Systems Approval and Verification:

Support Materials

Contents

Introduction

Who is this guide for?

This guide describes how to develop effective quality assurance systems which meet the SQA Quality Assurance Criteria. It will help all potential new centres as well as existing approved centres. Depending on your status as an SQA approved centre, you should read this guide in conjunction with either:

♦ Systems and Qualification Approval: Guidance for centres
♦ Systems Verification: Guidance for centres

What does this guide cover?

We recognise that, after reading the approval or verification guidance, you may require additional support to develop effective systems which suit your type of organisation. This guide provides further information, guidance and examples for the most commonly queried criteria.

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If you have questions about your quality assurance systems for a criterion not covered in this guide, please contact the SQA Quality Enhancement Team asv@sqa.org.uk

Writing roles and responsibilities

Criterion 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

In your introduction

Describe how documenting detailed roles and responsibilities provides clarity for:

- the person or people undertaking the role
- someone who is new to the role
- all members of staff in the centre who are involved with the delivery, assessment and quality assurance of SQA qualifications
- the management team in your centre
- SQA quality assurance personnel (eg the approvals and verification teams, qualification verifiers, systems verifier)

You must document the roles and responsibilities for those involved in:

The management of SQA qualifications

For most approved centres this will be the centre's SQA co-ordinator. Having an effective SQA co-ordinator is essential to being a successful SQA centre.

You must identify one person to undertake this role and ensure that they understand what is required and are given sufficient authority. This person will be responsible overall and must be the single contact for SQA. You must provide us with:

- the centre co-ordinator's own company e-mail account and phone number or
- a specific mailbox for receipt which will be monitored/checked daily

The responsibilities of the SQA co-ordinator are listed below. These can be split between different members of staff and/or included in a procedure, but you must allocate all the responsibilities.

The administration of SQA qualifications

SQA has specific requirements for the data management role, these are listed below.

In many cases data management responsibilities are also undertaken by the SQA co-ordinator. If this will apply to your centre, you may combine the roles.

If data management will be undertaken by another person or other people, you must identify who will undertake the role and ensure that they understand what is required.

You must allocate all the responsibilities listed below.

The assessment and quality assurance of SQA qualifications

The staff who will be delivering SQA qualifications must understand their specific responsibilities for assessing the SQA qualifications under their remit. You must document the roles and responsibilities of assessors. We recommend you include all the responsibilities listed below.

The staff who act as internal verifiers must understand their specific responsibilities for internally verifying the SQA qualifications under their remit. You must document the roles and responsibilities of internal verifiers. We recommend you include all the responsibilities listed below.

Sub-contracted services or partnership arrangements

If you subcontract 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. We recommend you include all the responsibilities listed in the guide below.

SQA co-ordinator

Responsibilities as the single point of contact for SQA:

♦ To be the first point of contact between the centre and SQA
♦ Liaise between SQA quality assurance staff and assessors/internal verifiers when SQA quality assurance staff wish to visit
♦ Ensure SQA quality assurance staff and regulatory personnel have access to relevant information, records, evidence, candidates, staff and premises as requested
♦ Circulate the subsequent quality assurance report to appropriate personnel
♦ Ensure that any required actions and development points identified in a quality assurance report are discussed and acted upon within agreed time scales.
♦ Inform SQA of intention to deliver SQA qualifications or customised awards on alternative/satellite sites in another country/nation.
♦ Notify SQA of issues of concern, e.g. breaches in the security of assessment materials published on SQA's Secure Site or suspected centre malpractice
♦ Notify SQA of any changes that may affect your centre's ability to meet quality assurance criteria including:

— change of premises
— change of head of centre or SQA co-ordinator
— change of name of centre or business
— outcome of internal/external investigations
— removal of centre and/or qualification approval by another awarding body
— lack of appropriate assessors or internal verifiers
— changes to your centre's arrangements for secure storage of SQA examination materials and candidate evidence

Responsibilities to manage centre documents and resources

♦ Ensure policies and procedures are documented, reviewed and updated in line with SQA requirements; legislative changes; and in line with internal centre decisions.
♦ Ensure any new and revised policies and procedures are version controlled and made available to staff
♦ Ensure initial and ongoing reviews of resources for all qualifications; ensure candidates have equal access to resources across assessment sites.
♦ Maintain the password for the SQA secure site and only provide access to relevant assessors and internal verifiers; report any breach of security of assessment materials from the secure site to SQA immediately.

Responsibilities to support centre staff

♦ Make information received from SQA available to staff and candidates, ensure that current versions of all documents are used.
♦ Enable internal verifiers and assessors to meet on a regular basis to standardise and share best practice.

Data management

Responsibilities when registering candidates
♦ Gather candidates' personal details (full name, date of birth, gender, address).
♦ Inform candidates that their personal information will be sent to SQA and provide them with the web address for SQA's Privacy Statement.
♦ Register new candidates with SQA. Allocate Scottish Candidate Numbers (SCN) via SQA Connect to candidates who have not previously undertaken SQA qualifications.

Responsibilities when making candidate entries
♦ Gather information about which SQA qualifications candidates should be entered for.
♦ Check your centre is approved to offer these qualifications.
♦ Check awards are not in their lapsing period before making candidate entries (*regulated qualifications only*).
♦ Submit candidate entries on SQA Connect as soon as possible after their induction.
♦ Make unit and group award entries; include appropriate estimated completion dates.

Responsibilities when submitting candidate results
♦ Gather information on candidates' results, and update SQA Connect, ensuring the 10-week rule is applied where applicable.
♦ Ensure individual candidate entries and results are not submitted at the same time.
♦ Ensure all data passed on by IVs and assessors is processed and results are submitted to SQA according to your centre's data management policy.

Responsibilities when undertaking data cleansing
♦ Update SQA Connect with:

— Changes to candidates' personal details.
— Withdrawal of unit and group award entries when past their completion date and not resulted as a pass or fail.
— Extend unit and/or group award completion dates where candidates have been granted an extension.
— Where applicable, reinstate candidates home addresses on SQA Connect after certification.

Internal verifier

Responsibilities for supporting and promoting quality assurance

♦ Maintain own experience, qualifications and, where applicable CPD, to meet the Unit/Group Award Specification or assessment strategy requirements.

♦ Define the approach to internal verification, including sampling.

♦ Internally verify centre-devised assessment. (Note: SQA strongly advises that you also submit centre-devised assessments to SQA for prior verification.)

♦ Check assessment requirements and conditions are applied (as described in the qualification's Unit/Group Award Specification or assessment strategy, including those requiring special assessment arrangements).

♦ Participate in reviews of the assessment and internal verification process and planning improvements.

♦ Respond to queries from and provide support and guidance to assessors.

♦ Authorise submission of results once internal verification, according to sampling plan, has been successfully completed.

♦ Provide internal verification records to SQA external verifiers as required for sampling.

♦ Respond to feedback from external verifiers and address any action points.

Responsibilities for ensuring standardisation

♦ Collaborate with assessors and other internal verifiers to ensure a shared understanding of the qualification requirements and conditions of assessment.

♦ Collaborate with assessors and other internal verifiers to ensure that assessment approaches are valid, reliable, practicable, equitable and fair.

♦ Participate in or lead standardisation activities and ensure that standardisation activities have taken place.

Assessor

Responsibilities when supporting candidates

♦ Prepare candidates and recognise when they are ready for assessment.
♦ Explain to candidates how and when assessment and re-assessment will be carried out.
♦ Identify the prior achievements and development needs of candidates.
♦ Maintain regular contact with candidates so that their progress can be monitored and support can be provided.

Responsibilities when undertaking assessment

♦ Familiarise oneself with qualification requirements and conditions of assessment and standardise with colleagues.
♦ Apply the assessment requirements and conditions described in the qualification's Unit/Group Award Specification or assessment strategy.
♦ Make valid, reliable, practicable, equitable and fair assessment decisions.
♦ Provide written and verbal feedback to candidates on their assessments.
♦ Standardise assessment judgements with colleagues.

Responsibilities for Supporting and Promoting Quality Assurance

♦ Maintain own experience, qualifications and, where applicable, CPD to meet the Unit/Group Award Specification or assessment strategy requirements.
♦ Provide candidate evidence and assessment records to internal verifiers as required for sampling.
♦ Respond to feedback from internal/external verifiers and address any action points.
♦ Participate in reviews of the assessment and internal verification process and planning improvements.
♦ Submit accurate information on candidate entries and results for qualifications/Units to data management staff.

Sub-contractors

Sub-contractor responsibilities

You will be expected to:

♦ Attend induction training and apply all centre policies and procedures.
♦ Make regular contact with your allocated candidates/assessors; provide advice and support; make assessment/verification decisions; and provide feedback on progress and achievement.
♦ Undertake relevant continuing professional development (CPD) and maintain associated records in line with sector assessment strategy requirements.
♦ Take part in team/standardisation meetings and 1:1 review meetings.
♦ Communicate with candidates and colleagues on a regular basis, completing administration records/forms.

Centre responsibilities

We (the centre) will provide you (the sub-contractor) with:

♦ A role descriptor confirming your role and responsibilities.
♦ Induction training and a mentor to provide you with support and answer any queries you may have.
♦ A set of operational procedures and centre communication contacts.
♦ An allocation of assessors (for internal verification) or candidates (for assessment) on an ongoing basis.
♦ Feedback through the performance review process and through routine internal verification records.

These are suggested responsibilities that may be included in a sub-contract agreement between an approved centre and a sub-contracted assessor or internal verifier.

A sub-contractor is an individual, but not an organisation, who has agreed to provide a centre with assessment and/or internal verification services. They must meet any qualification requirements for acting as assessors or verifiers to comply with centre, awarding body and (where applicable) regulatory body requirements.

A sub-contract agreement provides your centre and the sub-contractor with a clear understanding of each other's responsibilities. It provides both parties with a level of protection, whilst being clear that the sub-contracted assessors/verifiers are not centre employees.

The responsibilities listed are suggestions only and do not comprise a definitive list. It is likely that there are other contractual terms and conditions that will be agreed, such as renumeration, start and end dates, size of caseload, confidentiality and disciplinary procedures. SQA will not comment on these other types of arrangements as, although necessary for you and the sub-contractor, they are not related to our quality criteria.

These responsibilities could be incorporated into a specific agreement/contract or other document(s), such as an assessor/verifier induction checklist. Whatever type of document is used, it is important that both parties sign to agree their points of responsibility.

If you need guidance on wider partnership agreements between an approved centre and another organisation, please contact mycentre@sqa.org.uk.

Writing malpractice procedures

In your introduction, make clear what is meant by malpractice

Your procedures must cover both candidate and centre malpractice and state that all concerns of possible malpractice (by candidates or centre staff) will be taken seriously.

You may wish to include this information within a broader assessment policy. If you deliver qualifications with external assessment, you may have a separate section or separate procedure on malpractice in external assessment.

More information is available in Malpractice: Information for centres.

Definition of malpractice

Your policies and procedures for malpractice 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, 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, carelessness or neglect in applying the requirements (maladministration).*

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.

Examples — candidate malpractice

You may wish to include examples of candidate malpractice.

You should consider the list below and include examples which are relevant to the qualifications you offer and your methods of delivery:

- breaching the security of assessment materials in a way which threatens the integrity of any exam or assessment — including the early and unauthorised removal of a question paper or answer booklet from the examination room
- breaching the defined conditions of an assessment (eg completing work outside of controlled conditions)
- collusion — working collaboratively with other candidates beyond what is permitted
- copying from another candidate
- frivolous content — producing content that is unrelated to the assessment
- misconduct — inappropriate behaviour in an assessment room that is disruptive and/or disrespectful to others. This includes talking, shouting and/or aggressive behaviour or language in the examination room.
- offensive content — content in assessment materials that includes vulgarity and swearing that is out with the context of the assessment, or any material that is discriminatory in nature (including discrimination in relation to the protected characteristics identified in the Equality Act 2010). This should not be read as inhibiting candidates' rights to freedom of expression.
- personation — assuming the identity of another candidate, or a candidate having someone assume their identity during an assessment
- plagiarism — failure to acknowledge sources properly and/or the submission of another person's work as if it were the candidate's own
- prohibited items — possessing items that candidates must not have with them at their allocated seat in the examination room because they can give an unfair advantage, including (but not restricted to): mobile phones; electronic devices such as an MP3 player, iPod, tablet, smartwatch or any other device that is web-enabled or stores information; books, notes, sketches or paper; pencil case; calculator case; calculator or dictionary (except in specified assessments) — unless approved by SQA as part of an assessment arrangement

Examples — centre malpractice

You may wish to include examples of centre malpractice:

The following are examples of centre malpractice (SQA reserves the right to consider other instances of suspected centre malpractice which may undermine the integrity of our qualifications):

- managers or others exerting undue pressure on staff to pass candidates who have not met the requirements for an award
- deliberate falsification of records in order to claim certificates
- excessive direction from assessors to candidates on how to meet national standards
- failure to assess internally assessed unit or course assessment work fairly, consistently and in line with national standards
- failure to comply with SQA requirements in the preparation, quality assurance and submission of estimated grade information
- failure to apply specified SQA assessment conditions in assessments, such as limits on resources or time available to candidates to complete their assessments, including any amendments to permitted conditions

- misuse of assessments, including repeated re-assessment contrary to requirements, or inappropriate adjustments to assessment decisions
- failure to recognise and apply appropriate measures to manage potential conflict of interest in assessment or quality assurance
- failure to apply appropriate processes to ensure fairness in the provision of assessment arrangements
- failure to comply with SQA requirements in relation to appeals processes
- insecure storage, transmission or use of assessment instruments, materials and marking instructions, resulting in a breach of assessment security
- failure to comply with requirements for safe retention of candidate evidence, and safe and accurate maintenance of assessment and internal verification records
- failure to comply with SQA's procedures for managing and transferring accurate candidate data
- failing to register candidates within a qualification's accreditation period
- making late registrations to the awarding body for qualifications in their lapsing period
- requesting late certification of learners after the certification end date
- for all SQA qualifications, failure by a centre to promptly notify, investigate and report concerns of potential centre malpractice to SQA
- failure to promptly notify SQA of a finding of centre malpractice, maladministration or an equivalent or similar finding by another awarding organisation
- withholding information about circumstances that may compromise the integrity of any SQA qualification or the credibility of SQA
- failure to notify SQA promptly if another awarding body removes approval from the centre, regardless of the reason given for this withdrawal
- failure to take action required by SQA or to co-operate with an SQA investigation into concerns of malpractice
- for qualifications subject to regulation by SQA Accreditation, Ofqual or Qualifications Wales, failure by a centre to notify, investigate and report to SQA concerns of potential candidate malpractice

Reporting of malpractice

You must describe how suspected malpractice can be reported:

Describe how staff in your organisation can report suspected malpractice:

- by candidates
- by other members of staff

Also describe how candidates can report suspected malpractice:

- by other candidates
- by members of staff

Indicate who suspected malpractice should be reported to.

Investigating possible malpractice

You must describe who will undertake investigations and how these may be managed:

State that your organisation will take all concerns of possible malpractice seriously, and any investigation will be fair, robust and in proportion to the nature of the concern. SQA *Malpractice: Information for Centres* includes Standards for Devolved Investigations which explain our expectations of centres when carrying out investigations.

Explain how this will be done, for example:

♦ Who will conduct investigations (eg head of relevant department, independent manager, quality manager)?
♦ How will investigations be conducted (eg reviewing assessment evidence and records, seeking a second opinion from an IV, interviewing other candidates or members of staff)?

Communicating the outcome of the investigation

You must describe how the outcome of an investigation will be communicated:

♦ You should communicate the outcome to the candidate or member of staff under investigation in writing. You may wish to state a timescale for this.
♦ Describe how you will communicate the outcomes of investigations to other interested parties (eg assessor, tutor, head of department, data management staff dealing with results, line manager of member of staff)

Available measures for proven malpractice

You must describe the types of measures which may be applied if malpractice, for both candidates and staff, is proven:

♦ You should give examples of potential actions, which may vary in the level of severity depending on the circumstances and seriousness of the malpractice, eg ranging from having to re-sit one assessment to exclusion from a course.
♦ It may be appropriate to move to candidate or staff disciplinary procedures at this stage.
♦ Candidates involved in an investigation of malpractice (whether candidate or centre malpractice) must not be resulted for the assessments in question until the investigation is completed, the outcome decided, and any appeal concluded.

Actions taken in cases of proven malpractice

You must describe what actions you may take if malpractice is proven:

♦ Any actions to be taken as a result of malpractice being proven through investigation should be specified clearly in the written feedback on the outcome of the investigation.

Appeals against malpractice decisions

You must describe how candidates or staff can appeal a malpractice decision (internally and to SQA):

- ♦ Candidates and staff should have the right to appeal any malpractice decision made against them within the centre.
- ♦ State how and to whom, within your centre, appeals should be submitted. Include realistic timescales for this.
- ♦ Describe how appeals will be dealt with within your centre and how the outcome will be communicated. Include realistic timescales for this.

In addition, where malpractice is investigated by SQA, decisions can be appealed. We recommend you use the following standard wording in your procedure:

We have the right to appeal a decision where a case of reported malpractice by our centre has been confirmed through investigation by SQA.

We also have the right to appeal a decision in the case of suspected malpractice by a candidate reported by our centre to SQA.

Candidates have the right to appeal to SQA where:

- ♦ *SQA has conducted an investigation and the candidate disagrees with the decision*
- ♦ *our centre has conducted an investigation, the candidate disagrees with the outcome and has exhausted our centre's appeals process,*
- ♦ *SQA has asked our centre to conduct an investigation and the candidate disagrees with the outcome and has exhausted our centre's appeals process, and*

For regulated qualifications only:

- ♦ *Our centre and our candidates have the right to request a review by the appropriate regulator (SQA Accreditation, Ofqual or Qualifications Wales) of the awarding body's process in reaching a decision in an appeal of a malpractice decision.*

Please refer to: *The Appeals Process: Information for Centres*

Recording malpractice

You must describe what records will be kept and for how long:

You must keep records of investigations of suspected malpractice and the outcomes of these.

Your procedures should state the following requirements:

Where an investigation of suspected malpractice is carried out, we will retain related records and documentation for three years for non-regulated qualifications and six years for regulated

qualifications. Records will include any work of the candidate, and assessment or verification records relevant to the investigation.

In the case of an appeal to SQA against the outcome of a malpractice investigation, assessment records will be retained for six years.

In an investigation involving a potential criminal prosecution or civil claim, records and documentation will 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, we will keep records for the full six year period.

Reporting to SQA

You must report suspected malpractice to SQA:

Your procedures should state the following requirements:

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

We must inform SQA 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. We must also promptly bring to SQA's attention any findings of centre malpractice or maladministration communicated to us by another awarding or industry body. We must notify SQA promptly if another awarding body removes approval from our centre, regardless of the reason given for this withdrawal.

SQA expects centres to bring candidate malpractice concerns for internal assessments to their attention only if:

- ♦ *the concern came to our centre's attention after submission of internal assessment marks*
- ♦ *the concern relates to candidate malpractice for a qualification regulated by SQA Accreditation, Ofqual or Qualifications Wales*
- ♦ *a candidate affected by a malpractice decision, who has exhausted their right of appeal within our centre, wishes to exercise their right of appeal to SQA; or*
- ♦ *there are other exceptional circumstances, eg we believe that the malpractice case involves a criminal act (if the malpractice involves a criminal act the matter must also be reported to the police)*

Writing procedures for conflicts of interest in assessment

Criterion 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, IVs and invigilators.

Introduction

In your introduction:

♦ State that a personal interest in the outcome of an assessment amounts to a conflict of interest, which poses a risk to the integrity of the assessment.
♦ Indicate that all staff must take responsibility for reporting any personal interest, and that your organisation will take steps to address this. This includes assessors, IVs and invigilators (ie staff supervising assessments under controlled conditions).
♦ Describe how you will communicate this information to staff.

You should keep records of acknowledgement of receipt and understanding of this information by new staff, eg contracts, signed induction checklists. Make existing staff aware of this procedure through your established mechanisms for disseminating policies and procedures and keeping them updated.

Procedures for declaring conflicts of interest

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

♦ set assessments that 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.

Describe how staff in your organisation should report conflicts of interest, eg to their line manager, to the quality manager/SQA co-ordinator.

You may wish to provide a form for this (see example on following page).

Procedures for addressing conflicts of interest

When a conflict of interest is reported, your centre must decide on a suitable way to address the conflict of interest, if you feel that this is required. Possible actions might include: moving the candidate into another group; changing assessor/IV/invigilator; including the candidate in samples for verification; or having the assessment marking supervised or re-marked. The decision and agreed action must be recorded.

Record keeping

Copies of documentation, including details of the action taken to address the conflict of Interest, should be retained for a year after completion of the assessments in question.

Example:

Declaration of conflict of interest in an assessment
The following example shows the type of information which should be included on a declaration-of-interest form. You may adapt this for use in your organisation.

Name of assessor/internal verifier/invigilator	
Name of candidate (if applicable)	
Candidate number (If applicable)	
Qualification	
Unit(s) involved	
Assessment(s) involved	
Nature of Conflict	
Signature of assessor/internal verifier/invigilator Date	

Senior Management review and declaration	
I have reviewed the above declaration and noted the issue raised but have decided that no action is required.	Y/N
I have reviewed the above declaration and have decided that, to mitigate the risk of this declared conflict of interest in assessment, the following action will be taken:	Y/N
Signature of senior manager: Position: Date:	

Writing procedures for assessment arrangements

Criterion 3.5: Individual candidates' requirements for assessment arrangements must be discussed, identified, implemented and recorded.

NB this guide describes how to write procedures for managing assessment arrangements in **internally-assessed qualifications**. If you offer externally-assessed qualifications, you will need to consider additional steps — see our guide: [Assessment Arrangements Explained: Information for Centres.](#)

Introduction

- State your commitment to providing assessment arrangements to allow candidates who are disabled, and /or who have been identified as having additional support needs, appropriate arrangements to access the assessment without compromising its integrity.
- Acknowledge that candidates are individuals with a diverse range of needs and that you will consider the individual assessment needs of candidates' when considering the most appropriate assessment arrangements.

This procedure should be a useful reference for all members of your assessment team; you are advised to write it with your assessors and internal verifiers in mind as your intended audience.

Meeting needs across different subjects/units

You know your own centre, the qualifications you deliver and your candidates. Use this knowledge to describe the typical range of reasonable adjustments that might be put in place for candidates who may need them.

This should not be an exhaustive list but should give candidates and assessment staff an indication of the type of arrangements that could be considered.

Identifying the individual needs of candidates

This might be through discussion at the enrolment or induction stage or as part of your application process. Please bear in mind that some candidates will not disclose their needs immediately so it is important to also consider how you will recognise any particular requirements for assessment that become apparent as the candidate progresses through their award.

Use this section of your procedure to describe your usual practice in identifying the individual needs of the candidates you support.

Confirming the proposed assessment arrangement

Before any summative assessment goes ahead using the proposed arrangement, you must have it independently confirmed by an appropriate member of your assessment team. This could be another competent assessor or an internal verifier. The purpose of this step is to make

sure that the proposed arrangement is suitable and allows the candidate to access the assessment but does not compromise the integrity of the assessment.

To ensure transparency and prevent malpractice, no single assessor should implement assessment arrangements without confirmation from another member of the assessment team.

Use this section of your procedure to describe how this happens in your centre and how this step is recorded.

Recording and communicating this information

Use this section of your procedure to describe how you record the candidate's individual need and the proposed assessment arrangement to address that need. Be clear about whose responsibility it is to complete this form/record and how/where it is securely stored and shared only with those who need access to the information it contains.

You should take particular care with data protection in this record. It is likely to include sensitive personal information, so you should only share it with SQA staff on request and after gaining the permission of the candidate.

In internally-assessed qualifications, you are not required to notify SQA of proposed assessment arrangements. However, if the candidate's portfolio is selected for external verification, it may be appropriate for the external verifier to view this record, with the candidate's permission.

Reviewing the candidate's needs and the assessment arrangement/support over time

It is important to review the arrangement with the candidate over time to make sure it works for them, to establish if any improvements can be made and to check if it is still needed.

Use this section of your procedure to describe how often reviews will take place and where amendments will be recorded.

Writing complaints procedures

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

Introduction:

♦ Explain that your organisation values feedback, including complaints (for example, complaints give you valuable information you can use to improve your service provision and customer satisfaction).
♦ Describe how you will tell the candidate about the complaints procedure (for example through induction, handbooks, student advice centre, administration office).

Types of complaint you will deal with

Explain that the complaints procedure should not be used for challenging assessment decisions; your centre's appeals procedure should be used for this. There may be other exceptions (for example appeals against admissions decisions, bursary or other financial awards) where alternative processes should be used, and you should state this.

You may wish to have other mechanisms to deal with feedback that does not require a response, for example a suggestion box/e-mail/online form.

It may be appropriate to use your staff grievance procedure as your complaints procedure, if all candidates are employees of your centre, but the escalation stages identified below would still apply.

The stages of complaints

Stage 1: Informal complaint
Indicate who candidates can complain to in your organisation. There must be at least two people who they can complain to (not just their assessor, as it may be the assessor they are complaining about).

Include reasonable timescales for:

♦ submission of the complaint by the complainant (from the date when the issue arose)
♦ dealing with the complaint and responding to the complainant

Explain what will happen with their complaint; for example, will it be logged, recorded?

Stage 2: Formal complaint
Explain that formal complaints may be made verbally or in writing, including face-to-face, by phone, letter or email. You should also acknowledge that you understand some people may need help or advocacy in raising their complaint, and that they should contact you (by their preferred method) to ask for further help/guidance in how to make their complaint.

Identify who candidates should submit formal complaints to, include their phone number, email and/or postal address.

Candidates should be able to move directly to a formal complaint if the matter is very serious or if they feel unable to raise the matter with staff informally.

Include a reasonable timescale for submission of the complaint by the complainant (from the date when the issue arose).

You should state that you will acknowledge every complaint and give a realistic timescale for this.

You should state that you will investigate every complaint and provide a formal written response and give a realistic timescale for this.

You should state who will investigate complaints, eg a senior manager for the relevant area, an independent manager, a dedicated complaint handling manager.

Internal review stage

You may wish to include an internal review stage for candidates who are not satisfied with the response that they receive to a formal complaint, for example to the head of centre, board of management/governors/trustees. It is **not a requirement of SQA** to include this stage.

You may wish to set a time limit for escalating complaints; for example, within one calendar month of receiving a written response to a formal complaint.

Identify who the escalated complaint should be submitted to, including contact details.

You should state how the escalated complaint will be handled (for example, review of documents, meetings to discuss) and that a formal written response will be sent and give a realistic timescale for this.

Information from complaints

State what you will do with information from complaints. For instance, you might say that you will log all complaints, analyse trends and responses and provide quarterly or annual reports to a relevant committee or board.

Independent external review of complaints

You must also provide candidates with information on other bodies that they can complain to, such as SQA, local authority for schools etc.

If your centre falls under jurisdiction of the Scottish Public Services Ombudsman, as part of statutory requirements, you must also include information for candidates on escalating complaints to the SPSO. It is then the SPSO's role to determine whether an individual complaint

is one that they can consider (and to what extent). All centres under jurisdiction must signpost to the SPSO in their final response.

Complaints to SQA

For assessment-related complaints, candidates must be informed that they have the right to escalate their complaint to SQA. 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)

We recommend you use the following standard wording:

For assessment-related complaints, candidates of SQA qualifications may also have the right to complain to SQA awarding body. SQA will only consider your complaint if you have already exhausted all stages of (insert your organisation's name)'s complaints procedure and you remain dissatisfied with the outcome or the way in which we handled your complaint, or you believe that we have unreasonably failed to apply the procedure correctly.

SQA may consider complaints about:

♦ *assessment — in the broadest sense, including the conduct of, preparation for, and environment for, assessment*
♦ *dissatisfaction with the way in which the centre handled the complaint*

SQA will not consider complaints about:

♦ *academic judgement (use Appeals or Post-results Services)*
♦ *the wider experience of being a candidate (eg support services, funding, facilities — you may wish to insert your own examples)*

SQA's Customer Complaints and Feedback web page

Regulated qualifications

You must also inform all candidates working towards regulated qualifications (including all SVQs) that they 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.

You must make it clear that this does not apply to candidates on non-regulated qualifications. Do not include this 'Regulated qualifications' section if your centre does not deliver regulated qualifications.

Writing procedures for security of assessments

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

This criterion relates primarily to assessments where a candidate would gain an unfair advantage by seeing the assessment in advance when the assessment is carried out under controlled conditions (for example, an HN or SQA Advanced Graded Unit examination). These could be:

♦ assessments produced by SQA and published on the SQA secure site
♦ assessments produced within your centre

If you offer qualifications which require assessments to be stored securely, you must have a documented procedure for the management of this. This could be:

♦ a stand-alone procedure
♦ part of an assessment policy and procedure
♦ part of a wider security of assessment procedure, also covering external assessment

Introduction:

♦ Make security of assessments everyone's responsibility.
♦ State that centre managers and staff will take sufficient steps to protect the integrity of SQA assessments before and after assessment takes place.
♦ Allocate responsibility for management of security of assessments.
♦ Describe your methods of storage (electronic, hard copy).
♦ Describe how you will review your data management procedures regularly.
♦ Describe how all relevant staff will be made aware of these procedures (including covering them during induction).

Access to SQA's secure site

If you deliver HN or SQA Advanced Certificate/Diploma awards with published assessment exemplars, your SQA co-ordinator will have been given a secure log-in to SQA's secure site.

You must decide on your approach to using the secure log-in. Consider, for example, the following different scenarios:

♦ Only the SQA co-ordinator has access and downloads assessment exemplars for teaching staff and/or assessors on request.
♦ Other members of the quality team/administrative staff have access, in addition to the SQA co-ordinator, and they download assessment exemplars for teaching staff and/or assessors on request.

♦ Other identified individuals are given the log-in details (eg heads of department, managers, administrators) so that they can browse the secure site and download assessments themselves.

If other members of staff are given the secure log-in, you must consider:

♦ How do you decide who gets access?
♦ How and where do you record this?
♦ How will you ensure that these members of staff understand the security requirements?
♦ What is the procedure if one of these members of staff leaves?
♦ How will you 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 via your SQA co-ordinator?
♦ How often will you change the password? Who will do this? How will you inform the other members of staff who have access to the log-in?

Once assessments have been downloaded from the secure site, you must consider the following issues and make all relevant staff aware of your approach:

♦ If sending electronically, how will this be done securely (eg encrypted email, secure area of virtual learning environment (VLE) or intranet)?
♦ If a teacher/assessor is downloading them directly, where will they store them (eg encrypted memory stick, personal drive, secure area of VLE or intranet)?
♦ If they are printed off, how will they be passed on and stored securely (eg secure internal mail, put into locked cabinets rather than being left on a desk)?
♦ How will they be accessed by staff to be used for assessments, and what will be done with them after the assessment?

Secure storage of and access to internally-devised assessments

The same principles apply to access to and storage of internally-devised assessments as to assessments published by SQA.

If these are held electronically:

♦ Where are they held (eg shared drive, intranet, VLE)?
♦ How is security protected (eg password log-in)?
♦ Who has access and who decides this?

If these are held in hard copy:

♦ Where are they held (eg centrally with quality team, in administrative offices, in staff work areas)?
♦ How is security protected (eg locked cabinets, limited access to keys)?
♦ Who has access and who decides this?

Transport of assessments and candidate evidence

Transport arrangements within and between assessment sites, or between a central base and an assessment site, must also ensure the security of the materials.

Assessments in use

All staff using assessments must be made aware of the following requirements:

♦ The assessments must not be left lying in classrooms or workrooms.
♦ Assessments handed out to candidates to use must be collected back in and either shredded, put into confidential waste, or stored securely again (this would include assessment papers or booklets with the questions embedded in them).
♦ All candidates must be made aware that taking away assessments, copies or images of assessments is malpractice, and could result in a disciplinary process.
♦ Staff who give assessments, copies or images of assessments to candidates out with the assessment process, without good reason or permission, are committing malpractice, which could result in a disciplinary process.
♦ Any breaches of security of assessment must be reported immediately to the SQA co-ordinator or relevant manager.

Security of candidate assessment evidence

Assessment evidence produced by candidates must also be held and moved securely. This is to ensure that the interests of the candidates are protected and to protect the integrity of the assessment by ensuring that the evidence cannot be tampered with.

You must make arrangements to ensure that candidate assessment evidence in hard copy format is submitted, moved and stored securely.

Where electronic evidence is being used, you must ensure that the evidence submitted by candidates:

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

Electronic assessment evidence should, ideally, be submitted by the candidate and held securely using eg e-portfolios or VLEs. If it has to be submitted in another way (such as by email or on a memory stick), it should be protected (for instance, encrypted, locked with password access).

Assessors and IVs accessing electronic assessment evidence, including for quality assurance purposes, should use a form of remote signature. 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; eg 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 to whom it belongs, just as a hand-written signature would be.

Retention of candidate assessment evidence

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

Writing internal assessment appeals procedures

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

Introduction:
♦ State that candidates have the right to appeal against the results of internal assessments.
♦ State the grounds for appeal which will be accepted (eg if candidates feel they were not treated fairly in assessments).
♦ State how you will communicate this information to candidates (eg through induction, handbooks, student advice centre, administration office).

Stages of internal assessment appeal

Stage 1: Informal
Indicate who candidates can appeal to, on an informal basis, against an assessment decision. This is most likely to be their assessor.

Include reasonable timescales for:

♦ submission of the appeal by the candidate (from the date of receiving the assessment result)
♦ dealing with the appeal and responding to the candidate

Explain what will happen with their appeal — eg will it be logged, recorded?

Stage 2: Informal
Explain how candidates should appeal against an assessment decision, if they are dissatisfied with the response from their assessor or feel that they cannot approach the assessor.

It is recommended that the appeal is referred to the IV at this stage.

Include reasonable timescales for:

♦ submission of the appeal by the candidate (from the date of receiving the response from the assessor to the informal appeal or from receiving the assessment result)
♦ dealing with the appeal and responding to the candidate

Explain what will happen with their appeal — eg will it be logged, recorded?

Stage 3: Formal
Formal appeals should be made in writing.

♦ The formal stage of appeal should be to an independent third party who has not been previously involved in the assessment decision.
♦ Identify the person to address the appeal to, including email and/or postal address.

- Do you have an appeal form, or do you just accept letters/emails? If you have a form, where can this be obtained?
- Is there anyone who can help with writing an appeal, if necessary?
- Include a reasonable timescale for submission of the appeal by the candidate (from the date of receiving the response to the informal appeal or from receiving the assessment result).
- You should state that you will acknowledge every appeal and give a realistic timescale for this.
- You should state that you will investigate every appeal and provide a formal written response; give a realistic timescale for this.
- Who will deal with the appeal, eg a senior manager for the relevant department, an independent manager, quality manager, or a dedicated appeals committee?

State clearly that, if candidates are undertaking non-regulated qualifications (HNs, SQA Advanced Certificate/Diplomas, NQs), they have **no further right of appeal against internal assessment decisions**. The final decision rests with your centre. SQA will not accept internal assessment appeals.

Regulated qualifications — escalation of appeals

You must inform candidates undertaking regulated qualifications (including all SVQs) that they have further routes of appeal against internal assessment results. You must make clear that this does not apply to candidates on non-regulated qualifications (do not include this section if your centre does not offer regulated qualifications). We recommend you use following standard wording:

If you have gone through all the stages of [insert your organisation's name] internal assessment appeals procedure and remain dissatisfied with the outcome or the way in which we handled your appeal, you can:

- *appeal to SQA (the awarding body)*
- *appeal to SQA Accreditation, Ofqual or Qualifications Wales (as appropriate) if you feel that the centre and/or SQA (the awarding body) has not dealt with your appeal appropriately*

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

Keeping records

State that, in the case of an appeal to SQA against an internal assessment result in a regulated qualification, your centre will retain records (including all materials and candidate evidence) until the appeal has been resolved. Thereafter, assessment and internal verification records for appeals cases will be retained for six years

Writing procedures for data management

Criterion 6.1: Candidates' personal data submitted by centres to SQA must accurately reflect the current status of the candidate.

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

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

Criterion 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.

You must document your data management procedures, but you can choose how to do this. You might use written descriptions covering the stages of data management (see headings below for guidance), or flowcharts/ process maps with more detailed work instructions sitting beneath these.

You must make it clear, at each stage, who has operational responsibility as well as who is responsible for managing and reviewing the effectiveness of your data management processes.

Introduction

State how you will communicate this information to all relevant staff.

Candidates' personal information

You must have a method to capture the following personal information from candidates:

♦ full name
♦ date of birth*
♦ gender
♦ home address
♦ Scottish Candidate Number (SCN) (if known by the candidate)

International centres: If you have candidates under the age of 16, please contact your Regional Manager.

In your procedure, explain:

♦ How you will get personal information from candidates (eg will they complete an enrolment form on paper or online)? At induction, you should inform candidates that they must let you know if any of their personal details change and explain how they can do this. **Note:** if a

candidate knows their SCN, you can look it up on SQA Connect and update their personal details as necessary.

♦ When this will happen.
♦ Who is responsible for organising this.

Protecting candidate data

You must comply with the General Data Protection Regulations (from May 2018).

You must inform candidates that their personal data will be sent to SQA for the purposes of entering them for an SQA qualification, certification and of maintenance of their record of attainment. You do not have to obtain consent for this processing. Your data exchange statement should not seek permission or consent from candidates; instead, they should sign to confirm that they understand that their personal details will be shared for these purposes.

You must direct candidates to SQA's privacy statement so they can read about how SQA will use their information.

In your procedure, explain:

♦ where you will put information about GDPR compliance (for example, a data exchange statement on your enrolment form or candidate induction checklist)
♦ where candidate personal information will be stored
♦ how you ensure it is stored securely
♦ who is responsible for organising this

Managing, registrations, entries and results on SQA Connect

Checking Scottish Candidate Numbers (SCNs)

A candidate will already have an SCN if they have undertaken an SQA qualification at a school, college or training provider. If they know their SCN, ask them to give it to you, eg on their enrolment form. If they cannot remember it, you can check for an existing SCN on Connect using their personal details.

If a candidate does not have an SCN, you can allocate one to them using SQA Connect.

SQA's system will automatically check for duplicate candidates records during the registration process and you will be notified if a match is found. You must then check whether or not this is the same person.

In your procedure, explain:

♦ who is responsible for checking SCNs
♦ who is responsible for allocating new SCNs
♦ when and how this will be done

Registering new candidates with SQA

You must register any candidates using SQA Connect if they have never been registered with SQA before.

In your procedure, explain:

♦ when this will be done
♦ who is responsible for doing it

Unit and group award entries

In your procedure, explain:

♦ Who is responsible for deciding which units and group awards candidates will be entered for, eg the assessor, IV, manager.
♦ How you decide on the estimated completion date.
♦ Who is responsible for checking entry information.
♦ Who is responsible for submitting entry information using SQA Connect and how this information is communicated to them, eg paper forms or an online system.
♦ Who is responsible for checking on SQA Connect to ensure your centre is approved to offer the units and group awards and that the award has not finished or entered its lapsing period. **Note:** this must be done before you start delivering your programme to candidates
♦ How you ensure that entries are submitted as soon as possible after the start of the programme and that for qualifications which are verified as group awards rather than as individual units (eg SVQs and Skills for Work courses), the group award entry is made at the start.
♦ How you ensure that entries and results are not submitted at the same time.
♦ If applicable, how you ensure that the SVQ 10-week rule is adhered to. (SVQs and SVQ units, Workplace Core Skills units, and assessor and verifier units cannot be certificated within 10 weeks of the entry date of the qualification.)

Results

In your procedure, explain:

♦ who is responsible for recording candidates' results, eg the assessor
♦ how you submit results, eg on paper forms or through an electronic system /on a unit by unit basis or on completion of the group award
♦ your system for ensuring that results have been subject to internal verification, eg IV signature on a form or electronic authorisation by an IV
♦ who is responsible for submitting results using SQA Connect and when they will do this; you should also explain how the information will be communicated to this person

Data cleansing

In your procedure, explain:

♦ who is responsible for cleansing candidate information and communicating changes to SQA
♦ your system for updating changes to candidates' personal details

♦ your system to ensure that when candidate entries reach their completion date they are resulted, withdrawn (from both unit and group award entries) or, if you have granted an extension, the completion date is extended (for both unit and group award entries)

Note: If you have a reason to have candidates' certificates sent to your centre address, you must have a documented procedure to describe:

♦ your system for entering the candidate in their own home address;
♦ how you will ensure you have written permission from the candidate to open their certificate when it is delivered to your centre address, and who is responsible for doing this /where these records will be retained;
♦ your system for changing the address to the centre address before results are entered and who is responsible for doing this; and
♦ how you will ensure that the candidate's home address is reinstated immediately after the certificate is received and who is responsible for doing this.

Keeping records

Your procedures must meet SQA's minimum retention requirements. SQA's retention requirements may be shorter than for other purposes, eg funding, so you must take all external and internal requirements into consideration in your policy and procedures.

Retention of candidate evidence (relates to Criterion 4.7)

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

* This is the minimum timescale. You may choose to hold evidence for a longer period before returning it to candidates or securely destroying it.

In your procedure, state:

♦ how and where candidate evidence is securely stored
♦ how candidate evidence is securely transported, if necessary
♦ how long you retain candidate evidence
♦ how it is returned to candidates at the end of this period, or securely destroyed, and who is responsible for doing this

Assessment, internal verification and candidate records (relates to Criterion 6.4)

You must retain the following records for a minimum of one calendar year* following the completion of qualifications:

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

You must store these records in a retrievable format and make them available to SQA quality assurance staff on request.

* This is the minimum timescale. You may have reason to hold records for a longer period before securely destroying them.

Note: if you are offering Ofqual or Qualifications Wales regulated qualifications, the minimum retention period for candidate records is six years.

In your procedure, state:

♦ the records you will retain — ensure you cover the list above as a minimum
♦ how and where you securely retain candidate records
♦ how long you retain these records
♦ how you securely destroy records at the end of this period and who is responsible for doing this

Retention of evidence and records in cases of appeal or suspected malpractice (relates to Criterion 4.7 and 6.4)

♦ Following an appeal against an internal assessment result, you must retain records, including all materials and candidate evidence, until the appeal has been resolved.
♦ Following an appeal to SQA against an internal assessment result in a regulated qualification, you must retain assessment and verification records, and all materials and candidate evidence, until the appeal is resolved and for six years thereafter.
♦ Following an investigation into suspected malpractice, you must retain all related records, documentation and evidence for three years for non-regulated qualifications and six years for regulated qualifications.
♦ Following an investigation involving a criminal prosecution or civil claim, you must retain all records, documentation and evidence for six years after the case and any appeal has been heard.

Note: If there is any doubt about whether criminal or civil proceedings will take place, you must keep all records for the full six years.

In your procedure, state:

♦ where candidate evidence and assessment records will be securely retained in a retrievable format
♦ how long you will retain evidence and records following an appeal or malpractice investigation, ensuring you meet the SQA minimum requirements above
♦ how you securely destroy evidence and records at the end of this period and who is responsible for doing this

Example SQA Connect Data Management Procedure Flowchart

Agree Group Award with candidate

Check qualification approval status and lapsing date of award and units.

Enrol candidates. Gather personal data and inform candidates this will be shared with SQA.

Doe the candidate know their SCN number?

Yes

No

Check if SCN previously allocated to candidate.

No SCN

Allocate SCN to candidate on SQA Connect.

Register with SQA using candidate services within SQA Connect.

Have SCN

Input Group Award and mandatory/optional Units entries onto Connect with estimated completion dates.

Look up candidate on Connect and update their personal details.

Assessment complete: Results confirmed by centre Internal Verification procedures.

Completion date passed, candidate not resulted

Check 10 week rule has been applied (if applicable).

Extend completion date on SQA Connect if there is an extension applied.

Withdraw candidate from units and Group Award via SQA Connect if not continuing.

Submit results on SQA Connect (by unit or when Group Award is complete.

Candidate certificated by SQA

Candidate will be certificated for any Units achieved

Exemplar 1: Review schedule template

Criterion 1.1 Policies and procedures must be documented and reviewed to ensure full compliance with SQA quality criteria

The requirement to regularly review your centre's policies and procedures to ensure they remain compliant with the SQA quality assurance criteria is outlined in criterion 1.1. This template can assist you during your internal review, it will help you to organise your documents and keep track of any changes. Frequent use of this template will ensure you remain compliant with SQA requirements and are prepared for future systems verification.

If you already have a mechanism for reviewing your policies and procedures against SQA's Quality Criteria, then there is no need to also use this template. Whichever system you use to record the review of SQA related policies and procedures, it is important that you capture any changes to SQA requirements; legislative changes; and relevant internal decisions.

The information in the first two columns of the table below is extracted from SQA's Systems Verification Criteria: Guidance for Centres published in Jan 2021. This information can only be changed by SQA.

As an SQA approved Centre you should conduct reviews of your policies and procedures on an ongoing basis or when:

- SQA's criteria/requirements change
- there are legislative or qualification changes
- external audits or internal agreements require you to do so

Use the "Your Evidence and Location" column to describe:
- The title of your relevant policy or procedure
- Where the document(s) are stored
- How the document(s) meets the stated SQA requirements

Use the "Your Review Comments" column to record:
- What changes have been made
- Who approved the changes
- Any update to version control information

SQA Systems Verification Criteria		Your Documents	
Category 1: Management of a Centre		**Description & Location**	**Your Review Comments**
1.1	Policies and procedures must be documented and reviewed to ensure full compliance with SQA quality criteria.	*All documents stored on G Drive. Footer of each has version no, review date and owner.*	*Reviewed Jan '21 No update required L. Smith*
1.2	Policies and procedures must be endorsed by senior management and disseminated to all relevant staff		
1.3	SQA must be notified of any changes which may affect the centre's ability to meet the quality assurance criteria		
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		
1.5	Suspected candidate or staff malpractice must be investigated and acted upon, in line with SQA requirements		
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, IVs and invigilators		
1.7	There must be an effective process for communicating with staff, candidates and SQA		
1.8	Feedback from candidates and staff must be sought and used to inform centre improvement plans		
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		

1.10	Outcomes of external quality assurance must be disseminated to appropriate staff and any action points addressed within agreed timescales		
SQA Systems Verification Criteria		**Your Documents**	
Category : Resources		**Description & Location**	**Your Review Comments**
2.1	Assessors and internal verifiers must be competent to assess and internally verify, in line with the requirements of the qualification.		
2.2	Assessors and internal verifiers must be given induction training on SQA qualifications and requirements.		
2.3	There must be a documented system for initial and ongoing reviews of assessment environments; equipment; and reference, learning and assessment materials.		
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.		

SQA Systems Verification Criteria		Your Documents	
Category 3: Candidate Support		**Description & Location**	**Your Review Comments**
3.1	Candidate induction must include information about the SQA qualification and SQA requirements.		
3.4	Policies and procedures must give SQA candidates equal opportunities for assessment		
3.5	Individual candidates' requirements for assessment arrangement must be discussed, identified, implemented and recorded		
3.6	Candidate complaints must be handled in line with a documented complaints procedure which meets SQA requirements		

SQA Systems Verification Criteria		Your Documents	
Category 4: Internal Assessment and Verification		**Description & Location**	**Your Review Comments**
4.1	Internal assessment and verification procedures must be documented, monitored and reviewed to meet SQA requirements		
4.5	Assessment materials and candidate evidence (including examination question papers, scripts and electronically stored evidence) must be stored and transported securely		
4.7	Candidate evidence must be retained in line with SQA requirements *Please refer to the Candidate Evidence Requirements Table:* https://www.sqa.org.uk/sqa/files_ccc/SQA_Evidence_retention_requirements.pdf		

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

SQA Systems Verification Criteria	
Category 5: External Assessment (Assessments set and marked by SQA examiners)	
Very few vocational qualifications have externally marked elements, so this category will often not apply. National Courses with external assessments will not be verified under these criteria. If you are approved to offer externally assessed qualifications, you should refer to Systems Criteria: Guidance for centres to ensure your review activities cover the criteria in Category 5.	

SQA Systems Verification Criteria		Your Documents	
Category 6: Data Management		**Description & Location**	**Your Review Comments**
6.1	Candidates' personal data submitted by centres to SQA must accurately reflect the current status of the candidate.		
6.2	Data on candidate entries submitted by centres to SQA must accurately reflect the current status of the candidate and the qualification.		
6.3	Data on candidate results submitted by centres to SQA must accurately reflect the current status of the candidate and the qualification.		
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

Please refer to the Retention of Assessment Records Table. | | |

Exemplar 2

Assessor/internal verifier induction checklist

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

This example checklist can be used to evidence that an induction has taken place and that the assessor or internal verifier has received all the information relevant to their role.
The checklist covers the information listed in the SQA Requirements for criterion 2.2.
You may wish to add items to reflect additional topics covered during your new staff induction such as centre Health & Safety, and access to digital systems etc.
It is important that the checklist you use reflects the practice in your centre.

SQA's Principles of Assessment	
Qualification and assessment strategy requirements	
Assessment procedures, practices and methods of assessment	
Role of the staff team: Assessor, Internal Verifier, Administrator, Centre Coordinator	
Role of visiting SQA quality assurance personnel	
Maintaining continuing professional development (CPD)	
Content of candidate induction (and associated pack)	
Internal verification procedures	
Equal opportunities and access to assessment	
Individual assessment arrangements	
Malpractice (including ensuring candidate authenticity)	
Complaints	
Assessment Appeals	
Conflict of Interest	
Data management including General Data Protection Regulations (GDPR)	
Secure storage and transport of assessment materials	
Data retention: a) Candidate evidence b) Candidate, assessment and internal verification records	

Please initial beside each item on the checklist to confirm that you have received the information and have understood it. When all items have been covered, please sign and date below and pass it to your manager to sign and keep on file.

Your signature: Manager signature:

Date: Date:

Exemplar 3

Candidate Induction Checklist

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

This example checklist can be used to evidence that an induction has taken place and that the candidate has received all the information relevant to the qualification they are undertaking and are fully informed of their responsibilities and rights.

The checklist covers the information listed in the SQA Requirements for Criterion 3.1

You may wish to add items to reflect additional topics covered during your candidate induction such as centre Health & Safety, access to digital systems etc.

It is important that the checklist you use reflects the practice in your centre.

Overview of your qualification (Units and content)	
Methods of assessment we will use	
Role of the staff team: Assessor, Internal Verifier, Centre Coordinator, Administrator	
Role of visiting SQA quality assurance personnel	
Support and guidance from your assessor	
Access to course resources and materials	
Equal access to assessment	
Progress reviews	
Individual assessment arrangements	
Feedback on assessments	
Re-assessments	
Assessment appeals	
Opportunities for you to provide feedback	
Making a complaint	
Ensuring the authenticity of your work and malpractice procedures	
Your personal data will be sent to SQA for the purposes of entering you for an SQA qualification, certification and maintenance of your record of attainment. The web address (see below) for SQA's Privacy Statement provides more information on how SQA will use the information collected from you.	

Place your initial beside each item on the checklist to confirm that you have received the information and have understood it. When all items have been covered, please sign and date below and pass it to your assessor.

Your signature: Assessor Signature:

Date: Date: