A User Guide to Centre Approval

Contents

Introduction

We want to ensure that our Centres feel supported and confident when delivering our qualifications. We've put together this guide to offer an explanation for each section of the Centre Approval Report.

There are other supporting documents available on QualHub in the approvals section.

The Centre Approval Report will be completed by an External Quality Assurer (EQA) and you'll be graded between 1 and 5 for each criterion.

The grading criteria are explained below and you may also be given some actions or recommendations within Section 6: Action Plan for Centre. Depending on how successful the review is, you may gain approval or you may need an additional review to give you the chance to complete any action points.

Within our resource section on QualHub we have a range of sample course file documentation to support you getting started.

The Report

The Centre Approval Report is divided into sections as follows:

Introduction - Centre and Contact Details
Section 1 – Management Systems and Administrative Arrangements
Section 2 – Resources
Section 3 – Delivery and Assessment
Section 4 – Internal Quality Assurance
Section 5 – Action Plan for Centre
Section 6 – Action for External Quality Assurer or Head Office
Section 7 – Additional Information.

Within some sections, the main subject areas are divided into elements such as 2.1, 2.2 etc. These are graded using our 5 point scale. Your External Quality Assurer (EQA) will assess each point and grade it as follows:

1. Excellent (no action required)
2. Meets requirements (recommendation identified)
3. Discrepancies within tolerance (action required)
4. Requirements not met (significant action required)
5. Unsatisfactory (immediate action required)

N/A - Not Applicable

Please note throughout this document we refer to evidence, (possible and suggested sources). Not all are mandatory, and they aren't definitive lists, the evidence will be reviewed against the criteria and Qualification Specification. We are aware different Centres have different terminology/names for documentation.

The Approval Criteria in Detail

Section 1 - Management Systems and Administrative Arrangements

1.1	**The Centre's aims, policies and procedures in relation to the qualification are supported by senior management and understood by the delivery team**

You're being asked to demonstrate that senior managers within your Centre have given their approval and support to deliver our qualification(s) for which you are requesting approval. All delivery staff should be familiar with the assessment requirements of each unit and learning outcomes within the qualification(s) being offered. This information will be provided within the appropriate Qualification Specification, which can be downloaded from our website.

Possible sources of evidence could include:

- written confirmation of support from senior managers to run the qualification
- copy of your curriculum development plans
- organisational chart
- documented quality procedures.

If liability for the management of the course lies with a secondary party, you'll need to provide evidence of this agreement.

1.2	**There are procedures in place to ensure effective communication systems between all levels of staff and in all directions (including placements and staff who work remotely)**

Staff meetings (either face to face or remote) and the use of email or telephone calls are all forms of effective communication systems. If it's difficult to bring staff together because they cover a wide geographical area, minutes of meetings should be shared and kept for review.

Possible sources of evidence could include:

- staff handbooks and/or staff updates
- agendas and minutes of team meetings
- records of emails.

Its good practice to share external quality assurance report with all Internal Quality Assurers (IQAs) and Assessors associated with the qualification(s). If this doesn't happen, staff may develop different ways of working and learners could be disadvantaged through differing levels of assessment.

1.3	**Staff responsibilities, authorities and accountabilities of the assessment and internal quality assurance team across all assessment sites are clearly defined, allocated and understood**

All staff involved in the internal quality assurance and assessment process must be familiar with the assessment criteria stated in our Qualification Specifications. Staff allocated to the course delivery should understand their role in the assessment process.

The management role includes acting as the quality assurance link in the assessment process by making sure that appropriate staff are allocated to the qualification(s) and that they're sufficiently competent to assess the course.

Possible sources of evidence:

- Internal Quality Assurance strategy
- job descriptions or specified areas of responsibility
- organisational charts.

This must include those staff that deliver, supervise or assess parts of the qualification, details of their involvement and role, and whether they are based centrally or on placements. Any unfilled posts must be included too.

It's helpful for this to include a contingency plan in relation to staffing if required for long term absence.

All of this evidence will also be needed for any satellite sites or partner organisations which you intend to use.

1.4	**Time will be allocated for regular team meetings and standardisation for all staff involved in the teaching, assessment and internal quality assurance of the qualification**

The main aim of team meetings is to promote good practice within your team, and to ensure you have a standardised approach to assessment and internal quality assurance of learners' evidence, which is consistent with the assessment criteria set for each qualification. If someone can't attend the meeting they should be given a copy of the minutes and, if staff are based in different locations, meetings could take place via electronic conferencing.

Possible sources of evidence:

- records/minutes of meetings, briefings or updates
- schedule of activity for staff involved in the delivery.

1.5	**A staff induction and development process is in place for the assessment and internal quality assurance team**

All staff associated with the qualification(s) need to be familiar with it and the Qualification Specification. It's good practice to hold an induction session for all Assessors and IQAs and to ensure that all staff are given a copy of the Qualification Specification so they are familiar with the units and assessment criteria.

Staff new to assessment could be supported by more experienced staff or by attending an Assessor and IQA training event which are held throughout the year. Further details on events can be found on our website.

Possible sources of evidence:

- staff induction process (eg right to work etc)
- records of individual development plans
- induction checklist/plans for new colleagues
- monthly 1-2-1s
- action plans to acquire the Assessor and IQA qualifications where appropriate.

Remember that the IQA is responsible for their Assessors and should offer support as and when required.

1.6	**There are documented policies or procedures for:** • **Appeals** • **Centre Contingency and Adverse Effects (to include withdrawal of Centre approval status and protection of the learners' interest in the case of such a withdrawal)** • **Complaints** • **Conflicts of Interest** • **Equality, Diversity and Inclusion** • **Data Protection Policy** • **Risk Assessment and Health and Safety (incl. Public Liability)** • **Learner recruitment, registration and certification** • **Learner Support Policy/Protocol** • **Malpractice and plagiarism** • **Safeguarding** • **Special considerations and reasonable adjustments** • **RPL Policy incl. Transfer of credits** • **Withdrawal of learner or qualification(s) from NCFE** • **Admissions and/or enrolment**

Your course file should contain copies of all policies and procedures and there should be evidence to show how this information is shared.

Policies may be given to learners during the induction process or provided on an intranet site for the learner to read at their convenience. Our sample course file documents within the resources section of QualHub may support you with this.

Conflicts of interest in regards to assessment must be clearly documented including any risk mitigation plans to safeguard the integrity of the assessment. Please refer to information on our website about conflict of interest including our policy and declaration form for more information.

Learner support policy/protocol should include guidance on careers, progression and general wellbeing.

Evidence to meet this point will be documented polices as listed above that are aligned to NCFE policies and procedures, details of how and when these documents are provided to learners with evidence of how and when the policies and procedures will be updated.

1.7	**Marketing and advertising of the qualification(s) is clear, accurate and not misleading and, where applicable, complies with our guidelines**

You need to ensure that any marketing or advertising materials that you use to promote the qualification(s), including pages on your website, accurately reflects the details of the qualification(s) being offered. Any use of our branding elements should be in adherence to our branding guidelines which can be found on our website.

In the case on un-regulated provision, all promotional materials should adhere to the 'Stipulations for Advertising and Promoting Un-regulated Qualifications' in line with Ofqual Conditions of Recognition B5.1 and B5.2.

Evidence to support this could include copies of all relevant promotional materials and a demonstration of any webpages used to advertise the qualification demonstrating correct use of our branding guidelines.

1.8	**The Centre has in place a robust registration and certification process and will register learners in a timely fashion to allow for external quality assurance to take place**

You need to ensure that you register your learners early enough in the academic session to allow your EQA to carry out sufficient quality assurance reviews to ensure the qualification(s) is being delivered to the required standard, that there are no discrepancies with the assessment criteria, staff are occupationally competent, you have access to relevant assessments and assessment information and learner work meets the qualification(s) standards.

Evidence to support this could include copies of enrolment records, learner registration details, progress on the qualification and estimated timescale for completion.

1.9	**There is a process in place to notify us of any changes in relation to the delivery of the qualification which may affect the Centre's ability to meet our approval criteria**

You need to ensure there is a robust process in place to notify us of any changes in relation to the delivery of the qualification(s) which may affect the Centre's ability to meet our

approval criteria.

Evidence to meet this point could include a clear organisation chart of key people within the Centre and what process is in place to action any changes to the delivery of the qualification.

1.10	**Where qualification(s) have been written and developed by the Centre, there is a robust process in place to ensure the content is fit for purpose**

You need to ensure that the following is covered when writing course:

- the qualification(s) is fit for purpose by having clearly stated aims, objectives, learning outcomes and associated assessment criteria and guidance for recording assessment
- the stated learning outcomes and assessment criteria are appropriate to the level assigned to the course, in accordance with the 'Guidance for writing customised qualifications'
- checks are carried out to ensure there's not a more suitable qualification on the Ofqual register.

Evidence to meet this point could include course documentation/specifications including aims, objectives, outcomes and assessment criteria, evidence to show that the measurable learning outcomes are at a defined level and benchmarked against national framework level descriptors.

The Centre could also supply schemes of work, learning programmes, session plans and individual learning plans, workbooks and study guides. The CVs of staff involved in writing the programme evidencing relevant qualification and experience.

1.11	**Learner records and details of achievements will be accurate, kept up to date and securely stored for a minimum of 3 years and will be made available for external quality assurance reviews**

A system for tracking learner completion dates should be in place and kept up to date. This could be a spreadsheet recording all Assessors and learners on your qualifications.

Assessors are advised to hold a central record of learner achievement for presentation to the EQA. Centres should provide secure storage facilities for these records.

Our publication 'Regulations for the Conduct of External Assessment' and the 'Regulations for the Conduct of Controlled Assessments' should be made available to all staff involved in the external assessment of qualifications. These documents are available from our website.

The Centre must comply with reasonable requests from us or other regulators in relation to access to premises, records and information for staff or learners for the purpose of EQA and monitoring.

Evidence to meet this point could include:

- demonstration of assessment tracking system/spreadsheet
- learner's evidence tracking log

- assessment completion records
- security and access arrangements
- demonstration of storage arrangements to your EQA.

The Centre should collate feedback from various sources to evaluate the effectiveness of the qualification(s) in relation to continuous improvement.

This could include your curriculum or qualification review process, where statistical data will be gathered, to monitor achievement or a planned survey questionnaire from stakeholders and how the results will be evaluated.

Possible sources of evidence:

- internal audit/self-assessment arrangements
- Quality Improvement Plan
- evidence of corrective actions taken
- evaluation forms/surveys
- user's charter/customer service statements
- patient/stakeholder/learner/employer feedback.

The Centre must take responsibility of any actions identified through the external quality assurance process which will be recorded in the external quality assurance report. There should be a clear communication process in place to disseminate any actions to appropriate staff within the Centre.

Evidence to meet this point could include a clear organisation chart of key people within the Centre and key accountabilities in relation to the delivery of the qualification(s). A standard agenda item for team meetings to discuss EQA actions and who's responsible for sharing this information with the team.

Management Systems applicable to registered professions only.

Including:

- ***Level 3 Diploma in the Principles and Practice for Pharmacy Technicians***
- ***Level 3 Diploma in the Principles and Practice of Dental Nursing.***

1.14	***You have a Fitness to Practise Policy and Procedure***

Evidence would be a documented Fitness to Practise Policy and Procedure. It must be applicable to both staff and learners, written with reference to the relevant regulator, which includes how you'll ensure learners are fit to practise and how you'll deal with any fitness to practise issues at the point of selection.

For Dental Nursing only - you must have a Centre's professional misconduct panel membership in place and a General Dental Council registrant, not involved with the delivery/assessment/internal quality assurance of the learner's qualification on the panel.

1.15	***You have a work-based supervising registrant in place for each learner***

Evidence must show that professional registration of work based supervisors is checked before the qualification starts and that ongoing checks for any changes are in place.

Suggested evidence could include:

- *way agreement - employer/learner/Centre*
- *learner handbook*
- *statement as to how this is to be completed*
- *guidance on the role of the supervising professional registrant and evidence of how this person has been supported with training*
- *evidence that the supervisor/mentor has a current DBS certificate*
- *annual updating of these records*
- *work-based supervising registrant (workplace mentor or supervisor) documented for each learner/workplace.*

1.16	***You have a work-based placement procedure***

Evidence could include:

- *work-based placement procedure which includes the quality assurance of placements*
- *three-way agreement*
- *risk assessments/evidence of review*
- *consideration of patient safety*
- *insurance - public liability, employer*
- *process in place to check the work place/placement is registered with the appropriate regulators*

- *Health and Safety Policy*
- *details of study, workplace based assessments and support required for the learner in the workplace*
- *induction policy/procedure/ employer declaration of work-place induction*
- *adherence to the 3 month rule in accordance to Qualification Specification (Pharmacy Technician only).*

1.17	***You have a formal agreement in place between the learner, Centre and employer/work place***

Evidence would be a copy of the agreement. This should cover:

- *roles and responsibilities (selection processes, assessment, good character and health checks (when appropriate)*
- *reference to policies and procedures (whistle blowing policy, grievance procedure, safeguarding, health and safety)*
- *consideration of relevant regulatory policies (eg from General Dental Council or General Pharmaceuitcal Council)*
- *how feedback will be provided and dealt with*
- *policies for trainee supervision in the workplace*
- *how staff and learners can raise concerns in the workplace*
- *a statement to support how this will be maintained throughout the learners' qualification and monitored*
- *best practice is that completed and signed copies are be in place for each learner prior to approval, if this is not possible this will be checked at EQA reviews*

1.18	***You have a procedure for checking and documenting learner vaccination records (Dental Nursing only)***

Evidence could include:

- *outline of vaccination checking process and how records are to be retained*
- *procedure to outline checking process to ensure all learners have appropriate vaccinations prior to undertaking involvement with exposure prone procedures.*

1.19	***You have a procedure for checking good character and good health at selection stage (Pharmacy Technician only)***

Evidence could include:

- *collection of good character references*
- *collection of self-declaration of health forms*
- *DBS checks.*

Section 2: Resources

This section is about resources relating to the delivery of the qualification(s) eg staff and physical. The Centre will need to demonstrate their ability to meet the occupational competence and knowledge criteria and resource requirements relating to the qualification.

2.1	**There are sufficient competent, suitable, and knowledgeable Assessors and Internal Quality Assurers to meet the demand of assessment and internal quality assurance activities and who are appropriately registered with regulators if applicable and in accordance with Qualification Specification.**

Centres must have sufficient staff working on the qualification(s) to enable assessment and internal quality assurance to take place as highlighted in the Qualification Specification. We don't specify staff ratio numbers to learners as this is a Centre decision. However, it's essential to have at least one Assessor and one IQA for each qualification.

It is possible to implement a system where Assessors and IQAs work across qualification(s) and take on the different roles required.

Occupational competence requirements will vary across qualifications. The details of the occupational competence requirements for your qualification can be found in our Qualification Specifications.

Possible sources of evidence include:

- staff CVs and CPD records together with copies of relevant certificates
- organisation chart
- a record of Assessor/learner ratios and time allocation
- oral confirmation from Assessors and IQAs
- list of qualified Assessors and IQAs
- outline of roles and responsibilities
- evidence of professional registration, where applicable.

2.2	**Assessors and Internal Quality Assurers will have sufficient time, resources and authority to perform their roles and responsibilities effectively**

It's important that the delivery team has enough time, resources and authority to carry out their roles effectively.

Any resource requirements will be detailed in the Qualification Specification and consideration should be given to staff ratio to learners and that staff have sufficient time to fulfil the requirements of their role.

Possible sources of evidence include:

- scheme of work/lesson plans/timetables
- internal quality assurance sampling plans and assessment tracking sheets

- learner feedback
- organisation chart (caseloads of learners)
- job descriptions.

2.3	**There will be appropriate continued professional development (CPD) provision for staff involved in the delivery of the qualification and/or registered profession**

All staff involved with the course should be given access to training to enable them to maintain and update their skills as required in the Qualification Specification.

We don't specify the amount of time to be spent on staff development, but any updates affecting the qualification(s) you deliver should be accommodated as they take place. Staff development can also include keeping up to date with changes which are government-driven and are highlighted on a range of websites. Sharing good practice is also recommended.

Evidence to meet this point should include:

- copy of your staff development programme
- records of training undertaken such as CPD records
- records of meetings, briefings and/or updates
- reviews or monthly appraisals showing personal development plans and training undertaken
- CPD for registered professions should meet subject specific guidance (please see Qualification Specification for more detail).

2.4	**Equipment and accommodation used for the purposes of assessment comply with the requirements of relevant business legislation and qualification requirements**

You must have an appropriate health and safety policy in place and risk assessments should be carried out to ensure that you minimise any potential risks to staff or learners. Equipment should be checked to ensure you comply with legal requirements.

Evidence to meet this point could include:

- public employee liability certificates
- appropriate DBS checks/procedures
- records of equipment and accommodation
- maintenance schedules
- evidence of any additional resources obtained.

Section 3: Delivery and Assessment

This section is all about assessment. The Centre will need to demonstrate their ability to meet the assessment requirements of the qualification.

3.1	**There is a planned programme of delivery and assessment methods available for the qualification which meets our guidelines**

Our Qualification Specification details the requirement for assessment and internal quality assurance for the qualification(s). As you'd expect delivery and assessment must be in line with our Qualification Specification and an example of course planning needs to be presented to your EQA during a visit.

Evidence to meet this point should include:

- a planned programme of delivery such as a scheme of work
- lesson plans, assessment plans etc.
- learner assessment records
- IQA sampling plans and schedules of activity
- evidence of observations/reflective diaries covering different environments (if applicable).

3.2	**Information, advice and guidance about qualification procedures and practices will be provided to learners and potential learners**

Information regarding relevant procedures and practices related to the qualification(s) should be provided to learners as part of their induction. This information should also be accessible to learners and additional advice and guidance should be available.

Evidence to meet this point could include:

- learner guidance and induction materials
- details of support services available
- learner handbook
- evidence of learners being made aware of appropriate documentation from relevant regulators such as GPhC for Pharmacy Technicians and GDC for Dental Nursing.

3.3	**Learners' development needs will be matched against the requirements of the qualification and an agreed individual assessment plan established**

Prior to enrolment, all learners should be subject to initial assessment to ascertain the appropriate level, qualification and any additional educational needs that may be required. Any required pre-requisite qualifications outlined in the Qualification Specification should also be checked at this point.

Evidence to meet this point could include:

- learner initial assessment procedures
- learner assessment plans
- individual learner plans/personal learner plans

- learner contracts
- certificates evidencing pre-requisite qualifications.

3.4	**Learners will have regular opportunities to review their progress and goals and to revise their assessment plan accordingly to meet their target qualification.**

Learners' progress should be checked regularly to ensure they are working at the correct level/pace etc. Any issues should be addressed to reflect the learner's individual requirements.

Evidence to meet this point could include:

- learner assessment plan, frequency of review meeting
- learner records
- individual learner plan/personal learning plan
- system to track learners' progress.

3.5	**Assessment methods will be valid and reliable and will allow access to assessment for learners**

The assessment methods used allow the learner to produce evidence that is valid, reliable and that sufficiently addresses the requirements of the qualification. Assessment methods should provide accessibility to learners with specific requirements.

Evidence to meet this point could include:

- assessment plans and learner assessment records
- provision for learners with particular assessment requirements.

3.6	**Learners will receive regular verbal and written feedback after assessment**

The EQA will need to see that assessment has taken place. If no annotations are made then generally the summative feedback should be more detailed.

Positive and constructive feedback should be given to each learner as the qualification progresses. It should contain enough detail to allow a learner to formulate a response. It is good practice to give the learner both verbal and written feedback.

Evidence to meet this point will include:

- assessment plans and/or learner assessment records
- schemes of work, how and when assessment will take place and a process for feeding back to learners
- sample standard paperwork which will be used to provide feedback.

3.7	**Assessment records are in place which will show accurate assessment tracking, progress and achievement**

A system for tracking learner completion dates should be in place and kept up to date. This could be a spreadsheet recording all Assessors and learners on the qualification.

Learners should be encouraged to take ownership of their evidence and its presentation in a portfolio. Portfolios should also be indexed.

Assessors are advised to keep an assessment completion record including brief details of the type of evidence produced by each learner against each unit.

Evidence to meet this point could include:

- demonstration of assessment tracking system/spreadsheet
- assessment planning paperwork
- assessment plans or learner assessment records.

3.8	**Adequate procedures exist to ensure secure and safe storage of current and completed learner assessment records and examination materials**

Assessors are advised to hold a central record of learner achievement for presentation to the EQA. Centres should provide secure storage facilities for these records.

External and Controlled Assessment Materials provided by NCFE must be securely stored in adherence with NCFE policies. Our publications 'Regulations for the Conduct of External Assessment' and 'Regulations for the Conduct of Controlled Assessment' must be made available to all staff involved in the external/controlled assessment process. These documents are available from our website.

Evidence to meet this point could include an inspection of storage arrangements/facilities and receipt logs of assessment materials to your EQA as well as details of the security and access arrangements for the storage of current and completed learners' assessment records, examination materials and/or JCQ inspection report.

3.9	**There are suitable arrangements to administer exams to ensure compliance with our external assessment regulations**

You should have documented procedures to ensure all external assessments are carried out in accordance with our publication 'Regulations for the Conduct of External Assessment'. This document can be downloaded from our website and should be made available to all staff involved in the external assessment of the qualification.

Evidence to meet this point could include demonstrating an understanding of the process for external assessment, confirmation of arrangements for storage and return of external assessment materials in line with NCFE guidance incl. Qualification Specific Instructions for Delivery (QSID) found on QualHub.

Section 4: Internal Quality Assurance

This section is all about internal quality assurance and how the Centre intends to meet their requirements in relation to internal quality assurance.

4.1	**An appropriate internal quality assurance strategy and sampling plan is in place which will be reviewed regularly and corrective measures implemented**

You should have a documented internal quality assurance strategy and sampling plan in place. This should be regularly reviewed to ensure it is effectively supporting the assessment process and, where improvements are required, amend accordingly.

Evidence to meet this point could include:

- internal quality assurance sampling strategy
- internal quality assurance sampling plan
- records/minutes of team meetings
- internal reviews of sampling strategies
- evidence of corrective actions taken.

4.2	**Suitable arrangements are in place to ensure adequate liaison, consistency and standardisation will take place across all sites including satellite Centres**

It's essential that all staff have the chance to meet and discuss information relating to the qualification. Standardisation meetings are really important and should take place throughout the year across all sites including satellite Centres and/or other organisations involved in the quality assurance of the qualification.

The purpose of standardisation is to maintain consistency in the assessment practice and this can be achieved through sharing of learner evidence, exchanging teaching practices and agreement on assessment practices to be used.

Evidence to meet this point could include:

- documented quality assurance procedures
- schedule for standardisation between satellite Centres
- records of all satellite sites and personnel
- evidence of meeting minutes/training across satellite Centres.

4.3	**Allocation of Assessor responsibilities are clear and will meet the needs of learners and Assessors**

Centres must show that all Assessors and IQAs fully understand their roles and requirements of the qualification.

Evidence to meet this point could include:

- organisational chart
- caseloads/ratios of Assessors to learners
- records of all assessment sites and personnel
- signed agreements indicating the lines of accountability for partner organisations in relation to the management of assessment.

4.4	**Assessors will be provided with accurate advice and support to enable them to identify and meet their training and development needs**

IQAs must support the Assessor as this forms part of the Centre quality assurance process. The IQA's feedback should help the Assessor identify any areas for improvement in their assessment practice. We offer Assessor and internal quality assurance training so visit our website for more information.

Evidence to meet this point could include:

- individual development plans for Assessors/IQAs
- records of meetings, briefings or updates.

4.5	**Internal quality assurance procedures and activities are clearly documented, consistent with national requirements and will ensure the quality and consistency of assessment**

The Centre must have a clear process in place to support internal quality assurance activities which ensure the quality and consistency of assessment. The EQA will need to see a clearly documented process to support this.

Evidence to meet this point could include:

- internal quality assurance sampling plans
- internal quality assurance feedback reports
- records of team meetings
- networking opportunities.

4.6	**Records of internal quality assurance activity will be maintained in line with our requirements and will be made available**

The Centre must have an internal quality assurance sampling plan in place which demonstrates interim and summative assessment. An evaluation of the assessment and internal quality assurance process should always take place to review current and future practice.

Evidence to meet this point could include:

- internal quality assurance sampling plans
- internal quality assurance feedback reports
- records of team meetings.

4.7	**Adequate time will be allocated to allow for internal quality assurance duties to take place**

The IQAs must have sufficient time to carry out their role effectively. This will include time for planning, carrying out internal quality assurance, judgement and decision making and feedback and evaluation.

Evidence to meet this point could include:

- internal quality assurance sampling plans
- records of team meetings
- records of caseloads/ratios.

Section 5: Action Plan for Centre

This section will address any actions or recommendations that the EQA has identified from each section of the report. Your EQA should explain what will appear in this section within their feedback. Please ask about any areas you're unsure of during the visit or when you receive your report. Remember that the EQA is there to offer help and guidance throughout the process.

Section 6: Action for External Quality Assurer or Head Office

This area of the report is designed to pass information on to our head office such as support required by another team eg Business Development or Customer Support. It also records whether the Centre can be approved to offer the qualification and become an approved Centre.

Section 7: Additional Information Sheet

This section will be used by your EQA to record any other information which doesn't fall under the previous sections of the report.

If an Assessor and internal quality assurance training event was carried out as part of the approval record, the method of delivery, the name of the attendees and date should be included in this section of the report.