



PART OF **nocn** GROUP

Quality Assurance Manual

Requirements for approved centres to deliver
NOCN qualifications

Version 7.4

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1. Introduction

- 1.01 As a regulated Awarding Organisation, NOCN must ensure that all qualifications issued under its brands are safe and that the training, assessment and internal quality assurance of their delivery is robust. NOCN is committed to ensuring that quality plays an integral role in the development and delivery of its qualifications. For this reason, organisations must meet the quality assurance standards required by NOCN to gain and retain Centre approval status.
- 1.02 This document has been created to outline the requirements for the management, delivery, assessment and internal quality assurance of NOCN qualifications. This document also provides support and guidance for centres on best practice for implementing the required quality assurance systems as well as how NOCN will monitor compliance with its requirements.
- 1.03 Sections 3 to 7 contain the approval criteria that are relevant to that section, followed by support and guidance for centres in meeting the criteria. A full list of the approval criteria can be found in Appendix 1 of this document, alongside the indicative Sanction level for non-compliance.
- 1.04 Approved centres must ensure that they retain a copy of the most up-to-date version of this document to ensure that they are familiar and compliant with NOCN's requirements.

I. Scope

- 1.05 It is important to note that this manual covers general quality assurance requirements and that centres must ensure that they are aware of the specific requirements of the qualifications that they are seeking approval for or are delivering. This includes any qualification or sector specific industry or regulatory requirements.
- 1.06 Centres should read this manual in conjunction with the below documents, which are available on the NOCN website:
- a) NOCN Appeals Policy and Procedure.
 - b) NOCN Centre Approval Policy and Procedure.
 - c) NOCN Direct Claims Status Policy and Procedure.
 - d) NOCN Examination and Invigilation Policy and Procedure.
 - e) NOCN External Whistleblowing Policy and Procedure.
 - f) NOCN Malpractice and Maladministration Policy and Procedure.
 - g) NOCN Privacy Notice.
 - h) NOCN Reasonable Adjustment and Special Consideration Policy and Procedure.
 - i) NOCN Recognition of Prior Learning Policy and Procedure.
 - j) NOCN Registration and Certification Policy and Procedure.
 - k) NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.
 - l) NOCN Use of Language in Assessment Policy.
 - m) The individual qualification specifications for all qualifications in the Centre's provision.
- 1.07 Centres should also refer to the copy of the NOCN Centre Agreement and Terms and Conditions provided to them at approval and/or re-approval.
- 1.08 Please note that the guidance in this document is specific to NOCN centres. If a Centre is managed by a recognised NOCN Delivery Partner, the processes and systems may differ. Centres should contact their Delivery Partner directly for specific guidance.

2. Centre Approval

In order for an organisation to begin delivering NOCN qualifications, they must first gain NOCN Centre approval. For full details, please refer to the NOCN Centre Approval Policy and Procedure.

I. Obtaining Centre Approval

- 2.01 Organisations are not able to begin delivering, assessing or advertising NOCN products until Centre approval has been confirmed by NOCN in writing. During the Centre approval process, organisations must state which qualifications they wish to gain approval for. To obtain Centre approval, an organisation must be approved to deliver at least one NOCN product.
- 2.02 By becoming an approved NOCN Centre, organisations are accepting to operate in line with the NOCN Centre approval criteria (a full list is provided in Appendix 1). During the Centre approval process, NOCN will review the Centre's management systems, physical resources (including staff), knowledge and experience to determine whether the Centre is able to demonstrate meeting the approval criteria. It is the Centre's responsibility to evidence adherence to the approval criteria through their application form and any subsequent EQA review of evidence.
- 2.03 NOCN recognises that it may not be possible to review a Centre against some of the approval criteria, all of which will apply post-approval, due to a Centre needing to have approval in order to evidence compliance. Therefore, NOCN will not review the Centre against certain criteria at the Centre approval stage, this can be seen in Appendix 1 of this document.
- 2.04 When first approved, all centres must agree to the NOCN Centre Agreement and Terms and Conditions to confirm their adherence to work within NOCN requirements. This must be agreed by the Centre's Head of Organisation in full, or a delegated individual who holds the required authority, before registration rights are granted.
- 2.05 Centre approval status will allow centres to operate in England, Scotland, Wales and in Northern Ireland. If centres wish to deliver qualifications outside of these territories, they must complete a separate approval process. Please contact the Quality Assurance Team for further details.
- 2.06 If an organisation is not an approved Centre and wishes to know more about the Centre approval process, they should contact business-enquiries@nocn.org.uk for support. For further information, please refer to the NOCN Centre Approval Policy and Procedure.
- 2.07 In line with the NOCN Centre Approval Policy and Procedure, NOCN may decline an organisation's request for Centre approval where they do not meet NOCN requirements or based on cumulative risk factors. NOCN's decision regarding Centre approval *cannot be appealed*.

II. Additional Qualification Approval

- 2.08 Once Centre approval has been confirmed in writing by NOCN, centres are able to apply for additional qualifications to be added to their provision at any time. Centres must complete and submit the NOCN Additional Qualification Approval form and submit this to NOCN for review.

- 2.09 Centres must not begin delivering or assessing additional qualifications until approval has been confirmed by NOCN in writing. Delivery of qualifications prior to approval may affect NOCN's approval decision, as well as leading to the application of Sanctions.
- 2.10 Once all required information has been received, NOCN will review the Centre's application. Dependent on the risk of the qualifications being requested, the staff members being put forward for delivery and the Centre's range of current NOCN approvals, either an EQA risk assessment or a desktop approval will be completed by NOCN:
- a) An *EQA Risk-Assessment* may be required where the Centre is requesting high risk qualifications or qualifications in sectors where current NOCN approvals are not currently held. This will follow a similar format to the risk assessment conducted at Centre approval, with a specific focus on reviewing the Centre's systems and resources against those required for the requested qualifications.
 - b) A *Desktop Approval* allows for qualification approval to be provided without the need for an *EQA risk-assessment activity*. This may be an option where the Centre are requesting a qualification which is comparable to a NOCN qualification they already deliver, or where the qualification is deemed as low risk by NOCN. In considering the application, NOCN, or the Centre's EQA, will contact the Centre to discuss requirements and review current staffing and resources. Centres should discuss potential additional qualification requests with their EQA during monitoring activities as the EQA may be able to perform an immediate desktop approval.
- 2.11 Further information regarding additional qualification approvals can be found within the NOCN Centre Approval Policy and Procedure.

III. Retaining Centre Approval

- 2.12 Once approved, centres will be subject to ongoing monitoring activities to allow NOCN to ensure that they are consistently adhering to NOCN's approval criteria. As part of NOCN's strategy for Centre Assessment Standards Scrutiny, the Quality Assurance Team, in conjunction with the Centre's assigned External Quality Assurer, will monitor Centre adherence to the Centre Agreement and Terms and Conditions and approval criteria. Repeated failure to respond to EQA visit requests and/or failure to supply the requested evidence may result in the application of a sanction and/or withdrawal of Centre approval.

IV. Withdrawal of Centre Approval

- 2.13 NOCN recognises that there are three main routes of Centre withdrawal:
- a) *Voluntary withdrawal* – where a Centre informs NOCN that it no longer wishes to deliver NOCN products and wishes to renounce its Centre approval.
 - b) *Involuntary withdrawal* – where NOCN or Delivery Partner terminate its agreement with a Centre, removing its Centre approval.
 - c) *Cessation of trading* – where a Centre ceases to operate and can therefore no longer support its approved Centre status.
- 2.14 Both the Centre and NOCN can terminate the Centre Agreement and Terms and Conditions at any point. Aside from cases of proven malpractice, the notice period for the termination of Centre approval for both parties is one-month's written notice.

- 2.15 The withdrawal of Centre approval, both voluntary and involuntary, is managed by either the Quality Assurance Team or the Regulation and Compliance Team, dependent on the nature of the withdrawal. Centres should contact assurance@nocn.org.uk, or their Delivery Partner directly, if they require any advice regarding removing their Centre approval.
- 2.16 For further information regarding the withdrawal of Centre approval, please refer to the NOCN Centre Approval Policy and Procedure.

3. Internal Management and Systems

This section details the internal management and systems approval criteria with which centres must be compliant with to retain their Centre approval status.

3.01 Centres must successfully demonstrate that they have the systems, expertise, resources and policies and procedures in place to effectively manage the administration, assessment and internal quality assurance of NOCN qualifications. The NOCN approval criteria regarding internal management and systems are listed below.

I. Centre Management

Ref.	Approval Criteria
A.1	Appropriate and effective management systems are in place.

3.02 Centres must have an appropriate and effective management system to support and facilitate the delivery of NOCN products and to ensure compliance.

3.03 During approval, NOCN will require the Centre to provide and maintain up-to-date details of the *Head of Organisation* to NOCN. The Head of Organisation is the individual who has the overall accountability for the management of the Centre. This may be a principal, owner or manager of a Centre. This individual, or a delegated individual with the required authority, will be required to agree to abide by the NOCN Centre Agreement and Terms and Conditions on behalf of the Centre to confirm that they have read, understood and will comply with NOCN requirements at all times.

3.04 Centres must also have a designated *Quality Assurance Contact* in place at their Centre and provide and maintain up-to-date on NOCN's Horizon system. The Quality Assurance Contact is the individual responsible for ensuring that the administration and delivery of NOCN products within the Centre are both compliant and continuously improved. For smaller centres, this may also be the Centre's Internal Quality Assurer and at larger centres, this may be an IQA Co-ordinator or Quality Manager. The Quality Assurance Contact must:

- a) Hold the required authority and be provided with sufficient time to perform their role effectively in ensuring that the administrative, training, assessment and internal quality assurance processes at the Centre are implemented correctly and consistently across the Centre as a whole.
- b) Oversee or delegate the co-ordination of EQA monitoring activities and NOCN requests for information and access to learners, records or Centre premises.
- c) Disseminate actions set by NOCN to delivery staff, ensuring they are addressed and evidenced in line with the timescales set by NOCN.
- d) Oversee the internal quality assurance function of the Centre to ensure it is effective and compliant.
- e) Ensure that any complaints and appeals are addressed in line with the Centre's own policies and notified to NOCN where required.

- 3.05 Centres must be able to demonstrate how they ensure that their management system is fit for purpose to operate in line with NOCN requirements and maintain compliance with the approval criteria. This may be evidenced through a documented management structure, clearly documented roles and responsibilities, planned regular management team meetings and through organisational charts. By reviewing the Centre’s management system, NOCN will seek confidence in the ability of the Centre to effectively and consistently deliver a robust and compliant quality system.
- 3.06 An effective Centre management system also encompasses how NOCN provision will be managed on an operational level. This includes ensuring that all physical systems, such as the use of any software, databases or those which are paper based are secure and fit for purpose.

Cyber Security

- 3.07 Centres must ensure that they have appropriate cyber security systems to allow the secure storage of data. This includes ensuring that there are sufficient controls regarding who has access to learner personal data, as well as ensuring that data is backed up in case of a data loss or hack. Centres must notify NOCN in any cases where learner data has been compromised. NOCN recommends that Centres familiarise themselves with the guidance issued by the [National Cyber Security Centre](#) for further information on appropriate systems and provision.

Ref.	Approval Criteria
A.2	A suitable workforce for the administration of NOCN provision is in place.

- 3.08 Centres must ensure that they have a suitable workforce to allow accurate and timely administration of NOCN provision. What is appropriate will depend on the structure and size of a Centre; however, the key point is to ensure that any administrative tasks required by the Centre are completed to ensure timely learner induction, registration, progression and certification.
- 3.09 Centres are required to ensure NOCN timescales are met at all times and therefore centres are expected to carry out their own monitoring of their administrative functions to ensure activities are being completed in a timely manner and that the functions are appropriately resourced.

Ref.	Approval Criteria
A.3	All staff members are sufficiently inducted and trained on the Centre’s and NOCN’s policies, procedures and systems.

- 3.10 Centres must have a thorough induction process for all new staff members to ensure that they are fully aware of the Centre’s ways of working and how this correlates to NOCN’s requirements.
- 3.11 All staff members must be fully aware and have a sound understanding of all NOCN policies, procedures and systems before their involvement in the administration or delivery of NOCN provision. NOCN is able to support centres through free system support training. NOCN also has quality assurance training packages available, such as for invigilation, where charges apply.

3.12 Centres must have their own processes in place to allow the roll out of any changes to both NOCN and Centre policies, procedures and systems. This includes ensuring that all staff members are appropriately informed of changes in a formal and timely manner. Records of updates or training delivered to staff must be kept to evidence how the Centre is keeping their staff appropriately informed.

Ref.	Approval Criteria
A.4	Service level agreements with partner organisations are adequate to demonstrate responsibilities.

3.13 Where centres work with partner organisations, a service level agreement must be in place and signed by both parties. The agreement must clearly demonstrate the roles and responsibilities of each organisation. The service level agreement must be tailored to the specific nature of the Centre and the partner organisation and the qualification(s) within the Centre’s provision, however, as a minimum it must contain:

- a) How the Centre will encompass the partner organisation into their IQA strategy, including the frequency of IQA interventions (including observations), how these will be carried out and the individual responsibilities at both the Centre and at the partner organisation.
- b) How the administration of NOCN provision will work, including the individual responsibilities, any pertinent timescales and points of escalation in case of delays or failures.
- c) How staff will be trained, including by who and how this will be recorded and shared with the Centre.
- d) Confirmation that the named NOCN Centre is responsible for the monitoring of the partner organisation and ensuring that their own policies and procedures will be followed by all parties to ensure compliance with NOCN requirements.
- e) Consideration of termination of the agreement and how learner interests will be protected by the Centre.

3.14 Centres must be aware that, as the approved Centre with NOCN, they are responsible for ensuring the quality and compliance of any administration, training or assessment activities that are carried out by partner organisations. The Centre will also be held responsible in any cases of non-compliance, such as in instances of malpractice.

3.15 Centres are able to work with multiple partner organisations as long as an individual service level agreements are in place.

3.16 Centres must make NOCN aware of any case where a new partnership agreement is put in place or is terminated. The Quality Assurance Team, or the Centre’s assigned External Quality Assurer must approve each new partnership agreement before any work is carried out by a partner organisation and where declined, will not permit that organisation to be involved in the Centre’s delivery of NOCN products.

Ref.	Approval Criteria
A.5	Roles and responsibilities are understood by all staff involved in the assessment, training and quality assurance of NOCN qualifications.

- 3.17 For any staff member involved with the delivery of NOCN qualifications, such as a Tutor/Trainer, Assessor or Internal Quality Assurer, the Centre must ensure that the staff member is aware of their regulatory responsibilities regarding training, assessment and/or internal quality assurance.
- 3.18 Centres must ensure that they monitor staff performance to ensure that they are aware of their roles and responsibilities on an ongoing basis. This includes ensuring Centre staff members are aware of updates to qualifications, any actions from EQA reports and any changes to NOCN requirements which may affect them.
- 3.19 Centres are able to demonstrate compliance with this requirement through job descriptions, organisation structure charts, training records, meeting minutes and on-going staff compliance with requirements.

II. Policies and Procedures

Ref.	Approval Criteria
A.6	Appropriate, up-to-date policies and procedures to effectively manage NOCN provision are in place, as specified in the NOCN Quality Assurance Manual.

- 3.20 Centres must ensure that they have a full suite of policies and procedures in place, which, as a minimum, must contain the policies listed in this section. All policies and procedures must be authentic to the Centre and must be tailored towards the Centre's own quality assurance and management systems. To support centres, NOCN has provided minimum requirements of what the Centre's policies must contain.
- 3.21 Centres should always ensure that their policies and procedures support, and are in line with, NOCN requirements as specified within this section of the Quality Assurance Manual and in NOCN's suite of policies and procedures. NOCN's suite of quality assurance policies can be found on our website here: <https://www.nocn.org.uk/support/nocn-policies/>.
- 3.22 Centres must ensure that their policies are regularly reviewed, at least once annually, to ensure that they are up to date, fit for purpose and accurately reflect the Centre's current practices, NOCN requirements, qualification requirements and up-to-date legislation.
- 3.23 Centres may combine or embed the policies detailed in this section; however, they must ensure that the requirements of all policies are sufficiently covered. The appropriateness and effectiveness of Centre policies and procedures will be reviewed by an External Quality Assurer (EQA) as part of their monitoring activities.
- 3.24 *Access to Fair Assessment Policy* – NOCN promotes the use of a range of methods to assess the skills and knowledge of all learners. Fair assessment is the process by which the assessments and assessment methods used are designed to give all learners appropriate opportunities to demonstrate achievement, whilst considering any reasonable adjustments.

Centres must consider their Access to Fair Assessment Policy when planning assessment tasks to ensure that the assessment methods are relevant and meet the needs of all learners.

- 3.25 *Complaints Policy and Procedure* – The complaints policy and procedure should document how a Centre will respond to all complaints efficiently and effectively. Timescales and responsibilities should be documented to ensure transparency and fairness in the complaints process. Learners must be aware that they should follow the Centre’s own complaints policy and procedure first before escalating to NOCN.
- 3.26 *Conflicts of Interest Policy and Procedure* – A conflict or perceived conflict can be defined as a situation in which a person has a private or personal interest in the outcome of their duties, including in the training, assessing and internal quality assuring of learner’s work. To maintain the integrity of the assessment process, centres must have a conflicts of interest policy, which must document how the Centre will prevent, manage and report on conflicts of interest. Any perceived conflicts by the Centre must be reported to NOCN.
- 3.27 *Contingency Plan* – NOCN requires all centres to have a documented contingency plan. The plan must identify the action that the Centre will take to safeguard the interests of registered learners should the Centre no longer be able to maintain the delivery or assessment of its NOCN provision. This may occur if a Centre is to cease trading, loses funding or has its Centre approval withdrawn by NOCN. The Centre should identify alternative arrangements where learners may be signposted to in such an event. NOCN must be notified in the first instance if such an event is deemed likely.
- 3.28 *Data Protection Policy and Notice* – Centres are required to comply with the Data Protection Act (2018) and have a written policy to make learners aware of how their data will be used. NOCN requires information about the use, processing and sharing of personal data to be made available in the Centre’s learner registration documents. The Centre’s Data Protection Notice must allow personal data to be transferred to NOCN for the following purposes:
- a) To undertake administration in relation to the learner’s registered qualification.
 - b) To provide centres with a certificate for the learner.
 - c) To contact the learner directly regarding assessment or quality assurance purposes for the qualification they are registered on, or for the purpose of investigations into suspected malpractice. This includes the learner’s personal telephone number.
 - d) To disclose to NOCN’s regulators or sector skills bodies where so required.
 - e) To administer requests for Reasonable Adjustments and Special Considerations.
 - f) To carry out statistical analysis and monitor equal opportunities (anonymised).
- 3.29 *Documentation Retention and Secure Storage Policy* – Centres must set out their arrangements for documentation retention and secure storage. Secure storage not only relates to learner work and records, but to any examination material and papers issued by NOCN. The contents of all live assessment materials are confidential and therefore access should be restricted to the assessment itself. Centres must adhere to NOCN’s required timeframes of document retention. Please refer to section 5.
- 3.30 *Enquiries and Appeals Policy and Procedure for Learners* – This should document how a learner may challenge an assessment decision made by the Centre with which they disagree. The document should include a staged approach to the appeals process and include appropriate timescales. The document must mention that, once the internal appeals process has been

exhausted, learners have the right to appeal to NOCN. All appeals must be formally acknowledged upon receipt by the Centre and conclusions formally communicated at the close of the appeal to all those involved.

- 3.31 *Equal Opportunities Policy* – Diversity, equality, and inclusion are central to NOCN's policies and beliefs. Centres must have an Equality Opportunities Policy that clearly details how it will protect the interests of all learners. The policy should reflect the most current legislation in relation to access to equal opportunities.
- 3.32 *Examination and Invigilation Policy and Procedure (if relevant to provision)* – Where the Centre delivers externally set assessments, these must be administered securely, using appropriately trained Invigilators. The Centre are responsible for training Invigilators and ensuring that they are fully aware of their roles and responsibilities in assuring the validity of the qualification. An examination and invigilation policy must document the Centre's policy and procedure for the administration of examinations, which must be in line with the NOCN Examination and Invigilation Policy and Procedure.
- 3.33 *Health and Safety Policy* – Centres must have a documented policy stating its commitment for the protection of health and safety of employees and learners. The Centre's practices must be in line with the most up to date health and safety legislation and guidance generally and in relation to their provision.
- 3.34 *Internal Quality Assurance Policy/Strategy* – Centres must have a written policy or strategy that sets out its commitment and methodology regarding the internal quality assurance of all NOCN provision. Please refer to section 6 for further guidance.
- 3.35 *Learner Identification Policy and Procedure* – Centres must be assured that the person taking an assessment is who they say they are and as such, there must be a policy and procedure in place for checking learner identification prior to assessment. There must also be a way of recording these checks. NOCN may request such information in order to carry out quality assurance activities.
- 3.36 *Malpractice and Maladministration Policy and Procedure* – Centres must have their own policy and procedure regarding malpractice and maladministration. The policy and procedure must be comprehensive and have as a minimum:
- Definitions and examples of incidents or actions that constitute as malpractice and maladministration by both learners and Centre staff.
 - How the Centre ensures learners are aware of malpractice and maladministration both before and during their assessments.
 - References to the NOCN Malpractice and Maladministration Policy and Procedure, and how the Centre ensures that staff are sufficiently trained in identifying and preventing incidents of malpractice and maladministration.
 - The process for how incidents of malpractice and maladministration should be reported within the Centre when identified.
 - The process for how NOCN is informed of suspected or proven cases of malpractice or maladministration as soon as they are identified.
 - The Centre's process for how they will ensure that incidents of malpractice and maladministration are investigated thoroughly, when requested to do so by NOCN.
 - Details of the Sanctions/actions that NOCN may apply to a staff member if, following an investigation, evidence of malpractice or maladministration is found.

h) Reference to the right of appeal against a learner/staff member who has a Sanction imposed on them by NOCN.

- 3.37 *Reasonable Adjustment and Special Consideration Policy and Procedure* – Centres should have a documented policy and procedure in place for how they will consider, seek approval for and apply reasonable adjustments and special considerations. Please refer to section 5.
- 3.38 *Recognition of Prior Learning (RPL) Policy and Procedure* – Recognition of prior learning (RPL) is an assessment process that makes use of evidence of a learner’s previous non-certificated achievements to demonstrate competence or achievement within a unit or qualification. Centres should seek assistance from NOCN if they are unsure if RPL is a valid assessment method for a particular qualification.

Ref.	Approval Criteria
A.7	Policies and procedures are supported by management and are effectively shared and understood by all delivery and administrative staff.

- 3.39 As well as having the required policies and procedures in place, centres must ensure that all of their management, delivery and administrative staff are fully conversant on the Centre’s ways of working to ensure compliance with NOCN requirements.
- 3.40 The Centre’s management team must support and share the Centre’s policies and procedures to ensure all staff fully understand how to comply and are adequately supported and equipment to comply with requirements. This includes the sharing of updates to the Centre’s policies and procedures and supplying any subsequent training that may be required.
- 3.41 Centres must be able to provide evidence that all Centre staff members have been effectively inducted and trained on the Centre’s policies and procedures, and that there is the required understanding within their workforce. Centres must also be able to demonstrate that there are monitoring procedures in place to ensure that policies are being followed by their staff members when completing processes, such as for appeals, invigilation, health and safety and reasonable adjustments, as required.

Ref.	Approval Criteria
A.8	The appropriate insurances to protect learners, staff and visitors are in place as deemed by law and specific sector and/or qualification requirements.

- 3.42 Centres must ensure that they have appropriate insurance in place to protect learners, staff and visitors. The types of insurance required will depend on the individual circumstances of the Centre and the specific qualification the Centre has in their provision. For this reason, centres must ensure that they are aware of the insurance requirements both dictated by NOCN and sector bodies for all of their approved qualifications. Further detail on NOCN requirements can be found within each qualification’s specification, available on the NOCN website.

- 3.43 All centres must ensure that they have Employer's Liability Insurance in place. Centres may also wish to consider Public Liability Insurance and/or Professional Indemnity Insurance. Centres must consider the use of other insurances where appropriate. Centres are encouraged to consider Cyber Liability Insurance due to the increasing risks of cyber-attacks on company data. Where centres are based internationally and deliver internationally, local arrangements will apply.
- 3.44 NOCN also recommends that Centres familiarise themselves with the guidance issued by the [National Cyber Security Centre](#) for further information on appropriate cyber security systems and provision.

Ref.	Approval Criteria
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A.9	Conflicts of Interest are documented and managed appropriately.
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- 3.45 A *Conflict of Interest* may arise within a Centre where an individual's commercial, personal or family interests and/or loyalties conflict with those of a learner, another Centre staff member or NOCN. A Conflict of Interest can be an actual or perceived, in addition to any scenario in which it is reasonably foreseeable that such a conflict could arise in the future. If conflicts are not avoided, reported or managed appropriately, they may:
- a) Inhibit free discussion or decision-making.
 - b) Result in a decision or action that is not in the best interests of the Centre or their learners.
 - c) Risk the Centre acting improperly and/or not following NOCN requirements.
- 3.46 A *personal interest* is a type of Conflict of Interest that relates to a particular individual. An individual has a personal interest where an informed or reasonable person would conclude that the individual may have a good reason or an incentive to make anything other than a good faith decision, while carrying out a task or making a decision on behalf of a Centre. For example, if an individual carrying out the assessment of a learner is related to the learner being assessed, this would constitute as a personal interest.
- 3.47 Centres must ensure that, in line with their Conflicts of interest policy and procedure, that they have a process in place to allow for the collection, reporting and review of Conflicts of Interests within their Centre. All staff members must have their interests reviewed at least once annually to ensure that the Centre is aware of any Conflicts of interest. Centre staff members must also immediately declare to their Head of Organisation, or delegated representative, where a perceived or actual Conflict of Interest arises with another staff member or learner.
- 3.48 Where a Conflict of Interest is identified, the Centre must ensure that this is reported to NOCN or their EQA directly. The Centre must ensure that they include the suggested controls that will be put in place to manage the conflict for review. Centres must follow direction and guidance provided by NOCN regarding any adequate controls. The Centre must keep a log of all identified conflicts, alongside their corresponding agreed controls and date notified to NOCN, as evidence for external quality assurance review.

- 3.49 If an individual has a Conflict of Interest relating to the assessment of a learner, specifically a personal interest in the result of the assessment, they must not be involved in such assessment. Where an assessment by the individual cannot be avoided, NOCN may agree with the Centre that the relevant part of the assessment must be subject to scrutiny by another person who does not have such conflict.

III. Learner Management

Ref.	Approval Criteria
A.10	A robust induction process is in place to ensure learners are appropriately informed regarding appeals, equal opportunities and health and safety.

- 3.50 Once approval has been given, centres are able to promote and begin the delivery of NOCN products. No assessment(s) or examination(s) of learners can take place until the learners have been registered with NOCN through NOCN's registration and awards portal, Quartzweb.
- 3.51 Before any training or assessment takes place, centres must ensure that they induct their learners onto their respective course. The induction process must:
- Verify a learner's identity, in line with the Centre's Learner Identification Policy.
 - Ensure learners are appropriately informed regarding use of their data, malpractice, reasonable adjustments, complaints and appeals.
 - Ensure learners are being inducted onto the correct course, which is appropriate for them, including the selection of the most appropriate level.
 - Ensure that the learner meets the entry requirements of the specific product.
- 3.52 Centres must ensure that they carry out sufficient checks to *verify a learner's identity* to confirm that the learner is who they say they are and that they are meet the minimum age requirements to undertake the training/assessment of the product, as detailed within the product's specification. Full records of the identification checks must be kept and provided to NOCN upon request. Some products have specific ID requirements which must be adhered to, please refer to the individual product specification for further information, available on the NOCN website.
- 3.53 Centres must ensure that their *learners are appropriately informed* by providing learners with information and support on the Centre's policies and procedures, including those on appeals, complaints, malpractice, health and safety, equal opportunities, conflicts of interest and reasonable adjustment policies, procedures and practices. Learners must confirm in writing that they have received and understood this information before completing any training with the Centre.
- 3.54 The induction process must *ensure learners are being inducted onto the correct course*. Centres must register learners on courses which will have a positive impact on their progression, employment or life. Centres should ensure that learners have not obtained certification of the course, or similar, previously, before carrying out any training or assessment. Learners must also be registered onto the correct mode and level of product which best suits their abilities and potential.

Ref. Approval Criteria

A.11 Learners are made aware of how their data will be used, shared with and stored by NOCN.

- 3.55 During a learner's induction at a Centre and prior to any training or assessment activities taking place, the Centre must ensure that their Data Protection Policy/Privacy Notice is provided to and understood by the learner. Learners must be willing to share their full name, date of birth, address, contact number and email address to be registered with NOCN. Learners must be aware of *their rights regarding their data*; however, they must be aware that if they choose not to share their data with NOCN they cannot be registered and therefore cannot complete any training or assessment with the Centre.
- 3.56 Centres must ensure that all learners sign a data sharing agreement to confirm their acceptance that their data can be shared with NOCN for the above purposes. For this reason, centres are encouraged to include this information within their registration documentation. The data sharing agreement must be available for external quality assurance purposes and must be provided to NOCN upon request.
- 3.57 For further information regarding learner data requirements, please refer to the NOCN Registration and Certification Policy and Procedure. Centres must also ensure they are aware of and accept the NOCN Privacy Notice, found on our website at www.nocn.org.uk/privacy.

Ref. Approval Criteria

A.12 A robust registration process is in place to ensure correct and timely learner registration.

- 3.58 Centres must have robust systems and processes in place to ensure timely registration of learners. Timely registration is to protect the interests of learners, as without registration, learners cannot access their right to NOCN procedures such as for complaints or appeals.
- 3.59 Learners are recruited by the Centre and not by NOCN, and, therefore, centres have a responsibility to ensure that they protect the interests of their learners through registration. NOCN can only protect the interests of learners who have had their details registered.
- 3.60 Centres are also responsible for ensuring that learners are registered before the Operational End Date of a qualification or unit. NOCN will ensure that all approved centres are updated on any changes to our qualifications and products through the Bulletins section of the NOCN website (www.nocn.org.uk/bulletins/). This includes the development of new qualifications and units, as well as extensions, withdrawals, amendments and any qualifications or products that are due to expire, along with the dates that the changes come into force. Centres must ensure they are fully aware of all dates and changes to our qualifications and products to ensure that learners are registered before registration expires.
- 3.61 Centres are responsible for ensuring the accuracy of learner registration data at the time of submission to NOCN. NOCN requires registrations to be made in the legal name of the learner. Learners must not be registered using nicknames or preferred names. Aside from an incorrect spelling of a learner's name, or in cases of witness protection or gender reassignment, name changes will only be permitted *before* certification has taken place.

- 3.62 Learners must be registered as soon as possible following their induction into the course, with registration taking place no later than **60 working days** from the date of the learner's induction. Shorter timescales apply in the following scenarios:
- For courses less than 12 weeks expected duration, registration must take place from **25 working days** of the learner's induction onto the course.
 - For externally set assessments, learners must be registered at least **5 working days** before the date they are planned to sit their assessment. The same timescale applies for any subsequent resit registrations.
 - For courses which include externally set assessments and which are planned to be delivered over 2 or less working days, learners must be registered at least **2 working days** before the date they are planned to sit their assessment. The same timescale applies for any subsequent resit registrations.
- 3.63 *In all cases, no assessment activities can be carried out by the Centre until the learner is registered with NOCN.* This is to ensure that the learner's interests are protected. The only exception to this is the initial assessment carried out by the Centre during the learner's induction to ensure correct level of entry.
- 3.64 NOCN reserves the right to charge centres late registration fees, as well as fees for incorrect registrations, as detailed within the NOCN Fees and Charges (www.nocn.org.uk/centres/fees-and-charges/).
- 3.65 Each learner registration with NOCN will remain active for a period of **3 years from the course start date**. After the period of 3 years, NOCN will no longer accept any subsequent claims for achievement against the registration. Where claims are required to be made, a new registration will need to be made by the Centre, at which point the current registration and certification fee of the product will apply and will be charged to the Centre.
- 3.66 For further information regarding the requirements around registration, please refer to the NOCN Registration and Certification Policy and Procedure.

Ref.	Approval Criteria
A.13	Equality of opportunity data of learners is collected and reported on, with appropriate changes made based on findings.

- 3.67 NOCN is committed to equality, diversity and inclusion and we strive to only work with organisations who share our common values. Therefore, centres must ensure that they operate a policy of equal opportunity and fair treatment to all staff members and to their learners regardless of their age, disability, gender, gender reassignment, marriage or civil partnerships, pregnancy and maternity, sexual orientation, race, religion or belief.
- 3.68 In line with the Centres' Equal Opportunities Policy, centres should aim to collect and analyse equality of opportunity data from their learners. Centres should try to make positive changes based on their findings to ensure that their services are inclusive and do not discriminate against any specific group.

Ref.	Approval Criteria
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A.14	Claims for certification are safe, valid and made in a timely manner.
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- 3.69 Centres must ensure a timely and accurate upload of learner achievements to NOCN. Certificates must only be claimed for when a learner has successfully met all of the requirements of the qualification. NOCN requires centres to ensure that the required internal quality assurance checks are carried out on the accuracy and validity of result claims before they are submitted to NOCN.
- 3.70 In all cases, results must be submitted to NOCN for external quality assurance within *20 working days* of the end date of the course and within 3 years of the date of registration. Where a learner has sat an external assessment, all assessment materials (both used and unused) must be returned to NOCN within *2 working days* of the assessment date.
- 3.71 Where a Centre has not been granted Direct Claims Status (DCS) for a qualification/course in which results are submitted, the results will need to be moderated by a NOCN External Quality Assurer before certification can be granted.
- 3.72 It is important to note that submission of results by a Centre does not automatically trigger the required external quality assurance activities and centres should liaise with their External Quality Assurer, or NOCN directly, to progress results to certification. Centres must ensure EQA windows are factored into their assessment planning and that EQA Sign-Off is booked at least 20 working days in advance for NOCN to guarantee EQA availability. NOCN will try to accommodate shorter notice requests but may not be able to guarantee EQA availability at shorter notice. For further information on how NOCN quality assurers Centre result submissions, please refer to the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.
- 3.73 Once centres receive certificates, they must check all certificates for accuracy before securely distributing these to learners in a timely manner. Centres must ensure that they have their own internal procedures for the checking and logging of certificates. Centres should keep a record of certificates received and sent, including keeping the details of the relevant dates and tracking numbers. This must be provided to NOCN upon request.
- 3.74 As of 1st August 2023, all NOCN centres automatically receive eCertificates, following successful completion of a qualification. Any registrations prior to this, will automatically receive a paper certificate. For further information, please refer to the NOCN website.
- 3.75 Once NOCN issues a certificate, it is the responsibility of the Centre to ensure that the certificate is obtained by the learner and under no circumstances must centres hold or retain certificates from learners. This is a breach of the NOCN approval criteria and may lead to the application of Sanctions.
- 3.76 Where an error in claiming is identified and a certificate has been issued, the Centre must return the certificate to NOCN alongside a completed NOCN Incorrect Claim Form (available on the NOCN website). NOCN must receive any incorrectly issued certificates to allow the incorrect achievements to be removed. Centres will be charged an administration fee for the incorrect claim, in line with the NOCN Fees and Charges. For further information, please refer to the NOCN Registration and Certification Policy and Procedure.

4. Delivery Staff, Resources and Equipment

This section provides the requirements centres must meet regarding their physical resources. Centres should always ensure that they refer to the individual qualification specifications, alongside any sector body assessment strategies where applicable, for the qualifications within their provision to ensure that they meet any specific requirements. Requirements detailed in this section are general requirements across all NOCN qualifications.

4.01 Centres must ensure that they have sufficient and appropriate physical resources to support their delivery of NOCN provision. The NOCN approval criteria regarding delivery staff, resources and equipment are listed below.

I. Delivery Staff

Ref.	Approval Criteria
B.1	A suitably experienced and qualified workforce for the training, assessment and quality assurance of NOCN provision is in place.

4.02 Centres must ensure that they are aware of, and understand, the Tutor/Trainer, Assessor and Internal Quality Assurer (IQA) requirements for each qualification they have in their provision to ensure that they meet all requirements. Only staff members who *meet all of the requirements* detailed within the individual qualification specification are permitted to be used by the Centre for each of the Tutor/Trainer, Assessor and Internal Quality Assurer role(s).

4.03 Where a Tutor, Assessor or IQA does not meet all individual requirements in the qualification specification's delivery staff requirements, NOCN may use its discretion to consider alternative sources of evidence as part of its approval decision. This will only be considered where the Centre can evidence and demonstrate that the individual is of appropriate competence despite not meeting the full requirements. Where approval is provided on this basis, NOCN may impose mandatory actions or recommendations to address any gaps in meeting the standard requirements.

4.04 Please note that consideration of delivery staff outside of the standard requirements is at NOCN's discretion and will only apply where NOCN is satisfied that sufficient alternative sources of evidence have been provided to allow safe and valid training and assessment. NOCN will not consider any deviation from the standard requirements for qualifications where there are specific sector requirements or if the qualification is competency-based¹. Failure to notify NOCN of changes to staff where they do not meet requirements as detailed within the qualification specification will lead to the implementation of Sanctions.

4.05 Where NOCN identifies weaknesses in Centre practices but delivery staff meet the requirements of the qualification specification, NOCN may implement further requirements which may go beyond those which are the standard. This may be applied in circumstances such as repeated poor performance of Tutors, Assessors and/or IQAs. Additional requirements may include the requirement to undertake further training or gain further training/certifications. These will be applied by NOCN through mandatory actions in line with the standard process.

¹ Competency qualifications include NVQs and other qualifications where the focus of the qualification is on assessing learner ability rather than training.

- 4.06 In the case of certain competence-based qualifications, where the focus is on assessment rather than training (e.g., NVQs), a Tutor/Trainer is not required. For knowledge-based² qualifications, an individual may perform the role as both Tutor/Trainer and Assessor, where they meet the requirements of both roles in respect of the qualification. Tutors, Trainers and Assessors must not perform the role of the IQA for cohorts where they have delivered training or assessment. Centres must refer to the individual qualification specifications for confirmation of its staffing requirements.
- 4.07 Centres are responsible for demonstrating through written evidence how they have made decisions to appoint and register their Tutors/Trainers, Assessors and IQAs. The use of staff members who are not appropriate will lead to the application of Sanctions against the Centre.
- 4.08 Where centres make use of delivery staff who work on a sub-contract basis, they must ensure that they have appropriate contracts in place with these individuals. This includes ensuring that responsibilities of the individuals are clearly set out and that there are appropriate SLAs in place for the completion or contribution of work. Centres must register these individuals with NOCN in the same way as their full-time members of staff and they will be monitored in line with the same requirements.
- 4.09 Staff members who are repeatedly found to be demonstrating unacceptable and poor-quality assurance or record keeping practices, with no acceptable signs of improvement, may be suspended or their approval removed by NOCN. Please refer to the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.
- 4.10 As a minimum, *Tutors/Trainers* and *Assessors* must:
- Hold verifiable knowledge of the occupational standards at or above the level being taught or assessed. This includes the provision of original copies of up-to-date qualification certificates.
 - Have appropriate and sufficient experience that meets the requirements of the qualification specification.
 - Keep up to date with industry best practice for the duration of their role.
 - Meet any specified industry requirements or training/assessment strategies in relation to the qualification.
 - Maintain a record of Continuous Professional Development (CPD).
 - Hold an up-to-date CV.
- 4.11 For most qualifications, individuals are required to hold (or working towards in some cases) a recognised teaching and/or assessing qualification dependent on their role in the delivery process. For examples of recognised teaching and assessing qualifications, please see appendix 2.
- 4.12 Where staff members are permitted to be working towards their Assessor qualification, centres must ensure that their assessment decisions are checked and countersigned by an appropriately qualified and competent Assessor. It is important to note the qualified Assessor is active in the assessment decision and is not only signing the evidence. Centres must ensure that there is a plan in place for unqualified Assessors to achieve their qualification within 12 months of qualification registration.

² Knowledge-based qualifications, such as training diplomas, and NOCN skills for life qualifications, where a focus is on both training and assessment of learners.

4.13 For a minimum, *Internal Quality Assurers* must:

- a) Hold verifiable knowledge of the occupational standards at or above the level being taught or assessed. This includes the provision of original copies of up-to-date qualification certificates.
- b) Have appropriate, sufficient and relevant experience that meets the requirements of the qualification specification.
- c) Understand the content, structure, assessments and training/testing requirements of the units they are quality assuring. This includes understanding of the Rules of Combination (RoC) and exemptions that apply.
- d) Keep up to date with industry best practice for the duration of their role.
- e) Maintain a record of Continuous Professional Development (CPD).
- f) Hold an up-to-date CV.

4.14 For qualifications which are competency-based, such as in construction, Tutors and Assessors must hold auditable, sufficient and current 'hands on' experience/competencies which directly relate to the qualification types and levels approval is being sought/held for.

4.15 For certain qualifications, individuals are required to hold (or working towards in some cases) a recognised internal quality assurance qualification. For examples of recognised internal quality assurance qualifications, please see appendix 2.

4.16 Where IQAs are working towards their IQA qualification and where an IQA qualification is required to internally quality assure the qualification, centres must ensure that their IQA decisions are checked and countersigned by an appropriately qualified and competent IQA. It is important to note the qualified IQA is making the decision, not just signing the evidence.

4.17 In all cases where an IQA is registered on an IQA qualification, centres must ensure that there is a plan in place for the IQA to achieve their qualification within 12 months of qualification registration.

4.18 To maintain the integrity of the assessment process, IQAs must prevent any conflicts of interest with their Assessors. Assessment practices and decisions of any Tutor/Assessor who may have a conflict of interest, such as assessing a family member or friend, must be carefully scrutinised before awards are made. Equally, an IQA must declare any similar conflict of interest to an EQA.

Ref.	Approval Criteria
B.2	CVs and certificates for all staff members are available and securely stored at the Centre, with digital copies being uploaded to NOCN systems.

4.19 To evidence that each staff member meets the requirements of their individual roles for each qualification they perform a role in, the Centre must obtain and retain an up-to-date copy of a staff member's CV (updated at least within the previous 12 months) and copies of the certificates for them to evidence the required knowledge, competencies and qualifications.

- 4.20 The Centre must securely store copies of CVs and certificates during the entirety of a staff member's involvement with the Centre and must be able to provide copies of CVs and/or certificates for all of their staff members at any time, including during external quality assurance activities. Failure to provide this will lead to the application of Sanctions.
- 4.21 For any new Centre, qualification or staff approval, NOCN is required to see original qualification certificates. For centres who work directly with NOCN, copies of delivery staff CVs and certificates must be uploaded to and maintained on the NOCN Horizon system. This will both support the evidence of compliance with this criterion and speed up future applications for additional qualification approval requests.
- 4.22 In all cases, the Centre must hold copies of staff certificates on file so that their EQA can sign and date to confirm that they have seen the original copies. Where a remote visit is being conducted, the EQA will request that original certificates are available on the next face-to-face visit to allow a copy of the certificate to be signed and dated.

Ref. Approval Criteria

B.3 Continuous Personal Development of delivery staff is maintained and is auditable.

- 4.23 To ensure that all delivery staff members retain their verifiable knowledge of the occupational standards and that they keep up to date with industry best practice, the Centre must provide each staff member involved in the delivery, assessment and internal quality assurance of a NOCN qualification with training or support to aid Continuous Personal Development (CPD).
- 4.24 Centres must ensure that any completed CPD activities are in line with qualification specification and sector body assessment strategies so that they are relevant to the role(s) of the staff member in the delivery of NOCN qualifications.
- 4.25 The Centre's Lead Internal Quality Assurer/Quality Manager is responsible for ensuring that Tutors/Trainers and Assessors have undertaken an appropriate amount of CPD. The Head of Organisation is responsible for ensuring that their Internal Quality Assurers have also undertaken CPD during the duration of their role.
- 4.26 The Centre must ensure that they keep full records of all staff CPD activities, including through individual staff CPD logs, for external quality assurance review.

Ref. Approval Criteria

B.4 Changes to personnel involved in assessment, training and internal quality assurance are notified to NOCN.

- 4.27 Centres are responsible for ensuring that any updates to delivery staff (including any new staff members or leavers) are reported to NOCN in a timely manner. For centres who work directly with NOCN, any changes must be reflected on the Centre's Horizon record (as outlined in 4.30). The Centre is responsible for ensuring that they maintain appropriate levels of staff members to allow them to perform all functions of qualification delivery.
- 4.28 If, at any point, a staff member leaves that results in the Centre not having a single or sufficient staff members to perform the training, assessment or internal quality assurance for one or more

of their qualifications, this must be reported as soon as possible to assurance@nocn.org.uk. NOCN will review the information and will suspend the Centre’s registration or approval status for the qualification until appropriate staff members have been recruited and identified to NOCN. This is to protect the interests of learners.

- 4.29 For centres who work directly with NOCN, centres must ensure that they update and maintain their Centre staffing record on Horizon. This includes ensuring that any leavers are removed and that any new staff members are registered with NOCN and attached to the appropriate qualifications that they are involved in their delivery, alongside their appropriate roles. When adding staff, centres must upload certificate scans and CVs to the staff member’s record on Horizon.
- 4.30 NOCN will review Centre records on Horizon on a regular basis, including before and during EQA monitoring activities. Where NOCN finds that a Centre does not have the required staff levels attached to qualifications in their provision, or where it finds that the Centre’s record on Horizon is not up to date, NOCN will investigate the reasons why and may apply Sanctions.

II. Resources and Equipment

Ref.	Approval Criteria
B.5	Physical resources to support assessment and training are adequate and comply with health and safety legislations and directives.

- 4.31 Prior to delivering any training or assessment, centres must ensure that there are adequate and appropriate physical resources in place within the Centre to support all elements of the delivery of all of its approved NOCN qualifications.
- 4.32 All venues must be risk-assessed and deemed appropriate before their use. Centres must ensure that learners will have access to any equipment they will require to allow them to complete assessments and that the equipment is suitable.
- 4.33 Certain vocational qualifications require centres to have access to certain resources and equipment. Centres should refer to the individual qualification specifications for further guidance.

Ref.	Approval Criteria
B.6	All delivery sites are appropriate and have been identified to NOCN.

- 4.34 Centres must identify all of their delivery sites. For NOCN centres, the details of delivery sites must be logged on Horizon. For guidance on how to do this, please refer to Appendix 3.
- 4.35 A risk assessment must be carried out for all delivery sites where training or assessment will take place. The risk assessment must confirm whether the venue has appropriate facilities, including adequate learner welfare facilities and access for learners who may have a disability. Any risks regarding health and safety must be flagged and addressed prior to the venue’s use. Records of these risk assessments should be kept and shared with NOCN upon request.

4.36 The Centre is responsible for using only appropriate, safe venues which will be conducive to learning and will not hinder a learner in demonstrating achievement of assessment requirements. This includes ensuring that the venue provides a comfortable atmosphere for learners, including in terms of hygiene, noise levels, temperature and the provision of clean toilet facilities.

Ref.	Approval Criteria
B.7	Delivery tools (lesson plans, handouts, schemes of work) are available and are appropriate for the effective delivery of NOCN products.

4.37 The Centre is responsible for the creation and use of appropriate training and assessment tools and templates to support the delivery of NOCN products. The Centre will be required to produce the appropriate resources and templates at the initial and any subsequent approval stages to demonstrate that they have the required resources to gain approval.

4.38 Centres should ensure that all resources created are in line with qualification requirements, NOCN quality standards and sector body assessment strategies. Resources should be created for each qualification approval is held and is being sought for and should include schemes of work, lesson plans, course materials, handouts and practice tests/assessments (where relevant).

4.39 For certain qualifications, NOCN may provide sample templates, assessments, mock exams or training resources that may be used by the Centre to add to or support the Centre's own documentation. For further information, please refer to the individual qualification specification.

5. Training and Assessment of NOCN Qualifications

This section details the training and assessment requirements of NOCN qualifications. The requirements and guidance detailed within this section are general for all qualifications. Centres should refer to the relevant qualification specifications for specific requirements.

5.01 Centres must ensure that they have a delivery system which contains the robust and compliant training and assessment of learners. The NOCN approval criteria regarding training and assessment are detailed below:

I. Training and Assessment Practice

Ref.	Approval Criteria
C.1	Initial assessment of learners is appropriate and is carried out to confirm the correct level/mode of product, check entry requirements and remove barriers to entry.

5.02 Assessors must ensure that an initial assessment takes place at the beginning of each course for each learner. The initial assessment process should be used to ascertain a learner's previous knowledge and experience relevant to their registered qualification. The outcomes of the initial assessment should confirm qualification entry requirements, support or reasonable adjustment requirements, and the consideration of Recognition of Prior Learning (RPL).

5.03 By carrying out an initial assessment, centres must ensure that the learner meets the requirements to be registered onto the qualification/product. This includes having the appropriate levels of English language skills. Centres must also ensure that learners are assessed to ensure that they are subsequently registered onto the most appropriate level of the product (i.e., ensuring that a learner who is deemed to be at Level 2 in terms of skills and knowledge is not registered on a Level 1 qualification). Full records of initial assessment must be kept for external quality assurance purposes.

5.04 The initial assessment process must also ascertain whether the learner has any specific learning or support requirements and whether any adaptations to the Centre's standard assessments or assessment practices are required. This includes ensuring that any access arrangements, including Reasonable Adjustments, are considered and applied, where appropriate.

Ref.	Approval Criteria
C.2	Training, both planned and delivered, meets qualification requirements, including those of GLH, TQT and distance learning/self-study to ensure learners are assessment ready.

5.05 All delivery staff within centres must ensure that they are aware of the specific requirements of the training, assessment and internal quality assurance of the qualifications with which they perform a role.

- 5.06 Centres must refer and adhere to the Guided Learning Hours (GLH) and Total Qualification Time (TQT), as detailed within each individual qualification specification, for each learner they train or assess. Through consultation with users, the TQT for each qualification has been agreed by considering the total number of learning hours required for the average learner to achieve this qualification. TQT is split into two areas, Guided Learning Hours (GLH) and Other Learning Hours (OLH).
- 5.07 Guided Learning Hours (GLH) – Learning activity under the immediate guidance or supervision of a Tutor, or other appropriate provider of education or training. This includes the activity of being assessed if the assessment takes place under the immediate guidance or supervision of a lecturer, supervisor, tutor or other appropriate provider of education or training. Examples of GLH activities include:
- a) Classroom-based learning supervised by a Tutor.
 - b) Work-based learning supervised by a Tutor.
 - c) Live webinar or telephone tutorial with a Tutor in real time.
 - d) E-learning supervised by a Tutor in real time.
 - e) All forms of assessment which take place under the immediate guidance or supervision of an appropriate provider of training.
 - f) Exam time.
- 5.08 Other Learning Hours (OLH) – An estimate of the number of hours a learner will spend, as directed by (but not under the immediate guidance or supervision of) a Tutor, or other appropriate provider of education or training, including preparatory work, self-study or any other form of education or training, including assessment. Examples of OLH activities include:
- a) Independent and unsupervised research/learning.
 - b) Unsupervised compilation of a portfolio of work experience.
 - c) Unsupervised e-learning.
 - d) Unsupervised e-assessment.
 - e) Unsupervised coursework.
 - f) Watching a pre-recorded podcast or webinar.
 - g) Unsupervised work-based learning.
- 5.09 Centres must consider GLH when using distance learning or self-study methods as this will affect the amount of contact time the learner has with their Tutor or Assessor. Certain qualifications have specific requirements around the use of distance learning or self-study and for some qualifications it is prohibited. For further information, please refer to the individual qualification specification(s).
- 5.10 Where distance learning or self-study is used, centres must ensure that they have robust systems and controls in place. This includes ensuring that materials are appropriate and that they are distributed to all relevant learners in a timely and orderly manner. Centres must ensure that there is a resolution system in place in case learners have any questions regarding the material they are provided with and that learners are regularly and appropriately monitored. On a Tutor/Assessor's first contact with a learner following any self-study or distance learning, a check of the learner's understanding of activities must be completed. The Tutor/Assessor must also perform checks to ensure that learner work is authentic and all tutors and/or assessor must continue to meet the requirements to deliver to ensure consistency of standards across face to face and online modes of delivery and assessment.

- 5.11 Centres must ensure that the hours completed under self-study or distance learning are appropriately documented in learner’s individual learning plans and that this is auditable for external quality assurance purposes.
- 5.12 Centres must ensure that they adhere to the TQT and GLH for each learner they train or assess before learners are signed off as completed and before results are submitted to NOCN.
- 5.13 Where GLH or TQT has not been met, the Centre’s IQA must have confirmed in writing the rationale as to the reasons why and how the Centre has demonstrated that the learner is assessment ready before submitting the learner for assessment. This must be available for external quality assurance purposes.
- 5.14 Centres must ensure for each learner that they have had sufficient training, which may go above the levels of TQT or GLH dictated by the qualification, to ensure that they are ready for assessment. Entering learners into assessment before ensuring they are assessment ready may be considered as malpractice by NOCN and could also lead to a poor learner experience, as well as appeals or complaints.
- 5.15 Tutors/Trainers who are repeatedly found to be demonstrating unacceptable and poor training or record keeping practices, with no acceptable signs of improvement, may be suspended or their approval removed by NOCN. Further information is available in the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.

Ref.	Approval Criteria
C.3	Assessors are aware, and make use of, valid, reliable and inclusive assessment methods which are appropriate for the course being delivered.

Language of Assessment

- 5.16 For centres and learners based in England and Scotland, all training and assessment of NOCN qualifications must be conducted in English, except for where the proficiency in another language is a skill being assessed by the qualification. The assessment of learners in any other language is not permitted, except for British Sign Language, which may be permitted if a Reasonable Adjustment has been requested and approved. Centres are required to ensure through their initial assessment process that learners have sufficient English Language skills to engage with the qualification.
- 5.17 For centres based in Wales, Northern Ireland or Ireland, NOCN will permit for assessments to take place in Welsh or Irish (Gaelige) respectively, dependent on the qualification being assessed. Centres should contact assurance@nocn.org.uk for further information. Both NOCN and its approved centres are required to ensure that all reasonable steps are taken to ensure that any assessment which takes place in a language other than in English is of the same standard and level of demand as learners who complete the assessment in English. This will be completed through NOCN’s quality assurance activities.
- 5.18 For centres who are not based in England, Scotland, Wales, Northern Ireland or Ireland, NOCN may permit for assessments to take place in a language other than in English. This will be subject to a separate approval process. For further information, please refer to the NOCN Use of Language in Assessment Policy.

5.19 Centres have a responsibility to ensure that their assessment methodologies are inclusive, ethical and appropriate regarding the learner being assessed. Any derived assessment tasks should also be pre-verified and standardised to ensure that by completing them, learners are able to successfully meet all of the required assessment criteria.

Developing Accessible Assessments

5.20 When developing assessment tasks for learners, centres should consider the following principles. For more details, please see the NOCN Guidance for the Development of Accessible Assessments document, available on our website here: [Quality Assurance - NOCN](#)

5.21 Key principles for developing assessment tasks:

- a) The task must enable a learner to demonstrate their level of attainment in relation to knowledge, skills and understanding.
- b) An assessment task should only measure what it is intended to measure.
- c) Instructions on how to complete an assessment should be clear and unambiguous, for example, “You have 2 hours to complete this assessment”.
- d) The layout and structure of an assessment should be clear and consistent and not create an unnecessary barrier for learners. For example, relevant or essential text on the same page to avoid learners having to turn a page and, indicate where a page has been intentionally left blank.
- e) The language used in an assessment task should be appropriate for the level of the assessment and should not create barriers to learners. For example, use “with” rather than “in conjunction with”.
- f) Sentences in assessment tasks should be structured clearly.
- g) Images should only be used in an assessment where they support the measurement of the assessment construct. Where images are used, they should be clear and not distracting to learners.
- h) The task should only test those elements of knowledge, skills and understanding that it is intended to measure, for example, if a task is meant to measure numerical skills, it should not require learners to understand complex language.
- i) If the task is intended to measure learners’ understanding of complex language, then complex language should be the central to the task.

Safeguarding and Confidentiality

5.22 It is important that Assessors consider the appropriateness of evidence which may be collated to evidence learner completion. This includes considerations regarding safeguarding and confidentiality, especially in cases where a learner is working with vulnerable adults or children. NOCN recommends that where interaction is required by a learner with children or vulnerable adults to gain assessment evidence, that the evidence presented for achievement is anonymised as far as possible and that personal details, including photographs containing these groups, are not included, where this is not required to allow achievement or certification of an assessment/unit. Where this is required, centres must consider whether written permission has been provided by the parents/caregivers of these individuals for the evidence to be used as part of the learner’s assessment evidence.

5.23 Centres are responsible for ensuring that their Assessors and learners are aware of issues around confidentiality and safeguarding in order to protect the interests of members of the public.

Artificial Intelligence (AI)

5.24 Centres should consider the risk of Artificial Intelligence (AI) misuse when devising assessments for learners and consider using assessment methods to mitigate this risk. For example:

- a) Where a qualification requires a written assessment or portfolio which could be plagiarised with AI, centres could conduct a professional discussion or interview underpinned by the assessment, to ensure the validity of the learner’s work.
- b) Intermittent knowledge-based discussions with learners throughout the duration of a course.
- c) Requirements to submit draft assignments for review prior to final assessment.
- d) Unsupervised coursework.
- e) Assignments based on specific centre-devised case studies which are more difficult for AI tools to understand, due to their reliance on online information and historical data.

5.25 Further guidance on the misuse of AI and how this is defined by NOCN can be found in the NOCN Malpractice and Maladministration Policy and Procedure.

5.26 Assessors who are repeatedly found to be demonstrating unacceptable and poor assessment or record keeping practices, with no acceptable signs of improvement, may be suspended or their approval removed by NOCN. Further information is available in the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.

Ref.	Approval Criteria
C.4	Recognition of Prior Learning (RPL) and claims for exemption are considered, recorded and used appropriately.

5.27 Recognition of Prior Learning (RPL) is an assessment method that considers whether a learner is able to demonstrate that they meet the assessment requirements for a unit through knowledge, understanding or skills that they already possess (and can evidence), which do not require further development through a course of learning. The purpose of RPL is to recognise a learner’s previous learning or experience rather than allowing exceptional entry to, or exemption from, a programme of study.

5.28 RPL is a recognised and valid assessment method and therefore there is no difference between a learner’s achievement of the required standards (i.e., learning outcomes and assessment criteria), being met through RPL or through a formal programme of study. RPL must be treated in the same way as any another assessment methodology and therefore it will be subject to, and must comply with, all regulatory requirements for assessment.

5.29 All evidence must be evaluated using the stipulated learning outcomes in the unit or units being claimed. In assessing a unit using RPL, the Assessor must be satisfied that the evidence produced by the learner meets the assessment standard established by the learning outcomes. Centres therefore must have personnel with the appropriate expertise and knowledge to undertake this, in line with the relevant NOCN qualification specification.

5.30 Centre use of RPL will be subject to the same standard of scrutiny by NOCN as other assessment methods in its application of Centre monitoring activities and must be included within the Centre’s own internal quality assurance strategy and sampling activities. For this reason, the use of RPL should be clearly documented within the relevant learner’s assessment documentation.

5.31 For further information regarding RPL, please refer to the NOCN Recognition of Prior Learning (RPL) Policy and Procedure, available on the NOCN website.

Ref.	Approval Criteria
C.5	Reasonable Adjustments and Special Considerations are considered, applied and recorded appropriately.

5.32 A *Reasonable Adjustment* is an action taken to ensure equal access to an assessment. Under the Equality Act 2010, education and training providers (including Awarding Organisations) have a duty to make Reasonable Adjustments for learners who have a disability or difficulty so that they are not at a substantial disadvantage in accessing an assessment. Examples of a Reasonable Adjustment are, but are not limited to:

- a) Amending usual assessment arrangements, for example allowing a learner extra time to complete the assessment.
- b) Adapting the format of assessment materials, such as providing materials in Braille.
- c) Providing assistance during assessment, such as a sign language interpreter, a prompter, a scribe or a reader.
- d) Re-organising the assessment room, such as providing a learner with a separate room for an assessment away from other learners.
- e) Changing the assessment method, for example from a written to a speaking assessment.

5.33 A *Special Consideration* is an access arrangement taken when a learner’s assessment performance is affected by unforeseen circumstances which are out of their control. This includes learners who are suffering from a temporary illness or condition, or who were or would be otherwise disadvantaged at the time of their assessment. A Special Consideration can be requested, approved and applied both before and after an assessment has taken place.

5.34 Centres must ensure that they consider the application of reasonable adjustments and special considerations for any learner where this is appropriate. Depending on the reasonable adjustment required, centres may need to apply for the adjustment from NOCN. All special considerations must be applied for to NOCN.

5.35 Centres must comply with the NOCN Reasonable Adjustment and Special Consideration Policy and Procedure. Where the policy states that a reasonable adjustment must be applied for, centres must complete and return the NOCN Reasonable Adjustment and Special Considerations Application Form, found on our website below. There are separate forms for single requests and those for multiple learners:

<https://www.nocn.org.uk/support/quality-assurance/>.

5.36 Centres must ensure that they apply for the relevant adjustments within the stated timescales of NOCN’s policy and must not apply adjustments until approval has been granted by NOCN. For further guidance, please refer to the NOCN Reasonable Adjustments and Special Considerations Policy and Procedure, available on the NOCN website.

Ref.	Approval Criteria
C.6	Assessment decisions are supported by valid, authentic, current, sufficient and reliable evidence.

5.37 Following each assessment activity, a judgement must be made by the Assessor regarding whether the learner has met the relevant criteria being assessed. Judgements must be based on the specific evidence which has been gathered/collected as part of the assessment activity.

5.38 Assessors must ensure that all of their assessment decisions are made based on evidence, which is valid, authentic, current, sufficient and reliable regarding the assessment taking place:

- a) **Valid** – The validity of an assessment decision is ensuring that the right thing has been assessed in the right way to deliver an accurate assessment result.
- b) **Authentic** – The assessment process must ensure that all evidence of achievement is authentic in that it has been created solely by the learner (unless otherwise required) and has not been plagiarised. Any evidence from external sources should be appropriately evaluated, analysed and referenced as such, including evidence generated by AI. Copying and presenting external sources as a learner’s own work should be considered as plagiarism or AI misuse in line with NOCN’s Malpractice and Maladministration Policy. If work was not authentic, it would undermine the entire the assessment process and overall qualification system.
- c) **Current** – The assessment process must ensure that the evidence used to claim qualification or unit achievement reflects current industry/qualification practice. This can be done by ensuring that the evidence is relevant at the time of the assessment as well as ensuring that the assessor has used the most-up-date assessment documentation.
- d) **Sufficient** – The Assessor must review assessment evidence to judge whether the learner has generated enough evidence at the right level to confidently cover all relevant learning outcome or assessment criteria requirements. The Assessor must also ensure their records of the assessment are complete, legible and accurate.
- e) **Reliable** – The Assessor must ensure that they are making reliable and consistent assessment decisions across their learners and with other Assessors within the Centre. Assessment decisions must also be consistent over time and across academic/programme cycles. This can be supported by attending standardisation activities.

5.39 By making sure assessment evidence is valid, authentic, current, sufficient and reliable, the assessor can be confident that the evidence generated by the learner will hold under scrutiny by the IQA.

5.40 Following each assessment activity, Assessors must provide a signed written declaration to confirm authenticity and validity of the provided evidence and to confirm their assessment decision. The learner must also sign the declaration to confirm authenticity and their understanding of the assessment decision. This declaration must include:

- a) Name of learner.
- b) Name of Assessor.
- c) Qualification title (including level).
- d) Unit/assessment criteria/Learning outcome references covered and achieved during the assessment.
- e) Details of endorsements achieved (if applicable).
- f) Date assessment confirmed achievement.
- g) Signatures of both learners and their Assessor.

Ref.	Approval Criteria
C.7	Assessment records and evidence are auditable and are stored and retained in line with NOCN requirements.

5.41 Centres must have and maintain a reliable and auditable system for recording training, assessment and internal quality assurance of its NOCN provision. Information must be securely stored and be shared in case of external quality assurance by NOCN, learner appeals, malpractice investigations or information requests from NOCN or regulatory bodies.

5.42 The below information must be kept for a period of *at least seven years from the date of certification* to ensure that any claims for certification can be substantiated, to support any malpractice claims and to respond to information requests from NOCN or regulatory bodies:

- a) Learner name.
- b) NOCN learner number or ULN.
- c) Learner contact address and telephone number.
- d) Regulator reference and title of the qualification the learner was registered on.
- e) Date of the qualification achievement.
- f) Grade of the qualification (if applicable).

Details of unit achievement including:

- a) The name and regulator reference number of the unit achieved.
- b) The name of the Tutor/Trainer and Assessor for the unit.
- c) The name of the IQA (if sampled).
- d) The date the unit was judged as achieved within the Centre.
- e) Grade of the unit (if applicable).

5.43 In addition to the above, the below *must be kept for a minimum of three years* and should be made available to NOCN upon request:

- a) Records of the assessment plan, the assessment evidence, and assessment decisions for each learner, including the details of who assessed, what was assessed (learning outcome reference and assessment criteria), where it was assessed and the date the assessment decision was made.
- b) Details of all examinations conducted and their results.
- c) Synoptic Practical Assignments completed including any evidence generated.
- d) Records of progress/assessment criteria measured in guided learning hours (GLH) and total qualification time (TQT).
- e) A record of any exemption/Recognition of Prior Learning (RPL) used.

- f) The assessment methods used for each unit/component.
- g) Locations of where supporting evidence was gathered and stored at the time of assessment.
- h) Assessment reviews.

Records of internal quality assurance activity including:

- a) Details of the sample selected and internal quality assurance strategy.
- b) Internal quality assurance details including the assessment decisions verified, the name of the IQA and the date the verification took place.
- c) Records of internal quality assurance standardisation meetings.
- d) Records of Assessor support meetings and/or query resolution records.
- e) All completed declaration of authenticities.

5.44 It is important that centres ensure that their systems for logging and storing assessment evidence (for both paper-based records and electronic) are kept secure and that these are kept up to date by all Centre staff. The Head of Organisation has overall responsibility for the protection of data and records and ensuring that these remain free from cyber-attack, or intentional or unintentional destruction or removal by all Centre staff.

5.45 NOCN recommends that paper evidence is not removed from Centre premises to ensure that all records are centrally logged and stored. Access to paper records must be strictly controlled and a tracking system should be in place to show where evidence has been removed from central archives. NOCN also recommends that all assessment and IQA records are stored electronically to support the preservation of records.

5.46 Where records are stored electronically, the Centre must ensure that a secure platform is used and that staff permissions are controlled to avoid deliberate or accidental deletion of evidence. Any deliberate deletion of evidence will be treated as malpractice by NOCN. The Head of Organisation, or delegated individual with the required authority, must perform regular checks on Centre storage systems to ensure that records are stored in the correct place and to identify any data loss.

5.47 Where it is identified that there has been any data or record loss within a Centre of assessment or IQA records, the Centre must notify NOCN immediately via email at groupcompliance@nocn.org.uk. NOCN will review the nature of the data loss and determine whether this was preventable. Where NOCN determines an incident was preventable, this will be treated as a form of malpractice or maladministration, dependent on the circumstances around the incident. For further information, please refer to the NOCN Malpractice and Maladministration Policy and Procedure.

5.48 Where data loss has had an Adverse Effect in relation to a learner's completion of a NOCN assessment, NOCN will work with the Centre to mitigate the effects of the incident as far as possible. NOCN will make decisions by balancing the need for ensuring the integrity of assessment standards are maintained, whilst also supporting learner progression as far as possible. Incidents will be reviewed by NOCN on a case-by-case basis, with recommendations for corrective action including, but not limited to:

- a) Reviewing alternative forms of evidence to determine if assessment completion can be confirmed in the absence of the required evidence.

- b) Supporting the Centre in collating alternative forms of evidence to contribute to assessment completion.
- c) Requesting the re-assessment of the learner.

5.49 Centres who utilise e-portfolio systems must be able to demonstrate how their system meets Ofqual’s Regulatory Principles of e-assessment (2007)³. Centres must also have the necessary safeguards in place to ensure that assessment evidence meets the same principles as paper-based portfolios. Centre assessment strategies must detail how e-portfolio systems are used and quality assured.

5.50 To enquire about NOCN’s own online virtual learning environment, V-Learn, please contact NOCN or visit our website at www.nocn.org.uk/vlearn.

II. Learner Tracking and Progression

Ref.	Approval Criteria
C.8	Planned programmes of delivery are in place and have been agreed by learners.

5.51 Centres must ensure that the assessment process for all cohorts is sufficiently planned to ensure a positive learner experience and to ensure timely and complete qualification achievement.

5.52 The planning of assessment should be tailored to the Centre’s own delivery and assessment strategy. The Centre’s assessment strategy should outline the Centre’s overall approach to assessment, ensuring that it is fit for the purpose of preparing and assessing learner performance against the unit(s) of a qualification and preparing them for their intended progression route. In outlining its strategy towards assessment, centres must ensure that:

- a) A sufficient and auditable system is in place for the documentation and tracking of learner progress whilst on programme, including the planning of assessment, recording of assessment decisions and documentation of feedback.
- b) An effective initial assessment is in place and is followed consistently.
- c) Assessment tasks are pre-verified to ensure appropriateness for learners, allowing achievement of the assessment criteria. Centres should retain evidence of this.
- d) A range of assessment methods are always considered.
- e) Where more than one Tutor/Assessor works with a learner group, the assessment tasks are coherent and auditable across the course in terms of content, style and timescale.
- f) Where more than one learner group is following the same course, the assessment tasks are either the same for each group or, if the diversity of the groups requires differing tasks, are consistent with each other in terms of fairness to the learners.

5.53 An individual learning and assessment plan must be created for each individual learner to provide the learner with reasonable guidelines of when assessment activities will take place and a target date for qualification completion.

³ <http://www.e-assessment.com/resources/principles-of-e-assessment/>

5.54 Centres must ensure that they create programmes of delivery in conjunction with learners and that learners are in agreement with the schedule.

Ref.	Approval Criteria
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C.9	Learner progress whilst on programme is tracked and regularly reviewed to ensure timely completion.
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5.55 There must be planned reviews of learner progress to address any concerns and ensure timely qualification achievement. Centres must keep and retain tracking records which demonstrates learner progress. Tracking records must be auditable for external quality assurance purposes.

5.56 Centres must ensure that they support learners who do not initially meet assessment requirements by providing them with relevant feedback and subsequent opportunities for assessment. This includes learners who sit and fail externally set assessments. For these learners, centres must ensure that learners are provided with further training to address any areas of weakness before being subsequently entered for a re-sit. The Centre's tracking records should show a learner's initial assessment date and the date for future planned re-assessments.

5.57 Centres must ensure that they update tracking records for any early leavers or learners who wish to withdraw from their course. Centre records should show the reason(s) for each learner withdrawal. NOCN would require centres to investigate where there was a high number, or a noteworthy increase in the amount of learner withdrawals.

5.58 Centres must also ensure that they update all withdrawn learner records on the NOCN Quartzweb system by marking the learner as 'Withdrawn'. For support on how to do this, please contact nocn@nocn.org.uk.

Ref.	Approval Criteria
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C.10	Learners receive adequate and appropriate verbal and written feedback after each assessment activity.
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5.59 Assessors must provide learners with feedback after each assessment activity. This must first be delivered verbally to ensure the learner has understood the feedback and to provide them with the opportunity to ask any questions. The verbal feedback must then be followed by written feedback, which must reflect the verbal feedback provided. Assessors should avoid including feedback in writing that has not been provided to the learner prior in the verbal feedback.

5.60 It is important that Assessors ensure that their feedback is reflective of the evidence generated by the learner and is objective in its nature. The feedback must highlight areas where the learner has met and exceeded assessment requirements but should also highlight any development points, where necessary. Feedback should always be used to motivate and encourage.

6. Internal Quality Assurance of NOCN Qualifications

This section details the internal quality assurance requirements of NOCN qualifications. The requirements and guidance detailed within this section are general for all qualifications. Centres should refer to the relevant qualification specifications for specific requirements.

6.01 All approved centres must have a quality system in place that underpins and supports its delivery of NOCN qualifications and units. Centres should have their own quality assurance strategy which reflects the arrangements they have made to ensure quality in their delivery model. The quality assurance strategy should pay due regard to any risk factors posed and must be effectively implemented. The NOCN approval criteria regarding internal quality assurance are listed below.

I. IQA Planning

Ref.	Approval Criteria
D.1	A clear, appropriate and robust Internal Quality Assurance strategy is documented.

6.02 Effective internal quality assurance is crucial in managing risks posed to the Centre, in protecting the integrity of NOCN qualifications and in the safeguarding of learner interests. Centres must ensure that their internal quality assurance system encompasses all processes that affect the learner journey at their Centre, including the recruitment, registration, induction, initial assessment, tracking of progress, assessment practices and achievement recommendation of learners.

6.03 The Centre must have and follow a documented risk-based internal quality assurance strategy which details how the staff responsible for quality assurance will ensure that the Centre is meeting NOCN quality assurance requirements. This includes how:

- a) The quality staff will monitor all stages of the learner journey to ensure quality.
- b) Assessment practice and outcomes will be monitored to ensure compliance with qualification requirements and standards.
- c) Training of learners will be monitored to ensure compliance with qualification requirements.
- d) Observation of delivery staff practice will be carried out to monitor effectiveness.
- e) Delivery staff (Tutors, Assessors and IQAs) will be recruited and supported.
- f) Continuous Personal Development (CPD) of delivery staff will be maintained.
- g) Appeals will be addressed in transparent and fair manner.
- h) Assessment practices between Assessors will be standardised.
- i) Quality improvement will be supported.
- j) Adequate resources, including physical and staff, will be maintained and managed to support continuous qualification delivery.
- k) Malpractice and maladministration will be prevented and investigated when it occurs.

6.04 Interventions by the IQA must be planned according to any pertinent risks within the Centre. This includes the risk level assigned to each Assessor by the IQA, which may be determined by whether they are qualified, their case load of learners, their current CPD levels and the IQAs confidence in that Assessor's ability from previous IQA activities. The Centre's IQA strategy must reflect that Assessors with a higher risk will be subjected to more IQA activities.

- 6.05 A Centre's quality system must involve a number of well-informed, appropriately qualified and competent Tutors, Assessors and IQAs. Centres must also ensure that they have an identified individual who has responsibility for the co-ordination of the quality process, with clear and documented roles and responsibilities for all those involved. It is important that all Quality Assurance Systems place a focus on the consideration, prevention and investigation into suspected or proven malpractice or maladministration.
- 6.06 IQAs play a key role in implementing quality assurance within a Centre. The role of an IQA is to manage the assessment process and the various risks involved in ensuring claims for learner achievement of units and qualifications are sufficient, valid, reliable and authentic and meet national and/or NOCN requirements. Quality assuring different Assessors, especially those who assess the same unit or qualification, will provide the IQA with a valuable insight into the levels of standardisation of practice across their organisation, which will inform the number of team and standardisation meetings that may be needed per assessment cycle.
- 6.07 To enable an IQA to complete their role effectively, the IQA should play an accountable role in the assessment planning and management process. Centre management should therefore support IQAs in their role, allowing them to have the relevant level of responsibility as well as being provided with access to staff, learners, resources and records as and when requested.

Ref. Approval Criteria

D.2 An IQA sampling plan is documented and encompasses all Assessors, learners, qualifications and assessment methods within the Centre's provision.

- 6.08 It is important that sufficient planning of quality assurance activities takes place prior to qualification delivery. This should be documented on an IQA sampling plan, which should illustrate what will happen, when it will happen, who is to be involved, how risks are to be managed and how it is to be recorded over an 'IQA cycle'. The course of an IQA cycle will vary according to a Centre's provision. In many cases this will be based on an academic year, however some centres may operate a 'rolling' basis with a succession of short courses for which the start and finish of a 'year' could be agreed at any point.
- 6.09 A documented sampling plan should utilise the 'CAMERA' method, which will ensure that the sample is representative. This means that the sample plan will take into account:

- C**andidates/Learners - A selection of ages, genders, ethnicities etc.
- A**ssessors – Experience and qualifications, workload, occupational experience.
- M**ethods of assessment – All types of assessment methods utilised by the Centre.
- E**vidence – All types of evidence collected during assessment.
- R**ecords – Learner and assessment records.
- A**ssessment sites – All satellite sites of the Centre.

6.10 NOCN requires centres to take into consideration any risk factors that are posed to their qualification delivery. Typical risk factors include:

- a) Associated risks regarding the qualifications within the Centre's provision (i.e., the risk of license to practice qualifications).
- b) The numbers of Tutors and Assessors assigned for each qualification and their respective workload.
- c) Experience and performance of Tutors and Assessors. This includes whether the Tutor/Assessor is appropriately qualified or working towards their qualification(s).
- d) Changes to qualifications/units.
- e) Issues identified through previous IQA activity.
- f) Learner feedback.

II. IQA Activity

Ref.	Approval Criteria
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D.3	Pre-verification of all assessment tasks and strategies takes place and is effective.
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6.11 The IQA must play an integral part in ensuring accurate assessment by carrying out pre-verification of assessment tasks. In a Centre devising their own assessment, the IQA must ensure that the task is reviewed prior to its use to ensure that it is an appropriate assessment tool, that it is inclusive to learners of all needs, that it meets the principles of assessment and does not hinder learner attainment of the NOCN assessment evidence requirements.

6.12 Centre records of pre-verification of assessment tasks are reviewed by EQAs during monitoring activities to ensure that they take place and are effective. To support centres, NOCN has produced a set of templates which can be utilised by IQAs when completing pre-verification of assessment tasks. These can be found on our website here: [Internal Quality Assurance Templates - NOCN](#).

Ref.	Approval Criteria
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D.4	IQA sampling is effective for confirming validity and consistency of assessment decisions.
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6.13 Over the course of the year the IQA will need to ensure that assessment is being carried out as planned. This will involve holding regular meetings with Tutors, Assessors and other IQAs within the Centre. These meetings should be documented, and records made available to NOCN upon request.

6.14 It is the IQAs responsibility to monitor the quality of assessment through sampling of assessment practices and decisions. The IQA should specify the sample of work or activity they wish to observe. It is important that the sample is sufficient for the IQA to form a view on the consistency and validity of the assessment practice.

6.15 Centres should make use of formative, interim and summative sampling:

- a) *Formative sampling* takes place at the beginning of a learner's course and allows for a review of the induction and assessment planning process.
- b) *Interim sampling* allows for learner work to be reviewed early on in their programme of delivery and before any decisions have been made regarding unit completion. This allows the IQA to prevent any issues regarding weak Assessor judgements or practice as well as highlighting good practice which can be shared with the wider teaching and/or assessment team.
- c) *Summative sampling* allows for the completed assessment judgements for a qualification to be reviewed by the IQA. This will allow the IQA to sample completion of records, assessment decisions and evidence appropriateness and referencing.

6.16 In sampling assessed work or observing assessment practice, the IQA should look for evidence that:

- a) Qualification requirements have been met (e.g., unit and credit combinations).
- b) Assessment decisions are fair and consistent, both across provision and over time.
- c) Evidence of achievement is valid, authentic, current, reliable and sufficient.
- d) Assessors are providing learners with documented clear and constructive feedback.
- e) Learners' work, or the Assessor's evidence of assessment decision, is presented in a clear manner that enables effective verification to take place.

6.17 The methods of sampling used should ensure that assessment decisions are valid and consistent across learners, levels and learning outcomes. Individuals are not permitted to IQA work they have themselves assessed.

6.18 Following each IQA activity, a report must be completed to document the IQAs findings. The findings from the report must be discussed and agreed privately with the relevant Tutor or Assessor following the IQA activity. A copy of the finalised report should be signed by all parties involved to confirm that they agree with the findings, actions and any recommendations.

6.19 Each IQA report should highlight areas of good practice as well as setting any recommendations or required actions for quality improvement. Actions must be set where there are clear weaknesses in the Assessor's practice, and these must be mandatory to address. Recommendations may also be provided by the IQA; however, these are optional for the Assessor to complete. Any actions set must be SMART (specific, measurable, achievable, realistic and time-bound). The IQA must ensure that there is a full audit trail of actions being set, followed up on and addressed to evidence how quality improvement is being completed.

6.20 IQAs who are repeatedly found to be demonstrating unacceptable and poor internal quality assurance or record keeping practices, with no acceptable signs of improvement, may have their approval suspended or removed by NOCN. Further information is available in the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.

Ref.	Approval Criteria
D.5	Observation of assessment practice takes place to ensure Tutor/Trainer and Assessor competence and performance.

- 6.21 An effective way of ensuring that Assessors are performing effectively is to observe them carrying out assessment activities. In planning to carry out an observation, an IQA must ensure that they have the appropriate documentation to record their observation, such as using a checklist, which will also help to ensure that the IQA makes objective decisions regarding Assessor performance.
- 6.22 Observations can be a good source of evidence as the IQA is able to see the assessor making their decisions in real time and in a live assessment scenario. This will mean that the IQA will be able to see the assessor observing the learner and cross-reference this to their assessment documentation to see if they are accurately reflecting the outcomes of the observation.
- 6.23 Observations also provide the opportunity for an IQA to speak to learners to gain comments and feedback on their overall learning experience. By observing assessment practice, the IQA will also see how effective resources and learning materials are in supporting learning and assessment first-hand and whether any improvements or changes may need to be made. This would also allow the IQA to focus on interpretation of learning and assessment materials in standardisation meetings.
- 6.24 It is important that the IQA does not second-assess during an observation, rather they should observe the Assessor and their performance in the facilitation of the assessment. This includes communication with the learner, the recording of their assessment decisions and the provision of feedback to the learner.
- 6.25 An observation plan will usually consist of a table, where the list of all assessors that an IQA is responsible for are in a column with months of the year in the row at the top of the table. Dependent on practice, some IQAs will input planned dates of observations in the table and, when it takes place, the actual date that it occurred. This will allow for the observation plan to also be used as a tracking document. IQAs may also wish to input unit or learning outcome numbers as well to ensure that activities are sufficiently covering all units where an observation can take place is covered.
- 6.26 NOCN has produced a template IQAs may wish to use to conduct observations of assessment, which can be found here: [Internal Quality Assurance Templates - NOCN](#).

Ref.	Approval Criteria
D.6	Regular standardisation of training and assessment practices is planned and undertaken between Centre staff.

- 6.27 IQAs must ensure that appropriate standardisation of training and assessment practice is carried out as part of their internal quality assurance strategy. Centres may also be requested to contribute to standardisation activities by NOCN. Standardisation activities will provide a forum for discussion of borderline cases and good practice in assessment across the training and assessment team.
- 6.28 Standardisation activities should encompass all Trainers, Assessors, IQAs, qualifications and assessment methods within the Centre and must take place at appropriate intervals in relation to the Centre's provision. This is to ensure that given the same or similar piece of evidence, all members of the delivery team would come to the same conclusion.

6.29 Examples of standardisation activities include:

- a) Reviewing, standardising and approving assessments before use.
- b) Assessors/IQAs being asked to review an actual or simulated piece of evidence and comparing/discussing their responses.
- c) Asking Assessors or IQAs whether they believe a particular assessment is valid etc.
- d) Comparing the same type of evidence across a number of learners e.g., using observation reports to discuss/compare to decide whether they meet requirements.
- e) Discussing a new qualification to ensure everyone agrees on their understanding of what is expected and/or asking for further clarification if they don't.
- f) Review of Assessor feedback to learners to ensure it is consistent, fair and valid.

6.30 The NOCN EQA will ask to see evidence of internal standardisation activity and of how the Centre identifies and disseminates good practice. Where appropriate, the EQA may suggest ways in which standardisation activity can become more effective. IQAs must agree to implement any identified actions for quality improvement. A clear and auditable record of actions taken to address actions should be kept.

Ref.	Approval Criteria
D.7	Formal feedback is sought from learners and employers to evaluate the delivery of the Centre's training and assessment.

6.31 IQAs will need to speak with a sample of learners to ensure that their experience of assessment within the Centre is positive. IQAs are encouraged to create and issue surveys and evaluation questionnaires to learners to support them in gaining feedback. Findings from collection of learner feedback activities must be reviewed and used to inform quality improvement measures within the Centre. Any actions for the IQA following the review of learner feedback should be formally recorded and followed up on to support the evidencing of quality improvement.

6.32 It is important that IQAs ascertain whether learners have understood the assessment requirements of their registered qualification, are receiving clear and constructive feedback and are making acceptable progress. The IQA should ensure that learners are supported regarding progression routes and/or preparation for further study or work.

6.33 The timing of a review with a learner should be appropriate to their particular course. It should be far enough into the course for some meaningful assessment to have taken place, but early enough for any issues to be addressed before the learners' chances of achievement are compromised. It may also be appropriate to review learners who are at different stages, to identify issues with particular parts of the process.

Ref.	Approval Criteria
D.8	There is an effective query resolution system in place for delivery staff.

6.34 IQAs should induct all Tutors and Assessors that fall under their remit into their Centre's quality system. It is essential that all Tutors and Assessors understand the delivery and assessment requirements of the qualifications they are involved with, as well as having access to all of the relevant training and assessment materials, including the Qualification Specification.

- 6.35 Centres must ensure that Trainers and Assessors are supported on an ongoing basis, that there is an effective query resolution system in place and that IQAs have sufficient time and resource to implement it. The Head of Organisation must also ensure that there is a query resolution in place for their IQAs.
- 6.36 Delivery staff members must be aware of who they should raise queries or questions to and there should be clear expectations set of timescales and the mode of feedback. Centres should have a documented query resolution system for external quality assurance review and have evidence of it being followed.

Ref.	Approval Criteria
D.9	Internal quality assurance records show the Centre effectively implements and follows their documented IQA strategy and sampling plan(s).

- 6.37 The Centre must ensure that they keep full records of all internal quality assurance records and that these are collated and stored appropriately. Records must show that internal quality assurance activities are taking place regularly to ensure assessment within the Centre is at the required standard.
- 6.38 It is important to note that NOCN does not expect IQA activities to take place on the same day that they were provisionally planned for in the Centre’s IQA sampling plan. Rather, there should be evidence that the plan was being followed as far as possible and was updated following any missed dates. For any major delays in interventions, NOCN will expect centres to be able to justify the reason(s) as to why and to see that this is factored into an update of the sampling plan(s).

Ref.	Approval Criteria
D.10	Regular reviews of the Centre’s IQA strategy and sampling plan(s) takes place and any quality improvement measures are identified and implemented.

- 6.39 It is important that evaluation is used to ensure that the organisation’s assessment and IQA strategies are working. Findings from completed IQA activities should be reviewed to determine if any quality improvement measures are required within the Centre. IQAs should curate their own Quality Improvement Plan, which should state the required improvement, who this impacts, what actions were taken to address the weakness and how this has improved the process/quality within the Centre and for who. The Quality Improvement Plan should be revisited on a regular basis.
- 6.40 Evaluation of the IQA cycle should take place on a continuous basis to inform current and future practice. Where any issues are identified, the Centre must ensure that the IQA strategy and sampling plan is amended and/or strengthened as soon as possible.
- 6.41 The IQA’s sampling strategy should also be amended on a continuous basis and following the identification of any new risks, issues or trends that may dictate further sampling by the IQA. As an example, an IQAs sampling strategy may be amended once the IQA has confidence in an Assessor’s performance, which could mean performing fewer observations and monitoring of that Assessor.

Ref. Approval Criteria

D.11 Assessors are supported and provided with clear and appropriate feedback on assessment.

- 6.42 It is important for IQAs to provide sufficient feedback, support and advice to their Assessors to help them confirm their strengths and to address any areas of weakness. Feedback can be provided face-to-face or remotely over video or phone call if the assessors are remotely based.
- 6.43 Feedback should always concentrate on the assessment process and should not be critical of the assessor as a person. By providing feedback on the practices of the Assessor, it will help them to develop their own assessment practice as well as to maintain and improve the quality of the assessment process for them as well as their learners. Feedback should always be used to confirm competence and to motivate and encourage, rather than apportion blame. Therefore, IQAs should always aim to be honest, supportive, unambiguous, factual, constructive and as detailed as possible in their provision of feedback.
- 6.44 IQAs must always give feedback to Assessors following an observation of practice or a review of assessment records. It is best practice to discuss the feedback verbally to allow for the Assessor to ask any questions they have and to confirm understanding of the feedback provided. Verbal feedback should then be followed by written feedback. This will ensure that all parties have a record of the feedback in case they wish to refer back to it, as well as for audit purposes.
- 6.45 Where any weaknesses are identified in an Assessor's practice, the IQA should set developmental actions for the Assessor. Actions set should focus on how the assessor can improve their practice for the benefit of themselves and their learners. NOCN suggests asking the Assessor to review their own practice first, as they may identify the same weaknesses before the IQA presents their own feedback. By providing feedback and setting developmental actions, the IQA is taking steps to prevent errors or issues from occurring, that could lead to a serious failure in the assessment process or the disadvantaging of learners.
- 6.46 The provision of regular, quality feedback and an open dialogue between an IQA and their team of Assessors can be instrumental in the professional and personal development of an Assessor and also in making improvements to the quality system of an organisation. By resolving any misunderstandings or areas where assessors may not feel fully confident with as soon as possible, the IQA can help to prevent poor Assessor practice.

7. External Assessment Arrangements

This section details the external assessment arrangements requirements of NOCN qualifications. This only applies to centres who offer qualifications which are externally assessed, such as NOCN's Security and Functional Skills suite of qualifications. Centres should refer to the relevant qualification specifications for specific requirements.

7.01 All approved centres must follow the external assessment requirements of the qualifications within their provision. The NOCN approval criteria regarding external assessment arrangements are listed below.

Ref.	Approval Criteria
E.1	Examination venues and facilities are appropriate and have been risk-assessed by the Centre.

7.02 All examinations must be conducted in an appropriate setting, which is conducive to examination conditions. The room must be one in which learners and apprentices will not be disturbed and be of a sufficient size. Rooms must also be of a comfortable atmosphere in terms of hygiene, noise levels and temperature.

7.03 The Head of Organisation, in conjunction with the relevant Examination Contact, is responsible for ensuring that only venues and rooms which have been deemed appropriate are used. The Centre is responsible for completing a NOCN Examination Room Assessment checklist (Found in the Examination and Invigilation Policy and Procedure, Appendix 2) to audit this assessment.

7.04 Only approved rooms which have been deemed as appropriate following the completion of the checklist must be used for examinations. Completed checklists must be stored at centres and be made available to NOCN upon request. The Invigilator must also have access to, and be able to produce the checklist, during examinations.

7.05 The arrangement of desks/workstations and the position of the Invigilator's desk must facilitate the detection of any unauthorised activity by learners, for example, communication with others or use of unauthorised reference material.

7.06 Each learner's desk/workstation for both paper-based and online examinations must be spacious enough to hold question papers and answer booklets and/or computer equipment. For online examinations, sufficient workstations must be available, including at least one replacement computer in case of any technical issues.

7.07 Learners' desks/workstations must be far enough apart so that their work cannot be seen by, and contact cannot be made with others. Further detail on the spacing of desks/workstations can be found in the Invigilator Handbook.

7.08 For paper-based examinations, all learners must be facing in the same direction. For online examinations, learners/apprentices can face each other if the setup of workstations allows for the security of examination material to be upheld. However, where possible, it is recommended that all learners/apprentices face the same direction.

7.09 Prior to each examination session, a seating plan must be created by the Centre. This must be retained and provided to NOCN upon request. A seating plan template is available for centres in the NOCN Invigilator Handbook, available on the NOCN website.

7.10 For centres who conduct online examinations, checks must be completed to ensure that electronic equipment such as computers or laptops are working correctly and that they are setup appropriately for the conduct of examinations. This includes checking that any spell-checking software or internet connection is disabled, if dictated by examination requirements.

Ref.	Approval Criteria
E.2	All external assessments are invigilated by named Invigilators who meet NOCN's requirements and who are appropriately trained in their role.

7.11 The Invigilator is the appointed person (or software) who has the responsibility for conducting an examination session, usually in the presence of learners. Invigilators have a key role in upholding the integrity of the examination process and therefore must be suitably experienced adults who are not current learners at the Centre.

7.12 The role of the Invigilator is to ensure that all examinations are conducted in accordance with NOCN requirements, in order to:

- a) Ensure that all learners have an equal opportunity to demonstrate their abilities.
- b) Maintain the security and confidentiality of the examination papers and completed response sheets, before, during and after the examination – this includes the security of online testing platforms.
- c) Prevent possible learner malpractice.
- d) Prevent possible administrative failures.
- e) Ensure that NOCN's learner identification requirements are adhered to.

7.13 All examinations must be administered securely by centres, using appropriately trained Invigilators. Centres are responsible for ensuring that Invigilators are adults who do not have any perceived or actual Conflicts of Interests in performing their role in invigilating their assessment. Further information on the requirements of Invigilators can be found within the NOCN Examination and Invigilation Policy and Procedure.

7.14 The Centre is responsible for delivering formal and auditable training to each of its Invigilators regarding their role, responsibilities and on NOCN invigilation requirements, prior to their first invigilation activity. NOCN has a bespoke training package that centres are encouraged to use, which covers training on NOCN invigilation requirements and on invigilation best practice (charges apply).

7.15 NOCN has produced a Centre Log of Invigilator Training template (available in Appendix 1 of the NOCN Examination and Invigilation Policy and Procedure) which centres may wish to use. The log of Invigilator training must be stored at the Centre for external quality assurance purposes and be made available to NOCN upon request.

Ref.	Approval Criteria
E.3	Security arrangements for externally set assessments are appropriate.

- 7.16 Examinations will only be provided to centres by NOCN in a secure manner. Once provided, it is the responsibility of all individuals involved in the administration and delivery of examinations (including Centre/Training Provider staff) to ensure security of materials are maintained at all times.
- 7.17 Once issued, all examination papers must be stored securely by centres at all times and must only be accessed by authorised individuals, as detailed by the Centre's own examination and invigilation policy. All NOCN examinations must be invigilated by an individual who has not prepared the learners for the examination, this includes the learners' Tutor/Trainer or Assessor. These individuals *must not* be given access to examination papers for qualifications in which they deliver, unless this is a requirement stated in the qualification's specification.
- 7.18 To enable NOCN to provide access to examination documentation securely, centres will be required to provide the details of an Examination Contact(s), who will be responsible for the administration of examination material. The Examination Contact must not be a Tutor, or otherwise be involved in the delivery of NOCN products. NOCN will issue paper based examination material to the named Examination Contact(s) to ensure the confidentiality of examination papers, to secure the integrity of the assessment and to prevent any Conflicts of Interest. Centres must confirm to nocn@nocn.org.uk the details of their Examination Contact who meets these requirements to allow them to be setup on the Quartzweb system and must ensure through their internal processes that online examination and administration contacts process administration of the examination. Centres are also required to notify nocn@nocn.org.uk of any changes to their Examination Contact.
- 7.19 All examinations are created and issued by NOCN. Examination papers and questions must not be amended or annotated in any way by Centre staff members, unless prior authorisation has been provided by the Quality Assurance Team as part of a reasonable adjustment or special consideration. Examination papers or questions must also not be copied or used for training purposes (such as for mock examinations) under any circumstance. Both of these practices are classified as acts of malpractice by NOCN.
- 7.20 If it is identified by NOCN that examination material has been accessed, amended or distributed in an unauthorised manner by a Centre, or that a learner has had access to examination material outside of the examination window, NOCN will investigate the breach in line with the NOCN Malpractice and Maladministration Policy and Procedure. This may lead to NOCN voiding any linked examination paper(s). Centres may also be sanctioned in line with the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.
- 7.21 Please refer to the NOCN Examination and Invigilation Policy and Procedure for further requirements around the security arrangements which must be followed by centres regarding externally set assessments.

Ref. Approval Criteria

E.4 A process is documented and followed for ensuring learner identification is checked before assessments are sat.

- 7.22 Invigilators must ensure that they perform the appropriate and required checks to ensure that the correct learner is sitting the examination before the examination starts and before materials are opened.

- 7.23 The Invigilator must follow the Centre's own procedure for learner identification before the commencement of each examination. NOCN has produced a template which can be used by Invigilators to record identification checks within the NOCN Invigilator Handbook. Centre staff who have been authorised by their Head of Organisation may be present in the examination room prior to the start of the examination to assist the Invigilator(s) with the identification of learners.
- 7.24 Where photo identification is required, this must be communicated to learners prior to the examination date. Learners must be aware that without identification, they will not be permitted to sit the examination.
- 7.25 For certain qualifications, there may be specific identity requirements that must be adhered to for each learner. Invigilators should refer to the relevant qualification specifications for further information.
- 7.26 Full records of learner identification checks must be available for external quality assurance purposes.

Ref.	Approval Criteria
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E.5	The NOCN Examination and Invigilation Policy and Procedure is understood and is consistently complied with.
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- 7.27 All Centre staff must be aware of, understand and follow the NOCN Examination and Invigilation Policy and Procedure for the conduct of each external assessment.

Ref.	Approval Criteria
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E.6	Examination bookings on NOCN platforms are accurate and auditable, with processes in place to notify NOCN of any changes prior to the examination.
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- 7.28 All learners who are being entered for an examination must be registered with NOCN in line with the required timescales. For further information, refer to the NOCN Registration and Certification Policy and Procedure, available on the NOCN website.
- 7.29 It is important that learners are registered accurately, this includes ensuring that the appropriate date, time and venue is selected at registration. Centres who must maintain up-to-date details of their delivery sites on NOCN systems (Horizon for centres who work directly with NOCN) to ensure that they are able to select the correct site address upon learner registration or examination booking. Centres must ensure that accurate site details are recorded to facilitate NOCN and sector body unannounced visits. Failure to provide accurate details that results in a failed visit may result in charges and/or Sanctions against the Centre. For further information, please refer to the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.

7.30 Where a centre is required to cancel an examination session, or amend the site or times of the examination, they must confirm this in writing as soon as they are able to nocn@nocn.org.uk, as well as providing the rationale for the change or cancellation. This includes situations where an examination session does not go ahead due to the absence of learners. Failure to timely notify NOCN of a cancellation or amendment of an examination session may incur a charge, as detailed within the NOCN Fees and Charges.

8. Quality Monitoring of Centres

This section details guidance and support for how NOCN will monitor Centre quality systems. Full details of NOCN's monitoring policy and procedure can be found in the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure, available on the NOCN website.

- 8.01 Compliance with the NOCN approval criteria and adherence to the NOCN Centre Agreement and Terms and Conditions and suite of NOCN policies and procedures is monitored by the Quality Assurance Team, in conjunction with the Centre's assigned EQA. Centres who are managed by a recognised NOCN Delivery Partner will be monitored by their respective Quality Assurance Team.
- 8.02 All centres are assigned at least one EQA. Some centres may be allocated more than one EQA, dependent on the individual requirements of the qualifications in the Centre's provision. If the Centre's EQA is re-assigned, this will be communicated to the Centre by the NOCN Quality Assurance Team, who will put the Centre in contact with their new EQA.
- 8.03 NOCN takes a risk-based approach to the quality monitoring of its approved centres. The EQA will use findings from their monitoring activities to make judgements with regard to the Centre's level of risk. Centres are rated either Low, Moderate or High following each monitoring activity. The level of risk applied following a visit will correspond to when the Centre's next monitoring activity will take place.

I. External Quality Assurance Monitoring

- 8.04 Each Centre will receive at least one external quality assurance monitoring activity per academic year. This activity will be either face to face or remote dependent on the nature of the Centre's delivery model and the risk and content of the NOCN products within their provision. Where the Centre's throughput allows it, centres are also entitled to a second external quality assurance monitoring activity, which will be either:
 - a) A Centre-based external quality assurance visit.
 - b) A remote external quality assurance activity.
 - c) Remote portfolio sampling.
- 8.05 NOCN may conduct both announced and unannounced monitoring activities of centres at any time. Centres are required to allow access to their premises, records, learners and staff for the purposes of monitoring without notice when requested to do so by NOCN. NOCN understands that there may be certain situations where this is not possible, however centres must ensure that they fully co-operate with NOCN at all times.
- 8.06 NOCN reserves the right to undertake additional monitoring of a Centre at any time. Centres should request additional monitoring from the Quality Assurance Team, who will co-ordinate the process. Requested additional monitoring is chargeable to the Centre, as detailed in the NOCN Fees and Charges. For further information, refer to the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.
- 8.07 During each monitoring activity, the EQA will review Centre practices and records to ensure accuracy and consistency of training, assessment and internal quality assurance to ensure that they are in line with the approval criteria. The EQA will also provide information, advice and

guidance to centres regarding both best training and assessment practice and on NOCN requirements, processes and resources. Where a Centre delivers qualifications which are internally assessed, the EQA will also perform scrutiny of the Centre's assessment and internal quality assurance practices and decisions.

- 8.08 EQA monitoring activities are intended to be constructive, supportive and transparent. If any issues or areas of non-compliance are identified, the EQA will provide an opportunity to discuss these areas throughout the visit. Feedback will be provided face to face at the conclusion of a visit and will include any actions set or associated sanction levels if issues have been identified.
- 8.09 EQAs will contact centres to arrange monitoring activities, unless it has been agreed by NOCN in advance that the activity must be conducted unannounced to the Centre. The Centre Contact/Quality Assurance Contact must work with the EQA to identify and agree convenient dates and times.
- 8.10 If an EQA attempts to conduct a monitoring activity, however, is not able to complete it due to the Centre failing to inform NOCN of a change to the venue/time, or have failed to maintain accurate Centre details, the Centre will be charged for the cost of the monitoring activity. If a Centre repeatedly fails to facilitate a monitoring activity following request by their EQA, NOCN may place Sanctions against the Centre and may review the Centre's NOCN approval.

II. Requesting Additional Monitoring

- 8.11 During the period between EQA monitoring activities, centres may still submit certification claims to NOCN even if they do not hold DCS for the units/qualifications that they submit claims for. It is important to note that submission of certification claims does not automatically trigger EQA activity and that if this has not already been planned, centres must contact the Quality Assurance Team, or their EQA directly, for EQA activity to be organised. Centres must ensure EQA windows are factored into their assessment planning and that EQA Sign-Off is booked at least *20 working days* in advance for NOCN to guarantee EQA availability. NOCN will try to accommodate shorter notice requests but may not be able to guarantee EQA availability at shorter notice.
- 8.10 To reduce the number of required external quality assurance activities, centres are encouraged to have an open dialogue with their EQA to inform them of the timescales for learner completion, especially in cases where DCS is not in place. This will allow NOCN to arrange EQA activities at appropriate times to capture and quality assure learner completions and to allow certification. This will negate the need for centres to continuously request additional monitoring from NOCN which will remove delays to learner certification and reduce additional monitoring charges to the Centre.
- 8.11 To enable scrutiny and release of certification claims to take place by an EQA, the Centre may:
- Request an additional monitoring visit, either face to face or remotely (charges apply).
 - Request individual portfolio sign offs (charges apply).
 - Request a Direct Claims Status approval visit (charges apply)
 - Wait until their next monitoring visit for EQA review.

III. External Quality Assurance Reporting and Actions

- 8.12 Following the completion of each monitoring activity, the EQA will discuss their findings with the Centre verbally. The EQA will confirm to the Centre their assigned overall risk rating from the activity, including their rationale, as well as discussing evidence of good practice and the details of any corrective action or recommendations for improvement. The EQA may provide the Centre with recommendations, provide them with actions or apply Sanctions:
- Recommendations* are suggested amendments to current practice intended to further improve compliance arrangements. Implementation of recommendations is not mandatory.
 - Actions* are mandatory and scope what is required to address areas of non-compliance.
 - Sanctions* are penalties for non-compliance. Centres will be provided with Actions to detail the steps required to remove the Sanction, if applicable.
- 8.13 At completion of the visit, the EQA will summarise and document their findings on the NOCN External Quality Assurance Report. The report will be provided to the Centre within 3 working days of the monitoring date. At this point, the Centre will be provided with an opportunity to provide feedback on the activity to NOCN.
- 8.14 The Centre should ensure that the EQA's feedback from the report is cascaded to all relevant staff members as well as being fed into their quality assurance and assessment practices. Any actions set by the EQA are time-bound and evidence of completion is required for actions to be signed off by the EQA. If requested, evidence must be submitted to the EQA following the visit. Otherwise, evidence must be kept for review at the Centre's next monitoring activity.
- 8.15 Failure to address actions within the agreed timescales may increase a centre's risk rating and may in some cases result in the application of Sanctions. If centres are not able to meet an action within agreed timescales, they should contact the Quality Assurance Team.
- 8.16 Centres are provided with the opportunity to submit feedback to NOCN after each monitoring activity regarding the appropriateness of NOCN qualifications, the value of the external quality assurance visit and the quality of the EQA report.
- 8.17 For guidance on how to access Horizon EQA reports and how to submit feedback to NOCN, please refer to Appendix 4.

IV. Application of Sanctions

- 8.18 In instances of Centre non-compliance, where there is a risk to the integrity of NOCN products and/or to the interests of learners, NOCN may apply Sanctions against the Centre. Sanctions are penalties for non-compliance and, dependent on their level, affect a Centre's registration, certification or DCS rights.
- 8.19 NOCN has a range of Sanctions that can be applied to a Centre depending on the impact of the issues identified, the history of the Centre's level of compliance with NOCN, and the risk to the interests of learners and the integrity of NOCN products. For full details of NOCN's Sanctions, please refer to NOCN's Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.

8.20 NOCN will seek to support centres to comply with its requirements. Only in cases of serious non-compliance or the persistent failure of the Centre to address outstanding actions will NOCN apply the highest Sanctions (Level 4 – removal of qualification approval and Level 5 – removal of Centre approval). Notification of the application of this Sanction will be sent to the Head of Organisation at the Centre in writing by the Quality Assurance Team.

V. Direct Claims Status (DCS)

8.21 Direct Claims Status (DCS) is a method of obtaining learner certification without the requirement of a NOCN EQA scrutinising the Centre's assessment decision and practices in relation to a learner's evidence of achievement. Instead, this scrutiny will take place following certification on a risk basis, in line with the NOCN Risk-Based Approach to Centre Quality Monitoring Policy and Procedure.

8.22 DCS is approved by NOCN on an individual qualification basis; therefore, centres must meet the requirements of DCS for each qualification it wishes to obtain DCS for. NOCN will also consider approving DCS if a Centre already has DCS for a similar or comparable qualification with another Awarding Organisation.

8.23 If a Centre is not due a scheduled EQA monitoring visit but believes they meet the criteria for DCS approval for some or all of their NOCN provision, they can request an additional monitoring visit from NOCN, where DCS will be considered. The Centre is required to pay an additional visit charge for this, as detailed in the NOCN Fees and Charges.

8.24 Once approved, DCS is continuously monitored by NOCN and the Centre's EQA. In order to maintain DCS, centres must continue to meet all of the requirements of NOCN policies and approval criteria.

8.25 To ensure that DCS approvals can be ratified during monitoring visits, centres must ensure that all learner portfolios, records of assessment decisions and internal quality assurance activities are kept and stored in line with NOCN requirements, including those made through DCS. Centres must provide access to these records when requested to do so by their EQA.

8.26 Centres must ensure that any changes to their quality system, including changes of personnel, are communicated to NOCN immediately, as this may affect the Centre's ability to retain their DCS approval for some or all of their NOCN provision. Failure to notify NOCN may result in Sanctions being applied to the Centre.

8.27 For full details of DCS requirements, centres should refer to the NOCN Direct Claims Status Policy and Procedure.

VI. Malpractice and Maladministration

8.28 *Malpractice* is a deliberate or reckless act of an individual or business dishonestly claiming learning outcomes and/or units for learners through fraudulent or deceptive means. Malpractice is an act that does not comply with the Qualification Regulators' conditions and compromises the authenticity, reliability and integrity of qualifications and/or units.

8.29 *Maladministration* is an activity of poor practice that results in the Centre, or learner, not complying with the specific requirements for the delivery of a qualification. Maladministration is

often a reflection of poor rather than improper practice and therefore may require NOCN, or a Centre's assigned EQA, to raise actions for quality improvement. Although some instances of maladministration may not require investigation by NOCN, repeated cases and failure to respond and prevent further instances will then itself be escalated to constitute as malpractice.

- 8.30 Malpractice and maladministration can be conducted by centres, Centre staff and learners. To aid centres' understanding of what constitutes as malpractice and maladministration, NOCN have provided examples within the NOCN Malpractice and Maladministration Policy and Procedure.
- 8.31 NOCN reserves the right to investigate any incident which it believes may undermine the integrity of NOCN qualifications or which may pose a risk to learners.
- 8.32 It is the Centre's responsibility to ensure that an explanation of malpractice and maladministration forms a part of a learner's induction process at the Centre. All learners should receive an explanation, including examples, of malpractice and maladministration, as well as being informed of the consequences of them committing such acts. Learners should be asked to confirm their understanding of malpractice and maladministration in writing.
- 8.33 Centre staff must understand and follow NOCN and Centre processes and procedures for dealing with suspected and actual malpractice or maladministration when an incident occurs. When a Centre identifies that suspected or actual malpractice or maladministration has occurred, they **must inform NOCN immediately**.
- 8.34 Notifications of suspected or proven malpractice or maladministration should be sent to NOCN by completing a 'Notification of Suspected or Proven Malpractice or Maladministration' form. Please contact groupcompliance@nocn.org.uk in the first instance for further information.
- 8.35 NOCN has produced separate guidance for centres regarding investigating cases of suspected malpractice or maladministration. This guidance document will be provided to centres once notification to NOCN has been received.
- 8.36 If an allegation of malpractice or maladministration is brought to the Centre's attention by a third party or 'whistleblower', the Centre should refer the individual to NOCN for their investigation. Please refer to the NOCN External Whistleblowing Policy and Procedure.
- 8.37 Further guidance on how malpractice must be prevented, investigated and how NOCN will respond to incidents can be found within the NOCN Malpractice and Maladministration Policy and Procedure, available on the NOCN website.

Appendix 1 – Centre Approval Criteria

This table details the NOCN Centre approval criteria. It has been designed for centres to use as a referencing sheet as well as providing indicative Sanction levels for any areas of non-compliance. The table outlines the minimum approval criteria for all centres. Centres must also refer to guidance provided within the qualification specification and any other associated assessment strategies for the sectors in which the Centre has qualification approval for/or being sought for.

A checklist document is available for centres to support them in performing a self-assessment of being compliant with the NOCN approval criteria, which can be used both at and post-approval. This can be found on our website here: <https://www.nocn.org.uk/support/nocn-support/quality-assurance/>.

Section A – Internal Management and Systems

Ref	Approval Criteria	Applies For Approval?	Applies Post-Approval?	Indicative Sanction
Centre Management				
A.1	Appropriate and effective management systems are in place.	Yes	Yes	L1/2
A.2	A suitable workforce for the administration of NOCN provision is in place.	Yes	Yes	L1/2
A.3	All staff members are sufficiently inducted and trained and on the Centre's policies, procedures and systems.	Yes	Yes	L2
A.4	Service level agreements with partner organisations are adequate to demonstrate responsibilities.	Yes	Yes	L2
A.5	Roles and responsibilities are understood by all staff involved in the assessment, training and quality assurance of NOCN qualifications.	No	Yes	L2/L3
Policies and Procedures				
A.6	Appropriate, up-to-date policies and procedures to effectively manage NOCN provision are in place, as specified in the Quality Assurance Manual.	Yes	Yes	L1
A.7	Policies and procedures are supported by management and are effectively shared and understood by all delivery and administrative staff.	Yes	Yes	L1/2
A.8	The appropriate insurances to protect learners, staff and visitors are in place as deemed by law and specific sector and/or qualification requirements.	Yes	Yes	L3
A.9	Conflicts of interest are documented and managed appropriately.	Yes	Yes	L1/2
Learner Management				
A.10	A robust induction process is in place to ensure learners are appropriately informed regarding appeals, equal opportunities and health and safety.	Yes	Yes	L2/3
A.11	Learners are made aware of how their data will be used, shared with and stored by NOCN.	Yes	Yes	L2/3

A.12	A robust registration process is in place to ensure correct and timely learner registration.	Yes	Yes	L2/3
A.13	Equality of opportunity data of learners is collected and reported on, with appropriate changes made based on findings.	Yes	Yes	L1/2
A.14	Claims for certification are safe, valid and made in a timely manner.	No	Yes	L3

Section B – Delivery Staff, Resources and Equipment

Ref	Approval Criteria	Applies for Approval?	Applies Post-Approval?	Indicative Sanction
Delivery Staff				
B.1	A suitably experienced and qualified workforce for the training, assessment and quality assurance of NOCN provision is in place.	Yes	Yes	L3
B.2	CVs and certificates for all staff members are available and securely stored at the Centre, with digital copies being uploaded to NOCN systems.	Yes	Yes	L2/3
B.3	Continuous Personal Development of delivery staff is maintained and is auditable.	Yes	Yes	L2/3
B.4	Changes to personnel involved in assessment, training and internal quality assurance are notified to NOCN.	No	Yes	L2
Resources and Equipment				
B.5	Physical resources to support assessment and training are both adequate and comply with health and safety legislations and directives.	Yes	Yes	L3
B.6	All delivery sites are appropriate and have been identified to NOCN.	Yes	Yes	L1/2
B.7	Appropriate delivery tools (lesson plans, handouts, schemes of work) are used effectively for delivery of NOCN products.	Yes	Yes	L2/3

Section C – Assessment and Training

Ref	Approval Criteria	Applies for Approval?	Applies Post-Approval?	Indicative Sanction
Assessment Practice				
C.1	Initial assessment of learners is carried out to confirm the correct level/mode of product, check entry requirements and remove barriers to entry.	Yes	Yes	L2/3
C.2	Training, both planned and delivered, meets qualification requirements, including those of GLH, TQT and distance learning/self-study to ensure learners are assessment ready.	Yes	Yes	L3
C.3	Assessors are aware, and make use of, valid, reliable and inclusive assessment methods which are appropriate for the course being delivered.	Yes	Yes	L3

C.4	Recognition of Prior Learning (RPL) and claims for exemption are considered, recorded and used appropriately.	Yes	Yes	L2/3
C.5	Reasonable Adjustments and Special Considerations are considered, applied and recorded appropriately.	Yes	Yes	L2/3
C.6	Assessment decisions are supported by valid, authentic, current, sufficient and reliable evidence.	No	Yes	L3
C.7	Assessment records and evidence are auditable and are stored and retained in line with NOCN requirements.	No	Yes	L2/3
Learner Tracking and Progression				
C.8	Planned programmes of deliveries have been put in place and have been agreed by learners.	No	Yes	L2/3
C.9	Learner progress whilst on programme is tracked and regularly reviewed to ensure timely completion.	No	Yes	L2/3
C.10	Learners receive adequate and appropriate verbal and written feedback after each assessment activity.	No	Yes	L2/3

Section D – Internal Quality Assurance

Ref	Approval Criteria	Applies for Approval?	Applies Post-Approval?	Indicative Sanction
IQA Planning				
D.1	A clear, appropriate and robust Internal Quality Assurance strategy is documented.	Yes	Yes	L2/3
D.2	An IQA sampling plan is documented and encompasses all Assessors, learners, qualifications and assessment methods within the Centre's provision.	Yes	Yes	L2/3
IQA Activity				
D.3	Pre-verification of all assessment tasks and strategies takes place and is effective.	Yes	Yes	L1/2
D.4	IQA sampling is effective for confirming validity and consistency of assessment decisions.	Yes	Yes	L2/3
D.5	Observation of assessment practice takes place to ensure Tutor/Trainer and Assessor competence and performance.	Yes	Yes	L2/3
D.6	Regular standardisation of training and assessment practices is planned and undertaken between Centre staff.	Yes	Yes	L1/2
D.7	Formal feedback is sought from learners and employers to evaluate the delivery of the Centre's training and assessment.	Yes	Yes	L1/2
D.8	There is an effective query resolution system in place for delivery staff.	Yes	Yes	L1/2

D.9	Internal quality assurance records show the Centre effectively implements and follows their documented IQA strategy and sampling plan(s)	No	Yes	L2/3
D.10	Regular reviews of the Centre's IQA strategy and sampling plan(s) takes place and any quality improvement measures are identified and implemented.	No	Yes	L2/3
D.11	Assessors are supported and provided with clear and appropriate feedback on assessment.	No	Yes	L1/2

Section E – External Assessment Arrangements

Ref	Approval Criteria	Applies for Approval?	Applies Post-Approval?	Indicative Sanction
External Assessment Arrangements				
E.1	Examination venues and facilities are appropriate and have been risk-assessed by the Centre.	Yes	Yes	L2/3
E.2	All external assessments are invigilated by named Invigilators who meet NOCN's requirements and who are appropriately trained in their role.	Yes	Yes	L2/3
E.3	Security arrangements for externally set examinations are appropriate.	Yes	Yes	L2/3
E.4	A process is documented and followed for ensuring learner identification is checked before assessments are sat.	Yes	Yes	L2/3
E.5	The NOCN Examination and Invigilation Policy and Procedure is understood and is consistently complied with.	Yes	Yes	L2/3
E.6	Examination bookings on NOCN platforms are accurate and auditable, with processes in place to notify NOCN of any changes prior to the examination.	Yes	Yes	L2/3

Appendix 2 – Recognised Teaching, Assessing and Quality Assurance Qualifications

The below list shows the accepted qualifications for each of the delivery staff roles. Please note that this is not an exhaustive list and centres should check with NOCN as to whether their qualification will be accepted. Centres should also ensure that they are aware of the specific delivery staff requirements of the qualifications they wish to deliver, as detailed in their relevant qualification specification.

Recognised Qualifications for Tutors/Trainers:

Preparing to Teach in the Lifelong Learning Sector (PTTLS)
Certificate to Teach in the Lifelong Learning Sector (CTTLS)
Diploma in Teaching in the Lifelong Learning Sector (DTLLS)
Postgraduate Certificate in Education (PGCE)
Certificate in Delivering Learning (C&G 7302)
Preparing to Teach in the Lifelong Learning Sector (C&G 7303)
Certificate in Delivering Learning/Teaching Adults (C&G 7307)
Certificate in Further Education Teaching (C&G 7407)
Post Compulsory Education and Training (PCET)
Award in Education and Training
Certificate in Education and Training
Diploma in Education and Training

Recognised Qualifications for Assessors:

Assess candidate performance (D32)/Assess candidate using different sources of evidence (D33)
Assess candidates using a range of methods (A1)
Assess candidates' performance through observation (A2)
Award in Assessing Competence in the Work Environment
Award in Assessing Vocationally Related Achievement
Certificate in Assessing Vocational Achievement

Recognised Qualifications for Internal Quality Assurers (IQAs):

Internally verify the assessment process (D34)
Conduct internal quality assurance of the assessment process (V1)
Award in the Internal Quality Assurance of Assessment Processes and Practice
Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice

Appendix 3 – Updating Your Centre Record

Please note that the process for updating your Centre record will differ if your Centre is managed by a NOCN Recognised Delivery Partner. Centres should contact their Delivery Partner for further guidance.

Centres must ensure that NOCN is provided information with any important updates regarding their Centre, including any changes of name, address or details of delivery staff. Failure to promptly notify NOCN of changes will lead to the application of Sanctions.

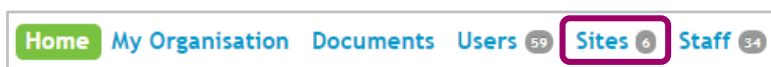
If your Centre does not have access to Horizon, please contact the Customer Services Team at nocn@nocn.org.uk for support in updating your record.

I. Updating Centre Name, Address and Additional Delivery Sites

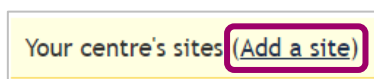
To update the name of your Centre or the main site address of your Centre with NOCN, please contact the NOCN Customer Services Team via email at nocn@nocn.org.uk and provide full details of the changes that are required.

If a Centre wishes to add or remove an additional delivery site that is not their main address, then this can be logged via the Horizon system. To add a delivery site to your Centre on Horizon:

- a) Select 'Sites' from the main menu bar:



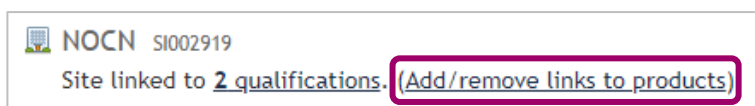
- b) Click on 'Add a site' at the top of the page:



- c) On the next page, input the details of the site including the site's name, address and any specific contact details for the site. Once finalised, select 'Add site':



- d) Once added, you can link/unlink specific qualifications to each site by selecting 'Add/Remove links to products' and selecting the appropriate site type you wish to add or remove:



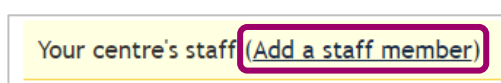
II. Adding Delivery Staff Members to your Centre

Centres must ensure that accurate delivery staff details are provided to NOCN through the Horizon system. All individuals who are involved with the delivery, assessment and quality assurance of the Centre's NOCN provision must be identified, and their records kept up to date on Horizon. To add a delivery staff member to your organisation on Horizon:

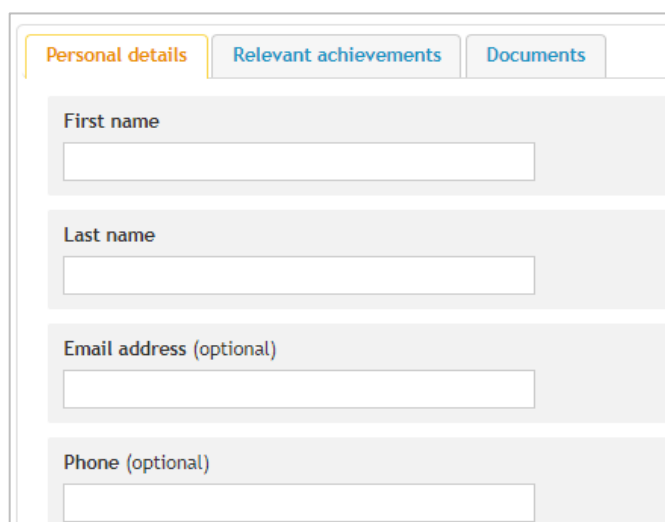
- a) Select 'Staff' from the main menu bar:



- b) Click on 'Add a staff member' at the top of the page:

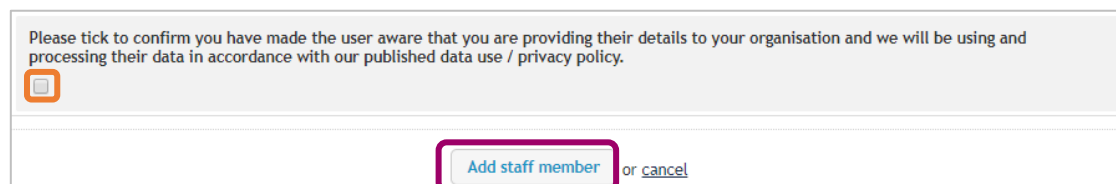


- c) On the next page, on the 'Personal Details' tab input the details of the staff member you wish to add, including their first name, last name, email address and telephone number:



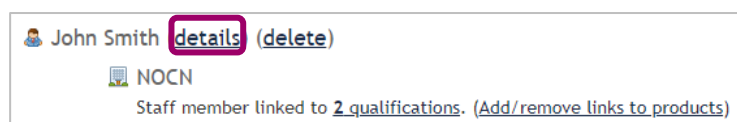
The screenshot shows a form with three tabs: 'Personal details' (selected), 'Relevant achievements', and 'Documents'. The form contains four input fields: 'First name', 'Last name', 'Email address (optional)', and 'Phone (optional)'. Each field is currently empty.

- d) Once the information has been added, tick to confirm that the staff member has agreed to share their personal details with NOCN and then select 'Add staff member':



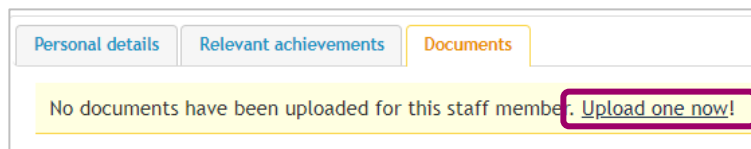
The screenshot shows a confirmation box with the text: 'Please tick to confirm you have made the user aware that you are providing their details to your organisation and we will be using and processing their data in accordance with our published data use / privacy policy.' Below this text is a checkbox, which is currently unchecked. At the bottom of the box, there is a button labeled 'Add staff member' (highlighted with a red box) and the text 'or cancel'.

- e) Once the staff member has been added, select 'details' beside their name from the staff list:



The screenshot shows a staff list entry for 'John Smith'. Next to the name are two buttons: 'details' (highlighted with a red box) and '(delete)'. Below the name, there is a NOCN logo and the text 'Staff member linked to 2 qualifications. (Add/remove links to products)'.

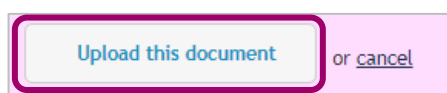
- f) Select the 'Documents' tab from the staff record. Here you will need to upload all relevant CVs and certificates to demonstrate how the staff member meets the requirements of all qualifications that they are involved in delivering in their various roles. The staff member must meet the requirements for their role as detailed in the relevant qualification specifications. To upload documents, select 'Upload one now!':



Personal details Relevant achievements Documents

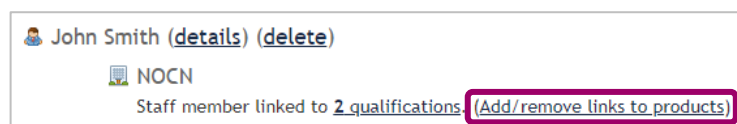
No documents have been uploaded for this staff member. [Upload one now!](#)


- g) The system will ask you to name the document and attach it from your computer. Once completed, select 'Upload this document':




[Upload this document](#) or [cancel](#)

- h) Once all relevant documentation has been added to the staff member's record, they will then need linking to the qualifications that they will be delivering in their various roles. To do this click on 'Add/remove links to products' besides their name in the staff list:

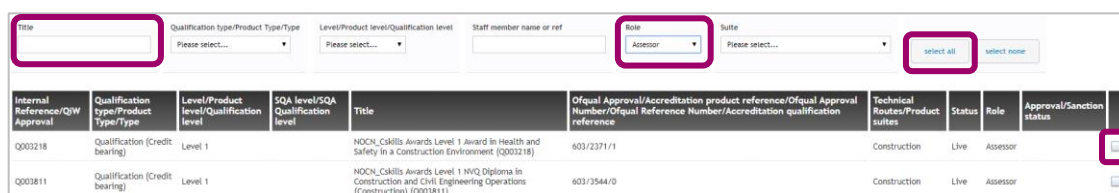


 John Smith ([details](#)) ([delete](#))

 NOCN

Staff member linked to **2** qualifications. [Add/remove links to products](#)

- i) Linking staff members to qualifications can be made easier by using the various filters at the top of the linking screen. For example, to link an individual as an Assessor to various qualifications, select 'Assessor' under the role dropdown menu and then begin typing the qualification title in the 'Title' filter. Centres can then select individual qualifications by selecting the box beside each qualification-role combination, or by selecting 'select all' to link the staff member to all visible qualifications in all visible roles:

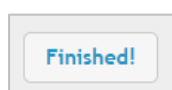


Title: Qualification type/Product Type/Type: Level/Product level/Qualification level: Staff member name or ref: Role: Suite:

Internal reference/QW Approval	Qualification type/Product Type/Type	Level/Product level/Qualification level	SQA level/SQA Qualification level	Title	Ofqual Approval/Accreditation product reference/Ofqual Approval Number/Ofqual Reference Number/Accreditation qualification reference	Technical Routes/Product suites	Status	Role	Approval/Sanction status
Q00218	Qualification (Credit bearing)	Level 1		NOCN_Cskills Awards Level 1 Award in Health and Safety in a Construction Environment (Q00218)	603/2371/1	Construction	Live	Assessor	<input type="checkbox"/>
Q00311	Qualification (Credit bearing)	Level 1		NOCN_Cskills Awards Level 1 NVQ Diploma in Construction and Civil Engineering Operations (Construction) (Q00311)	603/2544/0	Construction	Live	Assessor	<input type="checkbox"/>

- j) Staff members can be unlinked from qualifications or have a qualification-role combination removed by following the same process, but by unselecting the relevant box.

- k) Once all appropriate roles have been updated, select 'Finished!'



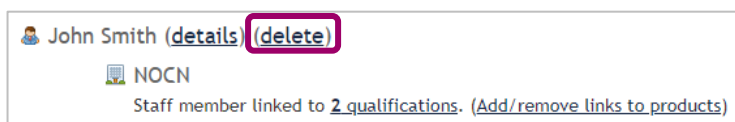
[Finished!](#)

- l) Centres are able to amend the details of their staff members at any time by selecting 'details' besides the staff member name and updating the required information.

III. Removing Delivery Staff Members to your Centre

Centres must remove the records of delivery staff for any individuals who leave their organisation. To delete a staff member:

- a) Select 'delete' besides the name of the staff member you wish to delete:



- b) The system will ask you to confirm your deletion:



Once a staff member has been deleted, the system will delete and remove all documents attached to the staff member. The Horizon system automatically audits any changes to staff and therefore the record of the staff member being registered at your Centre will remain for audit purposes.

Appendix 4 – Accessing Your EQA Report

The process for accessing your external quality assurance report will differ if your Centre is managed by a NOCN Recognised Delivery Partner. Centres should contact their Delivery Partner for further guidance.

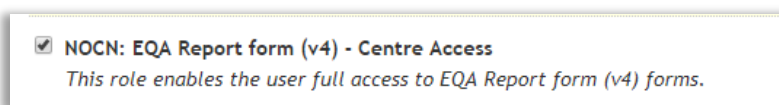
For the majority of centres, NOCN EQA reports are administered through Horizon. The PDF EQA report is attached to a Horizon form for secure transfer and storage of the report. This always ensures that NOCN, your Centre and your EQA always has secure access to your previous EQA reports. Centres can access the EQA Horizon form to download the EQA report and disseminate this within their Centre at any time.

The Horizon form also provides centres with the opportunity to provide feedback on the monitoring process to NOCN, which is reviewed by the Quality Assurance Team.

Centres who do not have access to Horizon will receive their PDF EQA report through email.

I. Providing and Checking Form Permissions

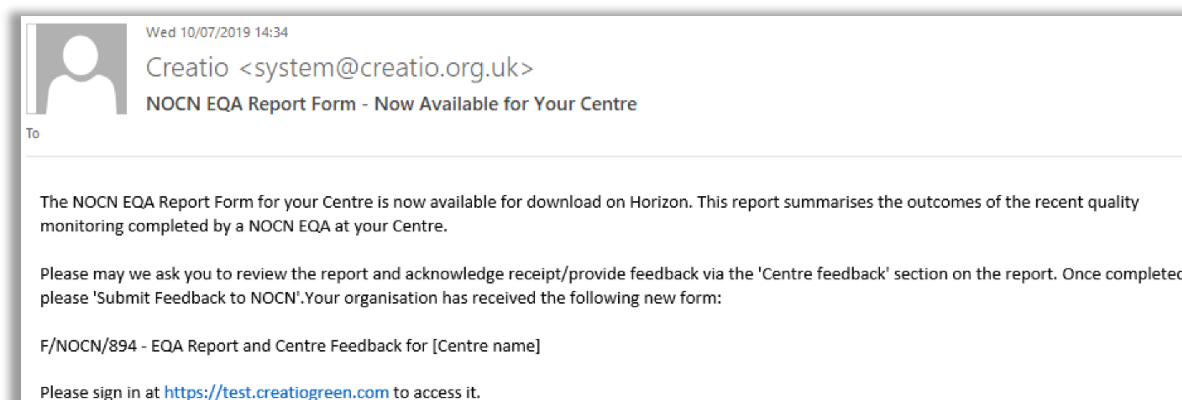
To view the report, your user profile on Horizon must have the appropriate permissions to view the EQA Horizon form. To check or to provide access, click on 'my details' in the top right-hand corner of Horizon, and ensure that the box is ticked by the side of 'NOCN: EQA Report form (v4) – Centre Access' as per below:



II. Notification of Report Being Available

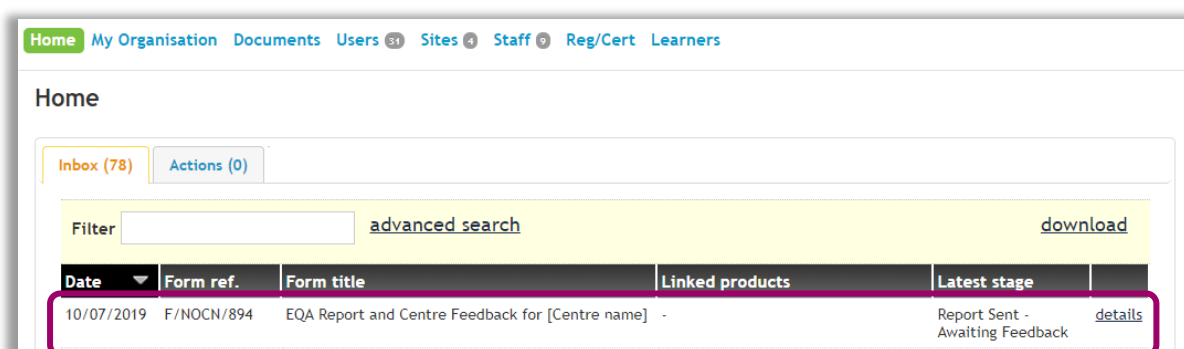
Once your Centre has had a completed EQA visit or remote sampling activity, the EQA will complete a NOCN EQA Report. This report will be sent to your Centre through the NOCN Horizon system. When a report has been sent to your Centre, all users who have access to the form on Horizon will receive the below email from 'Creatio'.

Centres are advised to add 'system@creatio.org.uk' to their safe sender list to avoid the notification emails from going into their junk or clutter. Centres are able to click on the link in the email to take them directly to NOCN's Horizon system.



III. Accessing From Horizon Inbox

Upon logging into Horizon, you will see your EQA report Horizon form in your Horizon 'Inbox'. The Horizon form is titled 'EQA Report and Centre Feedback for [Centre Name]'. To access the form and the report, click on the form entry:

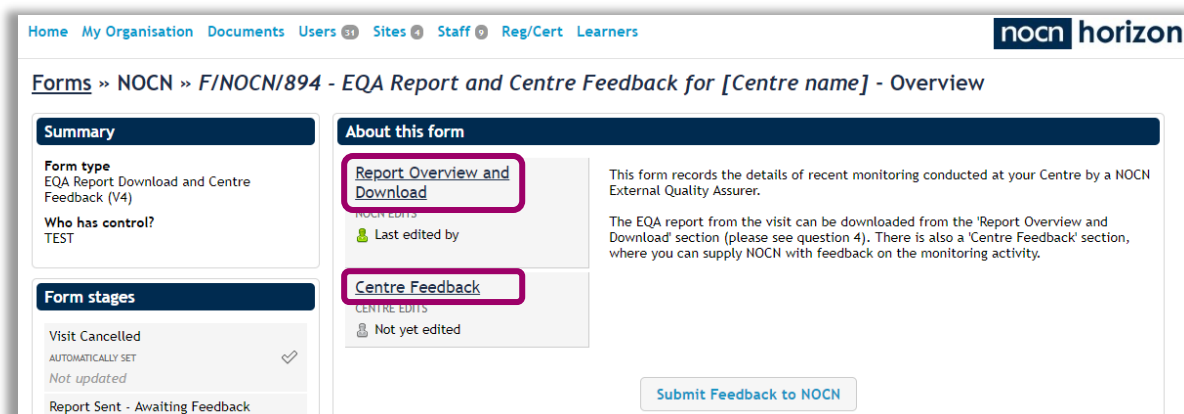


If the report is not visible, please refer to guidance in section VII.

IV. EQA Report Form Overview

Upon clicking on the form entry, you will be taken to the form overview screen. The form has two sections, which are detailed below. To access a section, click on its title:

- Report Overview and Download** – this is where the EQA has logged your PDF EQA report for download. This section is only editable by your EQA.
- Centre Feedback** – this section is an editable form for you to complete to provide feedback to NOCN on the monitoring process.



V. EQA Report Access and Download

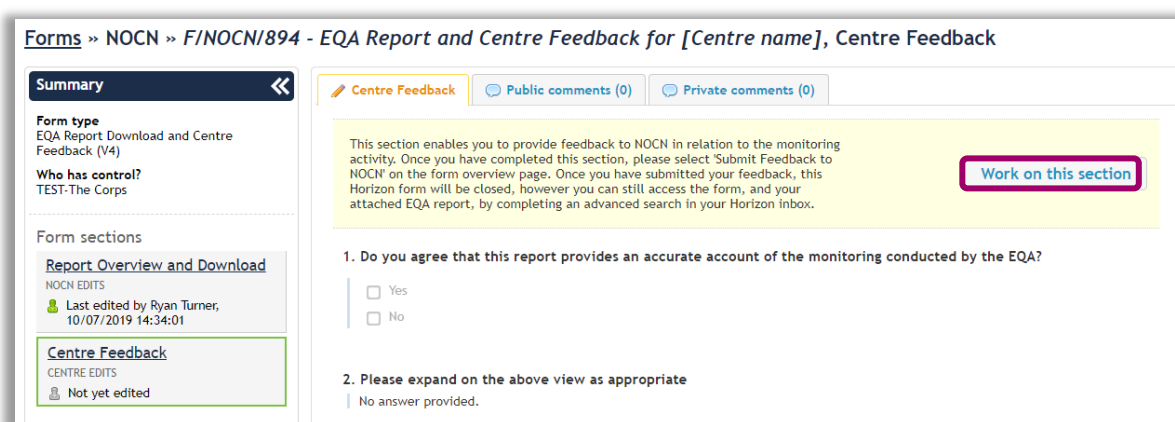
To access and download your EQA report, find the attached document, which will be uploaded by your EQA to question 4. To download, simply click on 'download'. Once this is clicked, the EQA report will be automatically downloaded to your computer for review, saving and printing:

4. Please find attached the completed EQA report and visit planner issued (where applicable) for download:

- NOCN External Quality Assurance Visit Planner (V2.0 201908)(1).docx [private to this form](#) [download](#) [view details](#)
- NOCN External Quality Assurance Visit Report (V3.0).docx [private to this form](#) [download](#) [view details](#)

VI. Providing Feedback to NOCN on the Monitoring Process

Following receipt of each EQA report, your Centre is able to submit feedback to NOCN on the monitoring process on the EQA form on Horizon. To do this, select the 'Centre Feedback' section of the form (as shown above). Once you have clicked on this section, the feedback form will automatically open. To allow your Centre to edit and complete the form, select 'Work on this section':



Forms » NOCN » F/NOCN/894 - EQA Report and Centre Feedback for [Centre name], Centre Feedback

Summary <<

Centre Feedback Public comments (0) Private comments (0)

Form type
EQA Report Download and Centre Feedback (V4)

Who has control?
TEST-The Corps

Form sections

[Report Overview and Download](#)
NOCN EDITS
Last edited by Ryan Turner, 10/07/2019 14:34:01

[Centre Feedback](#)
CENTRE EDITS
Not yet edited

This section enables you to provide feedback to NOCN in relation to the monitoring activity. Once you have completed this section, please select 'Submit Feedback to NOCN' on the form overview page. Once you have submitted your feedback, this Horizon form will be closed, however you can still access the form, and your attached EQA report, by completing an advanced search in your Horizon inbox.

[Work on this section](#)

1. Do you agree that this report provides an accurate account of the monitoring conducted by the EQA?

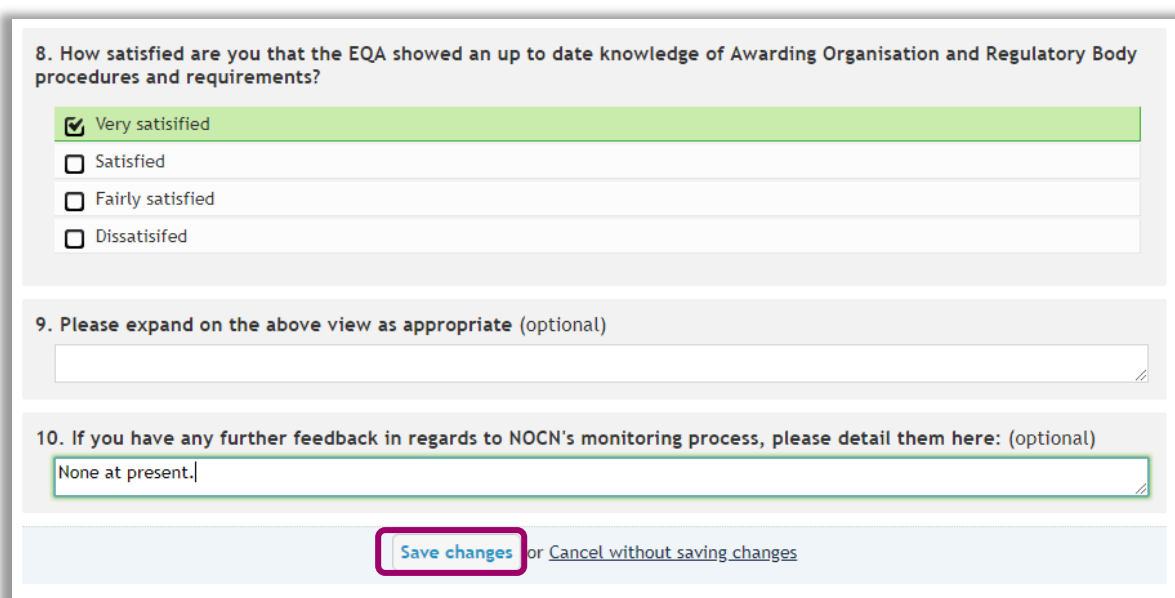
Yes
 No

2. Please expand on the above view as appropriate

No answer provided.

Once you have selected 'Work on this section' the form can be completed. The form is short and contains some tick boxes and some free text boxes. All of the questions are optional, however provide vital feedback for NOCN and EQAs on how we can improve our monitoring processes.

Once you have finished completing the feedback page, select 'Save changes':



8. How satisfied are you that the EQA showed an up to date knowledge of Awarding Organisation and Regulatory Body procedures and requirements?

Very satisfied
 Satisfied
 Fairly satisfied
 Dissatisfied

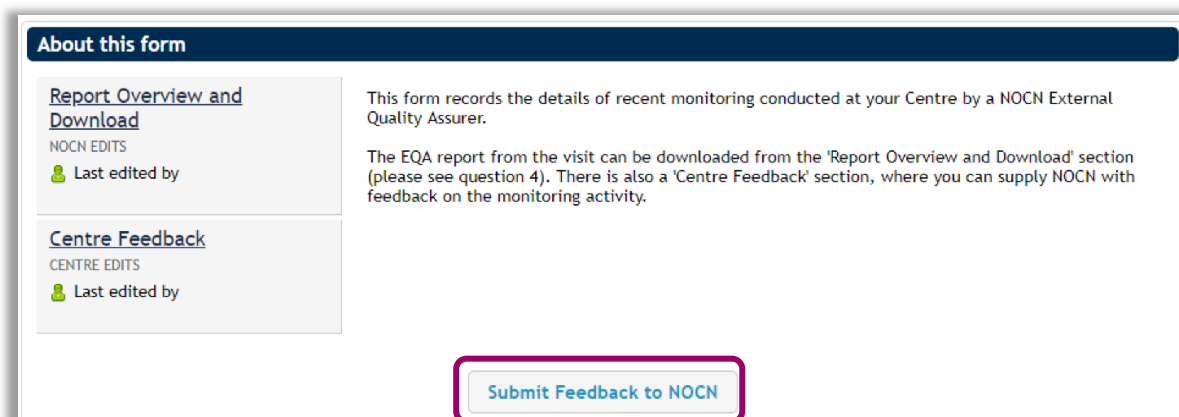
9. Please expand on the above view as appropriate (optional)

10. If you have any further feedback in regards to NOCN's monitoring process, please detail them here: (optional)

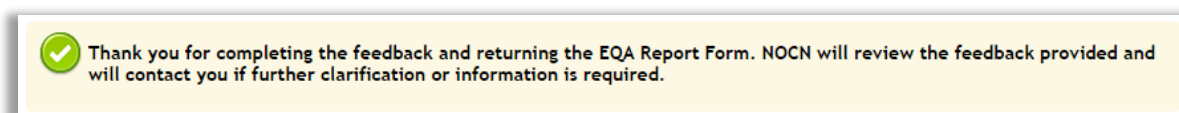
None at present.

[Save changes](#) or [Cancel without saving changes](#)

Once you have clicked on 'Save changes' Horizon will take you back to the EQA form overview screen. To submit your feedback, select 'Submit Feedback to NOCN':

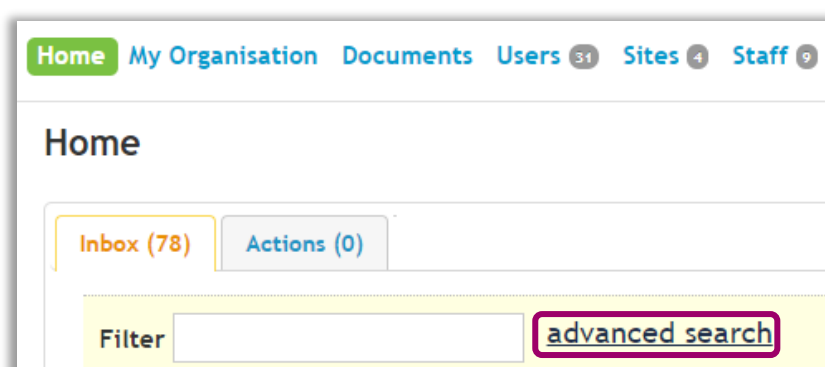


By selecting this button, the feedback will automatically be sent to the Quality Assurance Team at NOCN. You will receive the following message to confirm that the feedback has been sent:



VII. Accessing Historic EQA Reports Sent Through Horizon

Once your feedback has been reviewed and accepted by NOCN, the EQA form will be closed on Horizon and will no longer appear in your Horizon 'inbox'. It will however always be available for future reference and access. To access previous EQA reports that have been submitted to your Centre on Horizon, you can perform an 'Advanced search' in the form search option on the Horizon home page:



To view closed EQA Horizon forms to enable you to access historic EQA reports, select 'EQA Report Download and Centre Feedback (V4)' from the 'Form Type' drop down and 'Closed' under the 'Form status' heading as below. Once you have selected these options, select 'Search forms':

Advanced search ✕

Form title, reference or centre

Form type
Please select...
EQA Report Download and Centre Feedback (V4)

Form status
 Open Closed Both

Organisation in control of form
 Own org Other orgs Both

Show only unassigned forms

Assigned users
Please select...
Assignment date within...
 weeks

From...
-- -- --

to...
-- -- --

Created in this period Closed in this period

This will bring up a list of closed EQA report forms in your Horizon 'Inbox' that you can select and view as required.

Document Revision

This is version 7.4 of the NOCN Quality Assurance Manual and replaces all previous versions. This version includes various updates and reflects the latest policies and procedures by NOCN. Updates include:

- Guidance in relation to the use of Artificial Intelligence
- Guidance in relation to the development of accessible assessments