



**Vocational Training  
Charitable Trust**

## **Section 1**

# **New Centre Handbook**



## **1.1 Introduction**

This handbook is aimed at new centres requesting to offer VTCT qualifications for the first time, returning centres and current centres. It includes criteria regarding the process of becoming a centre and clarifies what is necessary to successfully offer VTCT qualifications to the standards required. It also includes specific information on VTCT Fees and Qualifications.

The information contained is relevant to all centres regardless of the length of time they have been offering VTCT qualifications and should be read and understood.

## **1.2 Centre Approval and Verification Criteria - General Compliance Issues**

Any application to become a VTCT approved centre must detail the systems, resources and quality assurance arrangements for the delivery of qualifications. These can then be monitored and evaluated by both the centre and VTCT to ensure the maintenance of standards.

VTCT promotes all approved centres to prospective candidates. Centres are, therefore, expected to support and promote VTCT qualifications accordingly.

Centres wishing to offer qualifications from other Awarding Bodies alongside VTCT qualifications within the same occupational area will be required to notify VTCT Quality Assurance.

A centre which has been approved, but not proceeded with courses leading to a VTCT qualification within six months will be reviewed and may be considered dormant. A period of six months dormancy within an active centre will lead to a similar review. Re-instatement may then require the approval process to be undertaken as for a new centre application.

Being an active centre listed for potential candidates implies a reasonable minimum number of candidate registrations per session. This will be quantified by VTCT according to the particular circumstances of the centre. If the minimum number of registrations is not achieved, notice of suspension may result.

Continuance of approval by VTCT is dependent on the full implementation of the Specific Compliance Criteria detailed and of any specifications approved by the Regulatory Authorities. VTCT may also make further regulations during the currency of this edition of the Handbook and these will be notified to all approved centres by Assessment Centre Bulletins. The most up to date version of the Handbook will be on the VTCT Secure Website.

Centres operating overseas may be subject to further specific requirements for initial and continuing approval. Full details will be sent with the information pack on applying to offer VTCT International Qualifications.

## **1.3 Centre Approval and Verification Criteria - Specific Compliance**

### **1.3.1 Management Systems**

The centre must have an effective system for managing VTCT qualifications including:-

- (i) an explicit policy for promoting and implementing VTCT qualifications which is supported by senior management and understood by the assessment team.

- (ii) policies to ensure equal opportunities for all candidates including those requiring reasonable adjustments. Copies of such policies must accompany any application. Staff and candidates must understand and comply with all policies.
- (iii) defined, allocated and understood roles, responsibilities, authorities and accountabilities of the team of Assessors and Internal Verifiers. Procedures must be in place for communication within the team. These procedures may be demonstrated by organisational charts, documented quality assurance and records of personnel. All Assessors and Internal Verifiers must register with VTCT and supply copies of appropriate ENTO (and other) certificates to indicate competence, occupational expertise and Continuing Professional Development (CPD) in the appropriate skill areas.
- (iv) clearly documented Internal Verification procedures consistent with current National requirements as detailed by VTCT, ensuring the quality and consistency of assessment. All Internal Verifiers must be competent in the relevant occupational areas.
- (v) a system for the maintenance of log books for all Assessors and Internal Verifiers, keeping up to date records of qualifications, copies of certificates and records of CPD as required by VTCT and/or the SSB/SSC for N/SVQ qualifications.
- (vi) adequate procedures in place for liaising with satellite and associated sites.

### **1.3.2 Resources**

Sufficient resources must be available to support the delivery of VTCT qualifications to the specified standard including:-

- (i) resource needs identified in relation to the requirements of each specific award and made available accordingly.
- (ii) arrangements to ensure that equipment, procedures and accommodation are safe, fit for use and comply with the relevant Health and Safety Acts. A copy of the centre's Health and Safety policy must accompany any application.
- (iii) evidence of sufficient finance to enable it to be a viable business and to fund student registration and qualification fees as required by VTCT. As a charity, VTCT keeps its charges as low as possible and it is, therefore, not appropriate or practicable to give commercial-type credit. Centres are expected to pay invoices promptly within the terms laid down. Approved centres are granted monthly settlement terms (30 days as standard). Centres which exceed their terms of credit may be suspended at which point no further services will be supplied by VTCT until the outstanding debt is cleared in full. Persistent offenders may be permanently excluded from offering VTCT qualifications. All terms are subject to continuous compliance.
- (iv) the provision of the names and qualification details of all occupationally competent relevant personnel before centre approval is given, or prior to approval for further qualifications. This is to ensure there are sufficient Assessors and Internal Verifiers to run the qualifications concerned. The centre is responsible for

ensuring that Quality Assurance at VTCT is kept up to date with the names of current Assessors and Internal Verifiers on an ongoing basis.

(v) sufficient time, resources and authority for Assessors and Internal Verifiers to perform their roles and responsibilities effectively.

(vi) systematic review of staff development needs and a staff development programme which is logged and available for examination by the VTCT External Verifier.

### **1.3.3 Candidate Support**

Sufficient resources must be available to evaluate and monitor candidate requirements at every stage of the qualification delivery including:-

(i) allowing sufficient time to provide information, advice and guidance on the qualification procedures and assessments to current and potential candidates. A copy of the centre candidate handbook or proposed induction material should be supplied to VTCT. Candidates should also be taken through the VTCT Candidates' Handbook and informed how to download their own copy from the VTCT website. The centre must also ensure candidates have a full understanding of its contents and, in particular, the appeals procedures. Candidates must also be aware that they may be required to attend External Verifier visits on a day and/or time that is different to the normal day/time they attend the centre.

(ii) an appropriate and valid range of assessment methods, with the candidate's needs being matched against the requirements of the qualification, and agreed individual assessment plans established. In most circumstances, the VTCT Record of Assessments Book will demonstrate this.

(iii) identification of the particular needs of candidates to be met where possible. This information must be made available to the VTCT External Verifier. It is a requirement of continuous approval that all candidates declaring a need for reasonable adjustments are notified to VTCT so that their progress can be monitored. Forms NV43-45 are included in the VTCT Masters Pack for this purpose.

(iv) candidates having the opportunity to review their progress and modify their assessment plans accordingly.

(v) a system for reviewing the quality and fairness of the assessment process with a documented student appeals procedure which must be supplied to VTCT with the centre application for approval. Both the centre and VTCT appeals procedures must be available to candidates and operated correctly.

### **1.3.4 Assessment and Verification**

A system for valid and reliable assessment and verification to VTCT standards must be specified and maintained including:-

- (i) a valid, reliable and suitable range of assessment methods which are systematically reviewed and monitored.
- (ii) the compliance with requests for access to premises, records, information, candidates and staff for the purpose of external verification.
- (iii) assessments being carried out by qualified and occupationally competent VTCT Registered Assessors whose details must be supplied to VTCT prior to initial centre approval. Newly appointed Assessors and Internal Verifiers must register with VTCT within one month of appointment.
- (iv) an effective system for quality assurance of assessment. Assessment documentation must be regularly sampled by Internal Verifiers to ensure consistency and fairness.
- (v) the use of external and independent assessments set by VTCT to enable VTCT to maintain assessment as required by QCA, SQA or VTCT itself as appropriate.
- (vi) effective procedures for the internal verification of VTCT qualifications. Such verification must be carried out by qualified and occupationally competent VTCT registered Internal Verifiers who must initially register with VTCT prior to centre approval. Any new Internal Verifier appointed after initial centre approval must be registered with VTCT within one month of appointment.
- (vii) the signing of all requests for certification by Internal Verifiers who must quote their VTCT registration numbers on all documentation.
- (viii) changes of Assessor and Internal Verifier staff being notified to VTCT immediately.
- (ix) unit certification being made available by the centre.

Queries relating to qualification specification, assessment guidance or other material from VTCT should be referred to the Customer Service telephone helpline through which VTCT will try to resolve the problem immediately. Cases where the matter has to be referred to senior officers for resolution will be dealt with within the quoted timescale.

### 1.3.5 Monitoring and Review

A system should be in place which regularly monitors the effective delivery of VTCT qualifications, ensures full quality assurance and identifies areas for future development, including:-

- (i) the prompt and correct fulfilment of VTCT administrative requirements. Information supplied for the purpose of registration and certification must be complete and accurate. Candidate information will be stored securely by VTCT and used for certification and monitoring purposes only.
- (ii) accurate recording of the assessment of candidates and internal verification activity, stored securely and made available for external verification and auditing. Records should be kept for a minimum of three years to enable monitoring of consistency of assessment.
- (iii) a recording system enabling candidates' achievements to be evaluated and reviewed in relation to the centre's Equal Opportunities policy and current legislation.
- (iv) specified procedures for maintaining, updating and securely storing information on databases (IT or manual).
- (v) the informing of VTCT on the application for approval if a previous application to another Awarding Body has been withheld or suspended. Failure to do so will result in the immediate suspension of the centre.
- (vi) accurate records of Assessors' and Internal Verifiers' qualifications. Copies of certificates and CPD must be maintained in log books and be available for inspection by the External Verifier.
- (vii) the centre having adequate financial resources to meet its obligations as an approved VTCT centre.
- (viii) procedures to ensure that actions identified by the External Verifier and noted and agreed by the centre Internal Verifier on the Action Plan at the visit are disseminated to the relevant staff and acted upon within a timescale specified or agreed with VTCT.
- (ix) an internal verification strategy and sampling plans. These must be monitored, regularly reviewed, and amended in line with QCA/SQA National requirements for N/SVQs and VTCT qualifications on the National Frameworks.
- (x) a procedure to provide feedback on courses and qualifications from students, staff and employers to ensure that the centre's aims and policies are evaluated and updated to enable future qualification development. Any proposed developments should be noted and discussed with the External Verifier.
- (xi) a way of managing progress and quality that is accessible retrospectively by outside agencies. This is not expected to include all, or possibly any, of the evidence for competence. VTCT seek a record of who assessed an individual in the

workplace, witness testimony and evidence of project work. This will need to include the name of the Internal Verifier. This data will enable an auditor or inspector to check with individuals what they did and when.

In accordance with the NVQ Code of Practice, Awarding Bodies must provide centres with instructions and guidance on record keeping. The requirement for record keeping must specify the minimum information required to track candidate progress and allow for independent authentication of any claim for certification. This must include:-

Lists of all candidates registered with the Awarding Body for each qualification offered and include –

- ❖ Candidate name
- ❖ Date of birth
- ❖ Contact address
- ❖ Workplace address and contact details
- ❖ Assessor(s) name(s)
- ❖ Internal Verifier(s) name(s)
- ❖ Date of registration with Awarding Body

Candidate assessment records detailing –

- ❖ Who assessed what and when
- ❖ The assessment decision
- ❖ The assessment methods used for each unit/component
- ❖ The location of the supporting evidence

Records of internal verification activity detailing –

- ❖ Who verified what and when
- ❖ Details of the sample selected and its rationale
- ❖ Records of Internal Verifier standardisation meetings
- ❖ Records of Assessor support meetings
- ❖ Assessor and Verifier competence records
- ❖ Monitoring records of Assessor/Internal Verifier progress towards achievement of the relevant Assessor and Internal Verifier qualifications.

Requirements for the retention of candidate evidence.

Records of certificates claimed including unit certificates, who claimed the certificate and when, and when it was issued to the candidate.

## **1.4 Centre Approval and Verification Criteria - Other Compliance Information**

### **1.4.1 Group Approvals**

VTCT has always given approval for centres to offer VTCT qualifications, whether NVQs, SVQs or VRQs, on an individual basis using a system that groups

qualifications accordingly. This system involves the use of application forms NV1 and NV1.F and is one which has been agreed with the Regulatory Authorities. The system works as follows:-

(i) Approval for a group is subject to individual approval and inspection for those qualifications within the group requiring this. Only after such individual approval can a course recognised by VTCT be provided. For example, if an NVQ or SVQ is included, a physical inspection of resources will be required. If specialist equipment is required, as for Epilation for example, then an undertaking to use approved equipment will be necessary and will be checked on subsequent Verification visits.

If the guidelines regarding facilities are followed and approved by VTCT, it will only need VTCT to issue specific mandatory guidelines for providing training in those qualifications.

(ii) Centres wishing to offer a number of qualifications must declare that fact so that VTCT can issue and monitor implementation of the necessary mandatory notices regarding equipment and/or training facilities. Form *NV14 – VTCT Qualifications in Groups* must be used for this purpose. The form must be submitted on first approval and whenever a change is proposed by the centre, with as much notice as possible.

(iii) In the case of some VTCT Qualification Groups such as Group 1, which includes Level 3 Diploma in Anatomy and Physiology, there are no specialist physical requirements although there may be guidelines for charts and models issued.

(iv) A list of all VTCT Qualification Groups and their components is updated regularly and available to approved centres from the VTCT Quality Assurance department.

(v) When a centre has satisfied the approval criteria, an approval certificate will be issued to the centre clearly showing the VTCT Qualification Group(s) they have been approved to provide. This Certificate will not be dated as continued centre approval is confirmed by separate letters that accompany NV14 forms following each re-appraisal inspection.

## **1.5 Recommended Guided Learning Hours**

Guided learning hours (GLH) are defined as:-

A notional measure of the substance of a qualification. It includes an estimate of the time that might be allocated to direct teaching or instruction together with other structured learning such as directed assignments, assessments on the job or supported individual study and practice. It excludes learner-initiated private study.

*Recommended guided learning hours are allocated on a unit basis and are stated at the beginning of each unit within a VTCT Record of Assessments Book. A total is quoted by VTCT towards the front of each Record of Assessments Book covering the GLH required to achieve the qualification. Qualification GLH are also in the VTCT Fees and Qualifications Book.*

## **1.6 Certificates outside England, Wales and Northern Ireland**

Certificates for accredited qualifications can be awarded to candidates outside England, Wales and Northern Ireland and carry the relevant regulatory authorities' logo(s). This is provided that:-

The qualifications issued are offered to the exact specification accredited for use in England, Wales and Northern Ireland

**and**

Centres must inform all candidates that the regulatory authorities' logo(s) on the certificate indicate that the qualification is accredited for England, Wales and Northern Ireland only.

## **1.7 Checklist of Procedures to become a VTCT Approved Centre**

The following information is designed to assist a centre in its application for approval as an approved assessment centre for VTCT qualifications:-

### **1.7.1 NV1 - Application for Approval as an Assessment Centre**

This form will be sent with an Initial Enquiry pack and should be completed and returned to the VTCT Quality Assurance department together with the appropriate outlined policy documents. An NV1 will need to be completed for each series of N/SVQs applied for (e.g. Beauty Therapy, Hairdressing, etc) or for any number of VRQs applied for. After approval has been granted, if a centre wishes to expand their provision of VTCT N/SVQs and/or VRQs, then form NV1F - Application for Further Approval should be used. Assessor and Internal Verifier applications for registration using form NV12 should also accompany the NV1/NV1F. All independent training centres will also be required to complete and return form NV42 Non-CFE Financial Viability Statement. All applications from independent training centres must be accompanied by a cheque for £50.00 which, although non-refundable, is part of the usual fee charged for initial centre approval.

### **1.7.2 On receipt of NV1 by VTCT**

The form and appropriate policy documents will be checked and any missing or incorrect information will be notified to the centre for rectification.

### **1.7.3 Notification to Centre**

The centre will be notified of the relevant costs for Inspection Visits and ongoing Verification Visits, and a date will be agreed for a VTCT External Verifier to visit the centre to ensure it is able to meet all the necessary criteria.

#### 1.7.4 Inspection Visit

The Chief/External Verifier will carry out the initial Inspection using form NV10 - External Verifiers Inspection Report. This will provide a recommendation to VTCT and include an Action Plan agreed with the centre. Any areas identified as not meeting VTCT requirements will need to be addressed before approval can be granted or continued. A potential centre must not assume approval until it has received written notification from the Deputy Director – Quality Assurance.

#### 1.7.5 On granting approval

VTCT will designate an External Verifier who will undertake future verification visits at the centre whilst the Chief/Regional External Verifier will maintain overall responsibility for the centre. The External Verifier will visit the centre at least twice a year. This may be increased according to the size or individual needs of the centre. On each visit the External Verifier will complete a form NV2/NV10 - External Verifiers Report and any changes will be recorded. *VTCT reserves the right to re-inspect a centre at any time during the approval period.* Approval will generally be for 3 years renewable for all centres. This may be adjusted subject to special requirements, but in any event, would only occur in exceptional circumstances.

#### 1.7.6 Approved Centre Pack

On being granted initial centre approval, VTCT will supply the centre with the following documents:-

- ❖ *A centre file containing:-*
  - *Centre Managers Handbook*
  - *Assessment Guidance Handbook*
  - *Fees and Qualifications Handbook*
  - *VTCT Masters Pack*
- ❖ *A centre number (if not already issued as a National Centre Number)*
- ❖ *Candidate Registration forms NV3 and NV4.*
- ❖ *Details of how to request access to the VTCT Secure Website*

Each centre will be informed of the approval expiry date by VTCT, so that a re-inspection visit can be arranged. The centre has a **shared** responsibility with VTCT to ensure that re-approval inspections occur before expiry dates are passed.

## 1.8 Sanctions for Non-Compliance with the Approved Centre Criteria in the UK

The following information was issued by the Regulatory Authorities for the UK regarding the levels of sanctions and rationale leading to their implementation. VTCT sanctions described elsewhere in this manual may apply particularly in respect to VTCT Vocationally Related Qualifications not included on the National Qualifications Framework.

**Table 1**

Level of Non-Compliance	Sanction	Reason
1	Entry in action plan with specified data for compliance, monitored by VTCT Quality Assurance.	Non-compliance with approved centre criteria, but no threat to the integrity of assessment decisions.
2	Entry in action plan as requiring urgent action. Tracked by VTCT and the subject of an individual letter from the Quality Assurance department requiring immediate compliance.	Weakness in the integrity of assessment decisions.
3	(a) Suspension of registration of candidates. (b) Suspension of certification of candidates. (c) Suspension of both registration and certification of candidates.	(a) Threat to candidates (b) Loss of the integrity of assessment decisions – danger of invalid claims for certification. (c) Failure to comply with basic centre approval criteria.
4	Withdrawal of centre approval for specific N/SVQs or VRQs included on the National Qualifications Framework.	Irretrievable breakdown in management and quality assurance of specific VTCT qualifications run by the centre.
5	Withdrawal of centre approval for all N/SVQs or VRQs included on the National Qualifications Framework.	Irretrievable breakdown in management and quality assurance of all VTCT qualifications run by the centre.

*All levels of sanction are linked to the approved centre criteria.*

### Non-Compliance at Levels 1 to 3

*For tariff levels 1 to 3, **Table 2** shows specific failure to meet criteria (non-compliance) linked with specific sanctions. With some criteria, more than one level of sanction may apply depending on the gravity of the infringement.*

### Non-Compliance at Levels 4 and 5

*For tariff levels 4 and 5 the non-compliance may be evidenced across a range of the criteria. These would need to indicate **significant faults in the management***

**and quality assurance which result in an ongoing failure to meet the core requirements for the conduct of assessment. This would apply to a specific qualification at non-compliance level 4, or across all qualifications at level 5. A failure to rectify non-compliance tariff at level 4 could constitute a reason for applying a sanction at level 5.**

**Table 2**

<b>Non-Compliance Level 1</b>	
<b>0.1</b>	Centre's aims, policies, assessment practices and responsibilities of personnel are not clear or well understood by the assessment team.
<b>0.2</b>	Internal verification procedures and activities not clearly documented.
<b>0.3</b>	Communication within the assessment team and with the Awarding Body is ineffective.
<b>0.4</b>	Equipment and accommodation do not comply with Health and Safety Acts.
<b>0.5</b>	Insufficient qualified Assessors.
<b>0.6</b>	Assessors/Internal Verifiers do not have adequate development plans.
<b>0.7</b>	Candidates are not aware of their rights or responsibilities (e.g. no appeals procedure for candidates).
<b>0.8</b>	There is inadequate assessment planning with candidates.
<b>0.9</b>	Queries are not resolved or recorded.
<b>0.10</b>	Range of assessment methods is insufficient to encourage access.
<b>0.11</b>	Changes to personnel of the assessment and verification team are not notified to the Awarding Body.
<b>0.12</b>	Unit certification is not made available to candidates.
<b>0.13</b>	There is inadequate monitoring or review of procedures.
<b>Sanction</b>	<b>List on Action Plan. Review by VTCT Quality Assurance department who may order extra External Verification visits.</b>
<b>Reason</b>	<b>Non-compliance with approved centre criteria, but no threat to the integrity of assessment decisions.</b>

<b>Non-Compliance at Level 2</b>	
<b>1.1</b>	Assessors have insufficient time, resources or authority to perform their role.
<b>1.2</b>	Decisions of unqualified Assessors not countersigned by qualified Assessor.

1.3	Assessment decisions are not consistent.
1.4	Insufficient qualified Internal Verifiers.
1.5	Decisions of unqualified Internal Verifiers have not been countersigned by qualified Internal Verifier.
1.6	Records are insufficient to allow audit of assessment.
1.7	Previously agreed corrective measures relating to Level 1 are not implemented.
Sanction	<b>List on Action Plan as 'Urgent, requiring immediate action'. Review by VTCT Quality Assurance Department who may order extra External Verification visits</b>
Reason	<b>Weakness in integrity of assessment decisions.</b>

<b>Non-Compliance at Level 3</b>	
2A.1	Assessment process disadvantages candidates.
2A.2	Assessment decisions are unfair.
2B.1	No qualified Internal Verifier.
2B.2	Assessment does not meet national standards.
2B.3	Centre fails to provide access to requested records, information, candidates and staff.
2B.4	Assessed evidence is not the authentic work of candidates.
2B.5	Records of assessment show serious anomalies.
2B.6	Certification claims made before all the requirements of assessment are satisfied.
2B.7	Previously agreed corrective measures relating to Level 2 non-compliance are not implemented.
2C.1	Non-compliance with VTCT terms of payment for services.
Sanction	<b>Suspension of candidate registration and/or certification services.</b>
Reason	<b>2A – Threat to candidate achievements 2B – Loss of the integrity of assessment decisions, danger of invalid claims for certification. 2C – Failure to comply with basic centre approval criteria.</b>

<b>Non-Compliance at Level 4</b>	
<b>3.1</b>	Significant faults in the management and quality assurance of the VTCT qualification programme which result in an ongoing failure to meet the core requirements for the conduct of assessment.
<b>3.2</b>	Previously agreed corrective measures relating to a Level 3 non-compliance have not been implemented.
<b>Sanction</b>	<b>Withdrawal of centre approval for specific VTCT qualifications.</b>
<b>Reason</b>	<b>Irretrievable breakdown in management and/or quality assurance for specific VTCT qualifications.</b>

<b>Non-Compliance at Level 5</b>	
<b>4.1</b>	Significant faults in the management and quality assurance of all VTCT qualification programmes.
<b>4.2</b>	Previously agreed corrective measures relating to a Level 4 non-compliance have not been implemented.
<b>Sanction</b>	<b>Withdrawal of centre approval for all VTCT qualifications.</b>
<b>Reason</b>	<b>Irretrievable breakdown in management and/or quality assurance</b>

### **Guidance on Interpretation**

The above sanctions represent a **minimum** level of response to identified non-compliances. There will be circumstances in which VTCT may judge that a higher level of response is justified.

#### ***Combinations***

A combination of non-compliance at a particular level might call for a more serious response. A judgement will be made by VTCT against the reason for the sanction. Thus a combination of infringements at Level 2 could be such as to give rise to a *loss of integrity of assessment decisions* and thus merit a Level 3 response.

#### ***Persistence***

A failure to implement action plan requests at Level 1 will invoke a Level 2 response. Similarly, a failure to rectify faults that have given rise to a Level 2 sanction will invoke a Level 3 response.

#### ***Recurrence***

A centre may temporarily rectify non-compliances in response to action plans (or higher level sanctions) only to display the same weakness again at a later date. VTCT will take into account the track record of a centre in considering whether to impose a higher level sanction.

#### ***Malpractice***

Where the circumstances and nature of non-compliance indicate that fraud is involved, the procedures for dealing with malpractice will be invoked.

## 1.9 Withdrawal of Approval

If a serious situation arises in which a centre is unable to fulfil the criteria set in respect of its assessment system and progress is not made within a given timescale, then approval for the centre will be withdrawn. Action for suspension will be taken immediately by the VTCT Quality Assurance department on the recommendation of, and evidence from, the External Verifier, supported by the Chief/Regional External Verifier.

The VTCT Quality Assurance department will automatically inform the Regulatory Authorities of the suspension when an NVQ, SVQ or qualification included on the National Qualifications Framework is involved in the centre's provision.

A full investigation will then proceed immediately and this may result in withdrawal of approval of the centre. If not accepted, the Appeals Procedure detailed in this handbook will be activated.

## 1.10 Quality Assurance of the Assessment and Verification Process

VTCT operates strict quality control of the assessment and verification process within its centres, monitored by the Quality Assurance department and under guidelines from the Regulatory Authorities.

Within this part of the Quality Assurance department's remit, there are three strands to consider.

**Firstly**, that Assessors, Internal Verifiers and External Verifiers hold appropriate qualifications as detailed previously. This affects the standardisation of approach, based upon an understanding of the essential elements of an assessment and verification system of high standard.

**Secondly**, there is the work in overseeing that the Internal Verifier is sampling in depth the assessment practices of each Assessor within the centre. The Internal Verifier is also concerned to ensure that all other relevant criteria for approval are maintained, with specific attention to equal opportunities and open-access policies.

**Thirdly**, through the External Verifier, VTCT must be sure that all assessments are undertaken in a way that satisfies its criteria.

To ensure quality control is maintained, VTCT has made arrangements to be able to independently cross-check External Verifier performance. These include:-

(i) Bringing all External Verifiers together annually for discussion on all aspects of the verification process. These meetings are attended by the Chief Executive or his representative and consider External Verifiers' experiences so policies can be agreed for future action.

(ii) Biannual Regional Meetings for External Verifiers to share experience as in point 1. These meetings are also used to update External Verifiers on company policy and procedures and to invite guest speakers from industry to give a wider view.

(iii) External Verifiers being given a range of centres both large and small and both Colleges of Further Education and Independent Training Providers. This broadens their horizons and makes them more valuable in conveying good practice across a wide spectrum of training facilities.

(iv) Where practicable, the External Verifier will change centres every five years in order to maintain impartiality.

(v) The Chief Verifier and Regional External Verifiers being on hand to discuss individual matters directly with External Verifiers at all times. In turn, the Chief Verifiers and Regional External Verifiers also have direct line contact with both the Quality Assurance department and the Chief Executive.

(vi) The retention of files covering approved centres by both the Chief Verifiers and the Quality Assurance department. These will include copies of all or part of the original application for approval and all subsequent External Verifier reports.

## **1.11 Equal Opportunities Policy**

As part of the approval process, VTCT requires each centre to supply a written statement of its Equal Opportunities Policy and to state how information, guidance and advice on the subject is provided for new candidates, staff and work providers. The Equal Opportunities Policy must include positive action to prevent any bias in candidate selection and the supply of training, most specifically in terms of age, colour, disability, gender, religion or racial origin. The policy must include a statement of action taken to ensure open access and to provide facilities for those requiring reasonable adjustments. It is also required that information be given on how candidates requiring reasonable adjustments are identified and how the training and assessment programme is adjusted to take account of those needs. Centres will be required to specify how open access has been achieved by a flexibility of training provision and the nature and conduct of induction counselling procedures. Part of the Equal Opportunities Policy is the maintenance of an appropriate appeals procedure and this is dealt with elsewhere in this handbook.

VTCT continuously examines all procedures and documentation to ensure that there is no bar to Equal Opportunities in providing open access to all the qualifications it offers. VTCT also has its own appeals procedure for candidates and centres, and undertake that these will be operated promptly and without bias within its Target Timings.

In order to ensure that all candidates obtain appropriate credit for previous learning and experience, VTCT gives guidance in the VTCT Assessment Guidance Handbook on the use of the Accredited Prior Learning (APL) system which can be used in connection with its qualifications.

## 1.12 Maladministration/Malpractice

### 1.12.1 Overview

These procedures apply to N/SVQs and all VTCT VRQs.

Centres must inform VTCT of any suspected malpractice which will include the following examples:

- the evidence assessed is not the candidate's own work;
- the candidate is still working towards the qualification after the certificate has been claimed;
- the certificates have been claimed on the basis of falsified records;
- the awarding body has issued certificates contrary to the NVQ Code of Practice 2001 and/or the Statutory Regulation of External Qualifications 2004;
- suspected irregular use of independent assessment papers and marking guides.

All VTCT approved centres must follow VTCT's procedures for reporting and dealing with any suspected case of malpractice. Centres must ensure that their staff, candidates and others involved in providing a qualification receive copies of these procedures.

VTCT requires all centres to report any malpractice suspected after candidates have been registered, making clear any possible implications of a failure to co-operate for the issue of certificates and the future acceptance of entries. The candidates' handbook placed on the VTCT website, provides details as to how a candidate may report suspected malpractice directly to VTCT's Chief Executive.

Where malpractice or maladministration is suspected in a centre, or a partner organisation involved in the administration or assessment of the qualification, VTCT's Quality Assurance department will write to the centre informing them that the centre has been suspended from placing any further claims for certification whilst an investigation is carried out and in serious cases the centre will also be suspended from registering further candidates until the investigation has reached a satisfactory conclusion.

The Deputy Director-Quality Assurance will inform VTCT's Chief Executive once malpractice or maladministration is suspected and initiate an investigation so that VTCT is satisfied that adequate safeguards are in place to guarantee the validity of all claims for certificates. Whilst the details may vary, the key factor to be considered by VTCT in determining when to investigate a centre is when it has reasonable grounds to doubt the integrity of the assessment process.

The Deputy Director-Quality Assurance will report significant cases of malpractice to the regulatory authorities automatically and report all cases on request. VTCT will initiate a preliminary investigation and co-operate fully with any follow up investigations that may be required by the regulatory authorities, sharing information with other awarding bodies or with other appropriate agencies as necessary.

VTCT will report cases of malpractice to the regulatory authorities whenever it finds evidence that certificates may be invalid and will agree with the regulatory authorities on what appropriate remedial action the centre must take before further registration and certification claims may be processed.

### **1.12.2 Dealing with Malpractice**

All reports of malpractice will be treated as serious and on receipt of initial information or allegation VTCT will provide details to the regulatory authorities depending on the gravity of the malpractice.

Following receipt of information or allegation relating to suspected malpractice VTCT's Quality Assurance department will contact the centre Principal in writing providing full details regarding the suspected malpractice, as known at that time. VTCT will require the centre to instigate an immediate investigation and provide VTCT with an initial response within 2 working days. VTCT will require regular updates as to the progress of the investigation and a full report must be sent to VTCT once the investigation has been completed.

In addition to the above VTCT will wish to conduct its own preliminary investigation which will normally involve one of VTCT's Chief/Regional External Verifiers contacting the centre to agree when the visit is to occur. Depending on the severity of the suspected malpractice the centre's VTCT External Verifier may carry out the initial investigation. In all instances of alleged or suspected malpractice, VTCT must take such action, with respect to the candidates and centres concerned as is necessary to maintain the integrity of the qualification. The actions taken will be commensurate with the gravity of the malpractice.

### **1.12.3 Reporting Malpractice**

Centres must report all cases of suspected malpractice, as a matter of urgency to VTCT's Quality Assurance department within two days following notification of suspected malpractice.

Centres are advised that VTCT must report cases of malpractice to the regulatory authorities whenever it finds evidence that certificates may be invalid and VTCT will cooperate with any follow up investigation of malpractice required by the regulatory authorities. Centres are advised that VTCT must agree with the regulatory authorities on appropriate remedial action if there is evidence that certificates are invalid.

Failure by centres to report any suspected malpractice will result in immediate suspension from the approved list and no further registrations or certification claims will be accepted until a full investigation has been completed. Centres that fail to report malpractice will not necessarily be returned to the approved list after the investigation is complete.

VTCT is responsible for each of the centres it approves and as such, the responsibility for investigating alleged irregularities normally rests with VTCT unless there are special circumstances which require the regulatory authorities to

be involved. VTCT's Quality Assurance department must notify the regulatory authorities when commencing an investigation and provide an estimated timescale for its completion.

All such investigations are to be fully documented and the investigation file is to be retained within the Quality Assurance department located at VTCT's Eastleigh headquarters. The Deputy Director-Quality Assurance will prepare a final report when the investigation is complete and this will be copied to the regulatory authorities. The report will provide details regarding:

- the origin of the complaint or mode of discovery of the alleged irregularity;
- the investigations carried out;
- the evidence provided;
- the conclusions drawn;
- the recommendations for action and resolution of the matter.

Exceptionally, the regulatory authorities may need to take over an investigation. In such circumstances the regulatory authorities will provide a written instruction to VTCT informing them of this requirement and the reasons for taking such action.

VTCT must inform the regulatory authorities whenever they find evidence that certificates may be invalid, and agree any appropriate action that may be required. N/SVQ and VRQ certificates are in principle deemed invalid in the following circumstances:

- the evidence assessed is not the candidate's own work;
- the candidate is still working towards the qualification after the certificate has been claimed;
- the certificates have been claimed on the basis of falsified records;
- the awarding body has issued certificates contrary to the NVQ code of practice and the accreditation agreement.

These circumstances set out the reasons why a certificate may be judged to be invalid. They do not prescribe the action that automatically has to be taken. A variety of factors need to be considered and VTCT's Quality Assurance department will discuss these with the regulatory authorities.

The responsibility for the assessment and certification of candidates is one which is shared between the centre and VTCT. Therefore, centres must accept a shared responsibility, when dealing with problems caused for candidates, when certificates have been wrongly claimed. When the decision is taken to invalidate certificates, VTCT must ensure that the following actions are taken:

- follow the principle of seeking to protect the interests of candidates, insofar as is reasonably possible in the circumstances;
- contact the candidates involved and notify them of the status of their certificates and of any arrangements for re-assessment and/or certification;
- ensure that the original certificates, whenever possible, are returned and cancelled on the VTCT database, to ensure that duplicates can not be issued;

- inform the regulatory authorities of the details of the invalidated certificates and, where appropriate, make the information available to public funding bodies;
- issue further certificate that the candidate is entitled to after any required re-assessment has been successfully undertaken.

#### **1.12.4 Check List**

Following an initial report of suspected malpractice:

- VTCT Quality Assurance to provide full written details to centre Principal;  
or,  
centre provides written confirmation to VTCT within two days following receipt of initial report of suspected malpractice;
- Chief/Regional Verifier or External Verifier to liaise with centre contact to arrange for VTCT to conduct a preliminary investigation which will normally involve a visit to the centre;
- centre completes initial investigation and provides written report to VTCT;
- centre provides VTCT with a copy of the final report which provides details of findings, actions taken and recommendations to safeguard against any future reoccurrence;
- on satisfactory conclusion VTCT will reinstate the centre to the approved list and accept claims for candidate registration and certification;
- on unsatisfactory conclusion, VTCT seeks further advice from the regulatory authorities which may result in handing over the investigation to the regulatory authorities;
- VTCT will provide the regulatory authorities with regular updates throughout the investigation.

### **1.13 The Realistic Working Environment (RWE)**

A Realistic Working Environment recreates the pressures and time constraints of a commercial salon or treatment centre within a non-workplace centre. It is essential that any non-workplace centre offering VTCT qualifications is able to provide a RWE. Practical assessments must be carried out under normal working conditions and the time taken for treatments must be in line with normal commercial practice. The accommodation provided for assessment will need to be of appropriate size and of such layout that it allows for good commercial practice, with a continuous flow of clients. It could also include a reception and retail sales area.

VTCT developed the concept of the Realistic Working Environment some years ago to cover the personal treatment fields in which we are concerned. This concept has now been widely adopted and is an essential for training taking place elsewhere than in the workplace for competence based qualifications.

The following offers guidelines for the provision of a Realistic Working Environment.

### **1.13.1 Reception**

A reception area should be provided and staffed by students who have received instruction and are working, or have worked, alongside an experienced receptionist. The way in which telephone calls are dealt with, appointments made and scheduled, money taken for treatments and goods, supplies received and display cabinets set out, are covered within VTCT qualifications. The receptionist must ensure that clients are greeted in a proper manner and properly attended to whilst waiting for their treatment. The receptionist is the first and last point of contact that a client has in a salon or clinic and is an important person fulfilling a function which can have a significant effect on profitability.

Clients should be met at the reception by the therapist or their assistant, greeted and conducted to the appropriate treatment area. At the end of their treatment session, the client should be escorted back to the reception area similarly.

### **1.13.2 Clients**

Clients must be drawn from as wide a spectrum as possible, in terms of age, physical condition and the nature of the treatments they require. They must be allocated for treatment so that candidates do not always treat friends or relatives and to ensure they deal with a variety of different requirements. Only in this way can assessments be properly undertaken, the range be fully covered and treatment plans drawn up which require use of knowledge in the selection of alternatives.

It is desirable that a reasonable charge be made for the services offered so as to put the pressure on candidates by clients wanting value for money. Responsibility for this provision rests with the centre under such arrangements as may be appropriate and which may involve candidate assistance.

### **1.13.3 Layout**

The Realistic Working Environment should be correctly laid out so that it is practicable to use it for teaching purposes in an open plan mode and then divide it into the separate areas needed for treatments and assessment. Where appropriate to the services being offered, a sufficient number of basins must be supplied, along with appropriate electrical outlets, good controllable heating and lighting, and adequate changing facilities.

The realistic situation will vary according to the nature of the treatments being undertaken and the guide is best industry practice.

### **1.13.4 Legislation and Hygiene**

The Realistic Working Environment must take full account of legislative requirements such as the Health & Safety at Work Act and also best industry hygiene practice. Local authorities impose requirements under licensing regulations and although these are not universally the same, all requirements in terms of

hygiene should be followed. Additionally there may be National legislative requirements, altered from time to time by Directives from the European Union.

At all times, safety and hygiene must be in the forefront of all activity occurring within the Realistic Working Environment.

### **1.13.5 Confidentiality**

The same standards of confidentiality that apply within an external salon or clinic must apply in a Realistic Working Environment. This is vital in establishing rapport with the client and providing competence in performance.

Record cards must not be left lying around and if a physical assessment is to be undertaken, a room or curtained cubicle should be set aside for this purpose. This should then not be entered unless the client invites you to do so. Respecting confidentiality implies a feeling of respect for the clients and can help to avoid difficult and potentially embarrassing situations from arising.

### **1.13.6 Cost-Effectiveness**

During early training, time is not so important as accuracy and material wastage will occur through inexperience. However, by the time clients are being treated in a Realistic Working Environment, treatments should operate within known time schedules. Once this has been achieved, budgeting can become effective and the cost-effectiveness of the candidate can be measured.

Above all, within a Realistic Working Environment, it is having the right attitude to those coming for treatment that is essential. They must be thought of as clients and not models. If all guidelines are followed, the Realistic Working Environment will work as if it were a fully commercial operation and mean that regular work experience is less daunting to the candidate and more valuable to both them and the employers.