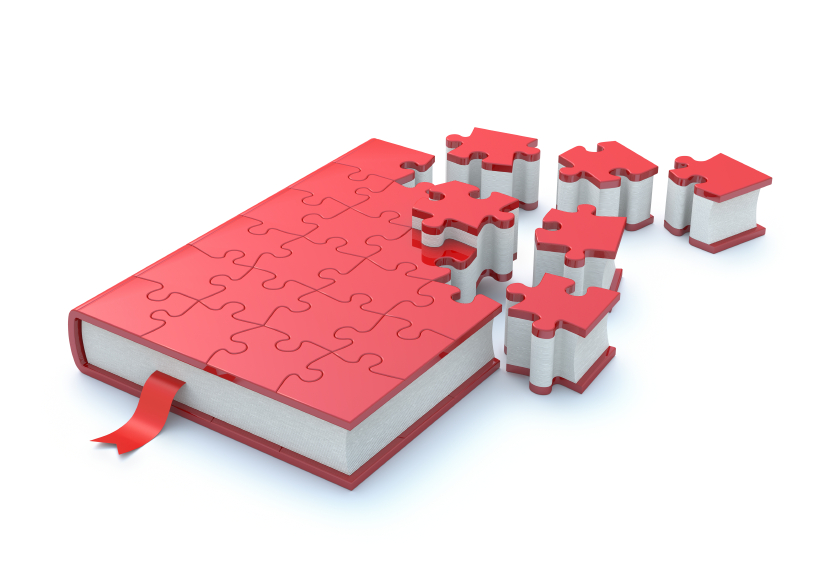


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|  | 0038 Self Assessment Checklist for Centre Approval – Vocational QUALIFICATIONS |



Version 1, April 2018

## Introduction

WAMITAB has produced this document to assist Centres wishing to become approved to deliver WAMITAB portfolio based qualifications. The below checklist details common policies, procedures and practices which underpin effective operations in line with WAMITAB’s quality assurance requirements for approved Centres. It is recommended that a prospective Centre use the checklist to gain a better insight into its current position against each section and identify where any gaps in administrative and quality systems may exist. This will help the Centre prepare for the subsequent approval visit carried out by a WAMITAB External Quality Assurer (EQA).

## Centre Delivery Team

WAMITAB expects that Assessors and Internal Quality Assurers (IQAs) involved in the delivery of WAMITAB portfolio based qualifications hold the appropriate qualifications and competence to carry out their roles. Assessors and IQAs must be approved by WAMITAB **prior** to them commencing delivery of WAMITAB qualifications. Assessor and IQA CVs and certificates should be provided to WAMITAB for approval.

**Please refer to:**

* Code of Practice for the Delivery of WAMITAB qualifications
* WAMITAB Centre Support Guide

## Qualifications to be Approved

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| **Qualification Title** |
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## Supporting Documents

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| **Abbreviation** | **Centre Document Index** |
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## 1. Planning

### 1.1 Management systems

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|  | **Criteria** | **Possible sources of evidence** | **Evidence demonstrating Centre meets criteria** |
| 1.1.1 | The centre’s aims and policies in relation to qualifications are supported by senior management and understood by the assessment team. | 1. Documented quality procedures. 2. Progress reports and staff updates. 3. Health and Safety Policy 4. Equality and Diversity Policy 5. Complaints and Appeals Policy 6. Malpractice and Maladministration Policy |  |
| 1.1.2 | The centre’s access and fair assessment policy and practice is understood and complied with by learners and assessors. | 1. Access and fair assessment policy review mechanisms. |  |
| 1.1.3 | The roles, responsibilities, authorities and accountabilities of the assessment and internal quality assurance team across all assessment sites are clearly defined, allocated and understood. | 1. Documented quality assurance procedures (existing or drafted) 2. An organisational chart. 3. Documented and signed agreements indicating the lines of accountability of partner organisations in relation to the management of assessment and internal quality assurance. 4. Records of all assessment sites and personnel. 5. CVs of the assessment team and internal quality assurers together with copies of qualifications. |  |
| 1.1.4 | Planned or existing internal quality assurance procedures and activities are clearly documented, consistent with national requirements to ensure the quality and consistency of assessment. | 1. Documentation which is likely to be used is available or existing systems are reviewed(see below) 2. Internal quality assurance plans and reports (existing or planned) 3. A sampling strategy and schedule of activity. 4. Records of assessment team meetings.(existing or planned) 5. Planned schedule of standardisation meetings. 6. Assessor networking opportunities. |  |
| 1.1.5 | There has been effective communication within the assessment team and with WAMITAB during the centre approval process. | 1. An outline of a staff handbook is provided relevant to the delivery of WAMITAB qualifications. 2. Schedule of planned team meetings 3. Schedule for standardisation meetings 4. Organisation charts/ staffing matrix outlining assessors/IQA and qualifications for which they are seeking approval. 5. Records of communication with WAMITAB and future plans for filing of information related to WAMITAB provision. 6. Minutes of approval planning meeting |  |
| 1.1.6 | The centre is compliant with the General Data Protection Regulations (GDPR). | 1. Evidence that the centre is registered with the Information Commissioners Office (ICO). 2. Evidence that they have a published privacy notice on their website. 3. Aware of the requirement to provide every learner with a copy of WAMITAB’s Fair Processing Notice prior to submitting registrations to WAMITAB. |  |

### 1.2 Resources

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|  | **Criteria** | **Possible sources of evidence** | **Evidence demonstrating Centre meets criteria** |
| 1.2.1 | Resource needs are accurately identified in relation to the specific award and resources are made available. | 1. Records of resource availability. 2. Evidence of any additional resources obtained. 3. Strategy for obtaining additional resources as required. |  |
| 1.2.2 | Equipment, accommodation and sites used for the purposes of assessment comply with relevant legislation relating to health and safety and access by learners. | 1. Public employee liability certificates. 2. Records of equipment and accommodation. 3. Maintenance schedules. 4. Health and safety policies (see 1.1.1) |  |
| 1.2.3 | There are sufficient competent and qualified assessors and internal quality assurers to meet the demand for assessment and internal quality assurance activity. | 1. CVs and development plans for the assessment team. 2. A list of qualified assessors and internal quality assurers (staffing matrix as noted in 1.1.5) 3. Assessor to learner ratios. 4. Strategy for allocating learners to assessors. |  |
| 1.2.4 | A staff development programme is established for the assessment and internal quality assurance team in line with identified needs. | 1. Staff induction and guidance materials related to WAMITAB provision will be developed. 2. Schedule of planned meetings. 3. An outline of a development plan to be used. 4. Action plans to acquire the appropriate qualifications (evidence of registration with an AO for the TAQA qualification). |  |
| 1.2.5 | Assessors and internal quality assurers have sufficient time, resources and authority to perform their roles and responsibilities effectively. | 1. A plan of assessor/learner allocation. 2. Learner/assessor ratios and time allocation. 3. Oral confirmation from assessors/internal quality assurers. 4. The issue of sufficient time, resources and authority to perform their roles and responsibilities, maybe included in the schedule within the centre’s contract with the individual. |  |
| 1.2.6 | WAMITAB is notified of any changes which may affect the centre’s ability to meet the approved centre criteria | 1. Systems must be set up to ensure that the potential new centre advises WAMITAB of any changes which may affect the centre’s ability to meet the centre approval criteria.   These include potential change in trading name, changes in staff and resources, loss of funding contract. Any issue which is likely to have an adverse effect. |  |
| 1.2.7 | The Centre has the staff, resources and systems necessary to support the assessment of units and the award, accumulation and transfer of credits | 1. Knowledge of the regulatory criteria to provide appropriate credit level and credit value to be entered on WAMITAB Certification request. 2. Ability to recognise appropriate Credit Level and Credit Value information on unit certificates presented by learners. 3. Disseminate Credit Level and Credit Value information appropriately. |  |

## 2. Delivery

### 2.1 Learner support

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|  | **Criteria** | **Possible sources of evidence** | **Evidence demonstrating Centre meets criteria** |
| 2.1.1 | Information, advice and guidance about qualification procedures and practices are provided to learners and potential learners.  Unique Learner Number ULN:  Unless the learner chooses not to have one, the Centre has in place arrangements to provide the learner with a ULN | 1. Learner guidance and induction materials are developed related to WAMITAB provision. 2. Details of support services available. 3. Appeals policy in place ( see 1.1.1) 4. Complaints procedure in place 5. Arrangements to provide ULN for   learners. |  |
| 2.1.2 | Learner’s development needs will be matched against the requirements of the qualification and an agreed individual assessment plan will be established. | 1. Learner initial assessment procedures. 2. Learner assessment plans. 3. Learner contracts. |  |
| 2.1.3 | Learners will have regular opportunities to review their progress and goals and to revise their assessment plan accordingly. | 1. Learner assessment plan, frequency of review meetings; examples of revisions to assessment plans. 2. Employer/Centre contracts/agreements |  |
| 2.1.4 | Particular assessment requirements and needs of learners are identified and met where possible. | 1. Materials/equipment/facilities to support learners with particular requirements and needs. |  |
| 2.1.5 | There is an established appeals procedure, which is documented and made available to all learners. | 1. Documented appeals procedure, including details of grounds for appeal and timescales (see 1.1.1) |  |

### 2.2 Assessment and internal quality assurance

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|  | **Criteria** | **Possible sources of evidence** | **Evidence demonstrating Centre meets criteria** |
| 2.2.1 | Access to assessment is encouraged through the use of a range of valid assessment methods. | 1. Templates for assessment plans and learner assessment records. 2. Provision for learners with particular assessment requirements. |  |
| 2.2.2 | Queries about the qualification specification, assessment guidance or related WAMITAB material are resolved and recorded. | 1. Evidence of issues discussed during the centre approval application process |  |
| 2.2.3 | Assessment will be conducted by qualified and occupationally competent staff.  The assessment process is carried out by suitable persons without a personal interest or conflict of interest. | 1. Details of the assessment team including occupational background, experience, and possession of assessor / internal quality assurance qualifications. 2. Details of countersigning arrangements for any assessment decisions made by unqualified assessors. 3. Use of un-certificated assessors and IQA’s countersigning arrangements. Confirmation of independence of the Tutor/assessor/IQA/ |  |
| 2.2.4 | Assessment decisions and practices will be regularly sampled and findings are acted upon to ensure consistency and fairness. | 1. IQA strategy agreed (including interim IQA) 2. Schedule of proposed team meetings and standardisation events 3. Sampled assessments (observations learner portfolios, knowledge evidence etc.) |  |
| 2.2.5 | Internal quality assurance is conducted by appropriately qualified and experienced staff. | 1. Details of internal quality assurer occupational background, experience and copies of qualifications. 2. Details of countersigning arrangements for any internal quality assurance decisions made by unqualified internal quality assurers. |  |
| 2.2.6 | Potential centre advised of the requirements for access to premises, records, information, learners and staff for the purpose of external quality assurance. | 1. Review of data and information systems to be used to ensure that they comply with WAMITAB’s requirements. |  |
| 2.2.7 | Unit certification is made available to learners | 1. Induction materials appropriate to the delivery of WAMITAB provision. |  |

## 3. Monitoring and review

### 3.1 Records

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|  | **Criteria** | **Possible sources of evidence** | **Evidence demonstrating Centre meets criteria** |
| 3.1.1 | Details of how learner achievements will be processed to ensure they are accurate and kept up to date, and securely stored in line with WAMITAB requirements, and available for external quality assurance and auditing. | 1. Learner registration details. 2. Credit Information details 3. Learner assessment records. 4. Data storage 5. Planned Security/access arrangements. |  |
| 3.1.2 | Records of internal quality assurance will be maintained in line with WAMITAB requirements and made available for the purposes of auditing. | 1. Proposed internal quality assurance plan and sampling documentation 2. Minutes of assessment team meetings conducted prior to approval. |  |
| 3.1.3 | Registration procedure explained in the Centre Support Guide provided to centres on approval. Access to WAMITAB website will be provided once approved. | 1. Records held to ensure compliance with WAMITAB’s requirements. |  |
| 3.1.4 | Details of Assessment Outcomes and other Records will be held and transmitted securely to WAMITAB | 1. Secure filing arrangements 2. Appropriate back-up for stored data 3. Arrangements for electronic transmission 4. Access rights to data as outlined in the Centre Support Guide. |  |
| 3.1.5 | Information and recording systems enable learners’ achievements to be monitored and reviewed in relation to the centre’s equality policy. | 1. Achievement records in relation to the access and fair assessment policy. 2. Plan for gathering statistical information on achievement and certification rates and analyzing it by factors such as ethnic origin, disability and gender and reasonable adjustments applied. |  |

### 3.2 Review

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|  | **Criteria** | **Possible sources of evidence** | **Supporting Evidence** |
| 3.2.1 | Actions identified by external quality assurer as part of the centre approval visit will be disseminated to appropriate staff and actions met in the time frames stated. | 1. Proposed plans for disseminating the feedback from external quality assurance actions, recommendations and requirements. |  |
| 3.2.2 | The effectiveness of the internal quality assurance strategy will be reviewed against the national requirements and corrective measures will be implemented. | 1. Plans for internal reviews of sampling strategies. 2. External quality assurance report of the approval visit. 3. Plans for recording corrective actions. |  |
| 3.2.3 | Learner, employer and other feedback will be used to evaluate the quality and effectiveness of qualification provision against the centre's stated aims and policies, leading to continuous improvement. | 1. Evaluation forms/surveys currently used 2. Users’ charter or customer service statements. |  |
| 3.2.4 | Plan for the centre's achievements are monitored and reviewed and used to inform future centre developmental activity. | 1. Existing Internal audit/self-assessment arrangements. |  |



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