QUALITY ASSURANCE MODEL FOR SCQF PARTNERSHIP APPROVED CREDIT RATING BODIES
1.0 INTRODUCTION

1.1 QUALITY ASSURANCE MODEL FOR EXTENDING CREDIT RATING TO SCQFP APPROVED CREDIT RATING BODIES

In December 2008 the Board of the SCQF Partnership agreed criteria to increase the number of SCQF Credit Rating Bodies. Up until then the SCQF Credit Rating Bodies in Scotland were the Scottish Qualifications Authority, Scottish Higher Education Institutions and Scotland’s colleges.

Since December 2008 other organisations have been able to become SCQF Credit Rating Bodies, providing they meet agreed criteria and are approved by the SCQF Partnership Board. The terminology used in this model for these bodies is SCQFP Approved Credit Rating Bodies (CRBs). However for ease of reading the term Credit Rating Body or CRB will be used in this document from section 1.3 onward to mean SCQFP Approved Credit Rating Body.

This is the Quality Assurance Model for those SCQFP Approved CRBs and those organisations wishing to become an SCQFP Approved CRB. It sets out the application, approval and on-going quality assurance processes which must be adhered to in order to ensure approval and review are transparent and robust. It is essential that the on-going quality assurance arrangements are rigorous in order to maintain partners’ and stakeholders’ confidence in the SCQF as Scotland’s Lifelong Learning Framework.

1.2 RIGOUR OF THE QUALITY ASSURANCE MODEL

The SCQF Partnership has designed rigorous quality assurance processes for giving credit rating authority to appropriate bodies. In order to demonstrate the rigour of these processes to stakeholders the SCQF Partnership will:

- operate its Quality Assurance Model under the better regulation principles; and
- ensure that the Quality Assurance Model is subject to external review.

As part of the external review processes, in 2011/12 the SCQF Quality Committee was asked to oversee a review of this Quality Assurance Model taking views of existing processes from committee members, stakeholders and partners. The revised Model was approved by the SCQF Board in June 2013. Further amendments were considered after the first cycle of Periodic Reviews and changes were made to the Quality Assurance Model in November 2014.
This model consists of:

- Recommendation for approval as an SCQFP Approved Credit Rating Body;
- Annual Monitoring of the SCQFP Approved Credit Rating Body; and
- Periodic Review of the quality assurance system of the SCQFP Approved Credit Rating Body.

1.3 APPLICATIONS AND TIMESCALES

Applications can take around 6 months from application submission to the Partnership to final approval from the SCQF Board. However, this timescale can be longer depending on the size and complexity of the applicant body or bodies.

2.0 CRITERIA FOR BECOMING A CREDIT RATING BODY

2.1 THE CRITERIA

The following three criteria must be met in full both by individual organisations and by Collaborative Partnerships seeking approval as a Credit Rating Body:

- Criterion 1: Body of Good Standing;
- Criterion 2: Robust Quality Assurance System;
- Criterion 3: Capacity and Commitment.

Appendix 2 provides examples of the type of evidence that is required to be submitted to the SCQF Partnership.

CRITERION 1: BODY OF GOOD STANDING

The organisation is a body of good standing, demonstrating a commitment to and a successful track record in the design and delivery of learning provision for Scotland.

The organisation must:

1.1 Provide a formal constitution which describes its identity, functions, aims and structures.
1.2 Demonstrate that it is a secure, stable and viable organisation.
1.3 Demonstrate a knowledge and understanding of education and training.
1.4 Provide evidence of a successful track record of and a commitment by senior personnel to operating in Scotland or for the Scottish market.
1.5 Provide evidence of a successful track record in devising quality assured learning provision in Scotland or for the Scottish market in relation to specific subjects/industries/sectors and levels.

1.6 Provide evidence confirming that its diversity and equality strategy meets the requirements of current legislation.

1.7 Provide an effective staff development policy and be able to demonstrate this policy in action.

CRITERION 2: ROBUST QUALITY ASSURANCE SYSTEM

The organisation already has in place a documented quality assurance system for programme design, approval, validation, accreditation, assessment or other related activities and has evidence, through internal and external review, that this quality assurance system is valid and reliable.

The organisation must:

2.1 Operate a robust quality assurance system for programme design, approval, validation, accreditation, assessment or other related activities and demonstrate that the separate processes which make up the quality assurance system:
- are operated by individuals who are experienced in the relevant process and have subject expertise where this is required;
- are supported by appropriate management structures and have externality in decision making;
- are benchmarked against other equivalent processes;
- are subject to regular review to ensure that they continue to meet the needs of users.

2.2 Demonstrate that it regularly reviews and strives to improve and enhance its quality assurance system by:
- carrying out internal reviews on all aspects of the quality assurance system;
- taking action on the outcome of such internal reviews.

2.3 Ensure that its quality assurance system is subject to regular external review and provide evidence of:
- the outcome of these external reviews;
- actions taken as a result of these external reviews.

CRITERION 3: CAPACITY AND COMMITMENT

The organisation has the capacity and commitment to operate as a Credit Rating Body and ensures that its credit rating processes and procedures link to and function within its existing quality assurance system as already defined under Criterion 2.
The organisation must:

3.1 Document a robust procedure for credit rating which sits within the existing quality assurance system and complies with the requirements of the SCQF Handbook: User Guide which contains the SCQF Credit Rating Guidelines.

3.2 Define the scope of credit rating authority being applied for in terms of levels, sectors, subjects and types of programmes or qualifications.

3.3 Document a robust procedure for the internal review of the proposed credit rating process showing how it sits within the existing quality assurance system.

3.4 Demonstrate the capacity and the ability to make valid and reliable decisions on credit rating, drawing on appropriate sector/subject/industry and level expertise and relating activities to the existing quality assurance system.

3.5 Document a robust procedure to:
   - record the outcomes of the credit rating process;
   - communicate these outcomes to users and other stakeholders;
   - keep the SCQF database up to date by way of the SCQF portal;
   - describe the way in which the SCQF logo will be used.

3.6 Document a procedure for developing an annual self-assessment report on credit rating activity for the SCQF Partnership and participating in SCQFP annual and periodic reviews.

3.7 Show how the credit rating function and its associated quality assurance are supported by staff development, continuing professional development and/or professional development planning.

3.0 ADDITIONAL REQUIREMENTS FOR BECOMING A CREDIT RATING BODY AS A COLLABORATIVE PARTNERSHIP

It is recognised that there may be circumstances where individual organisations cannot fully meet the criteria independently but they may be able to do so if they join with others to form a Collaborative Partnership and further guidance on the criteria for Collaborative Partnerships are included in the Model. Throughout this document the term organisations will be used to describe the criteria and on-going quality assurance for both individual organisations and Collaborative Partnerships and any difference in process will be highlighted where appropriate.
Applications from Collaborative Partnerships must be accompanied by a legally binding contract that sets out the respective rights and obligations of all parties. This must also:

- outline the roles and responsibilities of all the organisations that form the Collaborative Partnership;
- provide supplementary evidence for each of the three criteria which includes details of:
  - the organisation and personnel that will take lead responsibility for the quality assurance processes within the Collaborative Partnership;
  - the organisation and personnel that will take lead responsibility for the credit rating process within the Collaborative Partnership;
  - the organisation that will take lead responsibility for communicating the outcome of the credit rating decision, including the use of the SCQF logo and completion of the SCQF database;
- outline the procedure that will be taken, and the protection that will be given to learners, in the context of breach by one of the parties or termination of the agreement; and
- be signed by senior representatives of all organisations within the Collaborative Partnership.

If approval is given to a Collaborative Partnership to become a Credit Rating Body it will be dependent upon the contract continuing in force and any breach or non-compliance (or withdrawal of one of the partners) will result in withdrawal of the approval to credit rate.

Collaborative Partnerships are required to meet the arrangements in both Sections 2.0 and 3.0 of this document.

The criteria for becoming a Credit Rating Body (above) have been expanded to indicate the arrangements and evidence which must be provided against each criterion in addition to that indicated as required for individual organisations in section 2.0.

**CRITERION 1: A BODY OF GOOD STANDING**

1.1 All organisations in the Collaborative Partnership must provide evidence of its formal constitution which describes its identity, functions, aims and structures and in addition through the contract must provide information on the constitution of the Collaborative Partnership.

1.2 Between them a minimum of 50% of the organisations must meet this sub criterion as all organisations forming a Collaborative Partnership may not be able to provide evidence that they are a secure, stable and viable organisation. For example, organisations operating within the CLD sector may be reliant on external funding from government or Europe. However, the organisation that takes the lead responsibility for Quality Assurance (Criterion 2) must be one of the organisations demonstrating financial security.
1.3 – 1.5 Organisations working primarily outside of Scotland (including within the rest of the UK) and who do not offer learning provision targeted at the Scottish market may wish to be part of a Collaborative Partnership; however, between them a minimum of 50% of the organisations must meet these sub criteria.

1.6 All organisations involved in the Collaborative Partnership must provide evidence confirming that their diversity and equality strategies meet the requirements of current legislation.

1.7 All organisations must provide evidence of this sub criterion at the point of application.

CRITERION 2: ROBUST QUALITY ASSURANCE SYSTEM

The Collaborative Partnership must identify one organisation within the partnership that will take the lead responsibility for the quality assurance processes on behalf of the Collaborative Partnership. The following details must be provided by that organisation:

2.1 Details on how the quality assurance and credit rating processes will be managed across the partnership and the experience and roles of individuals who will undertake these activities including the arrangements for internal and external reviews
- a communication plan in relation to how the Collaborative Partnership will communicate the credit rating decisions across the partnership and externally including the completion of the SCQF database for the partnership
- the management structures and the involvement of externality in decision making.

2.2 Details of those involved in the internal reviews, the frequency of these and action taken as a result of the review
- a plan of how the internal review process will work across the partnership and how the results of these will be communicated to all partners and actions taken forward
- a clear statement of responsibilities of each partner.

2.3 Details of those involved in the external reviews and reasons for choice of organisation, the frequency of reviews and action taken as a result of the review
- a plan of how the external review process will work across the partnership, how it will be managed and how the results will be communicated to all partners and actions taken forward
- a clear statement of the responsibilities of each partner.

CRITERION 3: CAPACITY AND COMMITMENT

The Collaborative Partnership must demonstrate that it collectively has the capacity and commitment to act as a Credit Rating Body. Evidence against each of the sub-criteria for Criterion 3 must additionally include details of:
3.1 The procedure for credit rating detailing the responsibilities of each partner within the Collaborative Partnership.

3.2 The defined scope of the provision that the Collaborative Partnership will credit rate and their reasons for this and how this relates to the expertise of the partners.

3.3 Details on ways in which the lead organisation will undertake to ensure that the internal review process works across all partners within the Collaborative Partnership.

3.4 Documented evidence of a programme credit rated collaboratively as part of the application process, and provide evidence of the expertise involved in that credit rating process.

3.5 The named contact responsible for recording and communicating the outcomes of the credit rating process, and updating the SCQF database and how this contact will ensure that all outcomes are communicated across the Collaborative Partnership.

3.6 The named contact responsible for managing the self-assessment process for the Collaborative Partnership and reporting to the SCQF Partnership.

3.7 How staff development, continuous professional development and/or professional development planning will provide support for all involved in the credit rating process in all the organisations within the Collaborative Partnership.

4.0 MAKING AN APPLICATION

4.1 PRE-APPLICATION PROCESS

On notification of an expression of interest a member of the Executive Team will, in the first instance, have an informal discussion with the organisation (and all of the organisations in the case of a Collaborative Partnership) outlining the main aspects of becoming a Credit Rating Body. They will also discuss the options open to the organisation which would be to:

- take their qualifications and learning programmes to an existing Credit Rating Body; or
- proceed with an application.

The focus of this discussion will be on Criterion 1: Body of Good Standing to establish whether or not the organisation is likely to meet this criterion. In addition the organisation will be appraised of the detail of the application and approval processes.
If after this discussion it is still appropriate for the organisation to go ahead with an application to become a Credit Rating Body, support will be offered in the form of advice from the Executive Team and the opportunity to be mentored by an existing Credit Rating Body.

If an organisation chooses to apply, despite advice from the Executive Team to the contrary, it will have the right to do so provided there is capacity within the SCQF Partnership to accommodate the application and the organisation is able to pay the fee.

**4.2 DIFFERENT OFFICERS FOR DIFFERENT PROCESSES**

As outlined above, a member of the Executive Team will provide support to each organisation to assist its representatives through the pre-application process up to the point an application is made to the Partnership. This member of the Executive Team will not take any part in the review process.

On receipt of a formal application, a different Executive Team Officer will be appointed to manage the approval process. The intention here is to make sure that the development/support function, supplied after application but before approval, is kept separate from the reviewing and decision-making role at the approval stage. This Officer may or may not be the Executive Team member on the review panel.

The Executive Team Officer may therefore be supplying the support function to one applicant organisation whilst also undertaking the reviewing and decision-making function, as part of the Approval Team, for a different organisation. This will ensure that the Executive Team Officers have a wide understanding of application and approval issues.

**4.3 MAKING AN APPLICATION**

In order to gain approval, individual organisations or organisations that form a Collaborative Partnership must demonstrate that they meet the agreed criteria. The Application Form seeks information about the applicant, its proposals and potential for carrying out credit rating activity and reflects the criteria set out in section 2.0.

There are different Application Forms depending on whether the applicant is an individual organisation or a Collaborative Partnership and the application must be made on the appropriate form.

**4.4 APPLICATION PROCESS**

All applications to become a Credit Rating Body are made to the SCQF Partnership. The Application Form and any supplementary information supplied by the organisation is scrutinised by the Executive Team Officer to ensure that it is complete. All documents
submitted as evidence must be clearly cross referenced to the relevant section of the appropriate Application Form. The organisation’s named key contact will be contacted if further clarification or information is required.

On receipt of the Application Form the SCQF Partnership will issue an invoice to the organisation. Details of the fees are available from the SCQFP Executive Team. There is a set fee for processing the application of individual organisations to become a Credit Rating Body. Fees for Collaborative Partnerships may be higher depending on requirements and the complexity of the partnership. This will be agreed between the SCQF Partnership and the Collaborative Partnership prior to the application being progressed. The SCQF Partnership is willing to negotiate fees for charitable and not-for-profit organisations and these will be agreed prior to any application being processed. However, negotiated agreements with charitable/not-for-profit organisations will require an SCQF Partnership Board Director’s consent. The SCQF Partnership’s fees for becoming a Credit Rating Body are reviewed annually.

In making an application to become a Credit Rating Body, the organisation agrees to receive visits, as required, by SCQF Partnership representatives.

4.5 EVIDENCE OF ABILITY TO CREDIT RATE

To be approved as a Credit Rating Body the organisation must provide evidence of the ability to credit rate. This is done by demonstrating that it:

- has conducted a dry run of its new credit rating processes by credit rating at least one of its own programmes at the same time as the approval process is in progress and has had its decisions for credit points and level confirmed through its own internal and external review processes. A Collaborative Partnership selecting this option would conduct the dry run of the credit rating processes operating as a Collaborative Partnership, not as individual organisations.

Evidence for the dry run must be submitted along with the Application Form, and the result of the credit rating exercise should be reported to the SCQF Partnership as part of the application and will form part of the Approval Process. The organisation should ensure that the evidence from the completion of the credit rating exercise and from an internal review of that exercise is available at the Approval Visit in order that both can be considered at the same meeting of the SCQF Quality Committee.
4.6 SCOPE OF CREDIT RATING: INDIVIDUAL ORGANISATIONS

The criteria by which an organisation is approved and reviewed as a Credit Rating Body enables qualitative judgements to be made about the capability to take on the responsibility as a Credit Rating Body and its subsequent ability to perform the role to an acceptable standard.

Once approved as a Credit Rating Body, an individual organisation is allowed to credit rate its own qualifications and learning programmes. It may also be possible for an individual organisation to credit rate provision owned by them but delivered solely by other organisations, provided that, at the time of application, information is given on the partnership arrangements that it wishes to be considered within the scope of credit rating. Such arrangements need to meet the following criteria:

- The other organisation’s quality assurance systems are either the same as that of the body seeking Credit Rating Body status, or comply fully with them, and are operated by individuals who fully understand the applicant body’s quality assurance systems. These systems would normally cover arrangements for programme design, approval, delivery, validation, accreditation, assessment and certification. To provide evidence of this the applicant body would need to:
  - ensure that the qualifications and learning programmes comply with the SCQF design principles and common core set of headings and approve any changes to these;
  - have arrangements in place for ensuring staff subject expertise for those delivering the qualification or learning programme;
  - approve its delivery and assessment plan;
  - provide the quality assurance of the assessment;
  - demonstrate that they have confidence in the partner organisation’s quality management structures;
  - ensure that the other organisation’s externality in decision-making aligns with that of the applicant body;
  - ensure that the other organisation’s quality assurance system is subject to regular internal and external review and that action is taken as a result;
  - endorse the provision, by use of certification, naming the applicant body as the quality assurance organisation.

Any other arrangements which do not meet these criteria would be designated as third party and separate approval from the SCQF Partnership would be required for this type of credit rating.
5.0 APPROVAL

5.1 APPROVAL PROCESS

The SCQF Quality Committee will receive regular reports from the SCQF Executive Team on applications to become a Credit Rating Body.

5.2 REVIEW TEAM

On receipt of the application and payment of the appropriate fee, a Review Team will be formed which will comprise a minimum of three Reviewers, drawn from a pool of Reviewers trained and appointed by the Executive Team. The number of Reviewers can be increased if the size of the organisation to be approved requires it and/or the applicant body is a Collaborative Partnership.

The Review Team will normally include an:

- SCQF Partnership Executive Team Officer;
- External Reviewer;
- SCQF Quality Committee Member.

In addition, for training or updating purposes, the team may be shadowed by one additional reviewer. This reviewer, however, would not play any part in the review or decision making.

In addition, a reserve member of the Review Team will be appointed (either from the SCQF Quality Committee or from the Executive Team) so that, in the event of a very late withdrawal by a Team Member, the visit can go ahead as by that time, both sides will have undertaken considerable preparation for the visit.

5.3 CRITERION 1

Evidence submitted for Criterion 1 will be examined by the SCQFP Executive Team and a report submitted to the Review Team. This will also include the review of accounts submitted by the applicant organisation by external auditors to obtain assurance of continued financial viability. If the Executive Team feels that insufficient evidence for the Criterion has been submitted, the application may fail at that point and no visit will take place.
5.4 PROCESS FOR APPROVAL VISIT

An Approval Visit will always be made at a time agreed with the applicant body. The Review Team will individually and collectively consider all the evidence submitted by the applicant body and will identify issues from the application that need to be investigated further or require clarification. These will be agreed by the Review Team and will be sent to the named contact within the applicant body together with the SCQFP Executive Team report on Criterion 1 at least 10 working days prior to the Approval Visit. Whilst every effort will be made to notify the applicant body of issues, or points for clarification, prior to the visit, it should be noted that some might not be, simply because they will have only recently come to light or arise during the visit.

The Review Team will meet with representatives of the applicant body to discuss the application, following which a report on the visit will be presented to the SCQFP Quality Committee.

Where an application is made by a Collaborative Partnership, reviewers will meet collectively and individually with representatives from all of the organisations forming the Collaborative Partnership to confirm the arrangements as set out in the legally binding contract.

At the end of the visit the team should have gathered enough information on which to found its recommendation to the SCQFP Quality Committee.

5.5 CONVERGENCE

The SCQF Partnership recognises that some potential Credit Rating Bodies may have evidence, through rigorous quality assurance activities undertaken for other bodies, that they already meet some of the approval criteria in Criteria 1 and 2. In recognition of the need for convergence of quality assurance systems, the Executive Team will take account of any such evidence. It will be the responsibility of the applicant body to demonstrate that it has already met specified criteria or sub criteria and to supply the evidence for this. The Executive Team will identify the degree of mutual recognition that it can give to each application and will make recommendations accordingly to the Review Team and SCQFP Quality Committee.

These individual decisions on mutual recognition will contribute to the development of `case law’ on convergence issues for the SCQF Partnership and will help the Executive Team to map the SCQF Partnership Approval Criteria to the criteria of other bodies concerned with quality in Scotland. It is thought that the SQA Accreditation criteria will be a likely (but not the only) source where mutual recognition may apply.
5.6 APPROVAL VISIT REPORT

After the Approval Visit, the External Reviewer will write the Approval Visit Report which will include a criterion by criterion approach and a narrative on the applicant body, the Approval Visit and the overall findings and conclusions and the reasons for these findings.

The draft report will be circulated to the other members of the Review Team for comment and suggested amendment. When the editing process is complete the report will be sent to the applicant body for checking for points of accuracy. In the event of any amendments being suggested by the applicant body it will be the responsibility of the Executive Team Officer to finalise the report to the satisfaction of the Review Team and the applicant body prior to the report being submitted to SCQFP Quality Committee for the Approval Recommendation to be made.

5.7 DECISION ON APPROVAL

The SCQF Quality Committee is responsible for making a recommendation to the Board. The recommendation about approval will be taken by a meeting of the full SCQFP Quality Committee. However it may also be devolved to a sub-committee of the SCQF Quality Committee. The recommendations that the SCQFP Quality Committee can make are:

- approved - applicant body can start credit rating;
- approved with conditions – applicant body can start credit rating once the conditions are met;
- not approved – the applicant body cannot start credit rating.

The recommendation will be presented to the SCQF Board which will then make a decision based on the recommendation made by the SCQF Quality Committee.

In relation to Collaborative Partnerships, if approval is given it will be dependent upon the contract continuing to remain in force. Breach or non-compliance (or withdrawal of one of the partners, etc.) will result in withdrawal of the approval to credit rate.
5.8 WHEN APPROVAL IS GIVEN

Once an organisation has been approved there is no limit of time for that approval as long as on-going quality assurance monitoring is satisfactory. The organisation will be added to the list of Credit Rating Bodies which is published on the SCQF website. A member of the Executive Team will contact the new Credit Rating Body to discuss this new status including carrying out credit rating activities, using the logo and keeping the SCQF database up to date by way of the SCQF portal.

Reports from this process will not be routinely published but requests for copies of such reports will be considered under a public interest test.

5.9 WHEN APPROVED WITH CONDITIONS

When an organisation is approved with conditions, members of the Executive Team will meet with representatives from the applicant body to discuss the way in which the conditions can be met and the support that may be required. Where appropriate, this meeting may involve members of the SCQF Quality Committee.

5.10 NOT APPROVED

If an applicant body fails to meet the criteria and is not approved it may be given one further opportunity to seek approval. In such circumstances the applicant body will be required to pay a further fee (which may be modified) and will follow the approval process again. If after this second attempt the applicant body is not approved, it will no longer be eligible to participate in the approval process again. An applicant body that fails to be approved will be informed of this formally by letter and will be given the opportunity to meet with a member of the Executive Team for further clarification.

6.0 MONITORING AND REVIEW

6.1 MONITORING AND REVIEW ASPECTS AND TIMESCALES

SCQF Approved Credit Rating Bodies will be subject to annual monitoring and periodic reviews by the SCQF Partnership. Decisions at annual monitoring and periodic reviews will be based on a risk assessment. Monitoring visits will take place on an annual basis for the first three years after approval is granted. On the fourth year a periodic review will take place. The Quality Committee will then consider the results of the three annual monitoring visits and the periodic review. If these have not raised any major concerns then the Quality Committee can decide to move that Credit Rating Body to a process involving only the completion of a self-assessment report to the Partnership on an annual basis and a four-yearly periodic review visit. However, should there be issues for concern that have not been resolved satisfactorily then the annual monitoring visit will continue until the next periodic
review. However, if at any point in the 4 years areas of concern are identified, the Quality Committee may reinstate the requirement for an annual monitoring visit.

## 7.0 ANNUAL MONITORING

### 7.1 FORMAT

Annual monitoring will comprise:

- completion of the self-assessment Form by the Credit Rating Body resulting in a report sent to the SCQF Partnership. The Credit Rating Body will report on its experience of credit rating in the past year - what worked, what did not work and issues identified. It will also provide an update on the programmes that have been credit rated since the last quality assurance engagement with the SCQF Partnership;
- and, where appropriate, a visit, which will normally involve two Executive Team Officers and representatives of the Credit Rating Body to discuss the issues in the self-assessment report (see Section 6.0).

For the self-assessment of a Collaborative Partnership, the Executive Team Officers will meet with representatives from all of the organisations forming the Collaborative Partnership on a collective and individual basis to ascertain the robustness of working relationships and the operation of the legally binding contract.

For each Annual Monitoring exercise, an Executive Team Officer will be nominated to be the named contact for the Credit Rating Body and will be responsible for taking the lead for the co-ordination of activities and the collation of information.

### 7.2 TIMESCALES FOR COMPLETION AND RETURN OF SELF-ASSESSMENT FORM

At least one month prior to the due date for completion, a self-assessment form will be sent to the named contact within the SCQF Credit Rating Body by the appointed Executive Team Officer. The Credit Rating Body will be given one month to complete and return the form to the named SCQF Officer. This process is set out in Appendix 3.

### 7.3 REVIEW OF DOCUMENTATION

The Executive Team will review the completed self-assessment form against the risk factors and where a visit is due to take place, prepare questions for an annual monitoring visit. The questions will be shared with the named contact at the Credit Rating Body to allow time to prepare for the annual monitoring visit. In addition, reports from the SCQF database will be printed to cross reference with the data provided in the self-assessment form to ensure the SCQF database is up-to-date. Where no visit is due to take place, the self-assessment form will be reviewed against the risk factors and a report will be prepared for the SCQF Quality Committee. The Executive Team may contact the CRB on points of clarification.
7.4 MONITORING VISIT

The Executive Officer will arrange a suitable date for the monitoring visit to take place with the Credit Rating Body. The aim of this visit is to discuss the CRB’s self-assessment report, reports from the SCQF database, recent credit rating activity and the review of these against the risk factors.

7.5 REPORT

The Executive Team Officer will prepare a report based on the self-assessment and the visit. The self-assessment form completed by the CRB will be attached as an appendix to the report. The named contact in the Credit Rating Body will be asked to review the report for accuracy prior to its submission to the SCQFP Quality Committee. The SCQFP Quality Committee will consider the Annual Report to make the decision on whether the Credit Rating Body remains on the list of Credit Rating Bodies. Where no risks are identified the Chair of the SCQFP Quality Committee will inform the Board of the outcome of the Annual Monitoring and the Quality Committee’s decision. Where risks are identified, the Quality Committee may decide that the CRB requires additional support from the SCQF Partnership. Alternatively the Quality Committee may decide to instigate the Periodic Review process earlier than normal and inform the SCQF Partnership Board accordingly.

An executive summary of the report shall be agreed between the SCQFP Quality Committee and the CRB and will be placed on the SCQF website.

7.6 MONITORING BASED ON RISK: RISK FACTORS

For the SCQF Partnership risk is defined as meaning the risk to the learner and to the integrity and rigour of the framework.

The following risk factors will be used in the self-assessment report and by the monitoring team when undertaking annual monitoring visits.

The Credit Rating Body:

- continues to be secure, stable and viable;
- has robust processes;
- is subject to review by an external quality assurance body;
- employs staff experienced in SCQF credit rating;
- provides training and CPD in credit rating;
- has a good credit rating track record within SCQF;
- takes action in response to reports and reviews – both internal and external;
has changed the volume of its SCQF credit rating activity – up or down;
• has changed the scope of its SCQF credit rating activity – wider or narrower;
• has had changes in the personnel with responsibility for SCQF credit rating;
• has had no activity since last self-assessments;
• has taken action on complaints made to the SCQF Credit Rating Body and/or the SCQF Partnership.

Reviewers will make a professional judgement on the overall risk rating, taking account of individual circumstances and both the positive and negative aspects of the risk factors. It is the SCQFP Quality Committee’s expectation that bodies show that they can manage risk - not that they be risk-averse. Risk decisions at monitoring will be allocated a red, amber, and green rating with CRBs aiming for a green rating as set out in Appendix 3.

CRBs with:

• a red rating will be required to suspend their credit rating activities until their processes meet the criteria and the risk has been managed successfully – the SCQF Partnership will offer support and mentoring to such bodies;
• an amber rating will result in the CRB being asked to develop action plans for reducing the risk rating;
• a green rating will result in the CRB being asked to provide good practice examples.

8.0 PERIODIC REVIEWS

8.1 FORMAT AND TIMESCALES

The Periodic Review will take place on a 4-yearly basis and will comprise two parts:

• submission by the CRB of an evaluative, reflective and evidence-based narrative account of how it continues to meet the approval criteria including details of all provision that it has credit rated over the past 4 years, including information about approval and review dates of credit rated programmes of learning;
• a visit to the premises of the CRB at which the Review Team will explore specific areas of interest and carry out an audit of specific examples of credit rated provision.

In addition if there has been third party credit rating activity by the Credit Rating Body, the team will also seek the views of a sample of the third party organisations.

More information on the content and format of the reflective narrative account can be found in Appendix 4.
8.2 THE PROCESS

RISK BASED APPROACH

The SCQF Quality Committee has identified a number of risk factors which are aimed at managing the risk to learners and the integrity of the Framework. Therefore the format and scope of the Periodic Review and the size of the Review Team may be altered if there have been significant changes in the following:

- the volume of SCQF credit rating activity (up or down);
- the scope of SCQF credit rating activity (wider or narrower);
- the financial stability of the CRB;
- the level of provision offered in Scotland.

In addition, the following factors may also affect the format and scope of the review and possibly the size of the Review Team:

- if there have been significant issues highlighted in the annual monitoring reports related to certification and/or credit rating decisions which have not been addressed satisfactorily prior to the periodic review;
- if the CRB is a Collaborative Partnership;
- nature, size and operational complexity of the CRB.

8.3 THE REVIEW TEAM

If there are no significant issues a Review Team will be appointed by the SCQF Partnership normally comprising:

- a member of the SCQFP Executive Team;
- a member of the Quality Committee;
- an External Reviewer.

8.4 TIMESCALES FOR COMPLETION AND RETURN OF REFLECTIVE ACCOUNT

The Credit Rating Body will be required to submit a reflective account and associated evidence at least one month prior to the due date for the Periodic Review exercise. This process is set out in Appendix 4.
8.5 REPORT

The External Reviewer will prepare a report based on the reflective account, evidence and the visit. The named contact in the Credit Rating Body will be asked to review the report for accuracy prior to its submission to the SCQFP Quality Committee. The SCQFP Quality Committee will consider the Periodic Review Report to make the decision on whether the Credit Rating Body remains on the list of credit rating bodies. Where no risks are identified the Chair of the SCQFP Quality Committee will ask the Board to approve the outcome of the Periodic Review and the Quality Committee’s recommendation(s). Where risks are identified, the Quality Committee may also recommend that the CRB requires additional support from the SCQF Partnership.

An executive summary of the report shall be agreed between the SCQFP Quality Committee and the CRB and will be placed on the SCQF website.

9.0 THIRD PARTY CREDIT RATING APPROVAL

9.1 APPROVAL TO CREDIT RATE FOR THIRD PARTIES

A fourth criterion has been developed to meet the requirements of the guidance given in the SCQF Handbook: User Guide. These additional requirements are of a demanding nature and the SCQF Quality Committee requires that an organisation provides some track-record evidence of success as a Credit Rating Body in its own right before being permitted to credit rate for third parties.

Approval for third party credit rating will therefore be undertaken as a separate exercise against the fourth criterion after the Credit Rating Body has had the opportunity to put its own credit rating processes into practice, credit rating a range of programmes over a period of time. The SCQF Partnership does not define the minimum number of programmes to be credit rated or the period of time which must elapse before the approved Credit Rating Body may seek third party credit rating status. It will be for the Credit Rating Body to show that it is ready to meet the pre-approval criteria of volume of activity and time since approval. The charge for fees for applications for third party credit rating is available from the SCQF Partnership.

The Application Form for third party credit rating will be issued by the Executive Team and a timescale for completion and consideration of the evidence will be agreed. The application for third party credit rating status will always involve:
• the completion of the application form;
• the consideration of the evidence against the criteria by the Executive Team;
• a visit to the Credit Rating Body to discuss and clarify the evidence;
• a Report to Quality Committee.

Similar to the Approval process for becoming a CRB outlined in section 5, questions seeking explanation or further clarification regarding the application will be drawn up and sent to the Credit Rating Body prior to the visit which will normally be carried out by two Executive Team Officers.

The report on the application, the evidence and the visit will be drawn up by the Executive Team to enable the Quality Committee to make a recommendation on the application to the Board.

The fourth criterion is provided in section 9.2 below and in Appendix 2 along with a number of examples of the type of evidence that is required to be submitted to the SCQF Partnership by the Credit Rating Body. This criterion assumes that a body seeking third party credit rating authority will have been obliged to credit rate in its own right first. This would mean that such bodies will already have evidence that they meet all existing criteria and have only to be reviewed against the stand-alone fourth criterion.

9.2 CRITERIA FOR THIRD PARTY CREDIT RATING

CRITERION 4: THIRD PARTY CREDIT RATING

The organisation has the capacity, commitment and experience to operate as a Credit Rating Body for Third Parties and has the structure and systems in place to carry out this function. It ensures that its systems link to and operate within its existing quality assurance system as already defined under Criterion 2 and that it has the capacity and commitment under Criterion 3 in order that they comply with the requirements of the SCQF Handbook.

The organisation must:

4.1 Define the scope of third party credit rating authority being applied for in terms of levels, sectors, subjects and types of programme or qualification and provide information on how this extension of its credit rating authority will broaden, deepen and extend the Framework.

4.2 Provide robust, direct evidence of its ability to make valid and reliable decisions on credit rating in its own right, drawing on appropriate sector/subject/industry and level expertise and relating activities to the existing quality assurance system.
4.3 Document a robust system for providing a quality-assured third party credit rating service, which sits within the existing quality assurance system, and covers procedures for ensuring that the SCQF guidelines for third party credit rating are complied with fully.

4.4 Document a robust procedure for the internal review of the proposed third party credit rating service showing how this procedure sits within the existing quality assurance system.

4.5 Document a procedure for making an annual self-assessment of its third party credit rating activity.

4.6 Show how the third party credit rating function and its associated quality assurance are supported by staff development, continuing professional development and/or professional development planning.

10.0 REMOVING CREDIT RATING AUTHORITY

10.1 CREDIT RATING BODIES EXPERIENCING DIFFICULTIES

Although it is unlikely that the SCQF Quality Committee will ever have to remove a Credit Rating Body’s credit rating authority there is a process for doing so. In most cases where there are problems and concerns these will be picked up during annual and periodic monitoring and will be addressed at that time. The SCQF Partnership Executive Team will offer support and mentoring to bodies experiencing difficulties to help them to return to effective working as soon as possible. However, if Credit Rating Bodies continue to cause concerns their approval will be withdrawn.

Where a relationship deteriorates within a Collaborative Partnership and there is no resolution or a partner withdraws from the partnership, credit rating authority will be removed. If one or more of the organisations within the partnership wants to continue to be a Credit Rating Body, they will have to complete a new application form and apply as an independent organisation.

10.2 CIRCUMSTANCES GOVERNING REMOVAL OF CREDIT RATING AUTHORITY

Credit rating authority can be removed when the Credit Rating Body has:

- problems on which it has failed consistently to take action required by the SCQF Quality Committee, for example:
  - evidence of unresolved complaints made by a submitting body to the CRB
  - the loss of all experienced personnel
- institutional or structural change leading to a serious change in roles and responsibilities of the organisation
- problems and is unable to make and sustain improvements;
- not suspended credit rating activity when asked;
- misused its authority;
- stopped credit rating and has been dormant for a lengthy period of time;
- deteriorating relationships within a Collaborative Partnership which is beyond reconciliation.

10.3 PROCESS FOR REMOVING CREDIT RATING AUTHORITY

Credit rating powers will only be removed when all other courses of action have been explored and have been found not to work. The decision to remove authority will be based on evidence from self-assessment reports, annual monitoring, periodic review and special audits set up to deal with specific issues.

In some instances the SCQF Partnership could encourage the organisation/Collaborative Partnership itself to give up its authority but if this course of action fails, the SCQF Quality Committee has the right to implement the process to remove credit rating authority.

Removing credit rating authority will require the consent of the SCQF Quality Committee and will be carried out only after:

- meetings between the SCQF Partnership and the Credit Rating Body;
- agreements have been made as to where lines will be drawn on the exercise of authority – i.e. immediate cessation or completing the work with a mentor overseeing;
- arrangements have been made for taking over any work in progress.

A flowchart setting out this process is included at Appendix 5.

10.4 APPEAL PROCEDURE

An organisation or Collaborative Partnership can appeal a decision only if the SCQF Quality Committee, SCQF Partnership Executive Team or a member of the Review Team, did not conform to due process.

10.5 DECISIONS AGAINST WHICH A CREDIT RATING BODY CAN APPEAL

Appeals can be made against:

- Approval decisions;
- Periodic Review decisions;
- decisions to suspend credit rating powers;
- decisions to remove credit rating powers.
10.6 INFORMING THE CREDIT RATING BODY

Following upon an adverse decision on approval and periodic review, or following upon suspension or removal of authority, the Credit Rating Body will be:

- notified of the decision;
- informed that it has the right to appeal;
- sent information about how to appeal and the timescales for the process.

10.7 INFORMATION OR CLARIFICATION

The Credit Rating Body will have the right to ask for information or clarification and it may also supply evidence which it ought to have submitted to the original visit or other review process but did not. However, it will need to explain why such evidence was not made available originally and the Executive Team, in discussion with the SCQF Quality Committee, may choose to reject the evidence. Should the discussion not resolve the issue the Credit Rating Body will have the right to submit an appeal.

10.8 GROUNDS FOR APPEAL

The single ground for any appeal is that, based on all the evidence available to it at the time, the SCQF Quality Committee failed to conform to due process in reaching the decision which it did reach. For the original decision to be modified, the appellant would need to satisfy the appeal committee that there was maladministration or a material breach of procedural requirements on the part of either the SCQF Quality Committee or an Executive Team Officer.

10.9 APPEAL PROCESS

Appeals must be made in writing by the Credit Rating Body stating why the SCQF Quality Committee should not have reached the decision which it did and providing evidence for this. The Executive Team must provide reasons in writing for the decision that was taken.

The Executive Team and the appellant Credit Rating Body will each be given copies of the other’s documentation. See also Appendix 5.
10.10 APPEAL COMMITTEE

It has been agreed that a separate appeal committee will be set up to hear any appeals. The structure, membership, remit and reporting arrangements of this committee will be decided by the SCQF Partnership Board.

The appeal committee will set a date to meet to review the documentation in hand, to consider brief oral submissions by the two parties and to consider both the processes by which the SCQF Quality Committee came to its decision on the Credit Rating Body and the decision itself - was this the right decision to take in the light of the evidence that was before the SCQF Quality Committee? The material supplied to the appeal committee will include:

- original report;
- papers from the Credit Rating Body appealing;
- papers from the Executive Team and the SCQF Quality Committee.

The appeal committee will come to its decision in the light of the evidence before it. The appeal committee can decide that:

- the original decision be confirmed; or
- that the original decision be amended in a particular way.

The decision will be notified in writing to both the appellant Credit Rating Body and the Executive Team with an explanation of the reasons underpinning the decision. The Executive Team will implement the decision by taking the appropriate actions.

11.0 MAINTAINING A SHARED CONFIDENCE

11.1 DEALING WITH RAISED CONCERNS

Should the situation arise where concerns are raised about the credit rating process of any Credit Rating Body (CRB) by a submitting body then the SCQF Partnership would seek to resolve this. This course of action would only be taken where the cause for concern being flagged was that due process had not been followed and had affected the outcome of the credit rating decision. What the SCQF Partnership cannot provide for are situations where organisations or individuals unhappy with the outcome of the level of their qualification or learning programme make a complaint directly to the SCQF Partnership simply on the basis that the level confirmed was not what they expected. The SCQF Partnership would therefore only respond to a cause for concern from a submitting body that a CRB had:
1. failed to comply with the criteria set out in the SCQF Handbook and/or;
2. failed to take account of all of the relevant information supplied by the submitting body and/or;
3. failed to comply with any published processes which they themselves had issued.

The SCQF Partnership expects such situations should rarely occur, given the need for the submitting body and the CRB to work together so closely during the credit rating process. In addition it would only deal with any cause for concern raised where all of the existing complaints processes of the CRB itself had been fully exhausted. In such a situation the SCQF Partnership Board would refer the cause for concern to the SCQF Quality Committee to investigate the details and, if appropriate, work with the existing external accountability agencies to help resolve the matter. A flow chart setting out this process is attached as Appendix 6.

11.2 PROCESS

Any cause for concern raised directly and formally with the SCQF Partnership would be logged within the complaints log held by the CEO, and the Chair of the Board would then be notified. At this point the Executive would contact the CRB to alert them to the issue and give them the opportunity to comment. If the cause for concern fell into one of the three categories above, the full Board would be notified and the complainant would be notified in writing that the process set out in the flowchart would ensue. In the case of Scottish HE institutions, the QAA already operates a comprehensive process for investigating potential risks to quality or academic standards. This scheme encompasses all credit rating processes used by Scottish HE institutions. We will therefore forward any cause for concern relating to credit rating activities of HEIs to the QAA and will ask them to consider such cases under their standard protocol.

For all other CRBs the Chair of the SCQF Partnership Board would write to notify them of the cause for concern being raised and give them the opportunity to respond. Dependent on the outcome of that response the Chair could then decide to ask the Chair of the Quality Committee to approach one of the other agreed external bodies (Education Scotland or Scottish Government) asking them to investigate the issues being raised and the processes followed and to report back to SCQFP. If the issue related to one of the SCQFP Approved CRBs this would be passed directly by the Chair of Quality Committee to a sub group of the Committee to investigate. Initial response by the SCQF Partnership would be within 10 working days and a more detailed response within a further 21 working days.

Any appeal against the decision/outcome from Quality Committee would have to be heard by the Chair of the SCQF Partnership Board.
APPENDIX 1: FLOWCHART ON THE APPROVAL PROCESS

The following flowchart shows the full quality assurance cycle.
APPENDIX 2: INDICATIVE EVIDENCE FOR THE CRITERIA FOR BECOMING A CREDIT RATING BODY

CRITERION 1: A BODY OF GOOD STANDING

The organisation is a body of good standing, demonstrating a commitment to and a successful track record in the design and delivery of learning provision for Scotland.

The organisation must:

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>EXAMPLES OF EVIDENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Provide a formal constitution which describes its identity, functions, aims and structures.</td>
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<tr>
<td></td>
<td>Strategic plans; formal constitutions; business plans; audited accounts; organisational chart showing the key functions carried out by the organisation; documentation showing the organisation’s history; information about partners and stakeholders in Scotland.</td>
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<tr>
<td>1.2</td>
<td>Demonstrate that it is a secure, stable and viable organisation.</td>
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<td></td>
<td>Customer service statement setting out standards of service users can expect, performance measures against which provision will be judged, focusing particularly on manageability, responsiveness and value for money.</td>
</tr>
<tr>
<td>1.3</td>
<td>Demonstrate a knowledge and understanding of education and training.</td>
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<td></td>
<td>Details of partner education and training providers.</td>
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<tr>
<td>1.4</td>
<td>Provide evidence of a successful track record of and a commitment by senior personnel to operating in Scotland or for the Scottish market.</td>
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<tr>
<td></td>
<td>Testimonies from these partners as well as others such as employers and stakeholders in Scotland.</td>
</tr>
<tr>
<td>1.5</td>
<td>Provide evidence of a successful track record in devising quality assured learning provision in Scotland or for the Scottish market in relation to specific subjects/industries/sectors and levels.</td>
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<tr>
<td></td>
<td>Documentation showing how the organisation: ■ has implemented its diversity and equality strategy; and ■ ensures course accessibility in terms of content and delivery.</td>
</tr>
<tr>
<td>1.6</td>
<td>Provide evidence confirming that its diversity and equality strategy meets the requirements of current legislation.</td>
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<tr>
<td></td>
<td>Documentation showing: ■ the staff development policy; and ■ IIP registration.</td>
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<tr>
<td>1.7</td>
<td>Provide an effective staff development policy and be able to demonstrate this policy in action.</td>
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</table>
CRITERION 2: ROBUST QUALITY ASSURANCE SYSTEM

The organisation already has in place a documented quality assurance system for programme design, approval, validation, accreditation, assessment or other related activities and has evidence, through internal and external review, that this quality assurance system is valid and reliable.

The organisation must:

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>EXAMPLES OF EVIDENCE</th>
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</table>
| 2.1 Operate a robust quality assurance system for programme design, approval, validation, accreditation or other related activities and demonstrate that the separate processes which make up the quality assurance system:  
- are operated by individuals who are experienced in the relevant process and have subject expertise where this is required;  
- are supported by appropriate management structures and have externality in decision making;  
- are benchmarked against other equivalent processes; and  
- are subject to regular review to ensure that they continue to meet the needs of users. | Procedures and policies for:  
- the quality assurance of programme design, approval, validation, accreditation, assessment or other related activities;  
- roles and responsibilities of staff and/or committees involved in managing and operating both the quality assurance system and the individual processes within it;  
- evidence of system review and action taken as a result;  
- evidence of benchmarking activities and consideration of issues arising from these;  
- evidence of process reviews and actions taken as a result. |
| 2.2 Demonstrate that it regularly reviews and strives to improve and enhance its quality assurance system by:  
- carrying out internal reviews on all aspects of the quality assurance system; and  
- taking action on the outcome of such internal reviews. | Internal review reports; details of actions taken on the findings of these reports; details of action taken in relation to any quality assurance activity. |
| 2.3 Ensure that its quality assurance system is subject to regular external review and provide evidence of:  
- the outcome of these external reviews; and  
- actions taken as a result of these external reviews. | External review reports from quality assurance bodies such as QAA, SQA, HMIe; external review reports of other external quality assurance schemes; details of actions taken on the findings of these reports. |
CRITERION 3: CAPACITY AND COMMITMENT

The organisation has the capacity and commitment to operate as an SCQF credit rating body and ensures that its credit rating processes and procedures link to and function within its existing quality assurance system as already defined under Criterion 2.

The organisation must:

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>EXAMPLES OF EVIDENCE</th>
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<tbody>
<tr>
<td>3.1 Document a robust procedure for credit rating which sits within the existing quality assurance system and complies with the requirements of the SCQF Handbook, Section 1 – SCQF Credit Rating Guidelines.</td>
<td>Proposed credit rating procedure along with commentary showing how the procedure: ■ meets the criteria; ■ links to other quality assurance processes operated by the organisation; and ■ complies with the requirements of the SCQF Handbook.</td>
</tr>
<tr>
<td>3.2 Define the scope of credit rating authority being applied for in terms of levels, sectors and types of programmes or qualifications.</td>
<td>Business plan on proposed credit rating activity covering: ■ aims and objectives; ■ the qualifications, occupational sectors and levels of expertise in which it proposes to credit rate; ■ organisational chart illustrating the key functions of staff and level of expertise in occupational sectors relating to design, delivery and assessment of qualifications; ■ examples of record keeping; ■ communication strategy for the credit rating process; and ■ identification of key dates to evaluate and review the effectiveness of the business plan.</td>
</tr>
<tr>
<td>3.3 Document a robust procedure for the internal review of the proposed credit rating process showing how it sits within the existing quality assurance system.</td>
<td>Internal review procedure and explanation of how this links to other quality assurance processes operated by the organisation. Arrangements for identifying and actioning any corrective and preventative measures arising out of internal review.</td>
</tr>
<tr>
<td>CRITERIA</td>
<td>EXAMPLES OF EVIDENCE</td>
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<tr>
<td>3.4 Demonstrate the ability to make valid and reliable decisions on</td>
<td>Organisational chart illustrating the key functions of staff and level of expertise in occupational sectors relating to design, delivery and assessment of qualifications. Details of staff experience in credit rating activity undertaken in another capacity - eg submitting programmes for credit rating by a third party. Arrangement for implementing the credit rating procedure. Explanation of how this procedure links to other quality assurance processes operated by the organisation. Arrangements for confirming the effectiveness of induction and training for individuals in the credit rating process.</td>
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<td>credit rating, drawing on appropriate sector/subject/industry and level</td>
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<td>expertise and relating activities to the existing quality assurance</td>
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<td>system.</td>
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<tr>
<td>3.5 Document a robust procedure to:</td>
<td>Examples of the organisation’s certificates demonstrating how SCQF level and credit and logo will be shown on certificates. Examples of record keeping. Documentation showing how the organisation will inform its stakeholders about the SCQF. Documentation showing how the organisation will update the SCQF database. Description of the way in which the organisation will use the SCQF logo.</td>
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<td>record the outcomes of the credit rating process;</td>
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<tr>
<td>communicate these outcomes to users and other stakeholders;</td>
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<tr>
<td>keep the SCQF database up to date by way of the SCQF portal; and</td>
<td></td>
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<tr>
<td>describe the way in which the SCQF logo will be used.</td>
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</tr>
<tr>
<td>3.6 Document a procedure for developing an annual self-assessment</td>
<td>Arrangements for the provision of an annual self-assessment report. Description of how this process links to other quality assurance processes operated by the organisation.</td>
</tr>
<tr>
<td>report on credit rating activity for the SCQF Partnership.</td>
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</tr>
<tr>
<td>3.7 Show how the credit rating function and its associated quality</td>
<td>For individuals undertaking the credit rating process, examples of the organisation’s: training programme for credit rating; training needs analysis; continuous professional development and/or personal development programme; and induction training.</td>
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<tr>
<td>assurance are supported by staff development, continuing professional</td>
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<tr>
<td>development and/or professional development planning.</td>
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<tr>
<td>Examples of the organisation’s certificates demonstrating how SCQF</td>
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<tr>
<td>level and credit and logo will be shown on certificates. Examples of</td>
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<tr>
<td>record keeping.</td>
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<td>Documentation showing how the organisation will inform its stakeholders</td>
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<td>about the SCQF.</td>
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<tr>
<td>Documentation showing how the organisation will update the SCQF</td>
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<tr>
<td>database.</td>
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<tr>
<td>Description of the way in which the organisation will use the SCQF</td>
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<tr>
<td>logo.</td>
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</tbody>
</table>
CRITERION 4: PROVIDING A CREDIT RATING SERVICE FOR THIRD PARTIES

The organisation has the capacity and commitment to operate as an SCQF third party credit rating body and has the structures and systems in place to carry out this function. It ensures that its systems link to and operate within its existing credit rating processes and procedures link to and function within its existing quality assurance system as already defined under Criterion 2 and that they comply with the requirements of the SCQF Handbook.

The organisation must:

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>EXAMPLES OF EVIDENCE</th>
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</thead>
</table>
| 4.1 Define the scope of third party credit rating authority being applied for in terms of levels, sectors, subjects and types of programme or qualification and provide information on how this extension of its credit rating authority will broaden, deepen and extend the Framework. | Business plan on proposed third party credit rating activity covering:  
- aims and objectives;  
- the qualifications, occupational sectors, and levels of expertise it proposes to credit rate;  
- organisational chart illustrating the key functions of staff and level of expertise in occupational sectors relating to design, delivery and assessment of qualifications;  
- examples of record keeping;  
- marketing strategy for the credit rating process; and  
- identification of target dates to evaluate and review effectiveness of the business plan. |
| 4.2 Provide robust, direct evidence of its ability to make valid and reliable decisions on credit rating in its own right, drawing on appropriate sector/subject/industry and level expertise and relating activities to the existing quality assurance system. | Reports from the body’s annual monitoring of its own credit rating process;  
- details of the experience of existing staff in credit rating own programmes;  
- organisational chart illustrating key functions of the credit rating service;  
- details of how individuals with the required level of expertise in occupational sectors relating to design, delivery and assessment of qualifications will be accessed and deployed;  
- arrangements for implementing the credit rating procedures;  
- explanation of how this procedure links to other quality assurance processes operated by the organisation. |
### CRITERIA

**4.3** Document a robust system for providing a quality-assured third party credit rating service, which sits within the existing quality assurance system, and covers procedures for ensuring that the SCQF Guidelines for third party credit rating are complied with fully.

**EXAMPLES OF EVIDENCE**

Proposed procedure for third party credit rating along with commentary showing how the procedure:
- meets the criteria;
- builds on the body’s existing credit rating experience;
- links to other quality assurance processes operated by the organisation; and
- complies with the requirements of the SCQF Handbook.

This includes the proposed procedures for:
- the decision making function in relation to third party credit rating, the administration of the credit rating service and the support function;
- ensuring that the submitting body’s assessments are subject to external review and monitoring;
- the submitting body to report to the credit rating body.

The proposed guidance for submitting bodies on certificates and the way in which these should show SCQF level and credit and logo; examples of record keeping.

Documentation showing how the organisation will inform its learners and other stakeholders about the SCQF.

Arrangements for the provision of an annual self-assessment report; description of how this process links to other quality assurance processes operated by the organisation.

**4.4** Document a robust procedure for the internal review of the proposed third party credit rating service showing how this procedure sits within the existing quality assurance system.

**EXAMPLES OF EVIDENCE**

Documentation showing internal review procedures and an explanation of how this links to the existing quality assurance processes operated by the organisation.

Arrangements for identifying and actioning any corrective and preventative measures arising out of internal reviews.
### CRITERIA

<table>
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<tr>
<th>4.5</th>
<th>Document a procedure for making an annual self-assessment of its third party credit rating activity.</th>
</tr>
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</table>

### EXAMPLES OF EVIDENCE

| 4.5 | Proposed procedure and documentation of the annual self-assessment of third party credit rating activity. |

| 4.6 | Show how the third party credit rating function and its associated quality assurance are supported by staff development, continuing professional development and/or professional development planning. |

| 4.6 | For individuals undertaking credit rating processes for third party provision, examples of the organisation’s:  
- training programme for credit rating;  
- continuous professional development and/or personal development programme; and  
- induction training. |
APPENDIX 3: FLOWCHART FOR THE ANNUAL MONITORING PROCESS

Self-assessment form sent to SCQFP Approved CRB

Self-assessment forms returned to Executive team

Self-assessment forms reviewed, reports printed from the SCQF Database and visit conducted by Executive team

Quality Committee will instruct a periodic review to take place based on the risk rating

Risks identified

Based on the self-assessment form and the visit, a report will be prepared for Quality Committee

No risks identified

A green rating CRB may be asked to provide good practice

Quality Committee confirms that the credit rating body can continue as planned based on the risk rating
A red rating CRB will be required to suspend their credit rating activities until their processes meet the criteria and the risk has been managed successfully – the SCQFP will offer support and mentoring to such bodies.

An amber rating will be required to develop action plans for reducing the risk rating.

Final report sent to credit rating body and the outcome published on the SCQF website.
APPENDIX 4: ARRANGEMENTS FOR PERIODIC REVIEWS – GUIDANCE NOTES

INTRODUCTION

These guidance notes are designed to assist SCQFP Approved Credit Rating Bodies to prepare for and participate in the Periodic Review process.

AIMS

The main aim of the Periodic Review is for the SCQFP Approved CRB to satisfy the SCQF Partnership, the Quality Committee and the Board that it continues to meet the approval criteria. The evidence provided by the CRB for the Periodic Review therefore should demonstrate clearly how it continues to meet those criteria.

The Periodic Review should also provide the SCQF Partnership and the CRB with an opportunity to reflect on the overall performance and progress of the organisation over a 4 year period.

It is not the intention of a Periodic Review to subject the CRB to the same level of scrutiny experienced during an original application for CRB status. However, nor is it the intention simply to review recent changes and their impact since the last annual review. The outcome of the Periodic Review should ascertain whether the CRB continues to have the capacity, commitment and ability to continue to be awarded the facility to credit rate with the SCQF.

The processes set out below for the format of the Periodic Review should also provide the opportunity for the SCQF Review Team to review evidence and explore with the CRB specific areas of interest in some depth and to encourage them to reflect on areas of good practice and lessons learned over the previous 4 year period.

THE PROCESS

Risk Based approach

The SCQF Quality Committee has identified a number of risk factors which are aimed at managing the risk to learners and the integrity of the Framework. Therefore the format and scope of the Periodic Review and the size of the Review Team may be altered if there have been significant changes in the following:
the volume of SCQF credit rating activity (up or down)
- the scope of SCQF credit rating activity (wider or narrower)
- financial stability of the CRB
- the level of provision offered in Scotland.

In addition, the following factors may affect the format and scope of the review and possibly the size of the Review Team:

- if there have been significant issues highlighted in the annual review reports related to certification and/or credit rating decisions which have not been addressed satisfactorily prior to the periodic review
- the CRB is a Collaborative Partnership
- nature, size and operational complexity of the CRB
- whether there has been third party credit rating.

The Review Team

If there are no significant issues a Review Team will be appointed by the SCQF Partnership normally comprising:

- a member of the SCQFP Executive Team
- a member of the Quality Committee
- an External Reviewer.

The role of the Review Team is to work in conjunction with the CRB to ensure that the Periodic Review is carried out effectively and to the satisfaction of all parties whilst ensuring that the CRB:

- continues to operate robust quality assurance systems and processes for credit rating
- acts on the outcomes of both internal and external reviews of those processes
- continues to demonstrate the capacity and commitment to the quality and integrity of the SCQF and to education and training in Scotland.

Format of the Review

The Periodic Review will comprise two parts:

- submission by the CRB of an evaluative and reflective narrative account of how it continues to meet the approval criteria including details of all provision that it has credit rated over the past 4 years, including information about approval and review dates of credit rated programmes of learning; and
a visit to the premises of the CRB at which the Review Team will explore specific areas of interest and carry out an audit of specific examples of credit rated provision.

In addition if there has been third party credit rating activity by the Credit Rating Body, the team will seek the views of a sample of the third party organisations.

The Reflective Account

The reflective account should demonstrate the CRB’s capacity for self-reflection and a critical evaluation of how it continues to meet the criteria for being an SCQFP Approved Credit Rating Body and should include each of the 3 criteria. If the CRB has been awarded the facility to credit rate third party provision then the 4th criterion associated with this activity should also be addressed. In addition, the CRB should attach, as an appendix, details of all programmes of learning which have been credit rated in the four year period leading to the Periodic Review together with approval and review dates.

The CRB should provide focused evidence to support this reflective account – this evidence may be included with the account in hard copy or in electronic format (including links to documents). It is expected, however, that the evidence included should be clearly referenced within the reflective account demonstrating how it illustrates the conclusions made within the account. A pro-forma for this referencing has been provided, at Annex 2, for CRBs to use if they wish.

Evidence could include the following types of information:

- a sample of internal and external review reports
- a sample of action plans arising from review reports
- examples of changes made to processes resulting from feedback
- strategic and operational plans
- details of current credit rated programmes
- credit rating policies and procedures
- feedback from clients, customers, stakeholders
- organisation charts
- staff development programmes for credit rating etc.

This list is neither prescriptive nor exhaustive.

Starting the process

1. The SCQFP Executive Team will agree with the CRB the month and a mutually suitable date in which the Periodic Review shall take place. This discussion will normally take place at least 3 months prior to the review taking place. The SCQF Executive
Team member will act as the main point of contact for correspondence between the Review Team and the CRB. The CRB should identify a point of contact for the review at this stage.

2. The submission of the reflective account and associated evidence will be required at least 4 weeks prior to the date of the review. The SCQFP Executive will give the CRB notice of this date 8 weeks before the submission is due.

3. The SCQFP Executive Team will provide the Review Team with a copy of the submitted reflective account, any evidence submitted by the CRB and the following additional materials:
   - A print out from the database of all current provision listed as having been credit rated by the CRB in the previous four years;
   - Completed annual self-assessment reports for the CRB from the previous 3 years;
   - Annual monitoring pro-forma for the CRB from the previous 3 years.

4. The Review Team will individually evaluate the evidence submitted by the CRB before meeting to agree areas to be explored further with the CRB at the visit and to decide on the sample of credit rated learning programmes.

5. If there has been third party credit rating activity, views as to the operation of those processes will be sought from a sample of the third party organisations.

The SCQFP Approved CRB will receive a copy of the Review Team’s areas for further exploration before the visit takes place, in order to allow staff to prepare in advance for the visit. In addition, it will receive notification about which examples of credit rated learning programmes will be audited.

The On-Site Visit

1. The visit will normally be one day in duration. This may be altered if the CRB is a Collaborative Partnership and the review includes multiple partners/sites. The timetable and format for the visit will be agreed between the Review Team and the CRB.

2. At the visit, the Review Team will audit at least 3 examples of credit rated programmes – one per member of the Review Team. The aim of this audit will be to follow the audit trails for individually credit rated programmes, but not to revisit the outcomes of credit rating in terms of level and credit points. The Review Team will be looking to conclude that the CRB is following their approved published credit rating processes.
3. The team will also wish to meet with key staff with responsibility for credit rating, a selection of staff who have been involved in credit rating processes and/or those trained in credit rating (who may not yet have participated directly in credit rating).

4. Discussions will centre on those issues previously indicated by the Review Team to the SCQFP Approved CRB arising out of the Reflective Account. In addition, the team may explore other issues if these arise during the discussions at the visit.

**After the Visit**

1. Following the visit, the External Reviewer will collate feedback from all members of the Review Team and write a full report. This report will then be sent to the SCQFP Approved CRB for points of accuracy to be checked and returned to the SCQF Partnership.

2. The final report will be presented to the SCQF Quality Committee at the first available opportunity and Quality Committee members will make recommendations to the Board regarding whether the CRB continues to meet the approval criteria.

3. If there are any concerns about credit rating activity during the Periodic Review the SCQF Quality Committee may request that no more provision is credit rated until the concerns are resolved, or in extreme cases, could remove credit rating status from the CRB.

4. Following consideration by the Board, the outcome of the review will be communicated in writing to the CRB by the Chair of the Board.

5. The only ground for appeal is that, based on all the evidence available to it at the time, the SCQF Quality Committee failed to conform to due process in reaching its decision.

6. An Executive Summary shall be agreed between the Quality Committee and the CRB and published on the SCQF website.
ANNEX 1: FLOWCHART OF THE FORMAT AND TIMELINE OF THE PERIODIC REVIEW PROCESS

1. Date of review visit agreed by Executive Team and CRB 12 weeks prior to date of visit
2. At least 8 weeks notice of submission deadline for Periodic Review given to CRB by Executive Team
3. Review Team appointed at least 4 weeks before submission deadline and communicated to the CRB
4. Evidence submitted by Credit Rating Body by submission deadline
5. Executive Team to provide Review Team with all necessary additional materials by the submission deadline
6. 2 weeks after submission, Review Team meets to analyse CRB information, compile questions and identify credit rated programmes for audit
7. Areas for discussion and sample of credit rated programmes to be reviewed notified to CRB by the Review Team at least 2 weeks before date of review visit and agreed
8. Review visit takes place at CRB premises (normally 1 day visit 4 weeks after submission date)
9. Draft report completed by External Reviewer within 3 weeks of date of visit and sent to CRB for accuracy checks
10. Draft report returned within 2 weeks by CRB
11. Report is finalised by Review Team and sent to Executive Team within one week of agreement by CRB
12. Final report is submitted to Quality Committee which makes recommendations to the Board
13. Board makes decision and the Chair of the Board communicates outcome of review to the CRB within 2 weeks of decision
# ANNEX 2: EVIDENCE REFERENCING DOCUMENT

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<tr>
<th>EVIDENCE NO*</th>
<th>EVIDENCE</th>
<th>RELATED CRITERIA</th>
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* this number could be used as superscript within the Reflective Account
ANNEX 3: GUIDELINES ON REFLECTIVE ACCOUNT

The reflective account should involve an evaluation of perceived strengths and weaknesses in relation to the SCQF Quality Assurance Model Criteria with reference to evidence which substantiates the conclusions reached. Where weaknesses are perceived these should be explored within the document and the actions taken, being taken or planned to be taken and the impact and expected impact of these should be indicated.

The document should include the following sections:

Introduction

This could include any details of specific recent changes within the organisation.

A reflective narrative for each of the three (and if appropriate, four) quality criteria:

Criterion 1: Body of Good Standing
Criterion 2: Robust Quality Assurance System
Criterion 3: Capacity and Commitment
Criterion 4: Third Party Credit Rating (if applicable)

These sections should include strengths, weaknesses, actions and impacts as indicated above together with an indication of relevant evidence. This narrative should demonstrate how the CRB continues to meet these criteria.

A list of all previously credit rated provision since either the Approval to become a CRB or the last Periodic Review.

This should include:
- the title
- level
- credit points
- date of approval (credit rating)
- date of review
- date of archival removed (if applicable)
- programme owner (if different from CRB).

An indication of relevant evidence cross referenced to the quality criteria and the reflective account.

A suggested pro-forma has been included for this purpose but CRBs may choose to present this information in another format which is better suited to their needs/systems.
APPENDIX 5: REMOVAL OF CREDIT RATING AUTHORITY

INTRODUCTION

The Annual Self-Assessment Monitoring process is carried out in order to ensure that approved SCQF Credit Rating Bodies continue to carry out their responsibilities in accordance with the Quality Assurance Model (QAM). In the situation where the annual review exposes circumstances where the SCQF may be at risk, the SCQF Partnership reserves the right to remove credit rating authority.

The removal of credit rating authority is a serious matter and in all circumstances will be a last resort carried out only when matters of concern cannot be resolved by any other means.

The SCQF Partnership uses a `traffic light’ system when evaluating the outcome of the self-assessment annual reviews undertaken by SCQFP Approved CRBs and would then adopt a systematic and transparent approach to resolving AMBER or RED risk ratings from the Annual Self Evaluation Monitoring. The following sections of this paper explain how escalation would take place along with the necessary steps to resolve the situation.

POST ANNUAL SELF EVALUATION

Where the SCQF Partnership Executive Team agrees that, following the completion of the annual self-evaluation form and the Annual Monitoring Visit, the SCQFP Approved Credit Rating Body is not fulfilling its requirements against the risk factors set out in the QAM, the Credit Rating Body would be flagged with either an AMBER or RED rating. In such circumstances the Chair of the SCQF Quality Committee will be notified at the earliest opportunity and agreement reached on whether to call a special meeting of the Quality Committee or whether to refer it to the next meeting. This will be dependent on the nature and urgency of the issues raised.

The Quality Committee would then be asked to consider the issues being flagged and to agree a process for moving the SCQFP Approved Credit Rating Body from an AMBER or RED to a GREEN rating. Depending on the severity of the infringement this could range from directing the SCQF Partnership Executive Team to provide and/or arrange support for the SCQFP Approved Credit Rating Body for a defined period of time to the immediate suspension of credit rating authority and commencement of a Periodic Review (normally undertaken every four years) for which the SCQFP Approved Credit Rating Body would incur the charge currently in place at the time.
SUPPORT PROVIDED

If the Quality Committee came to a conclusion that the situation could be remedied by taking such a supportive role then the Chair of the Quality Committee would write to the SCQFP Approved Credit Rating Body setting out the reasons for reaching an AMBER assessment, along with the proposed support mechanisms and timescales (unlikely to be longer than 3 months) for the organisation to return to GREEN status. In the interim credit rating could continue. This letter would also ask the CRB to confirm its acceptance of the assessment by the Quality Committee, and the proposed way forward, to the Chair. Examples of issues which may lead to this assessment could be:

- the loss of key personnel within the CRB leading to lack of sufficient expertise
- a prolonged lack of activity of credit rating
- institutional changes which could potentially affect the credit rating activity.

The Executive Team would provide reports to the Quality Committee on progress until such time as the CRB had gone back to GREEN or until such time as the Committee considered that the assessment had to be escalated to RED and a Periodic Review commenced.

PERIODIC REVIEW REQUIRED

However where the initial agreement of the Quality Committee was to instigate a Periodic Review the Chair of the Quality Committee would write to the SCQFP Approved Credit Rating Body setting out the reasons for reaching a RED assessment along with the rationale for this generating a Periodic Review. This letter would also notify them that credit rating must be suspended until the Review had taken place and a report on the outcome made back to the Quality Committee. Again the letter would ask the CRB to confirm its agreement with the assessment and the proposed way forward. Examples of issues which may lead to this assessment could be:

- evidence of unresolved complaints made by a submitting body to the CRB
- the loss of all experienced personnel
- institutional or structural change leading to a serious change in roles and responsibilities of the organisation.

The Periodic Review would take place within 4 weeks of the letter being issued and the Quality Committee would then receive a report from the Review Team on the outcome of the Periodic Review within three weeks of the visit. Dependent on the outcome of that the Committee could either confirm that the issues had been resolved and the CRB returned to GREEN or that a plan was firmly in place to reach GREEN within an agreed timescale (unlikely to be longer than 3 months).
ISSUES UNRESOLVED

If, however, the issues remained and a more serious course of action, namely removal of credit rating authority, had to be considered, the Chair of the Quality Committee and an SCQF Partnership Executive Team member would meet in the first instance with senior representatives of the SCQFP Approved Credit Rating Body to discuss the concerns, the course of action that had been taken to date and establish the reasons that recovery to GREEN status had not been met. This meeting would also set out the possibility of removal of credit rating status and discuss the implications this would have for learners and organisations.

The Chair would then report to Quality Committee which would consider whether there was a way forward which could be proposed to ultimately return the CRB to GREEN. In such a case the suspension would continue but the agreed plan of action would be closely monitored; again the Quality Committee is unlikely to agree a further period longer than 3 months and it may be that they have to sit at AMBER during that time.

Only in the most serious situation where all of the evidence still pointed to a recommendation on removing credit rating status would the Quality Committee then have to consider submitting this to the Board. In coming to that recommendation they would also have to consider in detail information on the following:

- numbers of programmes credit rated
- those still active considering whether these could continue as live on the database for the period of approval or whether they would need to be removed
- the number and type of learners involved and how these might be affected by the removal of credit rating.

A plan for dealing with these issues must then be developed by the CRB and the SCQF Partnership Executive and endorsed by the Quality Committee. This would then be submitted along with the recommendation to remove credit rating authority to the SCQF Board for approval and the Chair of the Board would communicate the outcome of the Board’s decision to the SCQFP Approved Credit Rating Body.

APPEAL

The organisation may appeal the decision of the Board if, based on all the evidence available to it at the time, the SCQF Partnership failed to conform to due process in reaching the decision which it did reach. The appeals process is available on request.

RESUBMISSION

At least one calendar year must have elapsed before any organisation that had its credit rating authority removed could resubmit an application to become an SCQFP Approved Credit Rating Body. The application would be treated as a ‘new’ application and the process for approval carried out in accordance with the QAM.

www.scqf.org.uk
ANNEX 1: REMOVAL OF CREDIT RATING AUTHORITY – FLOWCHART

Annual Self Assessment
Monitoring visit to CRB takes place

Issues arising – AMBER or RED rating

Chair of Quality Committee notified and decision taken on whether to call special meeting or to refer to next Quality Committee meeting

(a) AMBER rating - Credit Rating Authority continues and support is provided by SCQFP Executive for a period of no more than 3 months. Reports provided to Quality Committee

(b) RED rating - Credit Rating Authority is suspended while Periodic Review takes place. Periodic Review scheduled within 4 weeks. Report from Periodic Review goes to Quality Committee within 2 weeks of visit. Letter from chair of QC to CRB

Issues unresolved. Chair of QC and Executive member meet with CRB

Issues resolved

Quality Committee / Special meeting agree either
(a) AMBER rating - measures to move CRB from AMBER to GREEN rating or (b) RED rating - to instigate a Periodic Review to either confirm RED rating or move CRB to AMBER/GREEN Rating. Letter from Chair of QC to CRB

GREEN rating - Report made to Quality Committee recommending restoring GREEN rating. Board notified

RED rating continues. QC recommends the removal of Credit Rating Authority to the SCQFP Board

Issues unresolved

Issues resolved

Report made to Quality Committee recommending continuation of CRB status. Board notified

No issues arising – GREEN rating

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APPENDIX 6

MAINTAINING A SHARED CONFIDENCE IN THE SCOTTISH CREDIT AND QUALIFICATIONS FRAMEWORK

The Scottish Credit and Qualifications Framework (SCQF) is Scotland’s Lifelong Learning Framework. The SCQF is a descriptive framework which has the facility to compare formal qualifications, awarded by universities, colleges and schools, with vocational education and training and non-formal learning programmes such as that delivered by employers and in the community. It does this through the allocation of a level and the award of SCQF Credit Points by a Credit Rating Body.

The SCQF is managed by the SCQF Partnership, a company limited by guarantee and a registered charity in Scotland. The SCQF Partnership is governed by a Board of Directors which has an independent Chair and comprises senior representatives from the member organisations which are:

- The Quality Assurance Agency for Higher Education Scotland;
- Scottish Qualifications Authority;
- Universities Scotland; and
- Scotland’s Colleges.

The Board also has a co-opted Director who represents employers. In addition, Scottish Government has observer status on the Board.

Quality assurance is fundamental to the SCQF and in order to maintain confidence in the Framework the SCQF Partnership has established a Quality Committee to ensure that the quality and integrity of the Framework is maintained. It is critically important to the SCQF Partnership that Credit Rating Bodies, learning providers, employers and learners have a shared confidence in the Framework.

Consistency in approach to credit rating is vital and for this purpose SCQF Guidelines for Credit Rating have been developed which set out the processes that every Credit Rating Body must adhere to in order to ensure that the award of SCQF Level and Credit is reliable. What we want is to try to ensure that CRBs are supported in their decision making processes by providing them with clear criteria and procedures supported by useful guidance.

The SCQF Credit Rating Guidelines were developed through consultation and encapsulate best practice. Their focus is exclusively on procedures for ascribing an SCQF Level and SCQF Credit Points to defined learning outcomes. They provide a standard approach to the measurement of the result of learning wherever, whenever, and however it has been achieved. To determine the level and credit value of learning SCQF Credit Rating Bodies
must have:

- rigorous processes to ensure that the stated levels and volume of outcomes accurately reflect the intended purpose and aims of the learning experience being credit-rated;

- rigorous, secure and appropriate arrangements for assessing learner achievement against those learning outcomes both within and across Credit Rating Bodies.

Decisions by the Credit Rating Body must be based on sound evidence supported by peer judgement.

The overall responsibility of ensuring consistency and integrity rests with the SCQF Partnership and they have ensured that external accountability exists for each Credit Rating Body.

**PROPOSAL FOR DEALING WITH ANY CAUSE FOR CONCERN**

Should the situation arise where concerns are raised about the credit rating process of any Credit Rating Body (CRB) by a submitting body then the SCQF Partnership would seek to resolve this. This course of action would only be taken where the cause for concern being flagged was that due process had not been followed and had affected the outcome of the credit rating decision. What the SCQF Partnership cannot provide for are situations where organisations or individuals unhappy with the outcome of the level of their qualification or learning programme make a complaint directly to the SCQF Partnership simply on the basis that the level confirmed was not what they expected. We would therefore only respond to a cause for concern from a submitting body that a CRB had:

1. failed to comply with the criteria set out in the SCQF Handbook and/or;

2. failed to take account of all of the relevant information supplied by the submitting body and/or;

3. failed to comply with any published processes which they themselves had issued.

The SCQF Partnership expects such situations should rarely occur, given the need for the submitting body and the CRB to work together so closely during the credit rating process. In addition it would only deal with any cause for concern raised where all of the existing complaints processes of the CRB itself had been fully exhausted. In such a situation the SCQF Partnership Board would refer the cause for concern to the SCQF Quality Committee to investigate the details and, if appropriate, work with the existing external accountability agencies to help resolve the matter. A flow chart setting out this process is attached as Annex 1 but in summary.
Any cause for concern raised directly and formally with the SCQF Partnership would be logged within the complaints log held by the CEO and an SCQFP Executive officer would contact the CRB to ascertain if there is a case to answer and the Chair of the Board would be notified. If the cause for concern fell into one of the three categories above, the full Board would be notified and the complainant would be notified in writing that the process set out in the flowchart would ensue. In the case of Scottish HE institutions, the QAA already operates a comprehensive process for investigating potential risks to quality or academic standards. This scheme encompasses all credit rating processes used by Scottish HE institutions. We will therefore forward any cause for concern relating to credit rating activities of HEIs to the QAA and will ask them to consider such cases under their standard protocol.

For all other CRBs the Chair of the SCQF Partnership would write to notify them of the cause for concern being raised and give them the opportunity to formally respond. Dependent on the outcome of that response the SCQF Partnership Chair could then decide to ask the Chair of the Quality Committee to approach one of the other agreed external bodies (Education Scotland or Scottish Government) asking them to investigate the issues being raised and the processes followed and to report back to SCQFP. If the issue related to one of the non-publicly funded CRBs this would be passed directly by the Chair of Quality Committee to a sub group of the Committee to investigate. Initial response by the SCQF Partnership would be within 10 working days and a more detailed response within a further 21 working days.

Any appeal against the decision/outcome from Quality Committee would have to be heard by the Chair of the SCQF Partnership Board.
ANNEX 1: SHARED CONFIDENCE – FLOWCHART

Cause for concern raised and logged with SCQFP and initial contact made with the CRB

Chair of SCQFP Board notified. Decision made as to whether cause for concern meets category 1, 2 or 3

If YES, full Board notified. Chair of Board responds to concern in writing within 10 working days to say that concern will be dealt with either (a) by SCQFP or (b) by QAA

(b) If concern is about an HEI, it is passed on to be dealt with by QAA under their Protocol for managing potential risks. Reports submitted to Quality Committee & Board. END OF PROCESS

If NO, Chair of Board responds in writing within 10 working days, saying that concern does not fall within policy remit. END OF PROCESS

(a) If concern is about an institution which is not an HEI, it is dealt with by SCQFP. Chair of the Board writes to relevant CRB for formal response

CRB response resolves concern

Chair of the Board writes to complainant with CRB response. Report backs made to Quality Committee and Board by respective Chairs. END OF PROCESS

CRB response does not resolve concern

Chair of the Board assesses whether concern relates to (i) a college or SQA or (ii) an SCQFP Approved CRB

If (i), concern is passed by Chair of the Board to Chair of Quality Committee who passes it on to Education Scotland or Scottish Government to seek to resolve

Outcome of discussions reported to Quality Committee. Quality Committee recommends any further action

Report back made to Quality Committee & Board by respective Chairs. END OF PROCESS

If (ii), Chair of the Board will ask the chair of Quality Committee to establish a QC sub group to review and discuss with the SCQFP Approved CRB

Chair of Quality Committee writes to complainant with outcome(s) within a further 21 working days. Chair of Board notified. Report backs made to QC & Board by respective Chairs. END OF PROCESS