

Systems Verification Criteria: Guidance for centres



Change log: March 2021

This version replaces the previous publication Systems Verification Criteria: Guidance for Centres published February 2019.

Document Version	Location of change	Description of change
V2.0 March 2021	All criterion	<p>The subheadings for each criterion have been updated to better explain what must be documented by centres and how the criterion should be applied in practice.</p> <p>Where applicable a Requirements for regulated qualifications section has been added to explain the specific requirements for qualifications which are accredited by a regulatory body.</p>
V2.0 March 2021	Criteria 1.5, 1.6, 3.6, 4.5, 4.8, 6.1	Removal of appendices. Guidance on writing procedures for these commonly queried criteria can now be found in Systems Approval and Verification: Support Materials
V2.0 March 2021	Criterion 1.5	Updated to align with SQA publication Malpractice Information for Centres V2.0 published December 2020.
V2.0 March 2021	Criterion 1.6	Updated to include the requirement to consider conflict of interest in assessment in assessor/candidate and quality assurance relationships.

Contents

How to use the Systems Verification Criteria Guide	3
Category 1: Management of a Centre	4
Category 2: Resources	16
Category 3: Candidate support	20
Category 4: Internal assessment and verification	26
Category 5: External assessment	33
Category 6: Data management	36

How to use the Systems Verification Criteria Guide

The quality assurance criterion is displayed in this box

Impact rating: high/medium/low

This rating indicates the level of risk to SQA, and your centre and candidates, if you do not fully comply with or implement the criterion.

Why is this important?

This box explains how the criterion ensures high standards in SQA-approved centres and maintains the integrity of SQA qualifications.

SQA requirements

This section gives details of the specific requirements SQA, as the awarding body, sets out for this criterion.

These requirements apply to **all** qualification types.

Information in this section **must** be written into your policy or procedure.

Additional Requirements for regulated qualifications

This section gives details of the specific requirements for qualifications which are accredited by a regulatory body.

If you offer a regulated qualification, the information in this section **must** be written into your policy or procedure.

If you do not offer regulated qualifications, you do not need to record this information.

By 'regulated' we mean qualifications regulated under the SQA Accreditation Principles or the *General Conditions of Recognition* of Ofqual and Qualifications Wales

You can check if the qualifications you offer are subject to regulation by visiting the relevant website: [SQA Accreditation](#), [Ofqual](#), or [Qualifications Wales](#)

How do I apply this criterion?

This section gives further details on what information you must document and how you can manage and record information relating to the criterion.

Examples of evidence

This box will describe the type of evidence you should present to the verifier.

The examples are those we commonly see during verification, but your centre may document or record information in a different way.

You may provide different evidence reflecting the actual practice in your centre, providing it clearly meets the quality criterion. You may use different terminology to the terms used in our guidance.

Additional support

Links to other SQA guidance and external sources of support will be displayed here.

Category 1: Management of a centre

Quality Assurance is managed effectively, and documented processes that support all SQA qualifications are implemented, reviewed and continuously improved.

1.1 Policies and procedures must be documented and reviewed to ensure full compliance with SQA quality criteria	Examples of evidence Documents
Impact rating: high	A quality manual containing all SQA-related policies, procedures, and recording documents
Why is this important? <p>Compliance with this criterion ensures that there is an effective system for the management of quality assurance in your centre.</p> <p>The system must be documented so that it can be audited and evaluated against SQA requirements, both by your staff and by SQA's systems verifiers.</p> <p>Your quality documentation (eg policies, procedures, and recording documentation) must be regularly reviewed to ensure that it reflects current practice, is up to date, and is fit for purpose.</p>	Staff and/or candidate handbook containing SQA-related policies, procedures and recording documents
SQA requirements <p>The quality system must be documented.</p> <p>Outcomes of reviews must be recorded and actioned.</p> <p>There must be a system of version control for documentation.</p>	Policies, procedures and recording documents stored on an electronic document management system
How do I apply this criterion? <p>Policies, procedures and supporting documentation for the assessment of SQA qualifications may be held electronically or in hard copy. These must be made available to all staff and candidates involved in SQA programmes. Staff, in particular, must be fully aware of the policies and procedures operating within your centre.</p> <p>You must have a documented schedule for reviewing your quality management system on an ongoing basis and demonstrate how you record and action reviews and ensure that all staff are made aware of any changes made.</p> <p>Version control could be evidenced by recording version numbers and dates of the last review on your documents (eg as a footer on every page). For certain documents, where there are legal or regulatory reasons for having a clear audit trail of changes — for example, key policy documents — it may also be appropriate to use a version control table to keep track of what changes were made, when and by whom.</p> <p>You must also make clear who is responsible for reviewing, updating, controlling and disseminating these documents, by documenting the relevant roles and responsibilities.</p>	Reviews <p>A schedule for the review of policies and procedures</p> <p>Internal audits of SQA-related policies and procedures</p> <p>Records of changes made as a result of review of policies and procedures</p> Version Control <p>Version control information noted on each document</p> <p>A version control table at front of 'quality manual'</p>

1.2 Policies and procedures must be endorsed by senior management and disseminated to all relevant staff

Impact rating: low

Why is this important?

Senior management endorsement of policies and procedures gives a clear message to all staff and candidates that your centre is committed to quality assurance.

Staff must be made aware of the policies and procedures operating in your centre, and of their responsibilities to act in accordance with them.

SQA requirements

All requirements are included within the wording of this criterion.

How do I apply this criterion?

The senior management of your centre must lead on or endorse all policies. They may devolve authority for the development of policy and procedure documents. You can record senior management endorsement in the version control information on the documents, or in a separate statement which confirms their support.

You must ensure that policies and procedures are communicated to staff and that you have procedures in place to ensure they are kept up-to-date with any changes.

You must provide evidence that your SQA-related policies and procedures have been communicated to relevant staff.

Examples of evidence

Endorsement

A statement from your chief executive

Foreword in quality manual from senior management

Manager/committee responsibility for development and review of policies is stated on documents

Signature of senior manager included on master documents

Dissemination

A statement or procedure on how documents are disseminated to staff

A distribution list

Evidence of digital dissemination eg SharePoint, Google Drive, Dropbox etc

Minutes of meetings which include discussion of policy and procedures

Staff induction materials

1.3 SQA must be notified of any changes which may affect the centre's ability to meet the quality assurance criteria

Impact rating: high

Why is this important?

This information must be documented in full so staff are aware of this requirement, particularly if they are new to a role.

SQA must hold accurate and current information on approved centres. Most communications from SQA will be sent to the SQA co-ordinator, so it is essential their name and contact details are current.

Providing this information allows SQA to minimise possible risks and to provide centres with additional support if required.

SQA requirements

You must document in a procedure or in the roles and responsibilities of staff, who will notify SQA of any changes.

You must show clearly that any of the following specific changes will be reported to SQA:

- change of premises
- change of head of centre, owner, or SQA co-ordinator
- change of name of centre or business
- change of contact details
- outcome of internal/external investigations
- removal of centre and/or qualification approval by another awarding body
- lack of appropriate assessors or IVs
- change to your centre's arrangements for secure storage of SQA examination papers and candidate evidence (where relevant)

How do I apply this criterion?

You can update these changes on SQA Connect:

- change of premises
- change of head of centre, owner, or SQA co-ordinator
- change of name of centre or business
- change of contact details

You must inform SQA by writing to your Business Development and Customer Support contact about:

- the outcome of any relevant internal or external investigations — including malpractice (see criterion 1.5)
- removal of centre and/or qualification approval by another awarding body.

You do not need to inform SQA about changes to individual assessors and/or IVs but must notify SQA immediately if you do not have enough appropriate assessors or IVs to deliver the qualifications you have candidates entered for.

Examples of evidence

Roles and responsibilities of SQA co-ordinator or head of centre which lists changes to be reported in full

Evidence you have notified SQA of changes (copies of correspondence, updates to SQA Connect etc)

Additional support

Information on how to contact SQA can be found in the [Frequently Asked Questions](#) on our website.

1.4 The roles and responsibilities of those involved in the administration, management, assessment and quality assurance of SQA qualifications across all sites must be clearly documented and disseminated

Impact rating: medium

Why is this important?

This is to ensure that all staff in your centre are fully aware of their own role and responsibilities, as well as those of others involved in providing SQA qualifications. This includes anyone sub-contracted or working in partnership with your centre.

SQA requirements

You must document and disseminate, to relevant staff, the roles and responsibilities of those involved in:

- the management of SQA qualifications
- the administration of SQA qualifications
- the assessment and quality assurance of SQA qualifications
- sub-contracted services or partnership arrangements

How do I apply this criterion?

The roles and responsibilities may be shown in job descriptions, specific role descriptions, or in procedural documents, but must be sufficiently detailed.

The management of SQA qualifications:

In [Systems Approval and Verification: Support Materials](#) we provide exemplar roles. We have grouped all responsibilities for managing SQA qualifications under the role of SQA co-ordinator. However, this may not suit your centre. These responsibilities may be split between different members of staff, but you must show clearly how all the responsibilities are covered.

The administration of SQA qualifications:

If your centre has dedicated administration staff, for example for candidate enrolment or data management, you must also document their roles and responsibilities. If administration is undertaken by the SQA co-ordinator, or another member of staff, these responsibilities can be recorded in their role.

The assessment and quality assurance of SQA qualifications:

You must have documented roles and responsibilities for assessors and Internal verifiers.

Sub-contracted services or partnership arrangements:

If you sub-contract services or work in partnership with another organisation to assess or quality assure SQA qualifications, you must provide evidence of a signed contract, partnership agreement or memorandum of understanding that clearly identifies the responsibilities of all parties.

You may also wish to document the responsibilities of candidates.

Examples of evidence

Organisational chart showing the relevant people involved in the SQA programme

Person specification/job role (if SQA responsibilities are included)

SQA-specific roles and responsibilities

Changes to the deployment of assessors/IVs

A documented system or procedure for managing partnerships and sub-contracts

Signed contract, partnership agreements or memoranda of understanding

Additional support

Example roles and responsibilities can be found in [Systems Approval and Verification: Support Materials](#)

[Guidance on the use of alternative assessment sites and partnerships](#) can be found on our website.

1.5 Suspected candidate or staff malpractice must be investigated and acted upon, in line with SQA requirements

Impact rating: high

Why is this important?

We are committed to safeguarding the quality and credibility of our qualifications. Even where you are taking good steps to prevent malpractice, concerns can still arise and so it is important you have a detailed, documented procedure in place to allow all allegations to be investigated consistently, fairly and impartially.

When a malpractice concern is reported to SQA, our approach will be fair, robust and proportionate to the nature of the concern. We may investigate it ourselves, ask you to investigate it and report your conclusions to us, or ask to review your handling of the situation.

SQA requirements

Your policies and procedures for malpractice must cover both malpractice by candidates and malpractice by centre staff. SQA's expectations are described in *Malpractice: Information for Centres*.

You must use the following definition:

Malpractice means any act, default or practice (whether deliberate or resulting from neglect or default) which is a breach of SQA requirements including any act, default or practice which:

- **compromises, attempts to compromise, or may compromise the process of assessment, the integrity of any SQA qualification, or the validity of a result or certificate; and/or**
- **damages the authority, reputation or credibility of SQA or any officer, employee or agent of SQA**

Malpractice can arise for a variety of reasons:

- **Some incidents are intentional and aim to give an unfair advantage or disadvantage in an examination or assessment (deliberate non-compliance).**
- **Some incidents arise due to ignorance of SQA requirements, or carelessness or neglect in applying the requirements (maladministration).**

You must describe:

- how suspected malpractice can be reported
- who will undertake investigations and how these may be managed
- how the outcome of an investigation will be communicated
- the types of measures which may be applied to candidates or staff if malpractice is proven

Examples of evidence

Documented malpractice policy and procedure

Log of instances of malpractice or suspected malpractice — or a template for this

Policy contained within candidate induction materials

Guidance for candidates on avoiding plagiarism

Signed declarations of authenticity from candidates

Policy contained in induction materials for assessors and IVs

Additional support

Guidance on writing malpractice procedures can be found in [Systems Approval and Verification: Support Materials](#)

[Candidate disclaimer for SVQ Portfolio \(sqa.org.uk\)](#)

[Malpractice: Information for Centres \(sqa.org.uk\)](#)

[The Appeals process: Information for centres](#)

- what actions you may take to prevent further occurrences
- how candidates or staff can appeal a malpractice decision (internally and to SQA)
- what records will be kept and for how long

Malpractice can include both deliberate non-compliance with SQA requirements and maladministration in the assessment and delivery of SQA qualifications. It is necessary to investigate any suspected instances of malpractice, whether they are intentional or not, to protect the integrity of the qualification and to identify any wider lessons to be learned.

Any suspected cases of centre malpractice must be reported to SQA as soon as you have carried out an initial screening exercise to establish the nature of the concern. This includes any concerns where you take the view that no further action is necessary.

You must inform us of any investigation carried out by an awarding body, industry body, funding agency or regulator which may or may not affect the delivery of SQA qualifications.

You must also promptly bring to our attention any findings of centre malpractice or maladministration communicated to you by another awarding or industry body. You must notify us promptly if another awarding body removes approval from your centre, regardless of the reason given for this withdrawal. This will allow us to assess any risk to SQA qualifications you offer.

Additional requirements for regulated qualifications

For qualifications subject to statutory regulation by SQA Accreditation, Ofqual or Qualifications Wales, you are required to report any suspected cases of candidate malpractice to SQA. This requirement must be written into your procedures.

SQA will need to share information with the relevant regulator, and if the regulator decides to get involved directly, you and SQA will need to co-operate. There are additional rights of appeal for candidates for regulated qualifications and you must let candidates know about them

How do I apply this criterion?

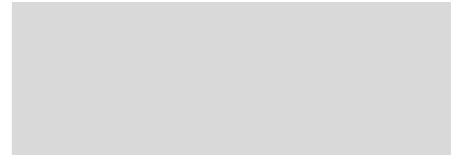
All staff and candidates must understand your procedures relating to malpractice.

Your documented procedure must be made available to all staff involved in the delivery and assessment of SQA qualifications as part of the centre staff induction process. This should also be discussed during staff development activities, including standardisation meetings.

As part of candidate induction, you must outline possible malpractice, such as plagiarism, collusion, copying, disruptive behaviour during an assessment etc.

Any concerns of possible staff or candidate malpractice must be investigated as described in SQA's Standards for Devolved

Investigations, and records maintained and made available to SQA on request.



1.6 No-one with a personal interest in the outcome of an assessment is to be involved in the assessment process. This includes assessors, internal verifiers (IVs) and invigilators

Impact rating: low

Why is this important?

Having a personal interest in the outcome of an assessment amounts to a conflict of interest, which poses a risk to the integrity of assessment. You must take steps to mitigate against this risk.

SQA requirements

All requirements are included within the wording of this criterion.

How do I apply this criterion?

Assessors, IVs and invigilators must be informed at induction of the requirement on them to declare any personal interest, and what the mechanism is for making such a declaration (eg informing their line manager in writing or completing a form and submitting it to the SQA co-ordinator).

Staff are required to make a declaration if they are related to or have a private relationship, or have a close professional or business relationship with a candidate, and are currently deployed to:

- set assessments which this candidate will undertake.
- make assessment judgements on this candidate's evidence.
- internally verify assessment decisions on this candidate's work.
- invigilate an assessment which this candidate is sitting.

Staff are also required to make a declaration if they are related to or have a private relationship with another member of centre staff involved in the internal verification of assessments . For example, where the assessment decisions of an assessor are to be internally verified by a relative.

Conflict of interest also applies where an individual stands to make a personal financial gain from the outcome of the assessment, as opposed to payment to the centre through normal business practices.

Copies of documentation, including details of the action taken to mitigate against the conflict of interest must be retained for a year after completion of the qualification in question.

Examples of evidence

Procedure for managing conflict of interest for assessors, IVs and invigilators

Signed staff declarations

Signatures of assessors and IVs to confirm no personal interest in the outcome of assessment on candidate portfolios.

Information (in staff handbook, or induction checklist, for example) that any interest must be declared, and to whom.

Records of notification of conflict of interest and actions taken to address this.

Additional support

Guidance on writing conflict of interest in assessment procedures can be found in [Systems Approval and Verification: Support Materials](#)

1.7 There must be an effective process for communicating with staff, candidates and SQA

Impact rating: medium

Why is this important?

This is to ensure that all staff are fully aware of SQA's current requirements. This could be information on specific qualifications, or about administrative procedures, or wider policy or qualification development issues. SQA will only send this information directly to the SQA co-ordinator, so you must have an effective internal process for communicating information to relevant staff.

It is important that you can demonstrate that you have established systems for communicating with SQA and candidates in order to keep everyone fully informed.

SQA requirements

All requirements are included within the wording of this criterion.

How do I apply this criterion?

You must state in your roles and responsibilities, who has responsibility for communicating with SQA and for distribution of information from SQA to staff and candidates.

Managers may have responsibility for disseminating information to their staff.

Individual members of staff can also keep themselves up to date using the SQA website and the My Alerts service. You may keep decision logs or minutes of staff meetings.

Other staff, such as assessors or tutors, may have specific responsibility for passing on information to candidates, and receiving information from them.

You may be asked to, or wish to, provide feedback on certain issues to SQA (eg comments on qualifications, feedback on examination papers) and your roles and responsibilities can also cover this.

Examples of evidence

Documented roles and responsibilities (eg SQA co-ordinator, IVs, line managers)

Correspondence file

Intranet

Evidence of digital communication, such as emails, texts, group chat, discussion boards etc

Feedback/report forms

SQA unit feedback forms

Distribution lists

Minutes of meetings

Staff notice boards

Additional support

You can sign up for [MyAlerts - SQA](#) on our website.

1.8 Feedback from candidates and staff must be sought and used to inform centre improvement plans

Impact rating: low

Why is this important?

You must ensure that staff and candidates are given the opportunity to provide feedback on your systems and the SQA qualifications that candidates undertake. This feedback should be reviewed so that your systems and programmes are improved for future participants.

Feedback must be used to:

- assist with monitoring the operation of your systems
- ensure that you continue to comply with SQA criteria
- inform continuous improvement.

SQA requirements

All requirements are included within the wording of this criterion.

How do I apply this criterion?

You must develop procedures and mechanisms to encourage, capture and review feedback from your candidates, and from your assessment team.

Feedback must be reviewed and acted upon. You must keep evidence of action being taken as a result of feedback (where appropriate).

Examples of evidence

Feedback procedure

Feedback forms

Analysis of feedback

Records of actions in response to feedback

Minutes of meetings

1.9 The centre must comply with requests for access to records, information, candidates, staff and premises for the purpose of external quality assurance activities

Impact rating: high

Why is this important?

In order to make an objective assessment of your compliance with SQA quality assurance criteria, our representatives must have access to the relevant people and documentation.

SQA requirements

All requirements are included within the wording of this criterion.

Additional requirements for regulated qualifications

Centres offering regulated qualifications must also allow access to SQA Accreditation, Ofqual or Qualifications Wales staff.

How do I apply this criterion?

SQA will make all requests for access to your SQA co-ordinator. The documented role and responsibilities of your SQA co-ordinator must include the management of SQA external quality assurance.

You may also include procedures for the preparation and management of external verification visits in other documents, such as those on the role of the IV, or assessment and verification procedures.

Examples of evidence

Documented procedures for handling quality assurance activity

Roles and responsibilities

Assessment site checklists

Permission for SQA quality assurance representatives to obtain access

1.10 Outcomes of external quality assurance must be disseminated to appropriate staff and any action points addressed within agreed timescales

Impact rating: medium

Why is this important?

The results of SQA external quality assurance activity must be made known to all relevant centre staff, to encourage positive aspects and good practice, and to make staff aware of any required action or recommendations. Staff must be clear about their roles in addressing action points, and any agreed timescales.

If SQA systems or qualification verification results in required actions, an agreed timescale will be set for addressing these. Sanctions may be applied if you do not fully meet the action points within this timescale. Extensions will only be granted in exceptional circumstances, which must be notified to SQA as soon as they are known.

SQA requirements

All requirements are included within the wording of this criterion.

How do I apply this criterion?

You must have an effective process in place to share SQA quality assurance reports with staff who are involved with SQA qualifications. Quality assurance reports will always be sent to your SQA co-ordinator. The documented role of your SQA co-ordinator must include the responsibility to communicate the outcomes of external quality assurance activity to appropriate staff.

The documented role of your SQA co-ordinator (or other role within your centre responsible for quality assurance) must include the responsibility to ensure that any required actions are met within the agreed timescale.

Exceptional circumstances may arise which make it difficult to fully meet the required actions within the agreed timescale. Requests for extensions should be made at the earliest opportunity and before the agreed action date is reached.

Examples of evidence

Roles and responsibilities eg SQA co-ordinator, IV

Signed distribution list

Corrective action log/report

Minutes of meetings

Category 2: Resources

The centre procedures for managing resources must be documented, implemented and monitored to meet SQA requirements.

2.1 Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.
Impact rating: high
Why is this important? To ensure the validity and integrity of the qualifications offered by SQA, it is important that assessors and IVs have the appropriate qualifications and occupational competence for qualifications they are assessing and/or verifying. Your awareness of these requirements and the processes you have in place for addressing them will be checked during systems verification.
SQA requirements Assessors and IVs must have the occupational experience and understanding, and any necessary qualifications specified in the SQA requirements for the qualification. The requirements can be found in the published guidance for each qualification, such as the assessment strategy, unit specification, operational handbook, arrangements document/group award strategy document.
Additional requirements for regulated qualifications If no alternative timescale is stated in an assessment strategy, assessors and verifiers of regulated qualifications must achieve a relevant assessor/verifier qualification within 18 months of starting to practise. Assessors and IVs for regulated qualifications must undertake and keep records of relevant continuing professional development (CPD) activities.
How do I apply this criterion? If the regulatory requirements or assessment strategy for a qualification state specific requirements for staff qualifications and experience, you must take steps to ensure these are addressed when you recruit and deploy staff as assessors and IVs.

In systems verification, the focus is on the policies and procedures for recruitment, selection and deployment of staff as assessors and IVs.

Checks on the qualifications and occupational competence of staff in relation to specific qualifications will be undertaken during qualification verification

Examples of evidence

Recruitment/selection policy/criteria

Job descriptions/person specification

Job adverts

Policies and procedures for training and development and CPD

Training/CPD records

Training needs analyses

Minutes of relevant meetings

2.2 Assessors and internal verifiers must be given induction training on SQA qualifications and requirements.

Impact rating: medium

Why is this important?

It is important that all new assessors and IVs have an induction programme so they are clear about their roles and responsibilities and are familiar with your centre's processes, procedures and documentation for the qualification. This is not only for staff new to the organisation, but for those who have been allocated these roles for the first time. Updates must also be provided to staff who have been inactive in the roles of assessors and IVs for some time or where there have been any significant changes to your centre's procedures.

SQA requirements

You must keep records of assessor and verifier induction.

Before undertaking any assessment activity, assessors and IVs must be provided with induction training which covers:

- the qualification assessment strategy
- the content of your candidate induction (see criterion 3.1)
- your internal verification procedures (see criterion 4.1)
- your malpractice policy/ procedures (see criterion 1.5)
- your conflict of interest in assessment policy/procedures (see criterion 1.6)
- secure storage and transport of assessment materials (see criteria 4.5 and 5.2)
- your retention policy for candidate assessment evidence (see criteria 4.7)
- your retention policy for candidate records (see criteria 6.4)

How do I apply this criterion?

Assessor and verifier induction may be combined with your organisation's new staff induction, covering specific and generic information about your centre, but the role-specific information in the topics above must be included in full.

As a minimum, your record of assessor and verifier induction can be a checklist, but you may provide induction information using other methods, such as a staff handbook, an online module or a classroom presentation.

Examples of evidence

Induction checklist (examples of checklist signed by current assessor/IV)

Staff handbook

Staff induction pack

Additional support

An exemplar assessor and verifier induction checklist can be found in [Systems Approval and Verification: Support Materials](#)

2.3 There must be a documented system for initial and ongoing reviews of assessment environments; equipment; and reference, learning and assessment materials.

Impact rating: medium

Why is this important?

It is your responsibility to ensure that you have sufficient resources to enable all candidates to achieve the competencies defined in the qualifications you offer.

You must review your resources regularly to ensure that they remain relevant, current and available in quantities appropriate to the qualification requirements and candidate numbers.

SQA requirements

Colleges in Scotland with devolved authority for approval must have a documented approval procedure and hold records of the approval process they carried out before submitting notification to SQA. These records must be retained for three years.

How do I apply this criterion?

Roles and responsibilities relating to approval for new qualifications must be documented.

Initial review of resources is part of the approval process.

When you seek approval for new SQA qualifications you must plan and allocate staff and physical resources, and learning, teaching and assessment materials, before you submit approval forms to SQA.

All communication between your centre and SQA about qualifications approval must be through the SQA co-ordinator. This is to ensure that the SQA co-ordinator is aware of additional approval applications and that these have been fully processed through your own internal procedures before being submitted to SQA.

Your internal procedures must reflect the size and complexity of your organisation. Organisations with devolved authority for approval must have full internal approval procedures.

All organisations must be able to evidence a link between resource and activity planning and making approval submissions to SQA.

You must document ongoing reviews of assessment environments and equipment, and of reference, learning and assessment materials. You may have one procedure for this, or it may be covered under a range of activities (eg staff meetings, internal verification, planning, feedback from staff and candidates).

Examples of evidence

Initial review

Roles and responsibilities for approval

Documented internal procedure for approval

Minutes of meetings, recording templates for planning new qualifications and approval submissions

Completed approval forms

SQA approval reports

Qualifications verification reports after approval

Ongoing review

Documented system of review

Minutes of relevant meetings

Procurement records

Library contents

Internal verification records relating to review of assessments

Records of additional sites

Records of review

2.5 All sites where candidates undertake assessments for SQA qualifications must be safe and appropriately resourced, and must provide access for candidates, staff and SQA personnel.

Impact rating: Medium

Why is this important?

Some assessment sites may be owned or managed by another organisation that has its own processes, policies and procedures. These are referred to in SQA guidance as 'alternative assessment sites'.

You must ensure that your quality assurance systems extend to all sites you use to assess candidates and ensure that all alternative assessment sites have appropriate resources for each qualification you assess there, and that candidates have a consistent experience wherever they are located.

SQA verifiers will report to SQA any concerns they have about safety or access arrangements at an assessment site they have seen.

SQA requirements

All requirements are included within the wording of this criterion.

How do I apply this criterion?

If you use alternative assessment sites (as defined above), you must provide documentation that records the checks you have undertaken to ensure their suitability.

You must ensure that access to alternative assessment sites is available at suitable times for candidates and staff. You must also ensure that, if requested, access for SQA staff can be arranged.

Guidance on the use of assessment sites owned by other organisations is available on SQA's website. This includes:

- a declaration form for sites in other countries/nations
- exemplar site checklists, which you can use in their entirety, or use to ensure that your own documentation incorporates all the checks required by SQA.

Examples of evidence

Procedures for managing assessment sites

Completed site checklists (or other documentation covering the same points)

Signed agreements with other organisations that own sites you use for assessment

Additional support

[Guidance on the Use of Alternative Assessment Sites and Partnership Agreements](#) can be found on our website.

Category 3: Candidate support

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

3.1 Candidate induction must include information about the SQA qualification and SQA requirements

Impact rating: high

Why is this important?

Providing this information at induction ensures your candidates are aware of the procedures relevant to the qualification they are undertaking and know about their responsibilities and rights.

SQA requirements

You must keep records of candidate induction.

Before you submit entries, candidates must be provided with an induction which covers:

- the content and structure of the qualification
- the roles and responsibilities of the candidate, assessor, IV and external verifier
- information on guidance and support available to them
- information on how and when assessment will take place and the opportunities for re-assessment (including charging policy, if relevant)
- how feedback on assessments will be provided
- your commitment to providing equal access to assessment
- information on how candidates with additional support needs or alternative assessment needs can request reasonable adjustments to assessments
- your malpractice policy and procedures, and any declarations of authenticity
- your complaint/grievance procedures
- your internal assessment appeals procedures
- notification that their personal information will be sent to SQA for the purposes of entries and certification, and maintenance of their record of achievement

How do I apply this criterion?

Induction materials may be provided to candidates in hard copy or made available for them to access electronically.

Depending on the nature of the programme and mode of attendance, candidate induction may be as simple as providing these materials, or induction activities may take place over a longer period at the start of the programme.

Examples of evidence

Policies and procedures for candidate guidance and support

Candidate/learner agreement

Induction pack/checklist

Course joining Instructions

Induction presentation slides

Information on support services available

A 'shell' portfolio

List of reference/learning materials

Additional support

An exemplar candidate induction checklist can be found in [Systems Approval and Verification: Support Materials](#)

Candidate induction checklists can be provided to ensure that staff cover all the required information, with candidates retaining their own record of what was covered. You may require candidates to sign the checklist to confirm they were provided with all the information.

3.4 Policies and procedures must give SQA candidates equal opportunities for assessment

Impact rating: medium

Why is this important?

As an SQA-approved centre, you must ensure that everyone eligible to take a qualification has an equal chance of benefitting from the services you provide. There must be no discriminatory barriers in the way of anyone who wants to take SQA qualifications.

SQA requirements

There must be a documented commitment to equal access to assessment.

How do I apply this criterion?

SQA systems verification focuses on equal opportunities in relation to SQA qualifications and the candidates undertaking them.

Within the constraints of available resources and current legislation, you must ensure that no-one is discriminated against because of any of the protected characteristics:

- Age
- Disability
- Gender
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race and ethnicity
- religion and belief
- sexual orientation

You must cover all these protected characteristics in your policy.

Examples of evidence

Policy statement on equal access to assessment

Documented assessment arrangements procedure and/or statement

Information on procedures and support services available in candidate induction handbook or materials.

Statement in roles and responsibilities of assessors

Initial application form which requests disclosure on any disability and/or additional support needs

3.5 Individual candidates' requirements for assessment arrangement must be discussed, identified, implemented and recorded

Impact rating: medium

Why is this important?

Assessment arrangements, or reasonable adjustments to assessment allow candidates who are disabled, and/or who have been identified as having additional support needs or alternative assessment needs, appropriate arrangements to access the assessment without compromising its integrity.

Candidates are individuals with a diverse range of needs, and it is important that you consider their individual assessment needs when selecting the most appropriate method of assessment.

This applies to both internal and external assessment, although you are only required to notify SQA of proposed arrangements for external assessments.

SQA requirements

You must inform all candidates at induction that assessment arrangements to address additional support needs are available.

You must have procedures for managing assessment arrangements for both internal and external (where applicable) assessments, which cover:

- how you identify and evidence candidate needs
- how needs are met across different subjects/units
- how recommendations for assessment arrangements are independently confirmed *
- how you record and communicate any assessment arrangements put in place
- how you will manage the review of candidate needs and support over time

* Before they are implemented, arrangements for individual candidates must be discussed by an assessor and IV (or other suitably qualified staff member). A record which confirms that these arrangements are suitable and practicable must be kept. This means no single assessor can implement adjustments to an assessment without confirmation from another staff member. These arrangements should be reviewed over time, and any further adjustments recorded.

How do I apply this criterion?

You must consider how you will address any barriers to assessment your candidates may have. These might include: nightshift working; physical/sensory impairment; English as a second language; or learning difficulties. Barriers must be removed wherever possible, but any

Examples of evidence

Equal opportunities policy specific to training and assessment

Policy statement on equal access to assessment

Procedures for assessment arrangements

Signed distribution list

Relevant minutes of meetings

Additional support

Guidance on assessment arrangement procedures can be found in [Systems Approval and Verification: Support Materials](#)

[Guide to Assessment](#)

[Guide to Reasonable Adjustments](#)

changes should not give an unfair advantage over other candidates or compromise the integrity of the assessment.

Candidates undertaking external assessments must be asked to give consent for SQA to share their personal information relating to assessment arrangements.

You may also need to ask candidates to give consent for this information to be shared with other centres, where relevant (eg school pupils attending your centre or college under partnership arrangements) (see criterion 2.5).



3.6 Candidate complaints must be handled in line with a documented complaints procedure which meets SQA requirements

Impact rating: medium

Why is this important?

SQA wants to ensure that candidates undertaking our qualifications are provided with a complaints/grievance process that allows candidates to raise concerns relating to assessment.

A robust complaint handling procedure will provide candidates with a structured mechanism to raise assessment-related concerns with your centre and allow investigation and response/resolution.

SQA requirements

You must provide candidates undertaking SQA qualifications with a complaints/grievance process that allows them to raise concerns relating to assessment.

The procedure can be invoked at any stage of a candidate's qualification and should be used for complaints about assessment-related matters. However, it must be clear that disagreement about academic judgement will not be handled through the complaints procedure and must be processed through the appeals procedure (see criterion 4.8).

If a candidate remains dissatisfied at the end of your centre's complaints procedure, you must provide full and clear information about the types of independent external review available following completion of your own complaints procedure. For assessment-related complaints, candidates must be informed that they may have the right to escalate their complaint to SQA Awarding Body and be provided with details of how to do this.

Additional requirements for regulated qualifications

Candidates undertaking regulated qualifications also have the right to ask the relevant regulator (SQA Accreditation, Ofqual or Qualifications Wales) to look at their complaint if they remain dissatisfied after your final response has been issued, and they have also exhausted SQA awarding body's complaints procedure. This must be stated in your centre's procedures and explained to candidates when providing your complaint decision if you deliver regulated qualifications.

How do I apply this criterion?

You must have a documented complaints/grievance procedure and ensure that this is included as part of candidate induction. Reasonable timescales must be attached to each stage of the process. There must be at least two people with whom candidates can raise complaints initially.

Your procedures must also include mechanisms for:

Examples of evidence

Documented complaints or grievance procedure which includes information on when candidates can complain to SQA and/or SQA Accreditation or (where applicable) to the SPSO

Procedure contained within candidate induction materials

Logs of complaints received, and action taken

Analysis of complaints received and any actions arising

Additional support

Guidance on writing complaints procedures can be found in [Systems Approval and Verification: Support Materials](#)

[Customer Complaints and Feedback.](#)

- telling candidates about the complaints procedure
- notifying the candidate of the outcome and subsequent actions
- appropriate signposting for external review
- recording and retaining records

Where the candidates are employees of your centre, your documented procedure may be staff grievance procedures, but the escalation processes described in the SQA requirements and Additional requirements for regulated qualifications sections above would still apply and must be clearly communicated.

You must inform all candidates that SQA can consider complaints from any candidates about assessment-related issues — including broader issues such as the conduct of and environment for assessment — but only if the candidate has already exhausted your centre’s complaints procedure, or the centre has unreasonably failed to apply its procedure correctly.

SQA will not consider complaints about the wider experience of being a student (such as student support services, funding, student facilities).

Disagreement about academic judgement will not be handled through the complaints procedure and must be processed through the appeals procedure (see criterion 4.8).

Complaints must be analysed for trends, to inform quality improvement in your centre. Details of any complaints or grievances must be logged and retained for review by SQA quality assurance staff.

Complaints ombudsmen

If your centre falls within the jurisdiction of a complaints ombudsman, for example the Scottish Public Services Ombudsman (SPSO), you should be aware of any additional requirements to meet statutory obligations.

Category 4: Internal assessment* and verification

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

* Internal assessment: An assessment for an SQA qualification where assessment judgements are made within the centre. Internal assessments are subject to both internal verification by the centre and external verification by SQA. This includes assessments which are externally set, but internally marked.

4.1 Internal assessment and verification procedures must be documented, monitored and reviewed to meet SQA requirements

Impact rating: medium

Why is this important?

Internal verification is a crucial element of SQA's quality assurance. It ensures that all candidates entered for the same qualification are assessed fairly and consistently to the specified standard.

SQA requirements

Your internal verification procedures must include the three stages of internal verification which are pre-assessment, during assessment, and post-assessment.

How do I apply this criterion?

It is a requirement of being an SQA-approved centre that you operate an effective and documented internal quality assurance system. You must regularly review the effectiveness of your procedures and make any necessary improvements. You must also ensure that changes made by SQA are adopted.

Your documented internal verification policy and procedures must cover the following:

Stage 1 (Pre-assessment)

At the pre-assessment stage, your procedures must describe how you:

- check assessment instruments for validity, currency and fitness for purpose, including SQA-devised assessments
- submit centre-devised assessments to SQA for prior verification, where appropriate
- ensuring all assessors and IVs have a common understanding of the standards required, even when assessments have been published by SQA

Stage 2 (During assessment)

At the during assessment stage, your procedures must describe:

- how and when you internally verify candidate evidence

Examples of evidence

Documented internal verification procedure

Minutes of assessor/IV meetings

Records of standardisation

Records of sampling activity

Schedules of internal verification activities

Documented feedback to assessors

Review records such as action notes

Internal audit records

Document control records logging any changes to procedures

Notification to staff of changes to procedures

Additional support

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

[Internal Verification Toolkit Guide to Assessment](#)

Sector assessment strategies can be found by [SVQ group](#) on SQA's website

- the documentation you use to record assessment and verification activities
- your schedule of assessor and IV meetings and how these are recorded
- how you record standardisation activities
- how you minimise the risk of plagiarism
- the assessment and internal verification records you keep

Sampling candidate evidence

Within this stage you must also state your centre's sampling strategy.

You should consider a risk-based approach to sampling which takes account of factors such as:

- new or inexperienced assessors and IVs
- new or revised qualifications
- revised assessment instruments
- previous quality assurance reports
- methods of assessment
- assessment location
- mode of delivery

Stage 3 (Post-assessment)

At the post-assessment stage your procedures must state how you review and update your assessment and internal verification processes.

4.5 Assessment materials and candidate evidence (including examination question papers, scripts and electronically-stored evidence) must be stored and transported securely

Note: This criterion relates to assessment materials for internal assessments only. There is a separate criterion (5.2) relating to external assessment.

Impact rating: high

Why is this important?

This is to ensure that the security and integrity of the assessment material is maintained. In particular, this relates to assessments where a candidate would gain an unfair advantage by seeing the assessment in advance and the assessment is carried out under controlled conditions (for example, an HN Graded Unit or SQA Advanced Graded Unit examination).

This includes both assessments developed within your centre and assessments produced and published by SQA.

Candidate evidence must be stored securely, to minimise the risks of malpractice and to ensure that it is available for internal and external verification.

SQA requirements

You must make all staff aware that any breach in the security of the assessment materials published on the secure site must be reported immediately to SQA.

How do I apply this criterion?

Your arrangements for secure storage and transport must be documented and covered in assessor and IV induction (see criterion 2.2).

You must have suitable practical arrangements in place in all assessment sites for the secure storage of assessment materials and candidate evidence. Transport arrangements within and between assessment sites must also ensure the security of the materials.

SQA's secure website for centres is an online resource containing assessment exemplar content and other secure information used in the delivery of our suite of qualifications. To access the secure site, you must be approved for qualifications which have materials on the secure site. A username and password are required to access the secure site, and these are issued to SQA co-ordinators. Access to the secure site for assessors and IVs is granted at the discretion of the SQA co-ordinator.

It is your responsibility to ensure that the security of assessment materials accessed from the secure site is maintained within your centre.

Examples of evidence

Physical evidence of secure storage of assessment materials and candidate assessments

Documented procedure for storing assessment materials, and for notifying SQA of any breaches of security

Roles and responsibilities, eg of SQA co-ordinator, assessors

Assessor and IV induction checklists

Additional support

Guidance on writing Security of Internal Assessments

Procedures can be found in

[Systems Approval and Verification: Support Materials](#)

4.7 Candidate evidence must be retained in line with SQA requirements

Impact rating: high

Why is this important?

Candidate assessment evidence must be retained 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.

SQA requirements

You must retain candidate assessment evidence for the periods set out in the Evidence Retention Requirements Table on the SQA website.

If an appeal against an internal assessment result is made:

You must retain records, including all materials and candidate evidence, until the appeal has been resolved.

If an investigation of suspected malpractice is carried out:

You must retain related records and documentation for three years for non-regulated qualifications (and six years for regulated qualifications, see below).

If an appeal to SQA against the outcome of a malpractice investigation is made:

Assessment records must be retained for six years.

If an investigation involving a potential criminal prosecution or civil claim is carried out:

Records and documentation must be retained for six years after the case and any appeal has been heard. If there is any doubt about whether criminal or civil proceedings will take place, you must keep records for the full six-year period.

Additional requirements for regulated qualifications

If an appeal is made to SQA against an internal assessment result in a regulated qualification:

Assessment and internal verification records must be retained for six years thereafter unless there is a legitimate reason to retain records for a further period.

If an investigation is made of suspected malpractice in a regulated qualification:

You must retain related records and documentation for six years.

How do I apply this criterion?

You must note the evidence retention requirements for the specific qualifications you are approved to offer. These are displayed on the Evidence Retention Requirements Table on the SQA website.

Examples of evidence

Documented retention policy/ assessment policy which includes retention of SQA candidate evidence

Assessor and IV induction checklist

Description of the arrangements in place for ensuring SQA verifiers have appropriate access to candidate evidence during verification events

Physical evidence of storage of candidate assessment evidence

Additional support

[Retention of Candidate Evidence Table](#)

[The Appeals Process: Information for Centres](#)

[Malpractice: Information for Centres \(sqa.org.uk\)](#)

You must document the specific retention requirements which apply to your centre and cover these in induction for assessors and IVs (see criterion 2.2)

Candidate assessment evidence may be in electronic, paper, video or audio formats. Whatever the format, it must be stored securely (see criterion 4.5).

There are separate requirements for retention of records of assessment outcomes/candidate achievement (see criterion 6.4).



4.8 Internal assessment appeals must be handled in line with a documented procedure which meets SQA requirements

Impact rating: medium

Why is this important?

If a candidate disagrees with an internal assessment decision, he/she must have the right to appeal. They must know the grounds on which an appeal can be made, and the procedure for doing so.

SQA requirements

All requirements are included within the wording of this criterion.

Additional requirements for regulated qualifications

Candidates undertaking regulated qualifications have additional stages of appeal:

- to SQA (the awarding body), once the centre's appeals procedure has been exhausted
- to SQA Accreditation, Ofqual or Qualifications Wales if they feel that the centre and/or SQA (the awarding body) has not dealt with the appeal appropriately

SQA Accreditation, Ofqual or Qualifications Wales cannot overturn assessment decisions or academic judgements but may investigate the effectiveness of your centre's and/or SQA's appeals process and require corrective action.

How do I apply this criterion?

You must have a documented internal appeals procedure and ensure that this is included as part of candidate induction (see criterion 3.1).

Reasonable timescales must be attached to each stage of the process.

Your appeals procedure must include mechanisms for:

- dissemination of information about the procedure to candidates
- notifying the candidate of the outcome and subsequent actions
- recording and retaining records

There must be at least three internal stages in your procedure, for example:

- Stage 1: the candidate's first point of contact is the assessor, then if still unresolved...
- Stage 2 : IV, then if still unresolved...
- Stage 3 : independent third party (part of organisation, or another centre, but not SQA)

Details of any appeals must be retained for review by SQA quality assurance staff.

If your centre offers regulated qualifications, you must inform candidates that they have additional stages of appeal (see Additional requirements

Examples of evidence

Documented appeals procedure, with appropriate stages

Document explaining the rights of candidates for regulated qualifications to appeal to SQA (awarding body) and the appropriate regulator

Procedure contained within candidate induction materials

Logs and records of internal assessment appeals

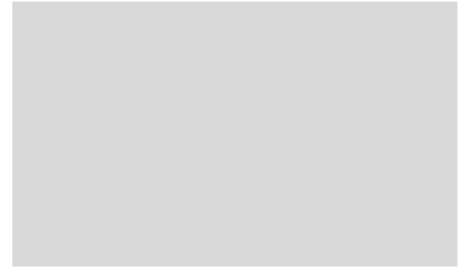
Additional support

Guidance on writing internal assessment appeals procedures can be found in [Systems Approval and Verification: Support Materials](#)

[The Appeals Process: Information for Centres](#)

for regulated qualifications, above). You may include this information within your centre's assessment appeals procedure, or a separate document provided to candidates (eg at induction) on regulated qualifications.

See Criteria 4.7 and 6.4 for information on retention of evidence in the case of an appeal to SQA.



Category 5: External assessment*

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

* **External assessment:** An assessment set and marked by SQA examiners. There are very few vocational qualifications which have externally marked elements, so this category will often not apply. National Courses with external assessments will not be verified under these criteria. are subject to both internal verification by the centre and external verification by SQA. This includes assessments which are externally set, but internally marked.

5.1 Assessment evidence must be the candidate's own work, generated under SQA's required conditions

Impact rating: high

Why is this important?

Any irregularity in the conduct of an external examination can have a serious impact on all candidates taking the examination, not just those in one centre.

You must take the appropriate steps to ensure that no instances of malpractice occur, and that evidence is authenticated.

SQA requirements

Conditions of assessment will be qualification-specific and must be communicated and adhered to within your centre.

You must ensure that appropriate resources are made available so that no candidates are disadvantaged.

How do I apply this criterion?

You must be able to demonstrate understanding and the correct implementation of SQA requirements for:

- exam conditions
- secure storage and handling of examination papers and candidates' completed examination scripts
- online testing (if applicable)

You must have clearly allocated responsibilities, eg those of exams officers and invigilators.

You must also provide documented evidence that you have assessed and reviewed accommodation and facilities to ensure they are appropriate for all candidates, and that the required resources are in place for scheduled external assessments (eg IT).

Examples of evidence

Roles and responsibilities eg of SQA co-ordinator, exams officer, invigilators

Examination procedure documentation

Online testing requirements: evidence of notification to candidates eg letters, emails, noticeboards

Minutes of relevant meetings

Guidance to candidates on malpractice eg at induction, signed candidate disclaimers on coursework

Invigilator guidance, roles and responsibilities

Procedures for checking candidate identity at examinations

Room plans

Handbook for invigilators

Inventories

Procurement records

ICT requests (eg for assessment arrangements, support for online testing)

Staff emails/memos

5.2 Assessment materials and candidate evidence, (including examination question papers, scripts and electronically-stored evidence) must be securely stored and transported

Impact rating: high

Why is this important?

This is to ensure that the security and integrity of the examination material is maintained throughout the examination diet.

SQA requirements

Question papers and any other confidential examination materials must be stored securely at your centre's registered address in a secure room solely assigned to examinations for the duration of the examination diet. Only persons authorised by the head of centre must be allowed access to this facility.

You must inform SQA immediately if the security of question papers or confidential examination materials is breached.

You must also inform SQA if your arrangements for secure storage of SQA examination papers and candidate evidence change.

How do I apply this criterion?

You must have suitable practical arrangements in place in all assessment sites that are used for external assessment.

You must document:

- the roles and responsibilities of relevant staff
- how you will manage the secure storage of examination question papers and materials, from the point when the papers and/or materials are delivered to your centre, until candidate scripts are uplifted or returned to SQA

Transport arrangements within and between assessment sites must ensure the security of the materials.

SQA staff and appointees have the right of access at any time to your centre's secure storage facilities. It is your responsibility to plan and arrange for the possibility of visits by SQA staff or appointees, as visits may be made without prior notice.

Examples of evidence

Physical evidence of secure storage of examination materials and candidate assessments

Documented procedure for storing assessment materials, notifying SQA of any breaches of security, checking examination materials upon receipt, and ensuring that examination scripts and assessments are stored and despatched securely

Roles and responsibilities, eg of SQA co-ordinator, exams officer, invigilators

Additional support

[Joint Council for Qualifications: Instructions for Conducting Examinations](#)

5.3 The centre must submit, where appropriate, within published timelines, results services requests

Impact rating: medium

Why is this important?

To ensure fairness for candidates in the external assessment process, SQA have services in place to ensure that individuals who have suffered genuinely exceptional circumstances, such as a bereavement or illness, before or around the examination period, are not disadvantaged. This also provides a 'safety net' check of final exam results.

Both candidates and centre staff involved in external assessments must be aware of these services and follow the required processes and timescales.

SQA requirements

Qualification-specific requirements for externally-assessed elements must be communicated and adhered to within your centre.

How do I apply this criterion?

Centres with candidates undertaking external assessments have recourse to two results services:

Exceptional circumstances

This service will assist candidates who could not sit an exam, or who sat an exam but whose performance suffered, because of exceptional circumstances.

Post-results service

This service will run after candidates have received their result. If your centre is concerned about a candidate's result, you can request a clerical check and/or a marking review of the exam paper.

Further information can be found in the Group Award Specification for the relevant subject

Examples of evidence

Documented processes for managing and submitting exceptional circumstances and post-results service requests to SQA

Roles and responsibilities of staff which include: gathering evidence, making and approving recommendations on submissions to be made, submitting requests

Information provided to candidates in induction materials about results services for qualifications with externally-assessed elements

Category 6: Data Management

The centre procedures for supplying complete, current and accurate information to SQA for the purposes of registration, entries and certifications must be documented, implemented and monitored to meet SQA requirements.

6.1 Candidate's personal data submitted by centres to SQA must accurately reflect the current status of the candidate

Impact rating: high

Why is this important?

SQA holds personal data on candidates in order to identify and certificate candidates.

SQA may have to contact candidates directly and therefore needs to have home addresses. There is also a risk that candidate correspondence/certificates might be sent to the wrong centre.

SQA requirements

Candidates' home addresses must be used, other than in reasonable circumstances (eg the candidate does not have a home address). If your centre temporarily changes any addresses (for example so that the certificates are sent to the centre itself), you must reinstate the candidates' home addresses immediately upon receipt of the certificates. You must have a documented procedure in place to guide this.

Your centre must have a documented data management policy and abide by the Data Protection principles in relation to both the collection of data for transmission to SQA and in the dissemination of data from SQA.

Candidates must be informed that their personal data will be sent to SQA for the purposes of entering them for an SQA qualification, for certification and for maintenance of their record of attainment. [SQA's Privacy Statement](#) must be provided to candidates so that they can be made aware how SQA will use the candidate information collected.

How do I apply this criterion?

It is essential that you have documented processes in place that will ensure that complete, current and accurate data is supplied to SQA.

Your procedure must cover

Personal data

You provide personal data to SQA when you make a Registration Creation.

'Registration' is the term used by SQA for the process of recording candidate details (ie full name, date of birth, gender, address) onto SQA

Connect.

Examples of evidence

Documented data management policy and procedures

Roles and responsibilities, eg of data management staff

Application and/or enrolment forms which include a statement informing candidates that their personal information will be sent to SQA, and which give the web address of SQA's Privacy Statement

SQA data showing the addresses held against candidates and their entry, results and certification status

If the centre address is used for receipt of certificates: Documented procedure for maintaining and updating candidates' home addresses, and reinstating home addresses after certification

Additional support

Guidance on writing data management procedures and an example data management flowchart can be found in [Systems Approval and Verification: Support Materials](#)

Your procedures must take account of the fact that registration is a one-time only process. In fact, the majority of Scottish candidates will already be registered, but in certain circumstances it may be necessary to register a candidate.

Your centre must check whether candidates have a Scottish Candidate Number (SCN) before sending their details for initial registration. If a candidate already has an SCN, you may have to update the candidate's personal data, for example to enter their current address.

Appropriate centre staff must be aware of, and implement, your centre's step-by-step procedures for data transfer between the centre and SQA, to ensure that accurate certification takes place.

GDPR/Candidate notification

SQA expects all centres to comply with the General Data Protection Regulation. Candidates must be **informed** that their personal details will be passed to SQA (as described above in the SQA requirements). This could be included as a statement on a candidate application or enrolment form. SQA does not require centres to obtain consent for this processing.

Centre use of personal data

Personal information supplied by SQA is for use as an SQA Approved centre only. It must not be used for marketing purposes, or any purpose which could reasonably be objected to by a candidate.

You must hold information securely (this applies to electronic files and hard copies) and provide details about your centre's security measures and access controls to candidates.

Instructions within SQA Connect on how to notify SQA of changes to home addresses

6.2 Data on candidate entries submitted by centres to SQA must accurately reflect the current status of the candidate and the qualification

Impact rating: high

Why is this important?

Your centre must notify SQA of registered candidates undertaking units and awards as soon as possible after they have enrolled on their programme of study. This is to ensure that:

- learners undertaking SQA qualifications are entered as SQA candidates, with the associated responsibilities and entitlements
- SQA can plan qualification verification visits effectively
- there is accurate certification of candidates when results are submitted

Entry information must be kept up to date to avoid delays in the release of certificates.

You must have a process in place for checking the status of the qualification, to ensure that you are able to submit entries, and the candidates can be result and certificated, on time. Entries cannot be accepted for qualifications which your centre is not approved to offer, or where the qualification is finished or in its lapsing period.

SQA requirements

You must have a process in place to ensure that your centre is approved to offer the qualification before starting delivery and making entries, and to check that the correct unit and group award codes are used for entries.

Candidate entries must be made as soon as possible after their enrolment on the programme. (Except for qualifications which are part of an examination diet with associated key dates.)

You must update candidate data at the recorded completion date, by submitting results, withdrawing the candidate (from units and group awards, as appropriate) or, if a candidate has been granted an extension, extending the completion date.

You must not submit entries and results for the same candidate at the same time. Exceptions to this are courses of a very short duration eg between one and three days. Examples include Emergency First Aid at Work and Street Works Reassessment.”

If you deliver qualifications which are verified as group awards, rather than as individual units (eg SVQs and Skills for Work courses), you must submit a candidate’s entry for the group award at the start of their study.

Examples of evidence

Documented data management policy which includes procedures for gathering and submitting entries and cleansing entry data

Internal records of entries

Candidate records on SQA Connect

Additional support

Guidance on writing data management procedures and an example data management flowchart can be found in [Systems Approval and Verification: Support Materials](#)

Additional requirements for regulated qualifications

Regulated qualifications (including all SVQs) are accredited for a finite period. This is known as the accreditation period. The accreditation period has a start date, a lapsing date and an end (or finish) date. The qualification is live between the start date and the lapsing date.

Candidates can only be entered on the qualification until the lapsing date. The lapsing period is the period between the lapsing date and the end (or finish) date. Certificates cannot be issued after the end date. This means that any candidates who are entered on the qualification must be entered before the lapsing date and must have successfully completed it by the end date.

Some qualifications have pre-set lapsing periods, eg two years for an SVQ 2.

Your centre must ensure that candidates seeking certification for a full SVQ, SVQ unit, a Workplace Core Skill unit or the assessor/verifier units are entered for the award at least 10 weeks before a claim for certification is made ('10-week rule').

How do I apply this criterion?

Entry data is supplied to SQA initially as an Entries Creation. As candidates progress through qualifications, data is submitted to SQA as an Entries Update.

It is essential that you have documented processes in place to ensure that complete, current and accurate data is supplied to SQA. Appropriate centre staff must be aware of, and implement, your centre's step-by-step procedures for data transfer between the centre and SQA to ensure that accurate certification takes place.

You must observe the relevant completion dates, finish dates and lapsing periods for qualifications. You can find these details through the Navigator function of SQA Connect

Based on your qualification type and client base, your centre must make decisions on when and how often data cleansing and updating should take place (for example, to extend completion dates where a candidate has an agreed extension, or to withdraw entries when the candidate is no longer active).

Procedures for data cleansing must be included in your documented system of data management.

SQA Navigator can be used to check the approval status of qualifications, and the completion dates and entry status codes of candidates. The qualifications have one of five status codes:

- Status code 1 — open entry
- Status code 2 — withdrawn entry
- Status code 3 — provisional result
- Status code 4 — final result
- Status code 5 — certificated result

6.3 Data on candidate results submitted by centres to SQA must accurately reflect the current status of the candidate and the qualification

Impact rating: high

Why is this important?

This is to ensure that results are submitted at the appropriate time in order to:

- allow SQA the opportunity to carry out quality assurance
- give SQA sufficient time for the smooth operation of certification processes
- prevent any unnecessary delays to candidates receiving the certificate that they are entitled to

SQA requirements

Qualification-specific requirements for the submission of candidate results must be communicated and adhered to within your centre.

Additional requirements for regulated qualifications

For regulated qualifications, certificates cannot be issued after the SQA finish date. This means that any candidates who are entered on the qualification must have successfully completed it and been resulted by the finish date (see criterion 6.2 for an explanation of the finish date).

SVQ awards and units, workplace Core Skills units and assessor and verifier units cannot be certificated within 10 weeks of the entry date of the qualification ('10-week rule').

How do I apply this criterion?

It is essential that you have documented processes in place to ensure that complete, current and accurate data is supplied to SQA. Appropriate centre staff must be aware of, and implement, your centre's step-by-step procedures for data transfer between the centre and SQA to ensure that accurate certification takes place.

Your procedures must include details of how results, once they have been confirmed through your centre's internal quality assurance processes, will be passed from assessors/IVs to data management staff, with timescales for the processing of results.

Note: There are specific requirements and published key dates for National Qualifications, if your centre is approved to offer these qualifications you must note and adhere to these. HN, SQA Advanced and Vocational qualifications are not subject to published timelines.

Examples of evidence

Documented data management policy and procedures

Assessment and internal verification procedures

Resulting records

Candidate records on SQA Connect

Additional support

Guidance on writing data management procedures and an example data management flowchart can be found in [Systems Approval and Verification: Support Materials](#)

6.4 There must be an effective and documented system for the accurate recording, storage and retention of assessment records, internal verification records and candidate records of achievement in line with SQA requirements

Impact rating: medium

Why is this important?

This is to ensure that accurate records of candidate achievement are retained securely to assist any future quality assurance enquiries and to minimise any risk of wrongful certification claims.

It also helps to maintain national standards by allowing for the review of assessment over time.

SQA requirements

Following completion of SQA qualifications, your centre must keep, for one calendar year, the following records:

- a list of candidates registered with SQA for each qualification offered in your centre
- details of candidate assessment, including the name of the assessor, location, date and outcome
- details of internal verification activity
- details of certificates claimed

These records must be made available to the external verifier and SQA on request.

Records must be stored securely and in a retrievable format.

If an investigation of suspected malpractice is carried out:

You must retain related records and documentation for three years for non-regulated qualifications (six years for regulated qualifications. See Requirements for regulated qualifications below)

If an appeal to SQA against the outcome of a malpractice investigation is made:

Assessment records must be retained for six years.

If an investigation involving a potential criminal prosecution or civil claim is carried out:

Records and documentation must be retained for six years after the case and any appeal has been heard.

If there is in any doubt about whether criminal or civil proceedings will take place, your centre should keep records for the full six year period.

Examples of evidence

Records of candidate assessment which include the name of the assessor, location, date and outcome

Results sheets/records

Portfolio log sheets

Secure storage policy

Physical evidence of secure storage

Records of internal verification activity

Records of certificates claimed

Additional support

[Retention of Candidate Assessment Records Table](#)

[Guide to Assessment](#)

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

Additional requirements for regulated qualifications

Centres delivering Ofqual or Qualifications Wales regulated qualifications must retain records of candidate assessment for at least six years.

If an appeal against an internal assessment result is made:

You must retain records, including all materials and evidence, until the appeal has been resolved.

If an appeal is made to SQA against an internal assessment result in a regulated qualification:

Assessment and internal verification records must be retained for six years thereafter unless there is a legitimate reason to retain records for a further period.

How do I apply this criterion?

You must document your system for the accurate recording and storage of candidate records, including required retention periods, within your data management procedures. The systems verifier may ask you to provide physical evidence of the secure storage of your records.