Centre Approval Guidance

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1. Introduction

This guidance document has been written to support centres who want to gain centre approval from SFJ Awards. Additional support and advice can be obtained by contacting SFJ Awards on 0114 284 1970 or by email to approvals@sfjawards.com

To gain centre approval from SFJ Awards, you must be able to satisfy the centre approval criteria set out by SFJ Awards and the qualification regulators. The Centre Approval Criteria can be found in Appendix 1 of this document.

To apply for centre approval, you should be satisfied that you meet all Centre Approval Criteria before submitting the **Centre Approval Request Form** which is available via a temporary login to our Odyssey Portal.

You can request a temporary login via a link our website www.sfjawards.com

Centres must be approved by SFJ Awards before they can deliver any of the national Regulated Qualifications Framework (RQF) qualifications accredited by SFJ Awards. Approval must be obtained for each qualification the centre intends to offer.

Many organisations devise high quality learning programmes that are specific to their own needs and are not part of the national Regulated Qualifications Framework (RQF). SFJ Awards provide a service to recognise, quality assure and certificate such learning programmes. This service is called *Accrediting Learning Professionally* (ALP). If you are interested in offering our endorsed route (ALP) you must be approved by SFJ Awards and complete the **Accredited Learning Professionally (ALP) Scheme Submission Form**.

2. The Approval Process

To achieve SFJ Awards Approved Centre status, SFJ Awards' Centre Approval Criteria must be fully met and be able to demonstrate this.

You will need to have in place:

♦ **procedures** for keeping records of Learners' achievements

♦ **policies** in place to ensure that there are no unnecessary barriers for Learners, the ability to respond to complaints and appeals, no equality and diversity issues and compliance with health and safety requirements

♦ sufficient **resources** (physical and human) to carry out the functions within the centre:

  o suitable facilities

  o staff who conduct the assessment are not the same persons who are quality assuring a unit/qualification

  o staff have sufficient time to carry out their work with Learners and their own development activities

♦ **staff** who are occupationally competent and suitably qualified to carry out assessments and quality assurance activities

♦ a senior member of staff with **overall responsibility** for the operation of the centre

♦ a nominated individual who will be the **Centre Coordinator** and the main contact between the centre and SFJ Awards.

3. Step One – Meeting the Centre Approval Criteria

SFJ Awards' Centre Approval Criteria covers both initial approval and continued approval.

Where a criterion requires historic evidence, a new centre may not initially be able to provide evidence in full to meet the criterion. SFJ Awards will take this into consideration when approving a new centre.

All applicants must review their current procedures and practices against the Centre Approval Criteria in *Appendix 1* to identify any gaps.

Please note that the possible sources of evidence in the Approval Criteria are suggestions; it is not a definitive list of possible evidence and is intended for guidance only.

New centres may already have some established procedures and practices in place on which to base any additional work needed to any address any identified gaps. Guidance by email and telephone will be given by SFJ Awards and, if required (or preferred), an Approvals Advisor may visit you. To arrange such a visit please contact SFJ Awards on 0114 284 1790.

Existing Centre Approval

If you are already approved by another regulated Awarding Organisation you may already have procedures and practices in place to meet the Approval Criteria and be eligible for Fast Track Approval. In this case, the Centre Approval Request Form should be completed and signed by the senior person within the organisation who has the authority to make the declaration. This should be submitted along with recent External Quality Assurance Reports (from the last 12 months) that demonstrate your centre has good management and quality assurance practices, as supporting evidence.

4. Step Two – Centre Approval Request

When you are satisfied that your centre meets the Approval Criteria, complete the Centre Approval Request Form, listing all the national Regulated Qualifications Framework (RQF) qualifications/units that you intend to offer and submit this along with your supporting evidence you wish to present, using your temporary Odyssey Portal login.

If you are also applying for Accrediting Learning Professionally (ALP) approval for your learning programmes, please complete and submit your completed **Accredited Learning Professionally (ALP) Scheme Submission Form** using your temporary Odyssey Portal login.

If you are a **brand-new centre**, you do not have to provide any supporting evidence other than your organisation chart prior to the site visit(s). However, you may submit as much evidence as you wish (policies, procedures etc.) in support of your application. This will help the Approval Advisor to plan their visit, may avoid the need to make further visits and will keep costs to a minimum.

If you are an **existing centre** approved by another Awarding Organisation, you may not need a site visit. If you have satisfactory recent External Quality Assurance Reports that show you have good management systems and practices in place and are fully compliant with the respective awarding organisation's centre approval critieria, these should be submitted with your online Centre Approval Request Form.

Please also submit your completed **New Customer Details/VAT Exemption Eligibility Status Form** using your temporary Odyssey Portal login.

Please Note: The Centre Approval Fee is payable by all applicants, whether your application is successful or not.

5. Step Three – Review of Application and Approval

You will receive acknowledgement of your application within *five working days*.

If you are an **existing centre** and you have submitted recent satisfactory previous External Quality Assurance Reports with your application, a member of the quality assurance team will review your application and you will hear if your application has been approved *within 10 working days*.

If you are a **brand-new centre**, we will contact you *within five working days* to arrange a site visit by one of our Approval Advisors. Before the site visit, the Approval Advisor will review any supporting evidence you have submitted, plan the site visit and advise you on the staff they will want to meet. Following the site visit the Approval Advisor will complete their report, make a recommendation and you will receive feedback *within 10 working days*.

If your application has been unsuccessful, we will discuss the reason for this and any future actions you need to take.

6. Step Four – Ongoing Review

In becoming an SFJ Awards Approved Centre you will have achieved the benchmark requirements against our centre approval criteria. Your Approval Advisor will discuss any improvement actions or recommendations and related timescales.

SFJ Awards will carry out an annual compliance monitoring audit to confirm:

♦ you are continuing to meet the Centre Approval Criteria

♦ you have implemented, or are implementing, any agreed actions

♦ you have made changes in line with recent guidance or requirements from the Qualification Regulators.

Appendix One:

SFJ Awards Centre Approval Criteria

Management Systems		
1	**Criteria**	**Possible Sources of Evidence** (*the list is not exhaustive and is intended for guidance only*):
1.1	The Centre's aims and policies in relation to qualifications are supported by senior management and understood by the assessment team, including policies for dealing with malpractice & maladministration, enquiries and appeals/complaints	• Documented quality procedures • Progress reports and staff updates
1.2	The Centre's access and fair assessment policies and practices are understood and complied with by Learners and Assessors	• Documented policies and procedures • Assess and fair assessment policy review mechanisms
1.3	The roles, responsibilities, authorities and accountabilities of the assessment and quality assurance teams across all assessment sites are clearly defined, allocated and understood	• Documented quality assurance procedures • Organisational chart • Documented and signed agreements indicating the lines of accountability of partner organisations in relation to the management of assessment and internal quality assurance • Records of all assessment sites and personnel • Job descriptions/role profiles of the assessment team and Internal Quality Assurers
1.4	There is effective communication within the assessment team and with SFJ Awards	• Staff handbooks and updates • Minutes of team meetings • Records of communication with SFJ Awards
1.5	SFJ Awards is notified of any changes which may affect the Centre's ability to meet the approved Centre criteria (not applicable for initial approval)	• Notification of change to the assessment and quality assurance teams

1.6	Learner, employer and other feedback is used to evaluate the quality and effectiveness of qualification provision against the Centre's stated aims and policies, leading to continuous improvement	• Evaluation forms/surveys • Customer service statements

Resources		
2	**Criteria**	**Possible Sources of Evidence** (*the list is not exhaustive and is intended for guidance only*):
2.1	Assessors and Internal Quality Assurers have sufficient time, resources and authority to perform their roles and responsibilities effectively	• A record of Assessor/Learner allocation • Learner/Assessor ratios and time allocation • Oral confirmation from Assessors and Internal Quality Assurers
2.2	There are sufficient competent and qualified Assessors and Internal Quality Assurers to meet the demand for assessment and Quality Assurance activity	• CVs and development plans for the assessment team • List of qualified Assessors and Internal Quality Assurers • Assessor to Learner ratios • Recruitment and selection procedures
2.3	A staff development programme is established for the assessment and quality assurance team in line with identified needs	• Staff induction and guidance materials • Record of meetings, briefings and/or updates • Records of individual development plans • Action plans to acquire the Assessor and QA awards, where appropriate
2.4	Resource needs are effectively identified in relation to the specific qualification, and resources are made available	• Records of resource availability • Evidence of any additional resources obtained
2.5	Equipment and accommodation used for the purposes of assessment comply with the requirements of relevant Health and Safety legislation	• Public employee liability certificates • Records of equipment and accommodation • Maintenance schedules • Health and Safety Policies

Learner Support		
3	**Criteria**	**Possible Sources of Evidence** (*the list is not exhaustive and is intended for guidance only*):

3.1	Information, advice and guidance about qualification procedures and practices are provided to Learners and potential Learners	• Learner guidance and induction materials • Details of support services available • Appeals procedures
3.2	Learners' development needs are matched against the requirements of the qualification units and an agreed individual assessment plan is established	• Learner initial assessment procedures • Learner assessment plans • Learner contracts • Details of how prior learning had been taken into account
3.3	Learners have regular opportunities to review their progress and goals and to revise their assessment plan accordingly	• Learner assessment plan, frequency of review meeting, examples of revisions to assessment plans • Learner records • System to track Learner's progress
3.4	Unit certification is made available to Learners	• Records of units registered, claimed and/or awarded • Induction materials • Access to Learner's previous achievement in their Learner record to ensure any credit transfer or exemption are maximised
3.5	Particular assessment requirements of Learners are identified and met where possible	• Materials, equipment and/or facilities to support Learners with particular requirements
3.6	There is an established appeals procedure which is documented and made available to all Learners	• Documented appeals procedure, including details of grounds for appeal and timescales • Records of appeals made and their outcomes

Assessment and Quality Assurance

4	Criteria	Possible Sources of Evidence (*the list is not exhaustive and is intended for guidance only*):
4.1	Queries about the Qualification or Award Specification, assessment guidance or related SFJ Awards materials are resolved and recorded	• Records of queries raised with the Internal Quality Assurer • Record of queries raised with SFJ Awards
4.2	Requests are complied with from SFJ Awards or the qualifications regulators for access to premises, records, information, Learners and staff for the purpose of external quality assurance or other monitoring activities	• Data and information management systems • Learner tracking systems • Assessment and internal quality assurance records
4.3	Access to assessment is encouraged through the use of a range of valid assessment methods	• Assessment plans and Learner assessment records • Provision or Learners with particular assessment requirements
4.4	Internal quality assurance procedures and activities are clearly documented, consistent with national requirements and ensure the quality and consistency of assessment	• Internal quality assurance plans and reports • A sampling strategy and schedule of activity • Records of assessment team meetings • Assessor networking opportunities
4.5	Assessment decisions and practices are regularly sampled and findings are acted upon to ensure consistency and fairness	• Sampled assessment (observation, Learner portfolios, knowledge evidence etc) • Internal quality assurance plans and records of internal quality assurance activity • Records of assessment sampling strategies and quality assurance • Minutes of assessment team meetings • Records of networking and/or standardisation events
4.6	Assessment is conducted by qualified and occupationally expert staff	• Details of the assessment team including the occupational background, experience and possession of Assessor awards (if appropriate) • Details of countersigning arrangements for any assessment decisions made by unqualified Assessors • CVs

4.7	Internal Quality Assurance is conducted by appropriately qualified and experienced staff	• Details of Internal Quality Assurers occupational background, experience and QA awards obtained (where appropriate)
		• Details of countersigning arrangements for any internal quality assurance decisions made by unqualified Internal Quality Assurers
		• CVs
4.8	The effectiveness of the internal quality assurance strategy is reviewed against national requirements and corrective measures are implemented	• Internal reviews of sampling strategies
		• External Quality Assurer reports
		• Evidence of corrective actions taken
4.9	Unless a Learner chooses not to have a unique Learner number (ULN), arrangements are in place to obtain the ULN and a Learner record on behalf of the Learner	• Facilities to obtain the ULN and access the Learner record
		• Learner records
4.10	Where Learner consent is given, the Centre uses access to the record of the Learner's previous achievements in their Learner record to ensure that opportunities for credit transfer and exemption are maximized	• Learner records
		• Record of recognition of prior learning (RPL)
		• Record of exemptions
4.11	The Centre has a process to identify, monitor and manage any conflicts of interest in assessment outcomes	• Conflicts of Interest Register
		• Procedures for identifying conflicts of interest and managing conflicts of interest
4.12	Actions identified by external quality assurance visits are disseminated to appropriate staff and corrective measures are implemented	• External Quality Assurer report(s) circulated to the assessment team and senior management action plans
4.13	The Centre has in place arrangements to ensure the confidentiality of assessment materials	• Written procedures
		• Working practices
		• Confidentiality agreements

Records		
5	**Criteria**	**Possible Sources of Evidence** (*the list is not exhaustive and is intended for guidance only*):
5.1	Information supplied to SFJ Awards for the purposes of registration and certification is complete and accurate	• Records of Learner entry/registration and certification claims
5.2	Learner records and details of achievements are accurate, kept up to date and securely stored in line with SFJ Awards requirements and are available for external quality assurance and auditing	• Learner registration details • Learner assessment records • Evidence files or portfolios • Security and access arrangements • Learner assessment outcomes
5.3	Records of internal quality assurance activity are maintained in line with SFJ Awards requirements and are made available for the purposes of auditing	• Internal quality assurance plans and sampling records • Minutes of assessment team meetings
5.4	The Centre's achievements are evaluated and reviewed and used to inform future Centre programme developmental activity	• Internal audit/self assessment arrangements • Record of findings against the approval criteria • Evidence of improvement actions taken
5.5	Information and recording systems enable Learners' achievements to be monitored and reviewed in relation to the Centre's equal opportunities policy	• Achievement records in relation to access and fair assessment policies • Statistical information and certification rates analysed by factors such as ethnic origin, disability and gender
5.6	The Centre has the staff, resources and system necessary to support the assessment of units and the award	• Learner records
5.7	The Centre has the staff, resources and systems necessary to support the accumulation and transfer of credits, the recording of exemptions and recognition of prior learning if applicable	• Records of Learner exemptions • Records of Learner credit transfers • Records of exemptions • Records of recognition of prior learning claims • Robust process/facilities to validate claims for exemptions and recognition of prior learning
5.8	Learner personal data is collected and held in accordance with current Data Protection Legislation and Data Privacy Laws. Records are held and data shared with the explicit consent of the Learner.	• Signed declarations from Learners • Security and access arrangements

5.9	The Centre has in place a process to confirm the identity of Learners	- Procedure for checking a Learners identity - Records of Learners' identity - Evidence of Learners' identity (copies of passports etc)

Appendix Two:

List of policies centres need to have in place for SFJ Awards Centre Approval:

1. Appeals
2. Complaints
3. Health & Safety (and risk assessments)
4. Equal Opportunities/Equality & Diversity
5. Malpractice
6. Maladministration
7. Conflict of Interest
8. Confidentiality
9. Data Protection
10. Recognition of Prior Learning
11. Access to and Fair Assessment
12. Reasonable Adjustments and Special Considerations
13. Assessment Strategy (Overarching Centre policy, and programme-specific strategy)
14. IQA Strategy (Overarching Centre policy, and programme-specific strategy)

Some of these policies may be combined into one document, eg 4,10 & 11, 7 & 8, 12 & 13; however, the Appeals process must always be separate from the Complaints process.

The policies must be suitable for the purpose of centre approval.

Other key documentary evidence for Centre Approval:

- Organisational Chart
- Job Descriptions/role profiles for Assessors and IQAs
- List of Assessors, their CVs, qualifications certificates (for assessing and/or to show occupational competence to assess), evidence of CPD/assessor training to the current standards
- List of IQAs, their CVs, qualifications certificates (for IQA-ing &/or to show occupational knowledge to IQA), evidence of CPD/IQA training to the current standards
- Development plans/Action plans for Assessors and IQAs
- Framework for team meetings – frequency, standing agenda items and minutes
- Maintenance schedules of equipment
- Evidence of appropriate equipment and accommodation
- Course programme and example resources
- Record systems: for learner records, including tracking progress and auditing and learner identification.