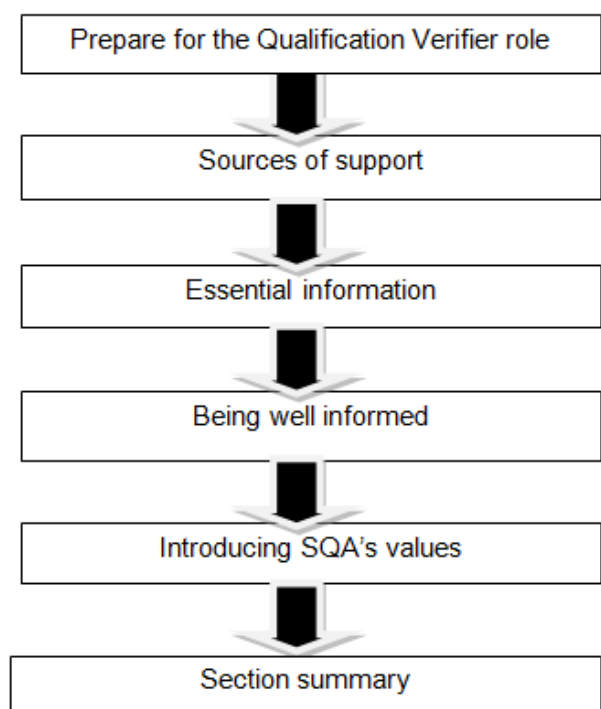
Because SQA's Quality Assurance Criteria cover HN, NQ, VQ/RQF units and Customised Awards, the verification process usually requires the same approach to be taken for all of these qualification families. In a small number of instances, slightly different guidance is provided for HN, NQ, VQ/RQF units and Cu. Where this is the case, the differences are highlighted.

The qualification verification process has five main stages:



# 1 Prepare for verification

This first section focuses on:



## Preparation for the qualification verifier role

Your verification responsibilities begin when you accept the role of qualification verifier with SQA. You will of course be given support to help 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 your verification area. As a new qualification verifier, this understanding will come from a combination of:

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

## The qualification verifier role

All qualification verifiers have a duty to understand the requirements of their role. You can find an outline of these on SQA's [qualification verifier web page](#).

At the start of each verification session, you will be asked to declare any potential conflict of interest. You can do this by letting SQA know of any approved centre you have a connection with — which could be on a professional or personal level. If the connection ended more than three years ago, a declaration is not required. The requirement to make a declaration is continuous, and it is your responsibility to inform SQA whenever you feel a potential conflict of interest arises. You can do this by e-mailing [am@sqa.org.uk](mailto:am@sqa.org.uk). This allows SQA to allocate any centres that you have identified to another qualification verifier.

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

## **Qualification verification and systems verification**

Systems verification is the process by which SQA ensures that centres are managing their systems and resources to meet SQA's Quality Assurance Criteria. This is a separate process to qualification verification, carried out by systems verifiers, which focuses on policies, procedures and processes in centres.

Qualification verification looks at the implementation of centre policies and procedures in the context of the subject being verified.

To see the full Quality Assurance Criteria referenced to each QA process, please visit the QA pages of SQA's website.

## **Sources of support**

As a qualification verifier, you are required to maintain a comprehensive working knowledge of all verification procedures and associated documentation. This guidance document will provide you with a firm foundation of knowledge, but at times you may need to access more information. [SQA's quality assurance web pages](#) and [QA appointee web pages](#) are gateways for you to access all the other information you should require.



## The main sources of support you will require in your role

Source of support	Nature of support
<p>Quality Assurance Logistics Officers</p> <p>Contact details:</p> <p>Tel: 0141 500 5928</p> <p>E-mail: <a href="mailto:gav@sqa.org.uk">gav@sqa.org.uk</a></p>	<p>Information on organising and conducting verification events/visits and monitoring of QA activity and practice</p>
<p><a href="http://theia.sgameet.net/qa/qat.nsf">Quality Assurance Management System (QAMS)</a></p> <p><a href="http://theia.sgameet.net/qa/qat.nsf">http://theia.sgameet.net/qa/qat.nsf</a></p>	<p>QAMS will allow you to view and monitor your allocated activity. SEVs will also be able to monitor the activity of the QVs they have responsibility for.</p> <p>QAMS will also issue e-mail alerts to QVs where they are reaching deadlines within Service Level Agreement (SLAs) for each stage of the qualification verification process.</p> <p>The QAMS Guidance document is available via QA appointee website.</p>
<p>SQA's QA appointee web pages for qualification verification</p> <p><a href="http://www.sqa.org.uk/sqa/63686.html">http://www.sqa.org.uk/sqa/63686.html</a></p> <p>Contact details:</p> <p>Tel: 0141 500 5928</p> <p>E-mail: <a href="mailto:gav@sqa.org.uk">gav@sqa.org.uk</a></p>	<p>Template forms, information about qualification verification policies and procedures</p>
<p>Quality Enhancement Managers</p> <p>Contact details:</p> <p>Tel: 0141 500 5189</p> <p>E-mail: <a href="mailto:asv@sqa.org.uk">asv@sqa.org.uk</a></p>	<p>For information on the systems requirements for approved centres</p>
<p>Appointee Management</p> <p>Contact details:</p> <p>E-mail: <a href="mailto:am@sqa.org.uk">am@sqa.org.uk</a></p>	<p>For information on verifier qualifications, CPD requirements and courses that can help you develop your knowledge and skills as a qualification verifier</p>
<p>Regional Managers</p> <p>Contact details:</p> <p>Tel: 0345 279 1000</p> <p>Tel: 0303 333 0330</p> <p>E-mail: <a href="mailto:mycentre@sqa.org.uk">mycentre@sqa.org.uk</a></p>	<p>For information on specific centre approval queries</p>

## Essential information

You need to prepare for qualification verification visits to help ensure they run as smoothly as possible.

New qualification verifiers will take part in a three-phase induction with SQA. This consists of: undertaking pre-induction 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 QV induction managed by your senior external verifier/senior without portfolio.

The list below covers the essential sources of information you should be in possession of before conducting visits (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 (VQs/RQF Units), Arrangements documents/ Group Award Strategy documents (HN)

Available SQA-devised assessment recording materials (including shell portfolios, evidence trackers, etc)

SQA-devised support materials (such as Assessor Guides/Candidate Support Packs, Assessment Support Packs and other exemplification materials)

Minutes and standardisation log of past QV group standardisation meetings

Discussion forum recorded messages set up by subject group area on SQA's [QA appointee web pages](#)

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

[Guide to Assessment](#)

[Internal Verification: A Guide for Centres offering SQA Qualifications](#)

[IV Toolkit for HN and VQ](#)

## Being well-informed

The information listed above 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 qualification verifier they deal with.

From the verifiers' perspective, well-informed qualification verifiers tend to be 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

It is important, and of benefit to you, to keep up-to-date with ongoing developments in SQA's quality assurance. You will find these as SQA website updates, on the [QA appointee web pages](#), or in e-mails or periodic updates.

## Introducing SQA's values

The role of qualification 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.

### Why do we need values?

SQA's three corporate values define the way SQA staff work with each other, their customers, partners, stakeholders and the wider public, in delivering services for Scotland's learners.

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, colleague qualification verifiers 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.

## **This section in summary**

There is a shared responsibility between you as a qualification 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 a qualification 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 QA appointee web pages.

It is your responsibility to operate in line with SQA's values.

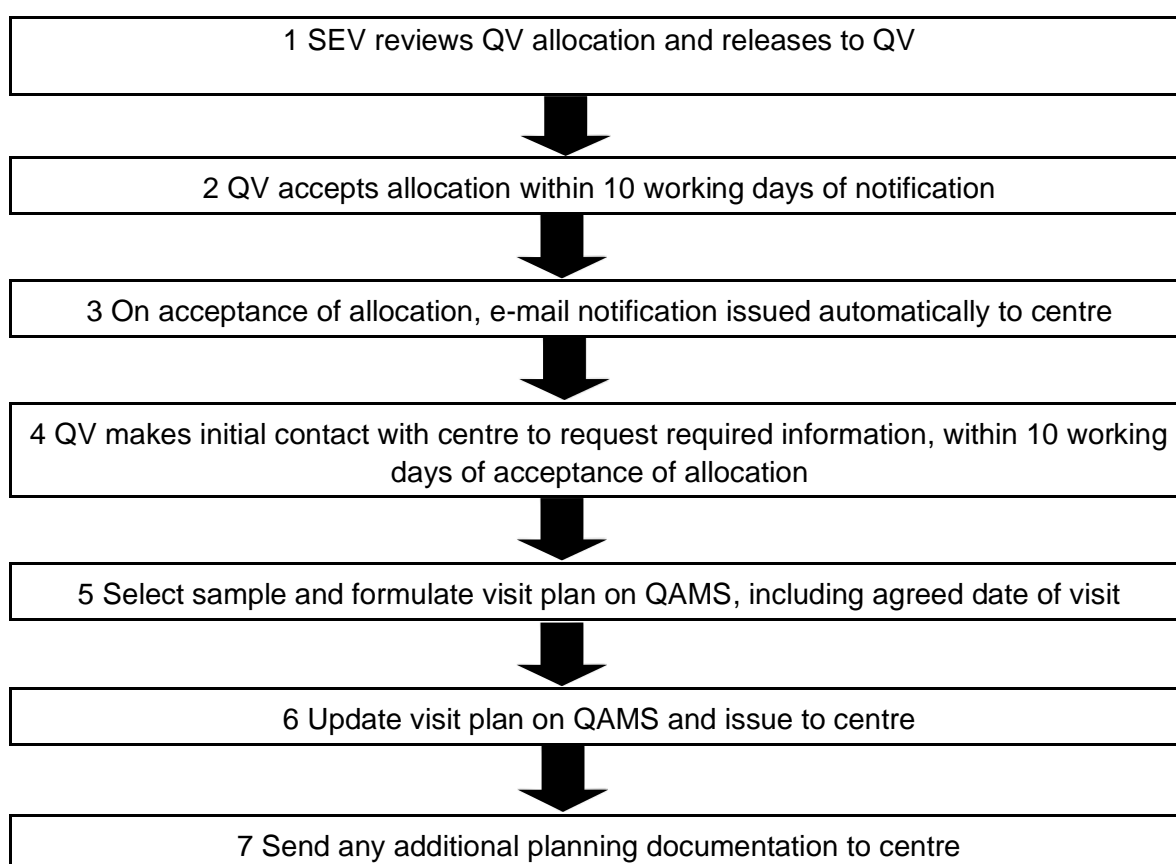
## 2 Plan visiting verification

Thorough visit planning allows you to gather important information before a visit, helping you to formulate an informed approach to qualification verification for each centre you have been allocated.

All qualification verifiers must be registered on QAMS to receive notifications of verification activity. If you are not currently registered on QAMS, please go to the [QAMS registration page](#) and follow the online registration process.

The following flowchart outlines the steps associated with planning a visit. Some of the steps may happen at the same time or very close to one another — the most important point being that all steps are undertaken and none are omitted, as each step serves an essential quality assurance purpose.

### Visit planning steps



### Guidance on the visit planning steps

The table on the next page covers each step of the above flowchart. Each step is supported with important SQA procedures information.

You can find more information on each of the steps and its procedures in the section 'Approach to sampling and visit planning' (page 13). This information is important in helping

you understand the role that visit planning has in the overall success of verification visits. It is also important to remember that qualification verification activity is developmental, so you should always ensure you factor in enough time to allow the centre to request support from you.

## **Allocation information**

You can find the timetable for when we release allocations to qualification verifiers on the QA Appointee website.

The Quality Assurance Management System (QAMS) will provide you with any additional information relating to specific allocations. This information is intelligence to assist you during the visit planning process.

## **Planning visits to colleges**

There is some specific guidance that you need to be aware of if you are planning to visit a college.

SQA's Qualification Verification Planning team works with every college in Scotland ahead of each verification session to identify the HNs, NQs and VQs to be verified in the forthcoming session.

As a result of this process, when you receive your centre allocations for each college centre, you will be informed of an approximate timescale of when verification should take place and the specific sites that should be visited.

SQA will release allocations at set times during the session and you will receive these during the corresponding session. Visits should be undertaken within that session.

## Planning visiting verification for HN, NQ and VQ/RQF Units

Step	Procedure
SEV reviews QV Allocation	SQA allocates verification activities to QVs by verification group, and issues the allocations to the relevant senior verifier to review, accept or decline. If the SEV declines the allocation, it will be returned to SQA to review and, where required, reallocate. Once accepted by SEV, the allocation will be automatically released to the QV by e-mail.
Accept allocations on QAMS	Accept the allocations on QAMS within 10 working days of receiving your notification e-mail. Any additional information relating to the allocation will be visible in the Allocation Information box on the event screen.
Notification to centre	When you accept your allocation, a notification will be issued to the centre by e-mail advising them of the allocation and that the QV will be in touch within 10 working days.

### Within 10 working days of accepting allocations on QAMS

Make contact with each centre to plan the visit	<p>Once contact has been made with the centre, log your date of initial contact in the relevant event on QAMS.</p> <p>All contact should be with the centre's SQA co-ordinator unless directed otherwise by SQA during the allocation process. Avoid contacting subject staff directly unless authorised to do so by the SQA co-ordinator. (Where this is the case, the SQA co-ordinator must always be copied into e-mails to subject staff).</p> <p>If the centre advises they are not running the qualification, you must change the status to <b>Not Running on QAMS</b>. This will initiate checks by the QA Logistics Team. If necessary, a notification will be issued to you as the verifier to start the visit planning process again.</p> <p>If, during the visit planning process, the centre advises you that they will not have evidence available and therefore cannot commit to a date until much later in the session, please change the status to <b>Not Running QAMS deferred</b>. This will allow the activity to remain in your workspace for visit planning at a later date, but will also advise the QA Logistics Officer that you have initiated contact.</p> <p>You should arrange an optimum date for the visit (when enough evidence will be available across the spread of awards/units you are verifying).</p> <p>Ascertain whether there will be enough available evidence to make an informed verification decision by checking whether sufficient</p>
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assessment decisions will have been made to warrant a visit and that there will be evidence of assessment decisions.

For colleges, you should be guided by the visit timescale indicated to you by SQA in the Allocation Information box on the event screen.

Once agreed with the centre, enter a visit date into QAMS.

### **At least six weeks before the visit date**

Request  
information from  
centre

#### **HN/NQ**

QAMS will provide you with the product list that has been selected for you to choose your sample from.

Based on the candidate information available on QAMS, information discussed at your standardisation meeting, and the previous QV Report, you have the ability to start to identify the units that will make up your sample.

Select these units and any additional units from the product list on QAMS and e-mail (refer to QA appointee website for the template) the centre to let them know which units you have selected.

The e-mail includes the Information Request Form for Visiting Verification. The form asks for the names of assessors and verifiers and the awards/units they are assessing/verifying. It also asks for each candidate's SCN and stage of progression. This form, which can be found in templates on QA appointee website, is for the centre to complete and return to you.

The information provided by the centre must cover **all** of the units you have selected from those that have been allocated to you by SQA.

For HNs and NQs, centres do not need to indicate whether an assessor or internal verifier is qualified or unqualified.

#### **VQ/RQF units**

**Important:** For VQ/RQF units, the template for all qualifications is optional. Centres can provide the same information in an alternative format.

### **At least two weeks before the visit date**

Select sample,  
formulate and  
send visit plan

Based on the additional information you have requested from the centre, and your previous selection — ie chosen from the candidate information available on QAMS, standardisation meeting and the previous QV Report:



- ◆ Select a candidate sample, complete and send the visit plan from QAMS. If you have additional information to send to the centre with the visit plan, send this in a separate e-mail and ensure it is documented that an additional e-mail is being issued. It is important to note that a visit plan must be completed where the system advises you to do so.  
NB: Only China and graded unit central events will be exempt from the visit planning process.  
If you do not complete a visit plan, you will not be able to complete a verification report.
- ◆ If the centre advises a need to change the visit date, you must select the **Replan** option within the visit report screen to initiate this process and issue an updated visit plan to the centre.  
NB Any updates to the verification report will be retained but frozen until a visit plan has been reissued to the centre.

## Approach to sampling and visit planning

**Note:** You are advised to use e-mail as the main method of communication with centres. However, on occasions it may be better to telephone — eg if you need to clarify an issue or if you have not received a response to an earlier e-mail. Where this is the case, it is important that you also confirm the outcomes of your discussions by e-mail.

It is important to note that the initial contact e-mail is now issued by QAMS, which will indicate contact by QV will be within 10 working days. However, this is not the date of initial contact by the QV. You must have received correspondence or spoken to the centre before completing the initial contact date on QAMS event screen. A standard e-mail has been created for QV use to initiate this contact. It is important that this date is updated and accurate as it is essential for the retention of candidate evidence by the centre.

If you have difficulties gaining a response from a centre, it is imperative that you contact SQA at [gav@sqa.org.uk](mailto:gav@sqa.org.uk) or by calling 0141 500 5928. SQA will initiate contact with the centre and keep you updated. (Please follow the 'no access to centre' process on the QA appointee website).

To comply with general data protection legislation you must always use your SQA e-mail address in all correspondence with centres during QA activity.

## Accept centre allocations from SQA

SQA will periodically release allocations to Senior Verifiers via QAMS. The senior verifier has 10 working days to review this allocation and accept or decline. If the senior verifier does not accept or decline within this time, SQA will automatically release the allocation to you. You can either accept or decline each allocation within 10 working days. SQA will re-allocate the centre/centres to another qualification verifier if no response is received within this timescale.

Your allocation will include a specific group number (eg Horticulture 146); and a qualification block (eg HN). To avoid confusion or duplication of effort, it is important that you only verify within the block of qualifications you have been given. All communication issued by SQA will include the event ID for the Qualification Verification activity you are undertaking.

If you feel there is a conflict of interest with any of the centres you have been allocated, rendering you unable to carry out any visit, or if you have queries relating to your allocation, you should contact the Quality Assurance Logistics Team.

### **Make initial contact with each centre**

When you accept an allocation, the system will automatically e-mail the centre you have accepted to advise it that you have been allocated the work, detail the product block and verification group, and advise that you will be in touch within 10 working days.

The purpose of the initial contact is to ascertain the best time to conduct a visit. There should be enough evidence available to enable you to make an informed decision and for the centre to gain enough valuable feedback on their assessment of the standards. This means that at least some assessment decisions must be made available on the day of the visit. Responsibility for identifying an optimum time to visit is shared between you and the centre.

It is important to update QAMS by logging the date of initial contact and the actual visit date. However, it is important from SQA's perspective that you ascertain whether or not a visit is actually required, and that the visit date (or dates) chosen makes the best use of your time and the centre's time.

SQA will monitor visit dates to ensure all released allocations are undertaken by qualification verifiers.

### **Request information from centre**

It is important to take into account the range of awards/units that have been allocated to you to verify. Your remit for VQ/RQF units or Customised Awards is to verify across all of those allocated to you by SQA. HNs and NQs are different in that the qualification verifier chooses the units to be sampled from the list units provided by SQA.

Where centres are delivering a large number of awards/units, you will have to decide how best to sample evidence. This could in some rare instances warrant more than one visit within a session (session ends 31 July). If you have any queries about this, you should contact the Quality Assurance Logistics Team who will be able to advise you.

If the centre has no candidate evidence for the awards/units selected for verification (and does not intend to enrol candidates for these awards/units this session), you would indicate this on QAMS by selecting the **Not Running on QAMS** button. This will alert the Quality Assurance Logistics Team that the activity requires investigation. If the centre is running the award/units, the agreed visit date field should be completed on QAMS.

Where verification activity is being undertaken remotely, a visit plan is still required. The visit plan can be used for visiting or remote verification by selecting the appropriate parts of the visit plan. This will advise the centre of the sample of evidence to be provided and the date by which you would like it to be submitted to SQA. This allows sampling even though the activity is being undertaken remotely.

If there are discrepancies between the numbers of candidates enrolled by the centre in comparison to the number held on SQA's records, you should flag this up in your report (this can be done via the **Feedback to QV** box in the report).

Sometimes centres will say that it will not have evidence of assessment in the immediate future, but may well have evidence by the end of session. Should this be the case, a date of initial contact must be recorded on QAMS, and you should change the status in QAMS to **Not Running QAMS deferred**. This actual visit date can be input after contacting the centre at a later date, as they will by then be able to confirm if they have evidence available or are 'not running' (in which case you would update QAMS by selecting **Not Running QAMS**).

In ascertaining the optimum date for a visit, you should also consider the date of the previous visit — a reasonable amount of time should have passed between the previous visit and the one you are planning. Visiting verification activity traditionally has been weighted towards May, June and July. However, where feasible, SQA would encourage you to also consider dates and times outwith these months so that verification activity is spread across the year. This obviously depends on factors such as availability of evidence — and, of course, the centre's agreement is required.

In terms of HNs and NQs, the units to be verified will be allocated to you by HN subject area under your group's specific name and number, eg 'Learning and Development 242'. It is then your responsibility to identify and agree with the centre the specific units that are to be verified, based on the evidence they are able to produce and your sampling choice.

Sometimes specific units are identified up front. Where this is the case, SQA will communicate those to you, or they may be identified at a QV group meeting or through conversations with your SEV/colleagues.

For VQs, the awards/units to be verified, similar to HNs, will be allocated by QV group name and number but will state the specific VQ units to be verified.

Your role here is about ascertaining with the centre which VQ/VQ units they have evidence for.

### **Select sample, formulate and send visit plan**

As part of preparations for completing the visit plan, you should consider qualifications discussed at your QV group meeting, previous reports, and candidate information from QAMS. To create a candidate sample, ask your allocated centre for details of current candidates, stage of completion and assessor and internal verifier details.

There is an Information Request Form for Visiting Verification on the QA appointee website. Centres should fill this in. Alternatively, centres can provide this information in any format

they wish. This approach is applicable for HN, NQ, VQ/RQF units and Customised Awards. However, if it is acceptable with the centre, and candidate numbers are small, they can arrange for all candidate evidence to be made available on the day of your visit. This will avoid the need for listing candidates and their awards ahead of the visit. To facilitate planning, you will still require an overview of the evidence to be made available, and the names of the assessors and internal verifiers and the group awards and units they are assessing/verifying.

## **General information on sampling**

This particular stage of verification requires a general knowledge of the purpose of sampling and a specific knowledge of SQA's sampling requirements for HN, NQ and VQ/RQF Units.

The general purpose of qualification verification sampling is to confirm that centres are interpreting standards correctly and that they have assessment and internal verification systems in place that allow valid, reliable, equitable and fair assessment decisions to be made.

As qualification verification is based on the management of quality assurance risk, the sampling of an appropriate range of assessment and verification decisions is important. Unless candidate numbers are very small you will rarely scrutinise all candidates' work on a single visit. Instead, you will select a sample of candidates' evidence. Please remember that it will be you and not centre staff who decides before the visit which candidates' evidence will be scrutinised.

The specific sampling approach for each centre will vary according to the needs of the centre and the type of qualifications being verified.

### **HN**

Discussion on qualifications from QV group meetings and information provided by the centre can be valuable in helping you plan visits, as can previous reports as they include information on previously sampled awards/units.

As a minimum, three different single-credit HN units across a selection of assessors and internal verifiers delivering these units should be verified during a one-day visit. However, the time you allocate to sampling should be proportionate to the overall number of candidates enrolled and the numbers of assessors/verifiers involved. If the scope of unit assessment extends to a considerable number of sites, assessors and candidates, you may need to make arrangements for additional remote activity. Please discuss this with the Quality Assurance Logistics Team before agreeing final arrangements with the centre concerned.

### **VQ/RQF units**

You must adhere strictly to any sampling requirements detailed in the Assessment Strategy. If there are no Assessment Strategy sampling requirements, your sampling should be

proportionate to the overall number of candidates enrolled and the numbers of assessors/verifiers involved in assessment/verification.

## **Candidate evidence retention for sampling purposes**

SQA's candidate evidence retention requirement provides qualification verifiers with an opportunity to sample a centre's past assessment evidence where there is limited availability, or none, of current ongoing assessment evidence.

SQA requires centres to retain all candidate evidence for the group award/units until at least three weeks after the official completion date. If the centre has not updated their completion date, it will be the completion date held by SQA against the candidate entry. However, if you make the first contact for the session within three weeks after the completion date, all candidate evidence must be retained until after the verification visit has taken place. It is important to note that where the outcome of verification activity is unsuccessful, SQA may ask the centre to return certificates for candidates involved in that verification activity.

## **Scope of sampling**

There are general rules for the scope of sample that can be applied for both HN, NQs and VQs. Working within this scope, it is important that you formulate a specific sampling strategy for each centre once you have gathered all of the relevant information.

The mnemonic **SAMPLED** summarises the scope of what should be sampled over time whenever qualification verification takes place.

**Selected** awards/units as selected by SQA for VQ/RQF units or, in the case of HNs and NQs, as allocated by SQA and then chosen for sampling by the qualification verifier. This has a bearing on the size of sample you choose, as does candidate numbers per award/unit.

**Assessment** and verification decisions and practice (all assessors and internal verifiers sampled and interviewed over time). New assessors and verifiers should be prioritised.

**Methods/instruments** (all assessment methods/instruments, ensuring the principles of validity, reliability, equitability and fairness are applied).

**Problematic**, revised and new units/qualifications (factored into sampling when necessary).

**Location** — all assessment sites visited over time. Where you are advised of the assessment site to visit at the allocation stage, you can discuss that with the centre and determine if the centre can or cannot make evidence from additional sites available at the site you will be visiting. The level of importance attached to conducting site visits, largely depends on the type of awards/units being offered. For example, it may be important to visit a construction site where VQ assessments are being carried out and where the health and safety of the environment/equipment and provision of resources is essential to the overall achievement. It might be less important to visit the office of a Management VQ candidate where the evidence required to meet qualification requirements is more to do with the extent of role responsibilities rather than physical environment resources.

Where centres have more than one assessment site, you should determine the most appropriate place for verification to take place. It is important to be pragmatic in your approach to choosing your site. It is always an option for the centre to provide evidence electronically from other sites. It is also important to ensure standardisation is taking place across the sites.

**Note:** Any concerns you have about the safety or access to assessment sites should be reported via the **QAV** box at the end of the QV report form.

**Evidence** of candidates being assessed for the awards/units selected, sampled through review of evidence records, supported with interviews (where appropriate).

**Documented** evidence of required centre procedures being followed.

Once you have decided on your sample you need to complete all of the appropriate documentation.

## The visit plan

You should complete the visit plan for remote or visiting qualification verification activity online via QAMS. Having decided on your sampling strategy, you should briefly explain your rationale in the visit plan. The scope of sampling mnemonic on the previous page of this guidance can help you to formulate a sound rationale for your visit.

If evidence is being provided electronically, eg via e-portfolios or virtual learning environments, you may consider reviewing some or all of the candidate evidence before the visit, in which case you should ask the centre to provide you with secure access. As part of the set-up arrangements, the centre may provide you with an ID and password for an agreed period of time. It would also be advisable for you to discuss with the centre who would be available to help with navigational/functional issues if required.

You should highlight the candidate evidence you wish to sample, on the returned Information Request Form or alternative format supplied by the centre, and send this as an attachment to the centre. It is important to remember the visit plan is issued via QAMS, so you must send any additional information directly to the centre. (Indicate on the visit plan where a further e-mail is being issued to the centre). If only a small number, include the candidate sample you have selected in the visit plan (use Scottish Candidate Numbers only — not names — when selecting candidates).

The visit plan includes sections on:

- ◆ Whether the activity is remote verification or a visit.
- ◆ The code, level and title of awards/units. If this information has already been given by the centre there is no need to write it in again: simply write 'refer to information' on the attachment. Otherwise, please ensure you detail the specific titles of the qualification.
- ◆ Evidence type (electronic, paper-based or practical). Where evidence is to be provided electronically, and you are unfamiliar with the system, you should discuss the arrangements the centre will make to help you navigate the system and access candidate evidence should you need it.

- ◆ Selecting assessors/verifiers/candidates for interview. It is generally best for interviews to be conducted face to face; however, other formats, such as tele/video-conference and telephone interviews, are also acceptable. (You must indicate whether the interview is taking place if activity is remote).
- ◆ Observation of live assessment remains a sampling method that you can use (in the visit plan it says 'Monitoring of Live Assessment.'). See section 3, 'Carry out verification' for more detail. (This section is to be completed for visiting verification only.)
- ◆ Rationale for sampling — stating the reasons for the range of evidence and assessors/verifiers you have selected.
- ◆ Agenda for visit. This is where you can outline what you would like to cover during the course of your visit and give an indication as to the 'running order'.
- ◆ Please also record the address where QV activity is taking place (if different from main address).
- ◆ The standard documentation that all centres should supply. This includes:
  - assessment standards/ unit specifications
  - assessment methods/ instruments
  - assessment decisions/ candidate evidence
  - assessor standardisation arrangements
  - assessment and internal verification procedures and practice
  - reviews of accommodation, equipment and learning and assessment materials (visiting verification only)
  - records relating to candidate development needs (visiting verification only)

In addition, for VQs/RQF units, centres are asked for the following to be made available for inspection during the visit:

- records of assessor and internal verifier qualifications and experience (visiting verification only)
- adherence to assessment strategies
- continual professional development (visiting verification only)
- evidence of accommodating the requirements of QV visits

Guidance on how to complete the visit plan and standard e-mail templates can be found on the [QA appointee web pages](#).

## **Send visit planning documentation**

The visit plan is issued via QAMS. Any associated documentation should be sent to the centre's SQA co-ordinator. If you are required to reschedule a visit it is important that you re-plan (from the visit report on QAMS) and reissue the visit plan to ensure accurate dates are recorded.

## **Remote verification (sometimes referred to as postal verification)**

SQA may at times ask you to conduct verification remotely instead of carrying out a visit. The term 'remote verification' means verifying a centre's compliance in relation to SQA's Quality

Assurance Criteria from a distance, eg from your home, rather than carrying out a physical visit to a centre's premises.

Remote verification activities may include verifying evidence online, eg e-portfolios; verifying evidence that has been transferred electronically, eg via e-mail attachments; or verifying hard-copy evidence that has been sent through the post.

Evidence that is sent by the centre through the post must go to SQA's Glasgow's address and be sent by recorded post.

The decision by SQA to conduct verification remotely will be decided on a number of factors, such as:

- ◆ the amount and nature of evidence to be verified
- ◆ previous successful verification visits
- ◆ the risk factors involved if a physical visit is not conducted
- ◆ recommendations of a qualification verifier

SQA will advise you if a remote visit should be carried out during the allocation process. Where this is the case, you will be required to complete a visit plan using the information SQA will provide to you:

- ◆ allocating the exact units/qualifications to be verified
- ◆ requesting that you carry out the remote verification within a specified timescale
- ◆ informing you how you will receive the evidence and date (if agreed in advance by centre) allowing you to complete the visit plan.

As this is remote verification, the centre will not be expected to provide the same level of evidence as would be expected during visiting verification. As a minimum requirement, each centre will be asked to provide evidence in relation to the criteria for Remote Verification in Appendix 1.



### 3 Carry out verification

#### Carry out remote verification

Unlike visiting verification, which usually takes place on one day, 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. Access to evidence may have been decided with SQA and communicated to you, or you may be asked to contact the centre to arrange this (this may be the case where an allocation has initially been visiting but has been turned into remote after discussion with the centre). Any changes from visiting to remote must be communicated to the Quality Assurance Logistics Team.

At the end of the evidence review session, you may have some questions to ask the centre. These discussions should be planned in advance to ensure availability of staff. The format of your discussions may be by:

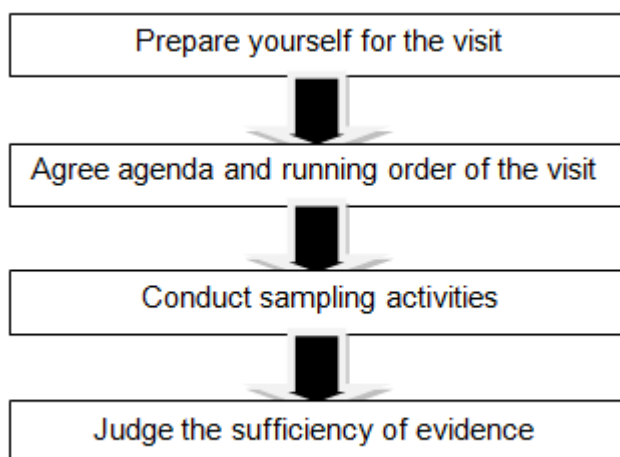
- ◆ telephone, where each discussion taking place is on a one-to-one basis
- ◆ tele-conference, where discussions with a number of assessors and verifiers and the centre's SQA co-ordinator can take place at the same time
- ◆ video conferencing using media such as Skype
- ◆ e-mail

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 as for visiting verification, remembering to place Not Applicable (N/A) next to criteria 2.1, 2.4, 3.2, 3.3 and 4.9

The Outcome of Qualification Verification Activity document does not get completed during remote activity. However, it could be advantageous to use the document to record the feedback session that is given verbally to the centre.

## Carry out visiting verification

This flowchart outlines the stages associated with conducting the verification activities you planned for, and communicated to the centre.



### Prepare yourself for the visit (practical checklist)

When preparing to visit a centre, apart from the planning arrangements you have agreed in terms of sampling, it is important to consider other domestic-type arrangements such as checking:

- ◆ you have appropriate forms — eg previous reports, Outcome of Qualification Verification Activity Form (Previously known as Summary of Agreed Actions form)
- ◆ unit specification, assessment support packs (if available)
- ◆ Outcome of Qualification Verification Activity pad to be issued at end of verification activity
- ◆ if accommodation and travel will be necessary, and booking in advance with SQA using the Travel and Accommodation Request (TARE) form
- ◆ the address of the site you are visiting (there could be a number of sites/campuses)
- ◆ you have contact numbers with you in case you are delayed
- ◆ the weather forecast — informing centre of possible delays and contingencies
- ◆ car parking arrangements and car parking fees (where appropriate)
- ◆ you have your SQA identification badge with you
- ◆ enough money for lunch and breaks (centres are not duty bound to provide lunch/refreshments)
- ◆ you are appropriately dressed for business — if working abroad it is important to observe local customs/traditions (ie dress codes, times of prayer, etc)

## 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. 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 for:

- ◆ the sites/locations to be visited
- ◆ the sampling of evidence — 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
- ◆ opportunity for providing support and development
- ◆ who will be available at the end of the visit for feedback

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.

There can be benefits in conducting your sampling activities in the following order:

**Procedures** sampling, such as those relating to assessment and internal verification before reviewing evidence, enables you to consider how procedures are being implemented.

**Evidence** sampling prior to meeting staff and candidates can help put subsequent discussions into context.

**Decisions** of assessors and verifiers (logically sampled alongside evidence).

**Discussions** with assessors, verifiers and candidates can be contextualised based on information gained from the documentation you have already sampled.

Agreeing the running order allows the centre to resource the visit the best way they can in terms of making available staff, candidates, rooms for viewing evidence, etc.

## Conducting sampling activities

### Sampling 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. You can ascertain the sufficiency of the evidence at the planning stage by asking the centre appropriate questions about the evidence and its stage of completeness.

### **Verifying evidence that is not yet internally verified**

It is not essential 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 below.

### **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 about 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.

### **Sampling evidence from qualifications with VQ units**

Where SQA qualifications, such as Professional Development Awards and Progression Awards, include one or more VQ units, the relevant sector's Assessment Strategy applies to those VQ units.

### **Sampling VQ/RQF assessment and verification practice**

For VQs/RQF units SQA Accreditation requires assessors and verifiers to show that their practice (the cycle of preparation, planning and carrying out assessment/verification) reflects current National Occupational Standards. See SQA Accreditation's [Statement on Assessor and Verifier Competence](#).

There have been considerable changes in assessment and verification standards since their inception 20 years ago. This requirement is essentially about promoting the principle of consistency, requiring those who qualified some time ago to operate with a similar mind-set to those who are newly qualified.

It is a CPD requirement for previously qualified assessors, internal verifiers and qualification verifiers (of VQ/RQF units) to show they work in line with the current National Occupational Standards. This may be evident initially in CPD records (SQA has a CPD Toolkit that centres can optionally use) and on an ongoing basis. It should be evident to you simply by the way in which assessment and verification practice naturally happens within a centre — seen through the sampling of applied procedures when conducting visits.

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)

### **Conducting interviews with assessors/verifiers/candidates**

Interviews with assessors and verifiers give you a valuable insight into how assessment and verification takes place, and allow 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 queries about evidence that has been sampled.

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 telecoms) should be an integral part of qualification verification.

Example areas for discussion with candidates:

- ◆ how their development needs are being identified
- ◆ frequency of contact
- ◆ induction into group awards/units
- ◆ support and guidance provided
- ◆ communication of progress/achievement

## **Observation of live assessment**

Observation of live assessment is where the QV is present while live assessment is taking place (observation role). If this activity is to take place, it must be agreed during the visit planning process. This remains a valid sampling method, so long as there is an agreed and published observation checklist, and for:

- ◆ VQ/RQF units — the method is deemed appropriate by the sector's Assessment Strategy, or the Qualification Verifier Group has agreed in principle there is a rationale for its use
- ◆ HN — the HN specification includes this as a requirement

## **Referencing evidence to standards**

Referencing helps you navigate the evidence efficiently, enabling verification to be carried out in a time effective way. Your 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.

Holistic assessments (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.

Referencing evidence that spans a number of units/outcomes can, however, be challenging. In this situation, you may have to spend more time locating evidence, especially where the unit/outcome evidence you are looking for has been combined with evidence belonging to another verification group. In this circumstance, you should only focus on locating evidence relating to outcomes/units you have been assigned to verify.

It is important to remember that **it is not your role to advocate a centre's use of any one particular assessment recording system**. You 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.

For VQ/RQF units: the centre must show how the evidence covers each component of the Unit Standard (normally broken down into units/outcomes and sometimes further defined as evidence requirements, performance criteria and knowledge).

Referencing shows the link between evidence and assessment decisions, and 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. For VQ/RQF units at higher levels, candidates normally take more responsibility for gathering and referencing their evidence. It is important that candidates are not overwhelmed with referencing responsibilities — their main priority is showing that they have the necessary skills and knowledge to meet the standard being assessed.

Up-front evidence profiling can assist with the referencing process — ie 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.

For VQ/RQF units, evidence can also be left in-situ rather than it all being placed in a portfolio. The same referencing principles apply — ensuring that the evidence can be successfully accessed and located.

## **Enhanced guidance provided to centres on managing assessment conditions**

Enhanced guidance provided to centres on managing assessment conditions SQA's Quality Assurance criterion 4.4 states that 'Assessment evidence must be the candidate's own work, generated under SQA's required conditions'.

Specific qualification arrangements/conditions are set out in unit specifications, arrangements documents and group award strategy documents.

Where there is a need for assessment to be invigilated or supervised, the information below gives further clarification to centres on how to approach it.

### **Invigilation**

Where there is a need for invigilation, an individual must be appointed by a centre. All invigilators must be trained to ensure that the assessments for which they have been assigned responsibility are carried out in accordance with specified instructions. No individual who has been involved in the teaching of the unit may act as an invigilator.

Any assessment under invigilated conditions should be carried out in silence by candidates working individually.

### **Supervision**

Supervision requires the oversight of an assessment. Supervision ensures that candidates' work is authentically their own. Individuals who have been involved in the teaching of the unit may act as supervisors, but must not interfere or offer guidance on the assessment. In some subjects, candidates may need to move around the room and/or access materials. The supervisor is responsible for ensuring that these activities do not permit collusion or cheating by candidates.

### **General**

Where a centre is approved to deliver one or more qualifications that include specific assessment conditions, the roles and responsibilities of invigilators/supervisors must be clearly documented, disseminated and understood. Roles and responsibilities should include:

- ◆ Ensuring that the centre has carried out the necessary identity/security checks at the start of the course and before the examinations.
- ◆ Ensuring that each candidate knows which assessment is to be taken, and that this accords with the centre's own records.
- ◆ Checking to see if any candidates are to be permitted to take the assessment under the special provisions for people with particular educational requirements.
- ◆ Ensuring that the seating in the examination room is arranged in such a way that there is no possibility of collusion or interference. Ideally candidates should be at single desks with 1.25 metres between heads. The invigilator must be able to see all the candidates at all times during the examination.
- ◆ Ensuring that all displays of material that may be of assistance to candidates in answering questions are removed.
- ◆ Ensuring that candidates cannot access applications that may be of assistance to them in answering questions/generating evidence.
- ◆ Where appropriate, ensuring that the status of the internet connection is sufficient to allow candidates to access online assessments.

Please see appendix 4 for information provided to centres.

### **Electronically recorded evidence**

Evidence that has been recorded electronically (computer files, e-mail, etc) and includes answers to questions, digital audio/video files, personal accounts or 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 they are recommended.

In all circumstances where electronic evidence is being used, centres must ensure the evidence submitted by candidates:

- ◆ is received securely by the 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, 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, you should not also require centres to print off hard copies of assessment/verification records.

## **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 next section) in relation to four main categories:

- ◆ the identification of good practice
- ◆ making recommendations
- ◆ agreeing action points
- ◆ 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 goes beyond normal and expected practice and effort. For example:

Criterion 2.1 Maintaining records of assessor/verifier competence is a requirement for SVQ 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 assessors, who through their continued efforts have exemplified practice that stands out — eg maintained comprehensive records of progress reviews or feedback — this could 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, this could 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 have some good practice that can be identified.

If the same good practice exists as picked up on during previous visits, it is still acceptable to comment on the same — as good practice is still being maintained.

## **Making recommendations**

Unlike agreed action points (see next subsection), a recommendation is a suggestion 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 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 a qualification 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 points 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 points 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. In assessment, 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, 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 names 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.

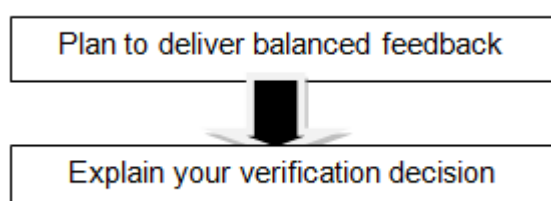
## 4 Communicate the verification decision

This section includes:

- ♦ planning to deliver balanced feedback
- ♦ explaining your verification decision

### The stages of communicating the verification decision

The following flowchart outlines the stages associated with planning your feedback and then communicating your verification decision to centre staff.



### Planning to deliver balanced feedback

Once you have completed all 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'.

You should take some time 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 providing 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 qualification 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 terms of organising the visit, planning it, conducting it, and writing up reports
- ◆ SQA in terms of managing and quality controlling the external quality assurance process

The category outcome ratings are confidence ratings. Where a centre has an outcome rating of Minimal or No Confidence against any category of criteria, you should inform the Quality Assurance Logistics Team on the same day, if feasible, by e-mail to: [gav@sqa.org.uk](mailto:gav@sqa.org.uk) or telephone: 0141 500 5928.

The investments by all concerned culminate in the outcome of the verification visit. This means that 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.

## **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 information relevant 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.

Having made a decision in relation to each criterion, you should explain your decision and 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 with the relevant centre staff. It is important that the centre fully understands how you came to make the decision.

Cover these points when delivering your feedback:

- ◆ Make sure you identify all evidence sources, to ensure you sample all available evidence.
- ◆ Explore your thoughts, concerns, ideas with those concerned (this gives centre a chance to provide additional information/evidence or confirm its totality).
- ◆ 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.

## Feedback

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 and send it to SQA, as this will provide you with valuable information to confirm that your verification practice is effective or to help you make future improvements.

## 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](#).

## 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. It is important at the start of your visit, that you identify who will be present during feedback.

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 Qualification Verification Activity Form.

It is important that you calculate the outcome rating of each category of criteria and provide the centre with the outcome rating and sanctions document to advise them of the potential sanctions SQA could invoke. 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.

A copy of the Outcome of Qualification Verification Activity Form should be given to the SQA Co-ordinator/representative, and you must keep a copy.

The category outcome ratings are confidence ratings. Where a centre has an outcome rating of Minimal or No Confidence against any category of criteria, you should inform the Quality Assurance Logistics Team on the same day, if feasible, by e-mail to: [gav@sqa.org.uk](mailto:gav@sqa.org.uk) or telephone: 0141 500 5928.

Also, any instances of suspected malpractice or plagiarism **must** be reported to the Quality Assurance Logistics team on the same day.

The communication of the verification decision normally constitutes the last part of the verification visit.

The duration of a visit will vary depending on a number of factors. However, on average, SQA recommends that a single centre visit should take no fewer than approximately three hours but not last longer than six hours.

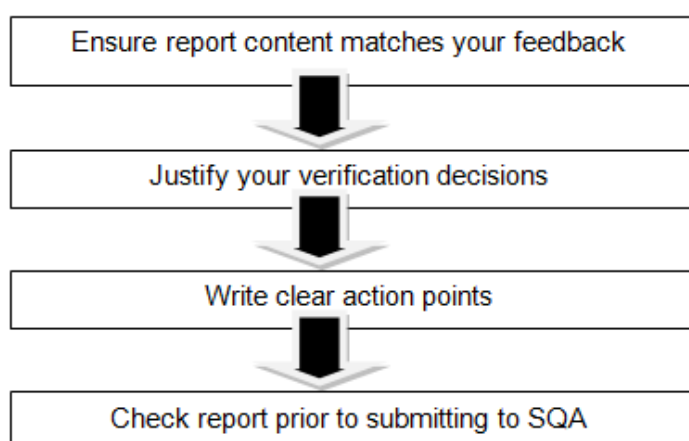
## 5 Complete the qualification verification report

This section includes:

- ◆ ensuring report content matches your feedback
- ◆ justifying your verification decisions
- ◆ writing clear action points
- ◆ checking your report prior to submitting to SQA
- ◆ what to do after submitting your report to SQA

### The stages of completing your qualification verification report

The following flowchart outlines the stages associated with writing up your report and checking it prior to submitting it to SQA.



This last section covers general guidance on completing the qualification verification report. 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 QA appointee web pages.

### 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 after feedback has been given and agreed, so it is imperative that there is clarity in agreed actions in both your 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 it.

### 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.

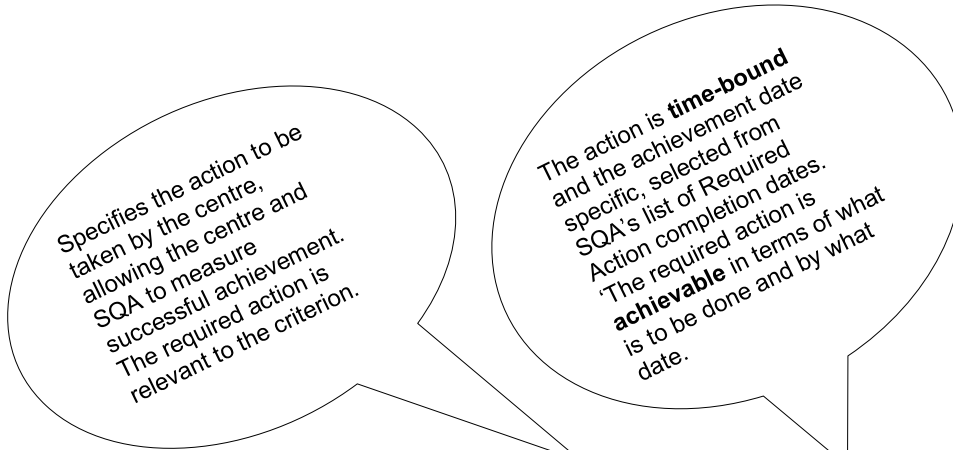


If, for example, in Criterion 3.2: *Candidates' development needs and prior achievements (where appropriate) must be matched against the requirements of the award*, the centre provides you with evidence in the form of a policy and procedure for dealing with candidates' development needs, this in itself is not evidence (although is good supporting evidence). In this situation, you are looking for evidence of what actually happens in practice, ie recorded evidence of candidates' needs having been met. This same principle applies to all criteria.

In summary, the comments section of your report relating to each criterion should include the sources of evidence you have found in justifying your verification decision.

## Writing clear action points

When centres are given action points they must be written based on the SMART objectives principle as described on page 34. The following is an example of an agreed action from a qualification verification report.



	Criteria	Impact	Compliance Level	Comments	Required Action	Evidence Type/required by date
2.1	Verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.	High	Amber	Centre records do not adequately confirm that staff have sufficient skills, knowledge and 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 assessment strategy.	Electronic  30 August 2017

Where a number of action points have been identified, only one agreed action date — by which all actions have to be achieved — will be attached to the activity.

Centres might have to be reminded at this point that they should submit electronic evidence for each non-compliant criterion to [gav@sqa.org.uk](mailto:gav@sqa.org.uk) rather than to you. This ensures that actions can be tracked by SQA.

The box at the end of the QV 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), or safety or access concerns at assessment sites. These issues may be escalated within SQA, or referred to systems verification.

## **Checking your report before submitting it to SQA**

### **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. You should refrain from naming individuals in your reports, either to criticise or praise.

Before submitting your report to SQA, check it for:

- ◆ overall cohesiveness and clarity
- ◆ accuracy, spelling and grammar

The following SQA publications can assist you with report writing:

[http://www.sqa.org.uk/files\\_ccc/WritingForSQAA-ZV6.pdf](http://www.sqa.org.uk/files_ccc/WritingForSQAA-ZV6.pdf)

## **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.

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 whether your report is completed satisfactorily:

1. Comments justify the criteria compliance level, i.e. 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 qualifications 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 for HN Unit(s), 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 QV guidance.)
10. The report has been checked for spelling, grammar, punctuation and 'flow' — it makes sense, and it reads well.

The qualification verification report must be an accurate reflection of the feedback given during the verification activity.

## **After submitting your report to SQA**

All qualification verification 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 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.

## **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 out 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 points from the centre, SQA will forward the evidence to you for your review and link you to the location of your original qualification verification report for you to update. Service level agreements relating to evidence review are the same as for completing the qualification verification report. Your evidence review will also be subject to sign-off by the senior verifier.

Guidance on how to complete the evidence review report can be found on the [QA appointee web pages](#).

## **Electronic housekeeping**

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

## **Central verification**

Central verification is currently used for verification of graded units of Higher National Qualifications. This model has many advantages for qualification verifiers, as they have the opportunity to work as part of a team while carrying out verification.

Central verification activity is planned and co-ordinated by the Quality Assurance Logistics Team. Central verification activity does not require you to complete a visit plan. You will be contacted directly with the selections and dates appropriate to the relevant evidence submission.

Central verification is conducted against a reduced set of SQA's Quality Assurance Criteria. Further information relating to central verification can be found on SQA's QA appointee website.

## **Qualification verification activity in China**

Qualification verification activity in China has previously been undertaken using Excel reporting. For all allocated activity the reporting will now take place via Quality Assurance Management System (QAMS).

All UK and International activity will now report confidence rating outcomes.

China verification activity is planned and co-ordinated by the Quality Assurance Logistics Team. Verification activity in China does not require qualification verifiers to complete a visit plan. You will be contacted directly with selections and dates appropriate to the relevant evidence submission.

China verification is conducted against the same SQA's Quality Assurance Criteria as UK and International activity with one exception — Criterion 2.1 must be completed for visiting verification activity for all qualification types. The remote verification Quality Assurance Criteria are the same as UK and International QA criteria.

# **Part B: SQA's Quality Assurance Criteria: requirements and guidance**

## **About this resource**

The resource is designed to provide support for those working with SQA's Quality Assurance Criteria and who have a direct or indirect role in quality assuring SQA systems.

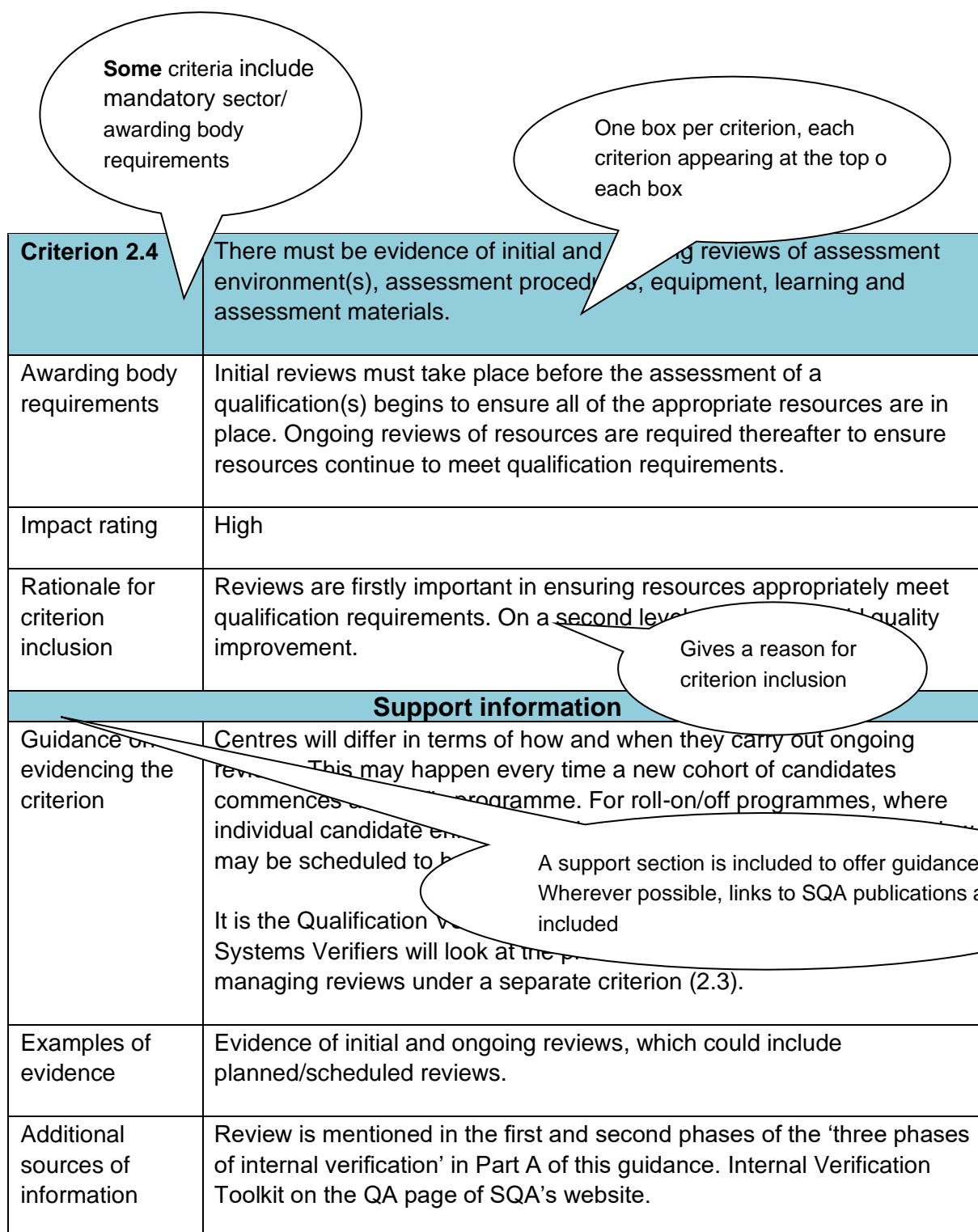
## **Features**

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 on a per criterion basis — the resource mirrors the categories of the qualification verification Visit Report
- ◆ provide SQA requirements and guidance relating to each criterion — making a clear distinction as to what is a requirement and what is purely guidance

The diagram on the next page explains the layout and format of the resource.

## Example of criterion with explanation of layout



**Some** criteria include mandatory sector/awarding body requirements

One box per criterion, each criterion appearing at the top of each box

<b>Criterion 2.4</b>	There must be evidence of initial and ongoing reviews of assessment environment(s), assessment procedures, equipment, 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 qualification requirements.
Impact rating	High
Rationale for criterion inclusion	Reviews are firstly important in ensuring resources appropriately meet qualification requirements. On a <u>second level</u> , they ensure quality improvement. Gives a reason for criterion inclusion
<b>Support information</b>	
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 programme. For roll-on/off programmes, where individual candidate entry may be scheduled to be continuous, reviews may be scheduled to be continuous. A support section is included to offer guidance. Wherever possible, links to SQA publications are included It is the Qualification Verifiers' responsibility to ensure that Systems Verifiers will look at the process of managing 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	Review is mentioned in the first and second phases of the 'three phases of internal verification' in Part A of this guidance. Internal Verification Toolkit on the QA page of SQA's website.

## The qualification verification criteria

<b>Category 2: Resource management</b>  <b>The centre procedures for managing resources must be documented, implemented and monitored to meet SQA requirements.</b>	
<b>Criterion 2.1</b>	Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.
<b>Awarding body requirements</b>	<p>Assessors and internal verifiers must have the required up-to-date occupational experience and/or subject understanding, <b>and, where stipulated</b>, 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 QV Report.</p> <p>Assessors and verifiers of <b>regulated qualifications</b> 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 <b>regulated qualifications</b> must undertake relevant continuing professional development activities, and keep records of this.</p>
<b>Impact rating</b>	High
<b>Rationale for criterion inclusion</b>	To ensure the validity and integrity of the qualifications 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.
<b>Support information</b>	
<b>Guidance on evidencing the criterion</b>	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



	<p>Additional sources of information for the guidance note from SQA 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"> <li>◆ holding other qualifications that include relevant and sufficient assessment or verification components, or/and</li> <li>◆ providing evidence of having successfully practised as an assessor and/or verifier of awarding organisation qualifications</li> </ul> <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>
<b>Examples of evidence</b>	Where a qualification requirement, records of relevant occupational/subject experience, CPD records, copies of qualification certificates.
<b>Additional sources of information</b>	<p>The following guidance is available to centres:</p> <p>'Assessor and Internal Verifier qualifications: a quick reference guide'</p> <p><a href="#">SQA Accreditation Statement on Assessor and Verifier Competence</a></p> <p>The <a href="#">National Occupational Standards for Learning and Development</a> 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 <a href="#">choosing an appropriate Assessor or Internal Verifier qualification</a>.</p> <p>A CPD Toolkit can be accessed <a href="#">on SQA's quality assurance appointee website</a>.</p>

<b>Criterion 2.4</b>	There must be evidence of initial and ongoing reviews of assessment environments; equipment; and reference, learning and assessment materials.
<b>Awarding body requirements</b>	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 qualification requirements.
<b>Impact rating</b>	High
<b>Rationale for criterion inclusion</b>	Reviews are firstly important in ensuring resources appropriately meet qualification requirements. On a second level, reviews can aid quality improvement.
<b>Support information</b>	
<b>Guidance on evidencing the criterion</b>	<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"> <li>• changes to the qualifications being offered where resources will be required to support the introduction of new or revised units/awards</li> <li>• feedback highlighting the need for updating resources, which may come from internal comments or reviews/IV or external quality assurance visits</li> </ul> <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 Qualification 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>
<b>Examples of evidence</b>	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>
<b>Additional sources of information</b>	<p>Review is mentioned in the first and third phases of the 'three phases of internal verification' in Part A of this guidance.</p> <p>An Internal Verification Toolkit is available on the QA page of SQA's website.</p>

### Category 3: Candidate support

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

<b>Criterion 3.2</b>	Candidates' development needs and prior achievements (where appropriate) must be matched against the requirements of the award.
<b>Awarding body requirements</b>	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.
<b>Impact rating</b>	Medium
<b>Rationale for criterion inclusion</b>	Identifying development needs and prior achievement helps ensure a more targeted approach is taken in helping candidates achieve their qualifications.
<b>Support information</b>	
<b>Guidance on evidencing the criterion</b>	<p>This criterion relates to identifying the prior achievements and development needs of candidates before or at the start of their awards/units.</p> <p>The identification of prior achievement helps ensure candidates satisfy any qualification 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 awards/units 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 awards/units (this can also apply to some VQ programmes), the general development needs of candidates are</p>

	usually matched against awards/units requirements at the programme/course design stage, and then factored into the learning, teaching and assessment plans and progress reviews.
<b>Examples of evidence</b>	SVQs- Personal Development Plans, Action Plans, (development section of Assessment Plans).  HNs/NQs – Learning, Teaching and Assessment Plans, Individual Learning Plans, Progress Reviews.
<b>Additional sources of information</b>	The <a href="#">Guide to Assessment</a> provides more information on formative assessment which is related to candidate development needs.

<b>Criterion 3.3</b>	Candidates must have scheduled contact with their assessor to review their progress and to revise their assessment plans accordingly.
<b>Awarding body requirements</b>	None in addition to the wording of the criterion.
<b>Impact rating</b>	Medium
<b>Rationale for criterion inclusion</b>	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.
<b>Support information</b>	
<b>Guidance on verifying the criterion</b>	<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>
<b>Examples of evidence</b>	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.
<b>Additional sources of information</b>	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 <a href="#">National Occupational Standards for Learning and Development</a> .

## 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.**

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

### Support information

<b>Guidance on evidencing the criterion</b>	<p>The Qualification 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 Qualification 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 qualifications 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 Qualification Verifier is to focus on the centre's implementation of these policies/procedures. However, if the Qualification Verifier identifies any concerns about the content of a</p>
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	<p>centre's assessment/ IV policies or 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>
<b>Examples of evidence</b>	The completion of records showing assessors/verifiers consistently follow their centre's assessment/verification procedures.
<b>Additional sources of information</b>	<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><a href="#">Guide to Assessment</a> includes guidance on the assessment process for SQA units</p> <p><a href="#">Internal Verification: A Guide for Centres offering SQA Qualifications</a></p> <p><a href="#">Internal verification: A Guide for Centres offering Ofqual Regulated Qualifications</a> includes the purpose and function of internal verification</p> <p>Internal Verification Toolkit on the QA page of SQA's website</p> <p>The <a href="#">National Occupational Standards for Learning and Development</a> includes the assessment standard 9 and internal verification standard 11 on which Assessor/Verifier qualifications are based.</p>



<b>Criterion 4.3</b>	Assessment instruments and methods and their selection and use must be valid, reliable, practicable, equitable and fair.
<b>Awarding body requirements</b>	<p>This criterion requires assessment instruments/methods to be appropriately <b>selected</b> (prior to assessment), and <b>used</b> (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>
<b>Impact rating</b>	High
<b>Rationale for criterion inclusion</b>	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.
<b>Support information</b>	
<b>Guidance on evidencing the criterion</b>	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.

	<p>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.</p> <p>The Qualification 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.</p> <p>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'.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>The approaches to assessment used should not impose any unnecessary barriers to individual candidates undertaking the assessments, and appropriate adjustments should be made, 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>
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<b>Examples of evidence</b>	Documented evidence of methods/instruments having been selected and applied.
<b>Additional sources of information</b>	<p>SQA's <a href="#">Guide to Assessment</a> includes more detailed information on the principles of assessment and selecting and using suitable methods and assessments.</p> <p><a href="#">Information on prior verification</a></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><a href="#">SQA Assessment Arrangements</a> web page</p>

<b>Criterion 4.4</b>	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.
<b>Support information</b>	
<b>Guidance on evidencing the criterion</b>	<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 qualification 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.
<b>Examples of evidence</b>	Induction checklists, portfolio disclaimers, checks on assessment conditions, testimonial evidence, use of plagiarism software.
<b>Additional sources of information</b>	SQA's <a href="#">Your Coursework</a> web page covers information widely available to centres and candidates on topics such as plagiarism and collusion.

<b>Criterion 4.6</b>	Evidence of candidates' work must be accurately and consistently judged by assessors against SQA's requirements.
<b>Awarding body requirements</b>	None in addition to the wording of the criterion.
<b>Impact rating</b>	High
<b>Rationale for criterion inclusion</b>	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.
<b>Support information</b>	
<b>Guidance on evidencing the criterion</b>	<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 stages of internal verification that SQA requires centres to build into their IV system 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 qualification 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> <p>Whenever standardisation takes place, whether through physical meetings or by electronic means (discussion forums, e-mail exchange,</p>

	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.
<b>Examples of evidence</b>	Any assessment and internal verification documentation that records accurate and consistent assessment decisions being made.
<b>Additional sources of information</b>	<p>There are examples of different types of standardisation exercise on page 4 of <a href="#">SQA's Internal Verification: A Guide for Centres offering SQA Qualifications</a> and on page 5 and 6 of <a href="#">SQA's Internal verification: A Guide for Centres offering Ofqual Regulated Qualifications</a>.</p> <p>There is an Internal Verification Toolkit on the QA page of SQA's website. <a href="https://www.sqa.org.uk/sqa/74678.6226.html">https://www.sqa.org.uk/sqa/74678.6226.html</a></p>

<b>Criterion 4.7</b>	Candidate evidence must be retained in line with SQA requirements.
<b>Awarding body requirements</b>	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 Qualification Verifier before three weeks after the completion date, all candidate evidence must be retained until after the verification visit has taken place.
<b>Impact rating</b>	High
<b>Rationale for criterion inclusion</b>	<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 Qualification 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>
<b>Support information</b>	
<b>Guidance on verifying the criterion</b>	<p>Evidence of centres meeting this criterion should derive from the access they allow Qualification Verifiers to information prior to the visit and then during the visit.</p> <p>The need for evidence to be retained for qualification 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>
<b>Examples of evidence</b>	The selected candidate evidence (pre-selected and on-site selected) available for qualification verification.
<b>Additional sources of information</b>	<a href="#">SQA's Retention Policy for SQA centres</a> (which Systems Verifiers look at).



<b>Criterion 4.9</b>	Feedback from Qualification Verifiers must be disseminated to staff and used to inform assessment practice.
<b>Awarding body requirements</b>	None in addition to the wording of the criterion.
<b>Impact rating</b>	Medium
<b>Rationale for criterion inclusion</b>	If the results of Qualification 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
<b>Support information</b>	
<b>Guidance on verifying the criterion</b>	<p>Centres must provide evidence of having disseminated the feedback contained in Qualification 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 QV 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>Qualification Verifier reports can be a useful source of information when it comes to conducting reviews of resources (see Criterion 2.4).</p>
<b>Examples of evidence</b>	Evidence of feedback being disseminated to staff and evidence of it has been used to update/improve assessment practice.

## Appendix 1: Quality Assurance — Remote and Central Qualification Verification Criteria

	Criteria	Impact Rating
4.2	Internal assessment and verification procedures must be implemented to ensure standardisation of assessment.	Medium
4.3	Assessment instruments and methods and their selection and use must be valid, reliable, practicable, equitable and fair.	High
4.4	Assessment evidence be the candidate's own work, generated under SQA's required conditions.	High
4.6	Evidence of candidates' work must be accurately and consistently judged by assessors against SQA's requirements.	High
4.7	Candidate evidence must be retained in line with SQA requirements.	High

## Appendix 2: Sampling

Carrying out sampling and supporting this process with a good rationale:

- ◆ helps to ensure all assessors and internal verifiers understand national standards and can apply them uniformly and consistently
- ◆ enables and ensures that all assessments being offered are valid, reliable, practicable, equitable and fair.
- ◆ Allows quality concerns to be identified and addressed

Choosing your sample is a key area of visit planning – a full discussion with the centre at the visit planning stage will ensure that the correct sample is chosen.

To assist you in identifying the stage each candidate is at – SQA has developed a pro forma which can be used to gain this information from the centre.

### Questions to ask yourself during the sampling process:

#### 1. What award/units are you going to look at?

You may have been advised by SQA which units to verify.

Your QV Group meeting will decide which units/GAs are of concern to SQA or centres based on previous intelligence — maybe they are new or revised units or maybe a high proportion of centres have had difficulties delivering them.

The timing of the QV activity will play an important part in identifying which units are available to make up the Sample. This will involve discussing with the centre the units that will be available from the initial point to when it is appropriate to visit.

#### 2. Which assessors/internal verifiers/candidates are you going to look at?

Some questions you might ask yourself or your centre contact to support this:

What units verified successfully last year?

What does the previous report tell you?

Were there any non-compliant units?

Which assessors/verifiers relate to these units?

Do you know how many assessors/internal verifiers they have?

- ◆ Are there any new assessors/internal verifiers?
- ◆ Are there any working towards an assessor verifier award?
- ◆ How are there judgements being supported?
- ◆ Were they highlighted in previous reports, can they be ruled out or do you want to look at them again?

- ◆ Which assessors will be available on the day?
- ◆ Do you have multiple assessors delivering the same unit?
- ◆ Are there assessors across multiple sites?
- ◆ Are there specific units that will be available at the time of the visit?
- ◆ Are there multiple assessment sites?
- ◆ Do they deliver holistically?
- ◆ Do they have an online system?

### **3. Where does verification activity take place?**

SQA has advised of where activity will take place

SQA will identify all assessment sites and the qualifications delivered (if this information is available).

Discussion of where evidence is.

Centre delivers across multiple sites.

Not all verification activity needs to take place at the main address held by SQA. Visit planning allows you to explore the options available to you as to where the optimum place is for verification to take place. Verifiers should always ensure that they ask centres where assessment takes place and factor that in during the sampling rationale.

The answers to these questions will help identify the candidate evidence you are considering looking at. Some of this information is readily available prior to the visit planning process commencing from QAMS, candidate entries, QV Group meetings, others you will have to initiate discussion with the centre to gain intelligence.

## Appendix 3: Assessor and internal verifier qualifications — a quick reference guide

Note: A number of the EV Report Codes cover both a unit and a single-unit PDA (Professional Development Award). These are identical in content and demand: only the SQA codes and titles are different. One SQA code/title is for the unit and the other SQA code/title is for the single-unit PDA.

<b>Workplace assessor qualifications for S/NVQs and recommended for Competence-Based Qualifications (CBQs) awarded by SQA</b>	
<b>EV Report Code</b>	<b>Titles and SQA awarding body unit/qualification codes</b>
<b>L&amp;D9DI (replaced A1)</b>	FD41 04 Assess Workplace Competence using Direct and Indirect Methods [Unit]  GA2E 48 Workplace Assessment Using Direct and Indirect Methods [PDA]
<b>L&amp;D9D (replaced A2)</b>	FD40 04 Assess Workplace Competence Using Direct Methods [Unit]  GA28 47 Workplace Assessment Using Direct Methods [PDA]
<b>*A1 (replaced D32 &amp; D33)</b>	D94L 04 Assess Candidates Using a Range of Methods [Unit]  G7ET 15 Certificate in Assessing Candidates Using a Range of Methods [PDA]
<b>*A2 (replaced D32)</b>	D94M 04 Assess Candidates' Performance through Observation [Unit]  G7EV 15 Certificate in Assessing Candidates Through Observation [PDA]
<b>*D32</b>	B2WH 04 Assess Candidate Performance
<b>*D33</b>	B2WJ 04 Assess Candidate using Differing Sources of Evidence
<b>*D32 D33</b>	B2WH 04 Assess Candidate Performance  B2WJ 04 Assess Candidate using Differing Sources of Evidence
<b>*TQFE</b>	Scottish Teaching Qualification (Further Education)
<b>QCF (WA)</b>	GA2M 69 Level 3 Award in Assessing Competence in the Work Environment
<b>QCF (CA)</b>	GA2X 70 Level 3 Certificate in Assessing Vocational Achievement

<b>Workplace Internal Verifier qualifications for S/NVQs and recommended for Competence-Based Qualifications (CBQs) awarded by SQA</b>	
<b>EV Report Code</b>	<b>Titles and SQA awarding body unit/qualification codes</b>
<b>LD11 (replaced V1)</b>	FD43 04 Internally Monitor and Maintain the Quality of Workplace Assessment [Unit]  GA2F 48 Internal Verification of Workplace Assessment [PDA]
<b>*V1 (replaced D34)</b>	D94P 04 Conduct Internal Quality Assurance of the Assessment Process [Unit]  G7ER 15 Certificate in Conducting Internal Quality Assurance of the Assessment Process [PDA]
<b>*D34</b>	B08W 04 Internally Verify the Assessment Process
<b>QCF (IQA)</b>	GA2P 78 Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice
<b>QCF (LIQA)</b>	GA2Y 63 Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice

Holders of the above qualifications marked with an asterisk\* must also provide CPD evidence of working in line with current Assessor/Verifier national standards.

Many of the Assessor and Verifier units listed are also contained within a number of PDAs and S/NVQs in Learning and Development and other sector qualifications. If presented with those PDAs or S/NVQs as proof of achievement, please check that the appropriate optional Assessor/Verifier Units have been achieved.

<b>Assessor qualifications for non-workplace qualifications awarded by SQA (eg HNs, NQs, NCs, NPAs, non-workplace PDAs, Skills for Work, PC Passport, Core/Key Skills, VRQs)</b>	
<b>EV Report Code</b>	<b>Titles and SQA awarding body unit/qualification codes</b>
<b>TQFE</b>	Scottish Teaching Qualification (Further Education)
<b>TQSE</b>	Scottish Teaching Qualification (Secondary Education)
<b>COAP</b>	G9DA 47 Carry Out the Assessment Process [PDA]  F7BV 34 Carry Out the Assessment Process [Unit]
<b>CAP (replaced COAP)</b>	GF8P 48 Conduct the Assessment Process [PDA]

	H290 35 Conduct the Assessment Process [Unit Code]
<b>QCF (VA)</b>	GA2N 69 Level 3 Award Assessing Vocationally Related Achievement
The following qualifications can also be accepted, but Assessor-Candidates cannot achieve L&D9D, L&D9DI or the A units by assessing HNs, NQs, NCs, NPAs, non-workplace PDAs, Skills for Work, PC Passport, Core/Key Skills, VRQs)	
<b>EV Report Code</b>	Titles and SQA Awarding Body Unit/Qualification codes
<b>L&amp;D9DI (replaced A1)</b>	FD41 04 Assess Workplace Competence using Direct and Indirect Methods [Unit]  GA2E 48 Workplace Assessment Using Direct and Indirect Methods [PDA]
<b>L&amp;D9D (replaced A2)</b>	FD40 04 Assess Workplace Competence Using Direct Methods [Unit]  GA28 47 Workplace Assessment Using Direct Methods [PDA]
<b>A1 (replaced D32 &amp; D33)</b>	D94L 04 Assess Candidates Using a Range of Methods [Unit]  G7ET 15 Assessing Candidates Using a Range of Methods [PDA]
<b>A2 (replaced D32)</b>	D94M 04 Assess Candidates' Performance through Observation [Unit]  G7EV 15 Assessing Candidates Through Observation [PDA]
<b>D32</b>	B2WH 04 Assess Candidate Performance
<b>D33</b>	B2WJ 04 Assess Candidate using Differing Sources of Evidence
<b>D32 D33</b>	B2WH 04 Assess Candidate Performance  B2WJ 04 Assess Candidate using Differing Sources of Evidence
<b>QCF (WA)</b>	GA2M 69 Level 3 Award in Assessing Competence in the Work Environment
<b>QCF (CA)</b>	GA2X 70 Level 3 Certificate Assessing Vocational Achievement

<b>Internal Verifier qualifications for non-workplace qualifications awarded by SQA (eg HNs, NQs, NCs, NPAs, non-workplace PDAs, Skills for Work, PC Passport, Core/Key Skills, VRQs)</b>	
<b>EV Report Code</b>	<b>Titles and SQA awarding body unit/qualification codes</b>
<b>TQFE</b>	Scottish Teaching Qualification (Further Education)

<b>TQSE</b>	Scottish Teaching Qualification (Secondary Education)
<b>IVAP</b>	G9DC 48 Internally Verify the Assessment Process [PDA]  F7BW 35 Internally Verify the Assessment Process [Unit]
<b>CIVP (replaced IVAP)</b>	GF8R 48 Conduct the Internal Verification Process [PDA]  H291 35 Conduct the Internal Verification Process [Unit]
<b>QCF (IQA)</b>	GA2P 78 Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice
<b>QCF (LIQA)</b>	GA2Y 63 Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice

<b>The following qualifications can also be accepted, but Verifier-candidates cannot achieve L&amp;D11 by verifying HNs, NQs, NCs, NPAs, non-workplace PDAs, Skills for Work, PC Passport, Core/Key Skills, VRQs)</b>	
<b>EV Report Code</b>	<b>Titles and SQA awarding body unit/qualification codes</b>
<b>LD11 (replaced V1)</b>	FD43 04 Internally Monitor and Maintain the Quality of Workplace Assessment [Unit]  GA2F 48 Internal Verification of Workplace Assessment [PDA]
<b>V1 (replaced D34)</b>	D94P 04 Conduct Internal Quality Assurance of the Assessment Process [Unit]  G7ER 15 Conducting Internal Quality Assurance of the Assessment Process [PDA]
<b>D34</b>	B08W 04 Internally Verify the Assessment Process
<b>QCF (IQA)</b>	GA2P 78 Level 4 Award The Internal Quality Assurance of Assessment Processes and Practice
<b>QCF (LIQA)</b>	GA2Y 63 Level 4 Certificate Leading the Internal Quality Assurance of Assessment Processes and Practice

For more information go the Assessor/Verifier qualifications visit SQA's Learning and Development web pages.

The units L&D9D, L&D9DI and L&D11 are component units in the following qualifications:

FD40 04 L&D9D Assess Workplace Competence Using Direct Methods is in:



- ◆ GA28 47 PDA Workplace Assessment Using Direct Methods
- ◆ GA29 23 SVQ3 Learning and Development

FD41 04 L&D9DI Assess Workplace Competence Using Direct and Indirect Methods is in:

- ◆ GA29 23 SVQ3 Learning and Development
- ◆ GA2C 24 SVQ4 Learning and Development
- ◆ GA2E 48 PDA Workplace Assessment Using Direct and Indirect Methods
- ◆ GD0R 23 SVQ3 Healthcare Support (Clinical)
- ◆ GD0T 23 SVQ 3 Healthcare Support (Non-Clinical)

FD43 04 L&D11 Internally Monitor and Maintain the Quality of Workplace Assessment is in:

- ◆ GA2F 48 PDA Internal Verification of Workplace Assessment
- ◆ GA2C 24 SVQ4 Learning and Development

For qualifications in which the lapsed assessor and Verifier units A1, A2, V1, D32, D33 and D34 are component units, visit SQA's Learning and Development web pages.

## **Appendix 4: Enhanced guidance to centres on managing assessment conditions**

Where the candidates are not known to the invigilator or supervisor, sufficient identity/security checks must be carried out prior to the examination/assessment to ensure the candidate is who they say they are. Suitable evidence includes:

- ◆ a new-style photo card driving licence with paper counterpart
- ◆ a valid passport
- ◆ a valid identity card from within the EU
- ◆ a police warrant card
- ◆ a valid (old style), signed GB or NI driving licence to be countersigned against the candidate registration form, and a form of photo identification from a reputable company or professional body
- ◆ other forms of identification (such as biometric testing, a PASS Card, or Young Scot card) may be considered

A copy of the identification documentation must be retained for six months after the candidate's completion date.

For invigilated paper based examinations, the environment must:

- ◆ have appropriate levels of heat, light, ventilation and noise control.
- ◆ have a level floor
- ◆ be without galleries
- ◆ have no displays of material that may be of assistance to candidates in answering questions
- ◆ have sufficient single desks or tables and chairs for the number of candidates stated
- ◆ have consecutively numbered seats/desks (a record must be kept of this arrangement of numbers and retained for six months)
- ◆ be organised in such a way that the invigilator can see all of the candidates at all times during the examination.
- ◆ be arranged in such a way that there is no possibility of collusion or interference (where practical, candidates should be at single desks with 1.25 metres between heads)
- ◆ have a means provided to allow the invigilator to summon assistance
- ◆ have a working clock, which is clearly visible to all candidates
- ◆ have supervised access to toilet facilities for male, female and disabled candidates

For supervised paper-based /practical assessments, the environment must:

- ◆ have appropriate levels of heat, light, ventilation and noise control.
- ◆ have a level floor
- ◆ be without galleries
- ◆ have no displays of material that may be of assistance to candidates in answering questions/generating evidence
- ◆ have sufficient single desks or tables and chairs for the number of candidates stated
- ◆ be organised in such a way that the invigilator can see all of the candidates at all times during the assessment.

- ◆ be arranged in such a way that there is no possibility of collusion or interference (where practical, candidates should be at single desks with 1.25 metres between heads)
- ◆ be suitably equipped for all candidates taking practical tests
- ◆ have a means provided to allow the supervisor to summon assistance
- ◆ have a working clock, which is clearly visible to all candidates
- ◆ have supervised access to toilet facilities for male, female and disabled candidates

For invigilated or supervised digital examinations/assessments, the environment must:

- ◆ have appropriate levels of heat, light, ventilation and noise control
- ◆ have a level floor
- ◆ be without galleries
- ◆ have no displays of material that may be of assistance to candidates in answering questions/generating evidence
- ◆ prevent candidates from accessing applications that may be of assistance to them in answering questions/generating evidence
- ◆ have sufficient single desks or tables and chairs for the number of candidates stated
- ◆ have consecutively numbered seats/desks (a record must be kept of this arrangement of numbers and retained for six months after the candidate's completion date)
- ◆ be organised in such a way that the invigilator can see all of the candidates at all times during the examination.
- ◆ be arranged in such a way that there is no possibility of collusion or interference — where practical, candidates should be at single desks with 1.25 metres between heads
- ◆ be suitably equipped for all candidates taking practical tests
- ◆ have a means provided to allow the invigilator/supervisor to summon assistance
- ◆ have a working on-screen clock, which is clearly visible to candidates
- ◆ have access to toilet facilities for male, female and disabled candidates
- ◆ have sufficient numbers of technical devices for candidate use, including spare devices in case of hardware failure

For remotely invigilated or supervised digital examinations/assessments, the environment must:

- ◆ have appropriate levels of heat, light, ventilation and noise control.
- ◆ have a level floor
- ◆ be without galleries
- ◆ have no displays of material that may be of assistance to candidates in answering questions/generating evidence.
- ◆ prevent candidates from accessing applications that may be of assistance to them in answering questions/generating evidence.
- ◆ have sufficient single desks or tables and chairs for the number of candidates stated
- ◆ have consecutively numbered seats/desks (a record must be kept of this arrangement of numbers and retained for six months after the candidate's completion date)
- ◆ be organised in such a way that the invigilator can see all of the candidates at all times during the examination; the proctor must be able to see candidates head, eyes, torso, keyboard and mouse — this means that it is unlikely that candidates will be able to access toilet facilities for the duration of the examination/assessment.
- ◆ be organised in such a way that the invigilator can detect noises made within the candidate's assessment environment at all times during the examination.

- ◆ be arranged in such a way that there is no possibility of collusion or interference — where practical, candidates should be at single desks with 1.25 metres between heads
- ◆ be suitably equipped for all candidates taking practical tests
- ◆ have a means provided to allow the invigilator/supervisor to summon assistance
- ◆ have a working on-screen clock, which is clearly visible to candidates

For more information on assessing SQA qualifications, please see SQA's Guide to Assessment at [www.sqa.org.uk](http://www.sqa.org.uk)