

# Appeals Panel Materials

## The appeals panel – route map

<p><b>CEIAG Quality Award provider states intention to appeal</b></p>	<ul style="list-style-type: none"> <li>• The CEIAG Quality Award provider sends a formal letter to the QiCS Project Leader stating that it intends to lodge an appeal against the validation panel's decision. It must do this within fourteen days of receiving the validation panel's report.</li> </ul>
<p><b>QiCS Project Leader initiates the appeals process</b></p>	<ul style="list-style-type: none"> <li>• The QiCS Project Leader:             <ul style="list-style-type: none"> <li>○ sends the CEIAG Quality Award provider a letter of acknowledgement and an appeals form to complete and return within 28 days</li> <li>○ informs the Chair of the Consortium Board that an appeal is underway.</li> </ul> </li> </ul>
<p><b>CEIAG Quality Award provider submits its appeal</b></p>	<ul style="list-style-type: none"> <li>• The CEIAG Quality Award provider submits the completed appeals form electronically to the QiCS Project Leader within 28 days – providers should note that the appeals panel will base its judgement on the evidence available to the validation panel and they may not add any 'new' evidence at this stage.             <ul style="list-style-type: none"> <li>○ The CEIAG Quality Award provider also confirms who will represent the CEIAG Quality Award provider at the appeals panel – if it wishes, the provider may send the same individuals who represented it at the validation panel</li> </ul> </li> </ul>
<p><b>QiCS Project Leader organises the appeals panel</b></p>	<ul style="list-style-type: none"> <li>• The QiCS Project Leader:             <ul style="list-style-type: none"> <li>○ convenes an appeals panel comprising the Chair of the Consortium Board and two Board members who were not part of the original validation panel – the appeals panel will be supported by the QiCS Project Leader (observer) and the original validation panel adviser (note-taker and report writer)</li> <li>○ confirms the venue and timing of the appeals panel.</li> </ul> </li> </ul>
<p><b>Appeals panel takes place</b></p>	<ul style="list-style-type: none"> <li>• The CEIAG Quality Award provider receives an immediate decision – this is final.</li> <li>• The validation panel adviser completes the appeals panel summary form.</li> </ul> <p><b>The Consortium Board accepts no liability for any commercial or other issues arising from a provider's failure to achieve the Standard.</b></p>

# Appeal against a validation panel's decision

Commercial in confidence

<b>CEIAG Quality Award provider</b> <i>(with contact details)</i>	
<b>Validation panel details</b>	
Validation panel date:	Validation panel members: 1 2 3
Validation panel adviser:	
Date of validation panel report:	
<b>Date appeal submitted</b>	
<b>Summary of grounds for appeal</b>	
National validation criteria	Reason for appeal

**Detailed statement in support of appeal**

**National validation criteria:**

**National validation criteria:**

**National validation criteria:**

**National validation criteria:**

Signed:

Position:

Date:

## Guidance notes on completing the appeals form

The template uses tables and you may insert additional rows as necessary.

<b>Details</b>	<ul style="list-style-type: none"> <li>• Provide the information requested.</li> </ul>
<b>Summary of grounds for appeal</b>	<ul style="list-style-type: none"> <li>• Insert the numbers of the national validation criteria that are the focus of your appeal.</li> <li>• For each of the criteria identified, give the main reason(s) for your appeal.</li> </ul>
<b>Detailed statement in support of appeal</b>	<ul style="list-style-type: none"> <li>• Give the number of the national validation criteria and then explain clearly why you disagree with the validation panel's decision – bear in mind that you may not add new evidence at this stage.</li> </ul>
<b>Sign/date</b>	<ul style="list-style-type: none"> <li>• Check the content of the completed form, sign and date it.</li> </ul>
<b>Submit the form</b>	<ul style="list-style-type: none"> <li>• Submit the form electronically to the QiCS Project Leader.</li> </ul>

## Appeals panel summary

*To be completed by the validation panel adviser at the end of the appeals panel meeting.*

<b>CEIAG Quality Award provider</b>	
<b>Appeals panel members:</b>	
1	
2	
3	
<b>Appeals panel date:</b>	<b>Validation panel adviser:</b>

### Grounds for appeal

National validation criteria	Met/Not met	Comment

### Panel decision and any additional comments

Signed:

Name:

Date: