

Accreditation Quality Framework

2014/15 Programme

Service policies and procedures for accreditation

For direct delivery and external providers



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This framework should be read in conjunction with the Service’s Quality Assurance Framework and – for external providers – with the Guidance for Providers.

1. Registration and certification policy and procedure

1. Introduction

The aim of this policy is to register individual learners to the correct programme for portfolio or examination accreditation within agreed timescales. The objectives are:

1. To claim valid learner certificates within agreed timescales.
2. To construct a secure, accurate and accessible audit trail to ensure that individual learner registration and certification claims can be tracked to the certificate which is issued for each learner.

The curriculum lead is responsible for the execution of this policy and managing the tutors involved (the “Curriculum Lead” is any manager with a curriculum responsibility, a Curriculum Assistant and a Family Learning Coordinator; the “Administrator” is the MIS and Examinations Officer.) The authorised tutor is responsible for providing accurate records. Authorised tutors will agree to the awarding body regulations as understood – the line manager is responsible for maintaining a list of authorised tutors.

2. Procedure

1. The respective tutor will collect names and information required for registering learners for the awarding body. The tutor is responsible for checking the accuracy of learner registrations and making each learner aware of their registration status.
2. The administrator will register each learner within the awarding body requirements.
3. The curriculum lead will inform the administrator of any changes and the person update online records; the person will inform the awarding body of withdrawals, transfers or changes to learner details.
4. Learners are registered for examinations will attend their examination on a set date. Learners are required to develop a portfolio and submit a complete portfolio to their tutor for grading on agreed date.
5. For examinations the administrator will submit the documentation by the given deadline.
6. For portfolios tutors will assess portfolio and recommend the learners’ award credit. Tutors are responsible for the submission of an agreed sample of these portfolios; the sample of portfolio will be verified by the internal verifier.
7. For portfolios the administrator will ensure that certificate claims are timely and based solely on internally verified assessment records.
8. For portfolios the administrator will keep a record of certificate claims made to the awarding body.
9. All records for accreditation are kept centrally, safely and securely for three years post certification.

2. Internal quality assurance policy and procedure

1. Introduction

The aim of this policy is to ensure that internal verification is valid, reliable and covers all assessors and programme activity. The objectives are:

1. To ensure that the internal quality assurance procedure is open, fair and free from bias.
2. To ensure that there is accurate and detailed recording of internal verification decisions.
3. To ensure that all centre assessment documentation are verified as fit for purpose.

The service lead internal quality assurer is responsible for a pool of internal quality assurers and up to date details of them on the staff record. The curriculum lead is responsible for the execution of this policy and managing tutors involved (the service lead is the curriculum lead nominated by the Head of Service; the curriculum lead is any manager with a curriculum responsibility, a Curriculum Assistant and a Family Learning Coordinator; the administrator is the MIS and Examinations Officer.) The MIS and Examination Officer is responsible for maintaining accurate records of all accreditation through portfolio and examinations results.

2. Procedure

The service lead internal quality assurer will:

1. Create a termly IQA sampling plan
2. Benchmark internal quality assurance sample based on Risk and "Camera" each term.
3. Ensure that identified staff will maintain secure documentation of all internal verification activity.
4. Ensure that new tutors delivering accreditation have been inducted to the respective awarding body quality assurance requirements.
5. Brief and train tutors of the requirements for current internal verification procedures.
6. Promote internal verification standard as a developmental process between tutors.
7. Produce standardised internal verification report which will be presented at moderation meetings.
8. Use the outcome of internal/external verification to enhance future assessment practice.
9. Ensure all assessors are observed conducting assessment at least once per year.

3. Policy on internal quality assurer

A nominated Service Lead Internal Quality Assurer– appointed by the Head of Service - is responsible for maintaining a pool of internal quality assurers and their programme areas. The person will maintain a record of internal quality assurance on the service’s staff record. The internal quality assurer will:

- Be qualified
- Be inducted
- Use standardised documentation
- Attend annual standardisation (internal moderation) with samples.

3. Appeals policy and procedure

1. Introduction

The aim of this policy is to enable the learner to enquire, question or appeal against an assessment decision or circumstances under which the assessment or exam took place. The objectives are:

1. To attempt to reach agreement between the learner and the assessor at the earliest opportunity.
2. To standardise and record any appeal to ensure openness and fairness.
3. To facilitate a learner's ultimate right of appeal to the awarding body, where appropriate.
4. To protect the interests of all learners and the integrity of the qualification.

The curriculum lead is responsible for the investigating appeals. The Performance and Development Manager is responsible for coordinating appeals and complaints across the service. (an assessor is any tutor authorised to perform the role by their line manager; the "Curriculum Lead" is any manager with a curriculum responsibility, a Curriculum Assistant and a Family Learning Coordinator; the "Administrator" is the MIS and Examinations Officer.) The learner who can appeal will be either taking an examination or through portfolio assessment for an accredited course. A portfolio or examination can be appealed against within four weeks of official receipt of their examination result or portfolio award credit level.

2. Procedure

1. Tutors will inform the learner at induction, of the Appeals Policy and procedure. Cases will be investigated with the learner informed of the decision within 10 working days from receipt of the appeal at each stage.
2. Should a learner make an appeal:

Stage one: the learner informally and verbally enquires to the assessor; the assessor gives a verbal explanation of the decision and seeks to reach an agreement with the learner. The assessor will brief his or her curriculum lead about any enquiries made.

Stage two: if the learner still wishes to appeal against the decision the assessor makes the learner aware of the next stage (provision of the published appeals policy for learners).

3. The learner contacts the Performance and Development Manager who takes a written statement of the appeal from the learner.
4. The Performance and Development Manager will initiate and coordinate an investigation with the curriculum lead, using the procedure given to learners.
5. The Performance and Development Manager will inform the learner making the appeal that it is not a review of work but an investigation compliance of procedures followed.

6. The Performance and Development Manager will record, track and validate any appeal.
7. Should a learner consider that a decision continues to disadvantage her/him after the internal appeals process has been exhausted then they have opportunity to appeal further should they wish to continue to do so.

Stage three: the curriculum lead informs the Head of Service and arrange for the appeal to be forwarded to the awarding body.

8. The Performance and Development Manager will keep appeals records for inspection by the awarding body for a minimum of 18 months.
9. The curriculum lead will ensure, when the outcome of an appeal questions the validity of other results, that the interests of other learners and the integrity of the qualification are protected.
10. The curriculum lead will monitor appeals to inform quality improvement through the SAR and Quality Improvement Plan.

4. Assessment malpractice policy and procedure

1. Introduction

The aim of this policy is to identify and minimise the risk of malpractice by staff or learners. The objectives are to:

1. Make all learners and staff aware of their responsibilities under this policy.
2. Respond to any incident of alleged malpractice promptly and objectively.
3. Standardise and record any investigation of malpractice to ensure openness and fairness.
4. Impose appropriate penalties and/or sanctions on learners or staff where incidents (or attempted incidents) of malpractice are proven.
5. Protect the integrity of this centre and awarding body.

The curriculum lead is responsible for investigating malpractice by learners. The Head of Service is responsible for investigating malpractice by staff. The Performance and Development Manager is responsible for the coordination of appeals across the service. The policy applies to all staff and all learners. The learner will be either taking an examination or a formal assessment through a portfolio for an accredited course. Malpractice by staff is improper assistance to candidates, changing marks, failure to keep candidate portfolios of evidence secure, fraudulent claims, inappropriate retention of certificates, improper assistance of learners, falsification of witness statements, improper use of evidence, facilitating impersonation, misusing the conditions for special learners, falsifying records, and fraudulent certificate claims. A fuller statement is given at the end of this policy.

Malpractice for learners is plagiarism, collusion, copying, deliberate destruction of another's work, fabrication, false declaration, and impersonation. A fuller statement is given at the end of this policy.

2. Procedure

1. Learners

- a. The service will inform all new learners of the service's policy on malpractice and the penalties for attempted and actual incidents of malpractice.
- b. Tutors will use vigilance to ensure that learners declare that their work is their own and report any concerns to their line manager or Head of Service.
- c. Where there is initial evidence or allegation of malpractice an investigation will be conducted.
- d. Where malpractice is proven, this centre will apply the penalties/sanctions which are linked to council policies for learners.

2. Staff

- a. The Head of Service is responsible for leading an investigation of a member of

staff in a form commensurate with the nature of the malpractice allegation. The Head of Service will nominate officer(s) to investigate the case.

- b. The Head of Service will make the individual fully aware at the earliest opportunity of the nature of the alleged malpractice and of the possible consequences should malpractice be proven.
 - c. The investigating officers will interview all relevant persons involved giving individuals the opportunity to respond to the allegations made, and interrogate files and compile evidence for assessment.
 - d. A report will be submitted to the Head of Service with recommendations which the Head of Service will consider and authorise any decisions in conjunction with relevant officers e.g. human resources.
 - e. Where malpractice is proven, this centre will apply the penalties/sanctions which are linked to the council's contract of employment for staff.
3. General procedure (learners and staff)
- a. Individuals will be informed of the avenues for appealing against any judgment made.
 - b. Documentation will be maintained for all stages of any investigation.

3. Definitions

Definition of malpractice by learners

This list is not exhaustive and other instances of malpractice may be considered by this service at its discretion:

- Plagiarism of any nature.
- Collusion by working collaboratively with other learners to produce work that is submitted as individual learner work.
- Copying (including the use of ICT to aid copying).
- Deliberate destruction of another's work.
- Fabrication of results or evidence.
- False declaration of authenticity in relation to the contents of a portfolio or coursework.
- Impersonation by pretending to be someone else in order to produce the work for another or arranging for another to take one's place in an assessment/examination/test.

Definition of malpractice/maladministration by staff

This list is not exhaustive and other instances of malpractice may be considered by this service at its discretion:

- Improper assistance to candidates.
- Inventing or changing marks for internally assessed work (coursework or portfolio evidence) where there is insufficient evidence of the candidates' achievement to justify the marks given or assessment decisions made.
- Failure to keep candidate coursework/portfolios of evidence secure.
- Fraudulent claims for certificates.
- Inappropriate retention of certificates.

- Assisting learners in the production of work for assessment, where the support has the potential to influence the outcomes of assessment, for example where the assistance involves centre staff producing work for the learner.
- Producing falsified witness statements, for example for evidence the learner has not generated.
- Allowing evidence, which is known by the staff member not to be the learner's own, to be included in a learner's assignment/task/portfolio/coursework.
- Facilitating and allowing impersonation.
- Misusing the conditions for special learner requirements, for example where learners are permitted support, such as an amanuensis, this is permissible up to the point where the support has the potential to influence the outcome of the assessment.
- Falsifying records/certificates, for example by alteration, substitution, or by fraud.
- Fraudulent certificate claims, that is claiming for a certificate prior to the learner completing all the requirements of assessment. If this is the case then the Service will:
 - Recover the certificate immediately
 - Notify the awarding body
 - Conduct internal investigation
 - Put in place a system to prevent this happening again.

5. Unique learner number policy

The learner uses the Unique Learner Number to access their personal learning record which also allows organisations the learner selects to see their personal information. Learners can request their ULN through the customer service. In case of errors the MIS and Examination officer will ensure errors are removed where possible and resubmit the learner record to LRS to get a valid ULN.

The MIS and Examination Officer is responsible for the coordination of activities by the service leading to the collection of appropriate information from the learners at the time of enrolment and update the learner record on the "Lernertrack" MIS database. The MIS and Examination Officer is responsible for registering the service with LRS. The MIS and Examination Officer is responsible for applying to the LRS for unique learner numbers (ULN). The MIS and Examinations Officer will liaise with curriculum lead to ensure that learners' records are kept up to date at all times for the LRS.

6. Access to fair assessment policy

1. Introduction

Curriculum leads are responsible for the operation of this policy. Assessors and internal verifiers are responsible for the delivery of this policy. CLASS is part of Slough Borough Council and upholds the Council's equalities policies.

2. Objectives

Assessment practice will be open and consistent within the codes of practice and regulations laid down by the relevant awarding bodies.

Assessment evidence will be judged according to the principle of:

- **Sufficiency** – consistent performance to the required level over a period of time.
- **Currency** – evidence should prove that the learner is competent now.
- **Validity** – evidence should be appropriate and relevant to the syllabus/standards it is addressing.
- **Authenticity** – evidence must reflect to the knowledge/skills understanding of the candidate. The work of another person must not be submitted as that of the candidate.

The chosen format and method of assessment will be appropriate to the qualification and any condition specified by the awarding body.

Assessment material will be presented in clear and unambiguous language and will differentiate only on the learner's knowledge, skills and understanding. Such material will free from any overt or covert discrimination against an individual either in wording or content.

The service will appoint assessment staff whose knowledge, skills and understanding is appropriate for the programme(s), they access.

Staff will maintain their competence through regular staff development organised internally or externally.

Arrangements for candidates with special assessment requirement

Assessment will be available to those who have the potential to achieve the standard required for a particular qualification. However, some candidates may need access to alternative means of providing evidence and /or additional support.

Access arrangements, including reasonable adjustments will be provided to enable a valid, reliable and consistent judgement to be made about achievement of all learning outcomes against the stated assessment criteria and to achieve the national standard

Special consideration will be given to learners in accordance to awarding body's published criteria and standard.

Candidates may be identified as having a particular assessment requirement in relation to, for example learning difficulties, a visual or hearing impairment, a mental illness. This means that they will be given appropriate support in their development to meet the required standard such as:

- Help with communication and number skills;
- Adapted equipment and physical environment;
- Special information technology;
- Confidence building

The curriculum lead, within reason, will provide the necessary resources to enable a learner with access-related needs for his/her examination or to produce evidence of developing the portfolio.

All candidates will be informed of the Service Assessment Appeal Procedure at the start of the programme.

7. Recognition of prior learning

Recognition of Prior learning (RPL) is a form of assessment which makes use of evidence of a learner's **previous non-certificated achievements** to demonstrate competence or achievement within a unit or qualification.

Through the RPL process, evidence of a candidate's previous achievement (learning) is assessed against the learning outcome of the unit.

Evidence can be draw on any aspect of a candidate's prior experience including:

- Domestic/family life
- Education and training
- Work activities
- Community or voluntary activities.

The assessor must ensure that all learning outcomes and assessment criteria being claimed are covered and that record of assessment is maintained in the usual way. The process must be subject to the same internal quality assurance requirements as any other assessment method is line of City and Guilds quality assurance policy.

8. Equality and Diversity

Slough Borough Council is committed to being an employer of choice. Our aim is to ensure that no job applicant or employee receives less favourable treatment on grounds of age, disability, gender reassignment, marriage or civil partnership, maternity and pregnancy, race, religion or belief, sex and sexual orientation. These are protected characteristics under the Equality Act 2010. In addition, the Council also recognises trade union membership and activity or any other reason which cannot be shown to be justified which will also result in grounds for unfair discrimination.

Recruitment and selection criteria, procedures and practices will be kept under regular review to ensure that individuals are selected or promoted on merit. All employees will be given equal opportunity and, where appropriate, training to progress within the Council.

Local authorities have a legal responsibility to promote Equality of Opportunity. The Council is committed to the use of those statutory provisions which permit Positive Action to improve recruitment and access to training where disadvantaged groups are under-represented. In particular the Council aims for its workforce to be representative of the local population of whom over a third are of ethnic minority origin.

The Council continually monitors this policy to assess its effectiveness.

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