

FOREWORD

The Scottish Quality Management System (SQMS) was first launched in 1993 as a harmonised quality management framework for vocational education and training in Scotland. The 1996 SQMS Early Impact Review commissioned by Scottish Enterprise highlights its great strength as a quality development framework for providers of vocational education and training and points the way toward establishing SQMS as a truly national, and potentially international, standard.

SQMS draws on and brings together quality criteria operated by key agencies: Scottish Enterprise, Highlands and Islands Enterprise, Local Enterprise Companies, the Scottish Qualifications Authority and the Scottish Executive Education and Lifelong Learning Department. It is recognised for its support of the UK Competitiveness agenda which calls for quality certification bodies to work together to recognise each other's standards, including Investors in People, BS EN ISO 9001 and other quality standards.

Interest in using SQMS to meet organisational and business objectives continues to grow at home and abroad amongst a range of potential users. For example, SQMS forms the basis of the European Quality Standards (a toolkit for continuous quality development)



which is a European Commission-funded Leonardo Project that aims to improve the quality of vocational education and training across Europe to support the economic objectives in all members states.

The SQMS Standards Council, comprising of representatives of the national partners and key stakeholders in Scotland, is delighted to present this third edition of SQMS to the vocational education and training market, including employers. It has been revised to take account of feedback from users and their various client groups.

The members of the Standards Council would like to record their thanks to all who have contributed to the implementation and development of SQMS and allowed us to learn from the widespread use of the standards for quality assurance and development.

The Standards Council is fully committed to the ongoing development of SQMS as a key means of ensuring continuous quality improvement in the supply of vocational education and training to meet the needs of businesses and individual learners. We are confident that SQMS will continue to make a valuable contribution to the prosperity of Scotland.





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INTRODUCTION TO SQMS

The Scottish Quality Management System (SQMS) is primarily designed for use by vocational education and training organisations in Scotland. However, more and more diverse organisations are using SQMS to develop their businesses. SQMS is built on quality systems and guidelines. SQMS harmonises the quality requirements of a number of key national agencies:

- Scottish Enterprise (SE)
- Highlands and Islands Enterprise (HIE)
- Scottish Qualifications Authority (SQA)
- Scottish Executive Enterprise and Lifelong Learning Department (SEELLD)

SQMS also provides indicators to the national standard for Investors in People, BS EN ISO 9001 and is complementary to the EFQM Business Excellence Model.

SQMS is a comprehensive system which organisations can use to evaluate themselves against the requirements. Its use should reduce administrative complexity for organisations and help to guide and support quality developments.

The system is designed to be used in a range of ways, such as:

- A guide to the quality elements, requirements, and perspectives of agencies and systems
- A tool for organisational self development and development of quality in education and training provision



- A way for organisations to marshal evidence for purposes such as accountability, marketing and promotion, and contracting with clients.

SQMS was primarily designed for Scottish education and training organisations operating under various funding arrangements, however more diverse organisations now use it. It caters for organisations offering a mixture of employment-based and education and training-based programmes. It provides a synthesising and cohering framework bringing the two traditions together. A feature of this is the use of a language of neutral terms (e.g. "learner" rather than "trainee" or "student"). The glossary provides guidance on the terms used in SQMS.

SQMS includes the criteria by which Local Enterprise Companies (LECs) judge the capability of organisations to provide and deliver education and training programmes. There is substantial alignment between these criteria and the centre approval requirements of SVQ awarding bodies which are also included in the system. SE, HIE, and LECs, together with the Scottish Qualifications Authority, have set principles for external audit, confirmation of the organisation's self audits and for mutual recognition and credit transfer. Organisations which have self-audits confirmed under the agreed principles are credited with meeting the criteria common to the enterprise agencies and the Scottish Qualifications Authority. Companion documents to this publication, available from the SQMS Certification Body, provide further information.



INTRODUCTION TO SQMS

SQMS STRUCTURE

The system is based on 10 standards which describe quality features or characteristics of management systems and education and training services.

1. STRATEGIC MANAGEMENT

The organisation has a clear sense of purpose and direction.

2. QUALITY MANAGEMENT

The quality system ensures that clients', learners' and staff needs are met.

3. MARKETING AND CUSTOMER CARE

The needs of the organisation's clients and learners are identified, its education and training services are effectively promoted and the needs of clients and learners satisfied.

4. HUMAN RESOURCES AND DEVELOPMENT

The structure, level, and type of staffing is appropriate for the education and training services provided. Staff development provision meets the needs of both the organisation and the individual.

5. EQUAL OPPORTUNITIES

Equal opportunities are ensured for all clients, learners, and staff.



6. HEALTH AND SAFETY

There is a safe and healthy environment for all learners, staff and visitors.

7. COMMUNICATION AND ADMINISTRATION

Communication and administration arrangements meet the needs of the organisation, external bodies, clients, learners and staff.

8. GUIDANCE SERVICES

The needs of individual learners are identified, formulated, progress reviewed and support provided where needed.

9. PROGRAMME DESIGN AND DELIVERY

Programme design is effective when the programme's content and outcomes are relevant and encourage access. Programme delivery is effective when delivery methods are appropriate and varied, emphasise activity and responsibility and are responsive to the needs of the learner.

10. ASSESSMENT FOR CERTIFICATION

Assessment for certification confirms that the learner has achieved the standards required by the awarding body for the award.



INTRODUCTION TO SQMS

SQMS STRUCTURE

The 10 SQMS Standards are divided into three parts: an introduction, the SQMS Standards and the SQMS Standards Criteria.

INTRODUCTIONS

Introductions explain the scope, the context and give a commentary on the quality associated with the standard. The introduction also highlights relationships between the different standards.

SQMS STANDARDS

The SQMS Standards set out the standards and pointers which have to be achieved for SQMS Certification. They are designed so they can be used by organisations for planning reviews, recording responsibilities and summarising findings and any areas for action after completing the reviews for each pointer. Pointers are questions about procedures and outcomes which demonstrate achievement of the standard.

SQMS STANDARDS CRITERIA

The SQMS Standards Criteria set out the standards and their pointers together with indications of the kind of evidence with which the organisation might support its claim to have achieved the standard in line with the



various pointers. In addition space is provided where organisations can write in alternative sources of evidence relating to their systems and processes. Two boxes allow for a tick to record whether a pointer is met and space is provided for listing the action points in relation to pointers and lines of evidence.

As SQMS is a composite of the criteria of quality systems and requirements of relevance in Scotland, it is very comprehensive. However, some aspects of organisational capability are not represented, e.g. aspects of human resource management such as employee relations. Organisations may wish to extend the framework to include this and other quality features.

The linear sequence of sections in this publication cannot show the relationships between the different aspects of organisational performance. The following diagram, Figure 1, shows how the business and resource functions (standards 1-7) underpin and support the education and training services (standards 8-10) which in turn support the customers', clients' and learners' needs.

The important issue of evaluation of the efficiency and effectiveness of business functions and education and training services is not present as a discrete section but rather is embedded throughout SQMS.

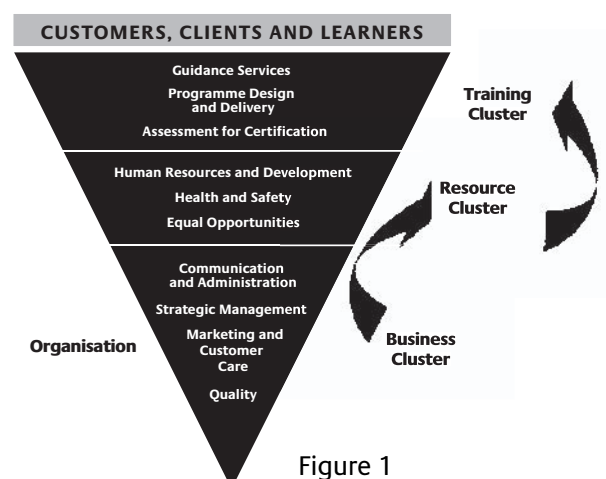


Figure 1





INTRODUCTION TO SQMS

GLOSSARY

- Accurate** Correct; without error.
- Adequate** Sufficient for purpose.
- Appropriate** Fit for purpose.
- Approval** The procedures of an awarding body (e.g. Scottish Qualifications Authority, City and Guilds, Emta Awards Ltd) relating to an organisation's ability to support candidates from enrolment for an award, through to assessment and certification of that award.
- Some approval criteria will cover general aspects such as internal quality management. Other criteria will relate to the organisation's capacity to run specific qualifications.
- Audit** A systematic and objective way of determining whether an organisation's activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve the organisation's objectives.
- Audit Instrument** A document designed for recording the pointers and evidence for each SQMS standard met by an auditing organisation and for comment on action planned in relation to the pointers and evidence requirements.



- Audit Scope** The SQMS standards and pointers, sections of the organisation, staff and learners included in the audit.
- Auditor** A person who is authorised to perform audits, internal or external.
- Business Plan** The document which sets out the mission and strategic objectives of the organisation; known by a number of terms including development plan, corporate plan, strategic plan, and organisation plan.
- Client** Anyone who uses the services provided, excluding learners and staff. Depending on the context, the term may include employers, the local community, LECs, SE, HIE, schools, colleges, universities, local education authorities, parents, and visitors.
- Evidence** Documents, statistics, observation records, records of interviews and discussions which demonstrate that a standard is achieved.
- Learner** Anyone using the organisation's services for education and training; includes trainees in employment and training schemes, students in full-time and part-time programmes, and any other category of learner.
- Organisation** A company, educational establishment, corporation, firm, voluntary sector organisation, enterprise, whether incorporated or not, public or private, involved in education and training.

INTRODUCTION TO SQMS

GLOSSARY

Performance Indicator	A statement, often quantitative, about deploying resources and/or providing services in areas relevant to the business objectives of the organisation. This is most often found in the business plan.
Pointer	A question about procedures and outcomes which demonstrate achievement of the SQMS standards.
Programme	Any plan, scheme or course set up for the purpose of helping learners to achieve goals. This includes employment based programmes directly related to occupational qualifications (SVQs or equivalent), skills training and education and training based programmes related to general qualifications, e.g. Higher National Certificates and Diplomas (HNC, HND), Skillstart Awards and Scottish Group Awards.
Quality Contract	An agreement made between the Scottish Qualifications Authority and an organisation which formalises the quality partnership between the Scottish Qualifications Authority and the organisation. The contract specifies the quality elements for which the centre will have devolved responsibility and the way the centre will discharge its function, and defines the way in which future reviews will take place.
Relevant	Directly bearing on the matter in hand.



Review	To examine the evidence and assumptions on which a policy, plan or programme is based together with its operation and outcomes and to evaluate the continuing relevance and appropriateness of the policy, plan, or programme.
Staff	Any person in an organisation who is directly concerned with the processes or outcomes of education and training. It covers terms such as trainer, teacher, training officer, training manager, instructor, lecturer, tutor, and, as relevant, support staff including administration and management staff.
Standard	A description of quality features or characteristics of management systems and education and training services.
Surveys	A means of gathering factual evidence or the views of clients, learners and staff about the quality of the provision. This may be conducted by questionnaires, structured interviews and discussions.
Verification	Internal – the process taking place in an organisation to ensure consistency of assessment. External – the process by which an awarding body ensures each organisation's assessment is to the standard defined for the award.
Verifier	Internal – the person(s) carrying out internal verification. External – the person(s) carrying out external verification.



INTRODUCTION TO SQMS

REFERENCES

QUALITY REQUIREMENTS

SFEFC/HMI (2001):

Quality Framework

This publication provides details of the Scottish Further Education Funding Council's and HMI quality standards for use in Further Education. The relationship between the SFEFC/HMI quality standards and the new SQMS standards and pointers has still to be established. The findings will be published and distributed in due course in the SQMS annex document "Matrix of SQMS relationships with other standards".

SQA:

SVQ criteria and guidance for Awarding Bodies

This publication defines the requirements which have to be met by any body wishing to be accredited by the Scottish Qualifications Authority (Accreditation) as an awarding body for an SVQ. It includes criteria relating to the awarding body's quality assurance system, such as the way in which centre approval and external verification should operate.

BS EN ISO 9001 (1994 or 2000):

Quality Management Systems – Requirements

Investors in People (2000):

The Investors in People Standard



SUPPLEMENTARY SQMS RESOURCES

Scottish Quality Management System: Arrangements for External Auditing and Credit Transfer

This document contains essential information for organisations wishing to undertake an external SQMS audit.

Scottish Quality Management System: Careers Service

This is a customised version of the SQMS Standards for Careers Service providers.

Scottish Quality Management System: A guide to Using SQMS for providers of Pre-Entry Guidance Services (2002)

This guide customises SQMS for certain providers of pre-entry guidance (contained in part 4 supplements of this manual).

Note:

The above documents are correct at the time of going to print. Organisations must ensure that they have/use the latest edition of the above documents.





ACKNOWLEDGEMENTS

The third edition of SQMS is the outcome of a review of the standards carried out in 2001.

The review was conducted by SQMS Scotland on behalf of the SQMS Standards Council (representatives of SE, HIE, SEELLD, SQA and key stakeholders). It was based on a survey of the standards, from a representative sample of education and training providers, external auditors, LECs, SE, HIE, SEELLD, SQA, HSE, SFEU and representatives of key stakeholders.

The work of the standards review drew on the expertise and knowledge of specialists for health and safety and professionals from the education and training industry.



1. STRATEGIC MANAGEMENT

The organisation has a clear sense of purpose and direction.

2. QUALITY MANAGEMENT

The quality system ensures that clients', learners' and staff needs are met.

3. MARKETING AND CUSTOMER CARE

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4. HUMAN RESOURCES AND DEVELOPMENT

The structure, level, and type of staffing is appropriate for the education and training services provided. Staff development provision meets the needs of both the organisation and the individual.



5. EQUAL OPPORTUNITIES

Equal Opportunities are ensured for all clients, learners and staff.

6. HEALTH AND SAFETY

There is a safe and healthy environment for all learners, staff and visitors.

7. COMMUNICATION AND ADMINISTRATION

Communication and administration arrangements meet the needs of the organisation, external bodies, clients, learners and staff.

8. GUIDANCE SERVICES

The needs of individual learners are identified, formulated, progress reviewed and support provided where needed.

9. PROGRAMME DESIGN AND DELIVERY

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10. ASSESSMENT FOR CERTIFICATION

Assessment for certification confirms that the learner has achieved the standards required by the awarding body for the award.





1. Strategic Management

Strategic management is concerned with the overall direction of the organisation and its policies and plans.

The organisation's mission, values, objectives and broad direction should be clear so that clients, learners, funding bodies and staff know what the organisation is trying to achieve and how this will be done.

The pointers are met when there is evidence of a systematic and collaborative approach to objective setting, policy making, planning and organisation.

Discretion is needed in how this is interpreted as not all organisations carry full responsibility for strategic management.

The key document, produced annually, is a business plan (may also be called a corporate, strategic, or development plan) which provides both a longer-term view and a set of objectives for the current year. Mission, aims and objectives, performance indicators/key success factors, priorities, and resource allocations, where relevant, should be clear for all the key areas of the organisation's operation (see 1.a.). Overall they should show that the needs and requirements of learners are at the heart of the business.

The business plan should be backed up by a clear policy framework, implementation plans and be endorsed by top management. Policies should be



directly related to the organisation's mission and objectives and give general guidance on the aims, principles and the conduct of affairs.

Implementation plans, whatever the size and scope of the organisation, should show, for the forthcoming period (at least a year), what is to be done, how, by whom, by when, and the arrangements for review.

There should be strong evidence that staff are involved and consulted in objective setting, policy making, planning and that they understand the organisation's strategy. Account should also be taken of advice from key external agencies.





STRATEGIC MANAGEMENT - STANDARD OVERVIEW

STANDARD MET

YES NO

**Management/
Staff Responsibilities**

1. The organisation has a clear sense of purpose and direction.

a) Is there a business plan covering all key areas of organisational activity:

- Quality management
- Marketing and customer care
- Human resources and development
- Equal opportunities
- Health and safety
- Communication and administration
- Guidance services
- Programme design and delivery
- Assessment for certification?

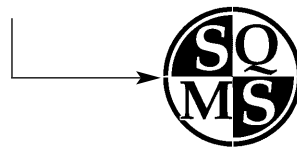
b) Does strategic planning and policy making take account of internal and external influences and factors?

c) Are performance indicators/key success factors used to measure the achievement of the business plan?

SCHEDULE OF REVIEWS

January	February	March	April	May	June	July	August	September	October	November	December

SUMMARY OF FINDINGS AND ACTION POINTS





STRATEGIC MANAGEMENT - CRITERIA

1. The organisation has a clear sense of purpose and direction.

POINTER MET
YES NO

a) Is there a business plan covering all key areas of organisational activity:

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Quality management
- Marketing and customer care
- Human resources and development
- Equal opportunities
- Health and safety
- Communication and administration
- Guidance services
- Programme design and delivery
- Assessment for certification?

- A business plan which provides a long term strategy for the organisation.
- A business plan which sets organisational targets and objectives.
- Written policies in all key areas.
- Budget allocations where relevant.

● Other:

YES NO

b) Does strategic planning and policy making take account of internal and external influences and factors?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Evidence from staff that they understand the mission and values of the organisation, contribute to planning and are kept informed of plans and objectives.
- Charts showing the structure of groups and committees in the organisation, together with remits which make clear the strategic planning functions of different groups and how they interrelate.
- Evidence that business plans and policies are communicated to staff or are available for staff reference.
- Evidence that advice from and requirements of relevant external bodies (e.g. clients, funding and awarding bodies, head offices, professional associations relevant to the work of the organisation) are taken into account in strategic planning.

● Other:

COMMENTS & ACTION POINTS





STRATEGIC MANAGEMENT - CRITERIA

c) Are performance indicators (PIs)/key success factors used to measure the achievement of the business plan?

POINTER MET
YES NO

COMMENTS & ACTION POINTS

YES NO

Large grey rectangular area for entering comments and action points.

- Vision or mission statement.
- PIs/key success factors for all key areas of organisational activity:
 - Quality management
 - Marketing and customer care
 - Human resources and development
 - Equal opportunities
 - Health and safety
 - Communication and administration
 - Guidance services
 - Programme design and delivery
 - Assessment for certification
- Evidence of monitoring, reviewing and where necessary re-evaluating PIs/key success factors.
- Statistics and charts analysing the achievement of the organisation's performance indicators/key success factors.
- Other:



2. Quality Management

Quality management is concerned with the framework of plans and procedures which the organisation uses to ensure the quality of its education and training.

There are a number of ways in which quality can be viewed – very high standards, consistency of standards, fitness for purpose, value for money etc. Increasingly there is interest in the link between the quality of products and services provided by organisations and the total quality of the organisation.

Perhaps the single most useful way of thinking about quality is the capacity of the organisation to supply services which meet clients' and learners' expectations. Many organisations try to ensure that their services meet clients' and learners' needs through a rigorous process of specification of standards of services and procedures to ensure the delivery of the standards of service. This approach is best exemplified in the quality management system of BS EN ISO 9001 to which much of this standard relates.

Another powerful approach – Total Quality Management (TQM) – stresses the importance of continuously striving for improvement in all aspects of the organisation. TQM is centred on valuing and supporting the contributions of all staff towards meeting or exceeding clients' expectations. This goes beyond a quality management system and is more an approach to organisational management. SQMS draws on TQM thinking across the audit as a whole. The Investors in People references in Strategic Management and Human Resources and Development reflect this thinking most directly.

The organisation should show how it incorporates its concept of quality into the running of the services it offers. It should show how it communicates, implements, and reviews the success of its quality policy and plans.

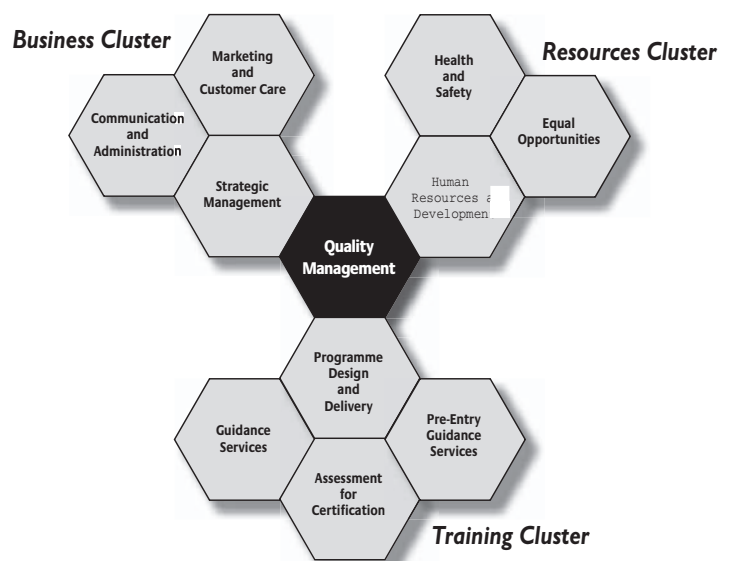


The pointers are met when there is an effectively managed and documented quality system. The system should include definitions of quality standards for services, the extent of the systems and quality procedures. Evidence of allocation of responsibility for quality should show that this is done systematically and comprehensively. This especially applies in large organisations where responsibility for maintaining quality is often delegated. There should be evidence of thorough communication of the organisation's commitment to quality.

Document control ensures that the organisation's key documents (e.g. quality manual, awarding body criteria, programmes, contracts, etc.) are maintained and controlled to ensure that all staff are working/referring to the latest issue of the key documents. Document control is directly linked to standard 7 pointer f.

Management should review all areas of their education and training services and related management activities at regular (specified) intervals. A range of performance indicators should be used by the organisation to aid its quality management (see section "Using SQMS").

Management responsibilities for planning and operating the quality system should be clearly allocated, with senior management taking the lead. There should be evidence of the systematic review of the quality system.





S Q M S S T A N D A R D S

QUALITY MANAGEMENT - STANDARD OVERVIEW

STANDARD MET

YES NO

2. The quality system ensures that the clients', learners' and staff needs are met.

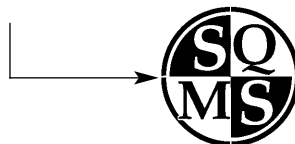
- a) Is there a documented quality system which the organisation operates?
- b) Is document control appropriate to the organisation's quality system and education and training services?
- c) Are all appropriate teams and people kept up to date with quality policy, procedures and standards?
- d) Is there up-to-date information on the education and training performance of the organisation and its learners?
- e) Are staff and management responsibilities clearly and appropriately allocated for all of the following key areas of organisational activity:
- Strategic management
 - Quality management
 - Marketing and customer care
 - Human resources and development
 - Equal opportunities
 - Communication and administration
 - Guidance services
 - Programme design and delivery
 - Assessment for certification?
- f) Are all of the following key areas of organisational activity systematically reviewed and are findings acted upon?
- Strategic management
 - Quality management
 - Marketing and customer care
 - Human resources and development
 - Equal opportunities
 - Communication and administration
 - Guidance services
 - Programme design and delivery
 - Assessment for certification?

Management/
Staff Responsibilities

SCHEDULE OF REVIEWS

January	February	March	April	May	June	July	August	September	October	November	December

SUMMARY OF FINDINGS AND ACTION POINTS





S Q M S S T A N D A R D S

QUALITY MANAGEMENT - CRITERIA

2. The quality system ensures that the clients', learners' and staff needs are met.

POINTER MET
YES NO

a) Is there a documented quality system which the organisation operates?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- A quality manual.
- Definition of the intended quality of services.
- Definition of key functions and activities covered by the quality system.
- Details of the programmes offered by the organisation.
- Written procedures and standards which support defined functions and activities.
- Process management diagrams and charts.
- Data on client and staff views on the effectiveness of the quality system.

● Other:

POINTER MET
YES NO

b) Is document control appropriate to the organisation's quality system and education and training services?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- There is a list of documents requiring control (e.g. quality manual/procedures, awarding body documentation, programmes, contracts etc.).
- Document control complies with organisational requirements for identification, issue, approval, amendment and withdrawal of all documentation within the system.
- Documents identified for control (internal and external) are subject to procedures which cover responsibility for control, authorisation, distribution, amendment and withdrawal.

● Other:

COMMENTS & ACTION POINTS





S Q M S S T A N D A R D S

QUALITY MANAGEMENT - CRITERIA

	POINTER MET		COMMENTS & ACTION POINTS
	YES	NO	
<p>c) Are all appropriate teams and people kept up to date with quality policy, procedures and standards?</p> <ul style="list-style-type: none"> ● Data on staff views on the effectiveness of communication on the quality system. ● Evidence that the quality manual or equivalent is available to appropriate people and teams. ● Evidence that all staff understand the quality policy and procedures relevant to their area of work. ● Evidence that staff are involved in a planned process of quality management (e.g. from minutes of meetings of management, programme team and quality groups). ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>	
<p>d) Is there up-to-date information on the education and training performance of the organisation and its learners?</p> <ul style="list-style-type: none"> ● Quality awards and standards. ● Systematic use of an appropriate and comprehensive set of performance indicators. ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>	
<p>e) Are staff and management responsibilities clearly and appropriately allocated for all of the following key areas of organisational activity:</p> <ul style="list-style-type: none"> ● Strategic management ● Quality management ● Marketing and customer care ● Human resources and development ● Equal opportunities ● Organisation chart ● Responsibilities chart ● Job descriptions and remits showing responsibilities of staff including senior management ● A quality manual ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>	

POINTER MET
YES NO

POINTER MET
YES NO





S Q M S S T A N D A R D S

QUALITY MANAGEMENT - CRITERIA

POINTER MET
YES NO

COMMENTS & ACTION POINTS

f) Are all of the following key areas of organisational activity systematically reviewed and are findings acted upon?

- Strategic management
 - Quality management
 - Marketing and customer care
 - Human resources and development
 - Equal opportunities
 - Communication and administration
 - Guidance services
 - Programme design and delivery
 - Assessment for certification
- Reports, notes of meetings, and action plans related to monitoring, review and development activity.
 - Examples of changes in arrangements over time as result of a review.
 - Examples of staff development activity as a result of a review.
 - Systematic use of appropriate performance indicators.
 - Evidence that the organisation provides access to staff from appropriate agencies and/or peers in the interests of monitoring quality assurance and programme design.
 - Written plans for internal quality audit covering:
 - Management responsibilities;
 - Designation, training and qualifications or experience of auditors;
 - Independence of the auditors;
 - Schedules of review according to the priority of the activity and the results of previous reviews;
 - Written procedures (checklists) of what has to be covered;
 - Requirement for documentation including date, area audited, findings and follow-up action.
 - Procedures for carrying out management reviews of the quality system, including the conduct and frequency of reviews, personnel involved and maintenance of records of reviews.

● Other:



3. Marketing and Customer Care

Marketing and Customer Care is concerned with the organisation's means of determining a need for and promotion of its education and training services as well as satisfying the customers' requirements.

MARKETING

Marketing is based on the principle that one key to organisational success is meeting the needs of clients. This involves a continuous process of identifying the organisation's strengths and resources to identify, anticipate and satisfy the needs of the target market. Information is gathered about potential customers, decisions are made on the services to be offered and the resources needed, plans are made and the services are delivered, with checks that the services continue to meet client requirements. Promotion is used to target customers and get the organisation's messages across effectively.

There are clear links between the standards Strategic Management and Marketing and Customer Care.

The pointers are met when there is evidence that the business plan is well informed by a knowledge of:

- The relevant labour markets;
- Business opportunities and opportunities for extended education and training;
- The local community, its demography and social characteristics;
- The profile of the organisation itself (easier in small than in large organisations).



There will be a means of identifying clients and their needs in a realistic way in relation to employment and further training opportunities. To achieve this the organisation should have established and be maintaining or have access to a comprehensive and up-to-date bank of relevant labour and training market information, taking into account the likely ability and aspirations of learners. The organisation should be maintaining close and effective links with other training and employment organisations in the locality, including the development of partnerships (e.g. for the delivery of SVQs/NVQs).

The pattern of services offered should be related to clients' needs which can be satisfied by the organisation at defined levels of quality.

Promotional materials should accurately communicate the qualities of programmes to potential clients, adhere to equal opportunity guidelines and should enhance the image of the organisation. Potential learners should have easy access to clear and accurate information about the organisation's education and training services i.e. content, delivery, assessment and guidance support.

There should be good co-ordination of information gathering and dissemination, reflected by one person or a small team having the responsibility and resources for marketing.

Market research and promotional activities should be evaluated for effectiveness.





CUSTOMER CARE

Customer care is about satisfying the needs of the organisation's customers and clients, whoever they are perceived to be. Customer care is not a physical entity but a psychological response felt by the receiver of a service. It does not really matter how effectively an organisation feels it has provided education and training services – what is important is how the customer/client perceives that service. If they feel that their needs have not been met then they will not be satisfied with the organisation's service and customer care.

This pointer is met when there is evidence of the organisation actively promoting and maintaining a strategy, policies and procedures to meet the needs of its customers/clients. This means in practice involving the customer/client before, during and after the service and analysing the feedback and data for service improvements and customer/client retention.





**S Q M S
S T A N D A R D S**

MARKETING AND CUSTOMER CARE - STANDARD OVERVIEW

3. The needs of the organisation's clients and learners are identified; its education and training services are effectively promoted and the needs of clients and learners satisfied.

- a) Is there analysis of target markets, including the education and training needs of identified clients and learners?
- b) Is the organisation's portfolio of programmes aligned with the identified needs of clients and learners?
- c) Is there effective promotion of the organisation's services?
- d) Is there evidence of the organisation's commitment to customer care?

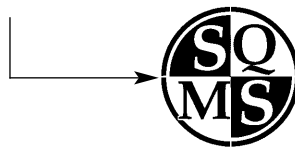
STANDARD MET	
YES <input type="checkbox"/>	NO <input type="checkbox"/>
Management/ Staff Responsibilities	

SCHEDULE OF REVIEWS

January	February	March	April	May	June	July	August	September	October	November	December

SUMMARY OF FINDINGS AND ACTION POINTS

[Large empty grey box for summary of findings and action points]





S Q M S S T A N D A R D S

MARKETING AND CUSTOMER CARE - CRITERIA

3. The needs of the organisation's clients and learners are identified; its education and training services are effectively promoted and the needs of clients and learners satisfied.

POINTER MET
YES NO

a) Is there analysis of target markets, including the education and training needs of identified clients and learners?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Reviews of labour market information, business opportunities, competition, demography, technology and need for skills updating and identification of opportunities and threats.
- Reviews of the organisation's capabilities and track record in relation to its mission/business plan/strategic plan and target markets and identification of strengths and weaknesses.
- A statement of target markets (e.g. numbers and types of clients and learners which the organisation wishes to serve) which is realistic in relation to the strengths, weaknesses, opportunities and threats analysis of the market and the organisation.
- Systems and techniques for establishing education and training needs of target markets (e.g. SWOT/ Environmental Analysis, market segmentation, market surveys).
- Evidence of maintaining close and effective links with users of the organisation's services (e.g. regular discussions with employers and other users); employer/user databases; client satisfaction surveys.

● Other: _____

POINTER MET
YES NO

b) Is the organisation's portfolio of programmes aligned with the identified needs of clients and learners?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Data on clients' views on the appropriateness of the range of provision to their needs.
- The number and types of learners recruited can be justified in relation to the subsequent opportunities available to them.
- The number and types of learners recruited meet the organisation's targets identified in the business/strategic plan.

● Other: _____

COMMENTS & ACTION POINTS





MARKETING AND CUSTOMER CARE - CRITERIA

COMMENTS & ACTION POINTS

POINTER MET
YES NO

c) Is there effective promotion of the organisation's services?

- Data on the effectiveness of the organisation's promotional activities (e.g. client satisfaction surveys, records of new and retained business, website visits/enquiries).
- Examples of how clients and learners are made aware of services available (e.g. brochures, prospectuses, website, e-mail).
- Examples of promotional plans for materials and activities designed for particular target groups.
- Other:

POINTER MET
YES NO

d) Is there evidence of the organisation's commitment to customer care?

- Examples of pro-active internal/external customer care activities (e.g. newsletters to clients, surveys of client/learner satisfaction, visits to clients, client/learner correspondence showing satisfaction with the service provided).
- Analysis of trends in customer satisfaction and retention over time.
- Procedures for handling client complaints including investigation of their causes and determination of corrective and preventative actions.
- Other:



4. Human Resources and Development

The quality and success of the Human Resources and Development (HRD) approaches are fundamental to the quality and success of the organisation.

The pointers are met when there is evidence that there are adequate numbers of competent people to meet the requirements of the organisation's current education and training services. In particular, there should be evidence that staff are competent in relation to their roles and responsibilities to manage and carry out all aspects of the organisation's operation to meet the demands of contracts and the number of learners enrolled. This implies that competences required of all staff to contribute to the organisation's objectives and to do their jobs effectively have been identified and reflected in job descriptions and in recruitment, selection and job allocation practices.

Evidence of staff competence for their organisational roles should be evidenced through their qualifications (e.g. degree, HNC, SVQ, trade qualifications etc.) and/or their records of experience in training or teaching.

All new recruits and post holders should have access to induction into the organisation or new post/section. Team and individual training and development needs should be reviewed and analysed. There should be a means of funding and prioritising key staff training needs. Individual action plans should be constructed for all staff.

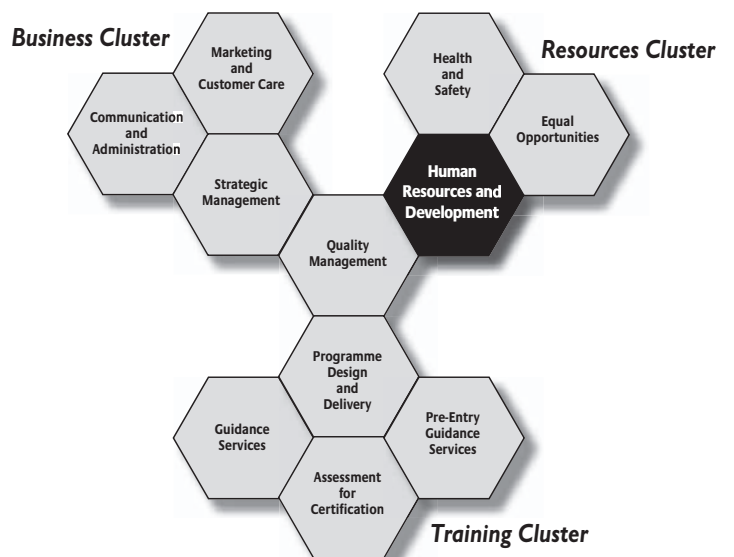


They should take account of prior achievement, identify goals and development needs, and describe agreed arrangements for meeting those needs.

Appraisal/review activities should be conducted regularly. Agreed staff training and development should be undertaken and staff should, where appropriate, be encouraged to gain qualifications relevant to their organisational role. This is particularly the case for, but not limited to, assessors and internal verifiers.

Management responsibilities for human resources and development should be clearly allocated. There should be evidence of systematic review of human resources and development arrangements.

Note that the audit of human resources and development includes staff in any sub-contracted organisation (see standard 7 pointer e).





HUMAN RESOURCES AND DEVELOPMENT - STANDARD OVERVIEW

4. The structure, level, and type of staffing is appropriate to the education and training services provided. Staff development provision meets the needs of both the organisation and the individual.

- a) Is there a system for ensuring that the structure and level of staffing enable the organisation's objectives to be achieved?
- b) Are competent staff who have the necessary qualifications, occupational experience and understanding deployed in the support, delivery, assessment and internal verification of each programme?
- c) Are there appropriate procedures for recruitment, selection and job allocation with clear job descriptions and remits for all grades of staff?
- d) Do all new recruits and new post holders have access to induction?
- e) Is there a staff development plan and are staff clear about the kind of support available?
- f) Is there a system of regular reviews of staff development needs?
- g) Are the competences of all staff progressively developed in line with the organisation's business plan?

STANDARD MET	
YES <input type="checkbox"/>	NO <input type="checkbox"/>

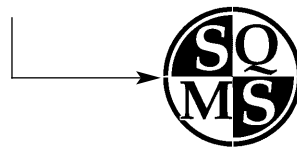
Management/
Staff Responsibilities

SCHEDULE OF REVIEWS

January	February	March	April	May	June	July	August	September	October	November	December

SUMMARY OF FINDINGS AND ACTION POINTS

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HUMAN RESOURCES AND DEVELOPMENT – CRITERIA

4. The structure, level, and type of staffing is appropriate to the education and training services provided. Staff development provision meets the needs of both the organisation and the individual.

a) Is there a system for ensuring that the structure and level of staffing enable the organisation's objectives to be achieved?

POINTER MET
YES NO

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Organisation chart which makes clear that the overall structure of staff roles and responsibilities is effective.
- Staff to learner ratios and support staff to teaching and training staff ratios are appropriate to the organisation's programmes, conform to awarding body requirements and to any performance indicators suggested by funding bodies.
- Contractual arrangements which are reasonable in terms of hours, preparation time, time for meetings and staff development.
- Provision of cover for absent staff.
- Statistics such as staff absentee and turnover rates etc., which demonstrate adequate stability and numbers of staff.

● Other: _____

POINTER MET
YES NO

b) Are competent staff who have the necessary qualifications, occupational experience and understanding deployed in the support, delivery, assessment and internal verification of each programme?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Staffing plans which demonstrate adequate teaching/training/supervision at all stages in the programmes and include, where appropriate, adequate additional support (e.g. learning support specialists, technicians etc.).
- Evidence that all staff providing teaching/training/supervision and related services are competent, qualified and experienced for the level and content area of the service being delivered.
- Evidence that all staff providing assessment and internal verification leading to national qualifications meet awarding body criteria, for example, in relation to compliance with appropriate national standards for assessors and verifiers.

● Other: _____

COMMENTS & ACTION POINTS





HUMAN RESOURCES AND DEVELOPMENT – CRITERIA

COMMENTS & ACTION POINTS

c) Are there appropriate procedures for recruitment, selection and job allocation with clear job descriptions and remits for all grades of staff?

POINTER MET
YES NO

- Evidence of systematic implementation of staff recruitment, selection and job allocation criteria which relate to an organisational view of what employees at all levels will contribute to the success of the organisation.
- Current job descriptions which identify staff roles and areas of responsibility, describe their level of authority and accountability and are regularly reviewed and updated.
- Evidence from staff that they know their expected contribution in relation to the achievement of the organisation's aims and objectives.
- Evidence from staff that remits are appropriate, using to good effect their qualifications, experience and skills.
- Evidence from staff that they know what is expected of them – duties, responsibilities, quality standards – and understand how their roles relate to the organisation's aims and objectives.
- Other: _____

POINTER MET
YES NO

d) Do all new recruits and new post holders have access to induction?

- Data on staff views on the effectiveness of induction.
- Staff induction programme with objectives.
- Staff induction handbook.
- Evidence of briefing of new staff, or staff taking on new roles, by managers or other experienced staff.
- Records showing that all new staff, or staff taking on new roles, participated in an induction on commencement of their appointment.
- Other: _____





HUMAN RESOURCES AND DEVELOPMENT – CRITERIA

COMMENTS & ACTION POINTS

POINTER MET
YES NO

e) Is there a staff development plan and are staff clear about the kind of support available?

- Data and/or staff views on the degree of commitment to staff development shown by the organisation.
- Evidence of sustained and public commitment to staff development from the most senior level.
- Evidence of adequate resources (e.g. training budgets, time, equipment) devoted to appropriate staff development.
- Evidence that all managers are actively involved in supporting staff to meet their development needs (e.g. from a staff development scheme linked to review, appraisal and career development).

● Other:

POINTER MET
YES NO

f) Is there a system of regular reviews of staff development needs?

- Data and/or staff views on the effectiveness of the identification of development needs.
- Evidence of regularly updated identification and analysis of:
 - Organisational staff development needs;
 - Individual staff development needs.
- Evidence that teams and individuals receive regular recognition and feedback on performance.

● Other:





HUMAN RESOURCES AND DEVELOPMENT – CRITERIA

COMMENTS & ACTION POINTS

POINTER MET
YES NO

g) Are the competences of all staff progressively developed in line with the organisation's business plan?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Data and/or staff views on the effectiveness of staff development activities.
- Regularly updated organisational/team/section and individual staff development plans, with targets and standards, which are directly related to the organisation's aims and objectives.
- Evidence that staff know what development opportunities are available to them, individually and as team/section members.
- Records showing that all staff have opportunities to participate in agreed and appropriate development activities.
- Records of development activity undertaken by teams/sections.
- Evidence that relevant guidelines and support materials are available for staff development.
- Evidence that staff development, where appropriate, is linked to awarding body requirements and national standards and qualifications.
- Records showing numbers of staff undertaking qualifications, or having achieved them, with the support of the organisation.
- Examples of evaluation, showing the benefits to the organisation from staff training and development.

● Other:



5. Equal Opportunities

The organisation should be implementing effective systems to provide equality of opportunity for all its clients, learners and staff in all its activities. It should ensure that it is recruiting, admitting and treating people fairly in the time they spend in the organisation and not rejecting some for the wrong reasons. The organisation should be committed to freedom from discrimination on the grounds of race, colour, sex, marital status, disability or offender background. Consideration should also be given to extending equal opportunities systems to include areas such as nationality, religion or sexual orientation.

Pointers are met when there is evidence of a planned approach to promoting, implementing and monitoring equal opportunities for clients, learners, and staff in all relevant activities, including activities under the control of subcontractors. For example, recruitment and selection might be aimed at recruiting learners and staff who represent the composition of the population in the recruitment area. Consideration of equality of opportunity in the identification of needs, guidance, placement, training, teaching and assessment, should ensure a supportive environment for all.

Similarly, there should be a planned approach to staff training for equal opportunities. This should ensure that staff have a general awareness of the existence and nature of discrimination and be trained in basic methods of avoiding behaviour which gets in the way of equal opportunities. There should be more specific training for staff and managers responsible for recruitment, selection, training and teaching and promotion so that learners and staff gain admission and advancement only on grounds of ability and potential.

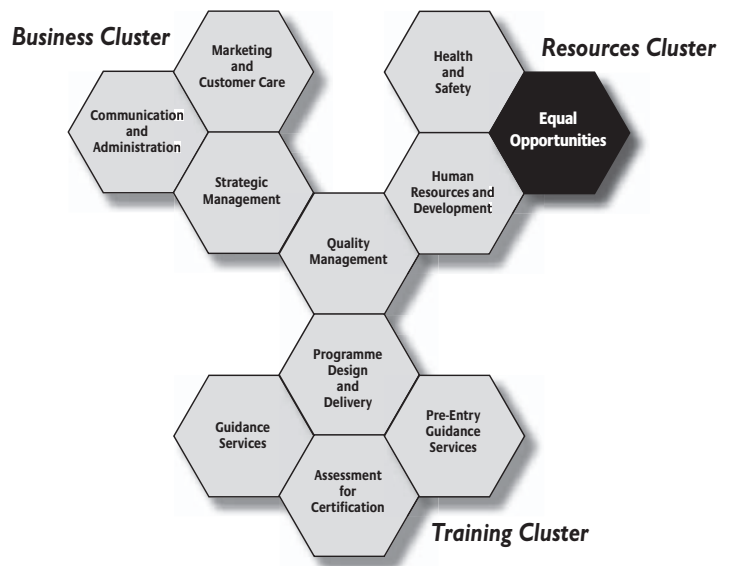


Appropriate allocation of responsibility for equal opportunities should ensure co-ordination and consistency in practice throughout the organisation. This applies particularly when more than one person is responsible for admissions and when the organisation offers a number of programmes under programme team control. For example, teaching and learning materials should recognise the interests and achievements of all groups in our society and challenge stereotypes of gender, race, and disability.

As with all the SQMS standards, it is worth noting in particular here the value of gathering evidence by asking learners, staff, and clients directly about their views on the way policies and plans are implemented.

Reviews should ensure that the organisation's standards and approaches are maintained. Programme participation, staff levels and such things as access to staff development should be monitored in terms of race, gender, etc.

Equality of opportunity is inherent within many other areas of the SQMS standards and it is expected that auditors will draw on this section while assessing other standards.





EQUAL OPPORTUNITIES – STANDARD OVERVIEW

5. Equal opportunities are ensured for all clients, learners and staff.

STANDARD MET	
YES <input type="checkbox"/>	NO <input type="checkbox"/>

**Management/
Staff Responsibilities**

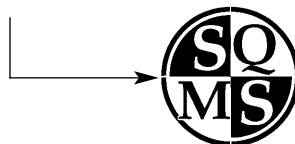
- a) Does the organisation have, operate and monitor an equal opportunities policy?
- b) Does the organisation ensure that everyone eligible has an equal chance of benefiting from the services it provides?
- c) Does the organisation actively promote its equal opportunities arrangements to all clients, learners and staff?

SCHEDULE OF REVIEWS

January	February	March	April	May	June	July	August	September	October	November	December

SUMMARY OF FINDINGS AND ACTION POINTS

[Large empty grey box for summary of findings and action points]





EQUAL OPPORTUNITIES – CRITERIA

5. Equal opportunities are ensured for all clients, learners and staff.

POINTER MET
YES NO

a) Does the organisation have, operate and monitor an equal opportunities policy?

YES NO

- Evidence of an up-to-date equal opportunities policy for the organisation and where applicable, its subcontractors.
- Procedures (e.g. recruitment, admission, placement, premises, assessment, guidance etc.) which show how the organisation promotes equality of opportunity that complies with or exceeds appropriate and current legislation.
- Data on client, learner and staff views on the implementation and monitoring of the organisation's equal opportunities policy and arrangements.
- Performance indicators, linked to the business plan, which demonstrate active promotion of equal opportunities.
- Procedures for addressing infringements of the organisation's equal opportunities policy.
- Other:

POINTER MET
YES NO

b) Does the organisation ensure that everyone eligible has an equal chance of benefiting from the services it provides?

YES NO

- Data on learner and staff applications to the organisation, analysed by factors such as race and gender and correlated with entry statistics for the same criteria.
- Data on learner achievement analysed by factors such as race and gender etc.
- Data on retention and drop-out, progression and post learning destinations by factors such as race and gender.
- Teaching and learning methods and materials which demonstrate promotion of equal opportunities, freedom from discrimination and encourage an inclusive learning environment (e.g. learning materials take account of cultural diversity, programmes take account of physical/psychological factors).
- Where appropriate, evidence that the organisation makes provision for learners with additional support needs.
- Other:

COMMENTS & ACTION POINTS





EQUAL OPPORTUNITIES – CRITERIA

c) Does the organisation actively promote its equal opportunities arrangements to all clients, learners and staff?

POINTER MET
YES NO

COMMENTS & ACTION POINTS

- Marketing materials (e.g. leaflets, brochures, advertisements, website etc.) which demonstrate promotion of equal opportunities and freedom from discrimination.
- Evidence from staff which confirms that they know in practice about the organisation's equal opportunities policy and procedures and know how to avoid bias.
- Performance indicators, linked to the business plan, which demonstrate active promotion of equal opportunities.

● Other:



6. Health and Safety

A safe and healthy working and learning environment should be provided for all. The organisation's premises and equipment must comply with the relevant and most up-to-date health and safety legislation. Since the 1992 European health and safety regulations came into force education and training organisations are treated like other workplaces. This standard therefore aims to ensure that the organisation is aware of its responsibilities to all staff, clients, learners, contractors and visitors to the organisation.

Demonstrating interest in the welfare of staff and learners is important. Not only does appropriate attention to health and safety issues build staff and learner morale and performance, it creates confidence in the organisation, and it also makes prosecution and/or civil action less likely. Studies have been done which show that organisations with good standards for health and safety tend to be more profitable.

All activities should take place in an environment where potential hazards have been properly identified and risks minimised through the establishment of safety procedures and where safe working practices are incorporated into all education and training programmes.

The pointers are met where there is evidence that the organisation operates a suitable safety management



system and all its subcontractors for education, training and placement providers, implement health and safety guidance and regulations for premises, equipment and materials, for everyone using them (clients, learners, staff, visitors and contractors).

Premises should be correctly registered. Clients, learners, and staff should be covered by suitable insurance.

Responsibilities for health and safety should be appropriately allocated.

Arrangements should ensure that learners are correctly supervised by responsible and competent people in all training locations (including subcontractors and placements) and that staff and learners know who to refer to for advice on health and safety matters.

Responsibilities for instigating, supervising, and reporting on safety audits, inspections, and accident reports and for taking corrective action should be clearly specified.

There should be a process for monitoring, reviewing, setting and measuring performance in relation to health and safety.

Health and safety applies across SQMS and it is expected that auditors of other areas will draw on this section during their work.





Additional information on this standard has been included in part 4 of this manual ("Supplements") to assist organisations to interpret and implement this standard. It is particularly important to be aware of current legislative requirements, as health and safety legislation is frequently updated in response to the changes in safe working practices and HSE regulations and guidance. The information contained in the supplement is correct at the time of publication, however; it is the organisation's responsibility to make sure that recognition is taken of the latest health and safety guidelines.

Note: All lines of evidence will be audited for this standard.





**S Q M S
S T A N D A R D S**

HEALTH AND SAFETY – STANDARD OVERVIEW

6. There is a safe and healthy environment for all learners, staff and visitors.

STANDARD MET

YES NO

**Management/
Staff Responsibilities**

- a) Does the organisation have suitable health and safety management systems?
- b) Are the premises registered with the appropriate enforcing authority and are all staff, learners and visitors covered by suitable insurance?
- c) Are appropriate systems in place to provide and promote a safe place of work, work equipment and safe use, transportation and storage of materials/substances?
- d) Are suitable processes, procedures and equipment in place to cater for any potential emergency situation?
- e) Are suitable systems in place to ensure the health, safety and welfare of staff, learners and others that may be affected by any process, act or omission?
- f) Are suitable management systems in place to ensure the health, safety and welfare of learners at placement premises for training and work experience?
- g) Is there evidence to demonstrate that appropriate systems are employed for the management/control of subcontractors?
- h) Are processes, procedures and organisational activities adequately monitored and reviewed, incorporating overall performance measurement, to ensure and promote continued development and awareness of H&S?

SCHEDULE OF REVIEWS

January	February	March	April	May	June	July	August	September	October	November	December

SUMMARY OF FINDINGS AND ACTION POINTS





HEALTH AND SAFETY – CRITERIA

COMMENTS & ACTION POINTS

6. There is a safe and healthy environment for all learners, staff and visitors.

POINTER MET
YES NO

a) Does the organisation have suitable health and safety management systems?

- Evidence that the organisation implements a current, up-to-date health and safety policy.
- Evidence which demonstrates that an appropriate risk assessment programme is in place and is effective.
- Evidence, including views from staff and learners, which demonstrates that an appropriate induction programme is implemented.
- Evidence to demonstrate that an appropriate and effective incident reporting, investigation and recording system/procedure is employed.
- Other:

POINTER MET
YES NO

b) Are the premises registered with the appropriate enforcing authority and are all staff, learners and visitors covered by suitable insurance?

- Evidence of registration with the HSE, Local Authority Department, and any others as appropriate.
- Where applicable a current valid Fire Certificate or evidence of correspondence with the Local Fire Prevention Officer.
- Completed HSE Law Poster on display or evidence that the HSE leaflet outlining British Health and Safety Law has been issued.
- Public and/or Employer's Liability Insurance which includes cover for learners.
- Suitable insurance cover for the use of company-owned vehicles including a mechanism to check the validity of the user's licence.
- Mechanism/process to check the validity of insurance, licence and MOT (where applicable) for staff and learners using their own vehicles for company business.
- Other:





S Q M S S T A N D A R D S

HEALTH AND SAFETY – CRITERIA

c) Are appropriate systems in place to provide and promote a safe place of work, work equipment and safe use, transportation and storage of materials/substances?

POINTER MET
YES NO

- Evidence, including views from staff and learners, which demonstrates that a safe and healthy workplace is provided.
- Are appropriate controls in place to promote the health, safety and welfare of employees who discharge their employer's responsibilities away from the organisation's premises?
- Evidence, including views from staff and learners, which demonstrates that appropriate controls are in place and routinely monitored in relation to work equipment.
- Are systems for the transportation and storage of work equipment and materials appropriate?
- Are controls implemented for the use, storage, transport and handling of materials/substances hazardous to health?
- Evidence, including views from staff and learners, which demonstrates that management systems for the provision and use of PPE is appropriate and effective.

● Other: _____

POINTER MET
YES NO

d) Are suitable processes, procedures and equipment in place to cater for any potential emergency situation?

- Recorded fire risk assessment and evacuation procedures suitable for the environment and learners/staff.
- Are fixed and portable fire appliances suitable by type, number and location?
- Are all records pertaining to fire equipment test/maintenance and awareness training available?
- Are fire/emergency signs suitable and unambiguous?
- Is the provision of first aid adequate to meet legal and organisational requirements?
- Information about what to do in the event of an incident or first aid treatment being required, e.g. by procedure, communication and signage.

● Other: _____

COMMENTS & ACTION POINTS





HEALTH AND SAFETY – CRITERIA

	POINTER MET		COMMENTS & ACTION POINTS
	YES	NO	
<p>e) Are suitable systems in place to ensure the health, safety and welfare of staff, learners and others that may be affected by any process, act or omission?</p> <ul style="list-style-type: none"> ● Are risk assessments suitable for the activities undertaken and do they take account of inexperienced staff and in particular learners? ● Is the level of supervision provided for staff, learners and others appropriate for the nature of activities undertaken? ● Evidence, including views of staff and learners, that suitable training for the specific task/process has been provided. ● Are records of training maintained? ● Is sufficient health and safety information provided and updated that is appropriate to the organisation and its activities? ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>	
<p>f) Are suitable management systems in place to ensure the health, safety and welfare of learners at placement premises for training and work experience?</p> <ul style="list-style-type: none"> ● Evidence that the vetting/monitoring checklists are relevant to the learning/training environments. ● Evidence which demonstrates that pre-placement vetting is conducted and routinely monitored thereafter to ensure arrangements remain satisfactory. ● Is the level of supervision provided by the placement provider appropriate for the nature of activities undertaken? ● Are the staff responsible for conducting 'pre' and 'in' placement vetting/monitoring occupationally competent to do so? ● Are vetting/monitoring checklists for each placement provider maintained and kept on file? ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>	





**S Q M S
S T A N D A R D S**

HEALTH AND SAFETY – CRITERIA

g) Is there evidence to demonstrate that appropriate systems are employed for the management/control of subcontractors?

POINTER MET
YES NO

COMMENTS & ACTION POINTS

- Evidence that an appropriate subcontractor vetting/selection process is in place.
- Are suitable subcontractor monitoring mechanisms/procedures employed?
- Are subcontractors provided with relevant information in relation to the organisation's activities?
- Are subcontractors, who deliver training, adequately assessed to ensure that adequate safety management systems are employed?
- Other:

POINTER MET
YES NO

h) Are processes, procedures and organisational activities adequately monitored and reviewed, incorporating overall performance measurement, to ensure and promote continued development and awareness of H&S?

- Is there evidence, including staff and learners' views, to demonstrate that an effective review process is employed?
- Evidence that formal planned premise inspections are conducted and recorded on a regular basis.
- Evidence, including staff and learners' views, that there is a recognised forum for consultation/communication in relation to health, safety and welfare-specific issues.
- Evidence that training or development has been delivered or planned as a result of review.
- Is there a system/procedure or physical evidence to demonstrate that reviews and corrective action plans (as appropriate) are instigated as a result of incident analysis?
- Have desired performance indicators been established; how is achievement measured/monitored and are recovery action plans instigated when required?
- How is relevant up-to-date H&S information/guidance accessed?
- Other:



7. Communication and Administration

Communication and Administration is concerned with the organisation's system for effective internal and external communication and with its systems for administration of education and training services such as contracting, subcontracting, management information systems, documentation and record keeping.

INTERNAL AND EXTERNAL COMMUNICATION

The pointers are met when there is evidence (appropriate to the size of the organisation) of reliable, up-to-date communication and dissemination of information within the organisation, especially when change is planned. There should be an appropriate structure of staff teams with clear remits and regular staff meetings where information is gathered and given, analysed and interpreted, and at which necessary action is identified clearly, with responsibilities and deadlines decided. Meetings should act as a focus for reviews and provide opportunities for staff at all levels to participate in decision making.

There should be effective systems for conveying information accurately from clients, external bodies and management to all appropriate people and for routine communications between staff. The organisation should have procedures for establishing and maintaining all contracts appropriate to the organisation's education and training services (e.g. schools, colleges, universities, parents, careers service, adult and community education, LECs, SE/HIE, individual employers and employer organisations,



professional and awarding bodies). Awarding bodies normally require a named contact to ensure effective liaison with the body.

The organisation should be using appropriate and up-to-date technology to support its communication and administration.

Promotional materials (see standard 3. Marketing) should provide evidence of the effectiveness of the organisation's communication about itself to the outside world.

MANAGEMENT INFORMATION SYSTEM

This pointer is met when it can be shown that the management information system provides accurate information internally and to all relevant external bodies. This information should include updates on key performance indicators required by these bodies at the required intervals, as well as on the organisation's own performance indicators/key success factors for its objectives as contained in the business plan. Normal practice will include the use of statistical techniques to analyse and review information, particularly for its accuracy. There should be adequate procedures to protect security of information (paper or computer based) and to ensure efficient access to information.

CONTRACTING

Contracting is the process by which the organisation formally agrees to provide a service to its customers (e.g. clients and learners). The contract should specify the details and scope of the service to be provided in order that all parties are conversant with the terms of the agreement.





Contracts with clients and learners should be supported by written documents. There should be procedures for undertaking regular reviews of the contracts.

This pointer is met when there is evidence of contract arrangements, procedures, control and systematic reviews.

SUBCONTRACTING

When a service is provided directly by an organisation's own employees and on its own premises, it is accountable for all aspects including the quality of the provision. When services are subcontracted to another organisation, although responsibility may be shared, accountability cannot be shared with or passed on to the subcontractors.

The pointer is met when there is a framework of procedures for:

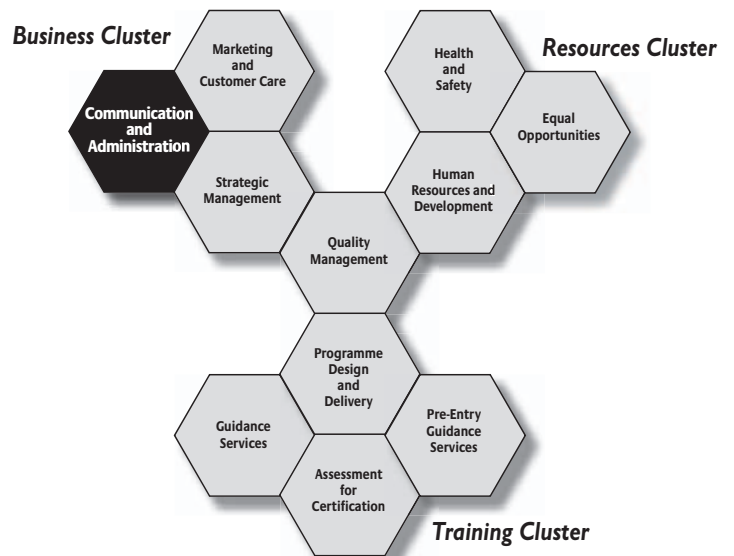
- Establishing the minimum criteria necessary to ensure the provision of a specified standard of service by the subcontractors;
- Monitoring and reviewing subcontractor performance.

DOCUMENTATION AND RECORD KEEPING

This pointer is met when records are clear, accurate, appropriately accessible and maintained efficiently and effectively for the purposes of the organisation. External agencies and legal requirements for record keeping should be clearly identified and carried out to the letter (e.g. Data Protection Act, Inland Revenue, LECs, etc.). There should be up-to-date versions of documents, made available where needed, to ensure the effective functioning of the organisation's services and all out-of-date documents should be removed from circulation. There should be procedures for who lists, controls, reviews, approves and issues changes to current or new documents.

The administration and control of documents is linked directly with standard 2 Quality Management (pointer b).

Documentation requiring control may include: quality manuals, assessment procedures, programmes, staff handbooks, policies and procedures, awarding body documentation, LEC documentation, legal documents, etc.





**COMMUNICATION AND ADMINISTRATION –
STANDARD OVERVIEW**

STANDARD MET

YES NO

**Management/
Staff Responsibilities**

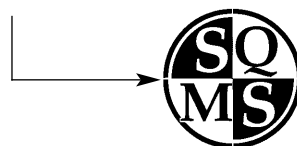
7. Communication and administrative arrangements meet the needs of the organisation, external bodies, clients, learners and staff.

- a) Does the organisation have an effective internal communication system?
- b) Does the organisation have an effective external communication system with clients, learners and all key bodies?
- c) Is there an effective management information system to support the organisation's business objectives and activities?
- d) Are contract arrangements with clients, learners and all key bodies effectively managed?
- e) Are subcontracted services effectively managed?
- f) Is documentation and record keeping appropriate to the education and training services and the management requirements?

SCHEDULE OF REVIEWS

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SUMMARY OF FINDINGS AND ACTION POINTS





S Q M S S T A N D A R D S

COMMUNICATION AND ADMINISTRATION – CRITERIA

7. Communication and administrative arrangements meet the needs of the organisation, external bodies, clients, learners and staff.

a) Does the organisation have an effective internal communication system?

POINTER MET
YES NO

- Feedback from staff and learners on the effectiveness of organisational communications.
- Evidence of an appropriate range of methods for dissemination of information throughout the organisation (e.g. memos, notices, pigeon holes, newsletters, intranet, staff meetings, e-mail, etc.).
- An appropriate system for targeted distribution of information and support material from external bodies (including awarding bodies) and internal policy and planning papers.
- Records of meetings.
- Agenda and minutes of meetings (e.g. board, advisory groups etc., made accessible to appropriate staff).
- Learner and staff representatives on appropriate committees.
- Effective internal telecommunication systems.

● Other:

POINTER MET
YES NO

b) Does the organisation have an effective external communication system with clients, learners and all key bodies?

- Feedback from clients, learners and key bodies on the effectiveness of organisational external communication.
- Evidence of effective external telecommunication systems.
- Documentation showing structured links with relevant bodies, including designated staff for contacts and a system for raising queries with, and providing feedback to, external bodies.
- Evidence of staff involvement in the work of professional and awarding bodies.
- Effective data transmission which meets awarding body requirements.

● Other:

COMMENTS & ACTION POINTS





**COMMUNICATION AND
ADMINISTRATION – CRITERIA**

COMMENTS & ACTION POINTS

c) Is there an effective management information system to support the organisation's business objectives and activities?

POINTER MET
YES NO

- Management views on the effectiveness of the management information system (MIS).
- MIS which provides for the efficient and accurate collection, storage, analysis and output of data needed by users in relation to performance indicators.
- Examples of an appropriate range of statistical techniques being used for analysis of performance indicators.
- Other:

POINTER MET
YES NO

d) Are contract arrangements with clients, learners and all key bodies effectively managed?

- Written contracts/agreements with individual learners and/or corporate clients (e.g. LECs, employers, etc.), specifying details of the services provided.
- Learner handbooks or other documentation detailing the rights and responsibilities of learners and the organisation.
- Procedures for reviewing education and training contracts at the start and throughout the duration of a course or programme.
- Procedures for controlling and verifying goods and services (e.g. information, documentation, equipment, premises, materials, tutorial support, etc.) supplied by/to the organisation as part of the contract.
- Other:





S Q M S S T A N D A R D S

COMMUNICATION AND ADMINISTRATION – CRITERIA

POINTER MET
YES NO

COMMENTS & ACTION POINTS

e) Are subcontracted services effectively managed?

YES NO

- Clear procedures and criteria for the selection of subcontractors.
- Written contracts of agreement with subcontractors, including work placement providers, which specify and lay down minimum standards for:
 - Monitoring and review;
 - Staff qualifications and experience;
 - Education and training services;
 - Equal opportunities;
 - Health and safety;
 - Staffing levels.
- Evidence that provision of agreed standards is regularly monitored through management reviews/visits and discussions with learners and subcontractors.
- Other: _____

POINTER MET
YES NO

f) Is documentation and record keeping appropriate to the education and training services and the management requirements?

YES NO

- Data and client, staff and learner views on the effectiveness of record keeping.
- An effective procedure for identification, collection, location, indexing, filing, storage, security, confidentiality, access and maintenance of records, including relevant subcontractor records.
- Records of key activities related to education and training which are:
 - Legible and identifiable to the service involved;
 - Located, stored and maintained in ways which optimise easy and safe retrieval and prevent loss or unauthorised access;
 - Retained for established and recorded periods of time;
 - Made available to representatives of agencies where agreed contractually.
- Evidence that learner records support claims made for payment by funding agencies.
- Other: _____



8. Guidance Services

This standard is concerned with ways of ensuring that learners have the opportunity to clarify their goals and relate them to the services available, receive comprehensive induction to programmes, and have access to continuing support and advice and pre-exit guidance to assist them in planning their next move.

IDENTIFICATION OF NEEDS

The process of gathering information about an individual's strengths, difficulties, aspirations and needs should be undertaken in partnership with the individual and, where appropriate, others whose views contribute significantly. It should ensure that learners access a service (e.g. assessment of prior learning and achievement, assessment on demand), or embark on a programme that will enable them to achieve legitimate and realistic goals to which they subscribe (e.g. to improve their skills, compete more effectively in the labour market, and progress to other education and training programmes).

The pointer is met when there is evidence of a framework which establishes:

- An individual's strengths, needs and goals through initial assessment
- The best match between the programmes available, and the learner's goals (this may involve directing the learner to another education and training provider)



- A means of support for helping learners to gain credit or certification for any previously acquired learning
- Outcomes agreed by the provider and learner (an action plan/personal training plan).

The approach to needs identification and action planning in this section is not linked to any particular context.

Some organisations take learners on the basis of recruitment and selection and initial assessments made (or partly made) by others. This can result in initial assessments during induction where the assessments are fine-tuned and related to the organisation's particular provision. Other organisations, or parts of them, recruit and select on the basis of their own assessments and carry out individual action planning and programme planning after or during selection.

Whatever the circumstances in which initial identification of needs and action planning take place, all organisations will want to assure themselves that the pointers in this section are met. This implies that if some processes are carried out by others the managing organisation will want to ensure that the processes are adequate as indicated by the pointers and that top-up approaches are used where needed.

INDUCTION

General induction to the organisation and induction to separate parts of a programme are an essential part of both employment-based and education and training-based vocational programmes. Learners should feel at home and valued in the organisation and learn and accept their responsibilities to the organisation, particularly with regard to statutory requirements.





The pointer is met when there is evidence of adequate introduction and information for all learners about the organisation, its staff and the training or programmes of learning to be undertaken.

REVIEWS AND GUIDANCE

Learners are likely to have at least two types of needs during programmes which require guidance:

- Making sense of the training and learning, personal development and career opportunities and choices
- Understanding, facing and resolving or adapting to personal problems and difficulties which can inhibit progress.

There should be regular reviews which provide feedback to individual learners on their performance, feedback to staff and managers on the learner’s progress and the effectiveness of the training and teaching methods.

Reviews identify, through consultation with the learner, those parts of a learner’s action plan which have been achieved and those that remain to be completed. They provide guidance on what needs to be emphasised during the forthcoming period and whether the action plan/personal training plan needs to be added to or modified. They also identify the general well-being of the learner and the support available to achieve their personal goals.

There should be evidence of regular opportunities for learners to review their progress and make any changes to their action plan/personal training plans while they are undertaking their programmes. Towards the end of the programmes learners should be supported in their preparations for the next step.

There should be properly designated staff, suitable accommodation, guidelines on procedures and confidentiality, and appropriate links to specialist services. Arrangements should be regularly reviewed.

It should be noted that:

- As programme durations can last from one day to several years, the interpretation of this standard will be adapted by the auditor for organisations who only deliver short courses
- As technology progresses some or all of the guidance services may be supported via an electronic format.





S Q M S S T A N D A R D S

GUIDANCE SERVICES – STANDARD OVERVIEW

8. The needs of individual learners are identified and formulated. Progress is reviewed and support provided where needed.

- a) Do learners have the opportunity to discuss and formulate their starting points, possible goals and relate these to learning opportunities?
- b) Have learners' prior achievements been taken into account?
- c) Is induction to the organisation and programme provided for all learners?
- d) Do all learners have regular opportunities during programmes to review their individual progress and goals and replan their programme where necessary?
- e) Is there a system for referral of learners to specialist services if reviews show that this is needed?
- f) Is pre-exit guidance available to support post-programme progression and Lifelong Learning?

STANDARD MET

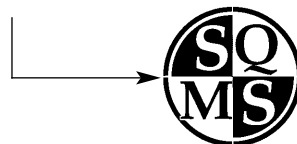
YES NO

Management/ Staff Responsibilities

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SUMMARY OF FINDINGS AND ACTION POINTS





GUIDANCE SERVICES – CRITERIA

8. The needs of individual learners are identified and formulated. Progress is reviewed and support provided where needed.

a) Do learners have the opportunity to discuss and formulate their starting points, possible goals and relate these to learning opportunities?

POINTER MET
YES NO

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

- Data on learner satisfaction with initial identification and formulation of needs.
- Procedures for initial identification of needs which are appropriate to the purpose of the organisation's programmes and provide a:
 - Framework (e.g. structured review)
 - Focus on the individual
 - Supportive environment
 - Link to ongoing review
 - Method for taking account of occupational choice or other valid goals of learners (e.g. skill improvement and progression to other education and training programmes)
 - Method for identifying special circumstances and needs.
- Procedures for the preparation of action plans/personal training plans which:
 - Recognise current competence (e.g. skills, knowledge and abilities)
 - Outline the learner's aspirations (e.g. employment aims or further education goals)
 - Note any special circumstances and needs which must be taken into account
 - Identify the vocational, or other, qualification to be achieved
 - Log the planned programme
 - Outline the opportunities for ongoing review
 - Meet the client's requirements.
- Other:

COMMENTS & ACTION POINTS





GUIDANCE SERVICES – CRITERIA

	POINTER MET		COMMENTS & ACTION POINTS
	YES	NO	
<p>b) Have learners' prior achievements been taken into account?</p> <ul style="list-style-type: none"> ● Data on learner satisfaction with the extent to which prior achievements have been taken into account. ● Procedures for encouraging and assisting learners and ensuring that they have the opportunity to build on prior achievements (possibly leading to certification) rather than undertake repetitive experiences. ● Evidence of actual occurrences, from learners' records, that prior achievements are recognised (e.g. by arrangements for exemption, credit transfer or accelerated learning or training). ● Evidence that additional support is available to help learners maximise achievements so that they can enter programmes that lead to the highest possible level of qualification. ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>	
<p>c) Is induction to the organisation and programme provided for all learners?</p> <ul style="list-style-type: none"> ● Data on learner satisfaction with induction. ● Data on rates of learner participation in induction. ● Outline of the induction process, examples of induction packs etc., which demonstrate adequate introduction to the organisation and the programme. ● Evidence of ongoing induction in cases where learners take a course of units or undertake training in a number of different organisations or with a number of distinct phases. ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>	

POINTER MET
YES NO





S Q M S S T A N D A R D S

GUIDANCE SERVICES – CRITERIA

d) Do all learners have regular opportunities during programmes to review their individual progress and goals and replan their programme where necessary?

POINTER MET
YES NO

- Data on learner satisfaction with ongoing guidance and support.
- Data on rates of learner participation in ongoing guidance.
- Use of National Record of Achievement (NRA), Progress File or similar document as basis for learners' systematic record keeping and planning of future goals.
- Procedures for reviews of learners' progress which cover, for example, the basis, frequency, methods, staffing arrangements, content, location and records kept.
- Guidelines covering the confidentiality of reviews.

● Other:

POINTER MET
YES NO

e) Is there a system for referral of learners to specialist services if reviews show that this is needed?

- Where appropriate, data on learner satisfaction with referral to specialist services if reviews show that this is needed.
- Data on referrals.
- An up-to-date list of specialist support services available (e.g. learner support services, internal trained specialists, external agencies) with details of how they may be contacted.
- Guidelines on when and how staff should refer learners to these services.

● Other:

COMMENTS & ACTION POINTS





GUIDANCE SERVICES – CRITERIA

	POINTER MET		COMMENTS & ACTION POINTS
	YES	NO	
<p>f) Is pre-exit guidance available to support post-programme progression and Lifelong Learning?</p> <ul style="list-style-type: none"> ● Data on learner participation in and satisfaction with pre-exit guidance. ● Data on rates of learner participation in pre-exit guidance. ● Procedures for pre-exit guidance which demonstrate adequate guidance on options available to learners in light of the likely achievements of their goals and their future aspirations. ● Where relevant to contract agreements with learners, procedures covering any support provided after completion of the programme. ● Other: <hr/> <hr/>	<input type="checkbox"/>	<input type="checkbox"/>	



9. Programme Design and Delivery

Education and training programmes fall broadly into one of two categories, employment-based or education and training-based:

1. Employment-based programmes generally lead to SVQs/NVQs or equivalent and, following initial assessments and action planning for individuals, training is delivered through a full-time systematic programme of work-based activity and learning. Direct training, supervision of practice and access to learning resources support the achievement of competences. Sometimes off-the-job education and training is included.
2. Education and training-based programmes relate to general vocational and educational qualifications. They can be part-time or full-time, take place in a range of centres, and are sometimes linked to work-based placements. Teaching and training is usually a group activity (increasingly supported through flexible learning for individuals), and follows a timetable of learning and teaching sessions related to components in the award.

PROGRAMME DESIGN

For employment-based programmes, Programme Design involves planning (often for individuals rather than groups) a mix of learning and assessment opportunities matching the component units in the award or other valid goals of learners.



In education and training-based programmes, Programme Design involves planning how groups of learners can best achieve outcomes and making decisions about programme components, locations and access arrangements, methods of delivery and assessment for certification.

For both types of programme, the pointers are met when, for each programme, there is a statement of purpose which clearly links the target group to the award or other planned outcome and to the end user of the programme (e.g. employers, higher education institutions). It should be clear that well researched needs are being met.

There should be evidence that each programme achieves a good match with learner and client expectations of content and standards. The programmes should lead to SVQs/NVQs, national qualifications or equivalent where this is required contractually. They should follow any given specifications, (e.g. the programmes should be designed against the standards of the qualification to which they lead), or particular criteria agreed by a client or with a learner. The learning opportunities in work placements should be carefully identified to ensure that all the outcomes required by the award or other learning goals can be achieved.

Particular attention should be paid to specifications for the integration of core skills into programmes in order to achieve the appropriate degree of breadth. Core skills cover communication, numeracy, information technology, working with others and problem solving. It should be clear that the organisation knows, understands and has taken steps to ensure that learners will be prepared for future change by progressing in these skills.





Education and training-based programmes for groups should be organised to meet individual needs so far as possible by flexible arrangements for access and progression through the programme (e.g. by self study methods, e-learning, accreditation of prior learning/achievements, assessment on demand).

For all programmes there should be a clear outline of the learning resources and environment, staffing requirements, and overall learning methodology appropriate to the aims and purposes of the programme. Plans should demonstrate that learners will experience coherent, well structured and sequenced activities.

Where learners with additional support needs are recruited to programmes leading to an award, there should be plans for modification of the programmes (e.g. extra time, alternative learning methods, special assessment arrangements agreed with the awarding body).

Overall the programme design should ensure that there is a good degree of learner activity and that learners are encouraged to take responsibility for their own learning.

Programme design should be effectively managed and all aspects should be regularly monitored and reviewed.

PROGRAMME DELIVERY

Whereas Programme Design is concerned with the quality of the planned intentions, Programme Delivery is concerned with the effectiveness of the training, teaching, and learning experienced.

The success of the organisation depends on the effective delivery of well designed programmes. Is design translated into practice so that learners achieve their goals and the education and training standards set by the organisation are realised?

Programme delivery is effective when there is evidence of:

- A purposeful, productive, and supportive learning environment
- A concern for learners as individuals
- A relevant, well-produced and maintained set of resources which are adequate for the purposes of effective learning
- Learning, teaching and training approaches that are appropriate to the learning outcomes, the needs of individual learners, the learner's intended destinations, are varied, emphasise learner activity and give the learner responsibility for learning.



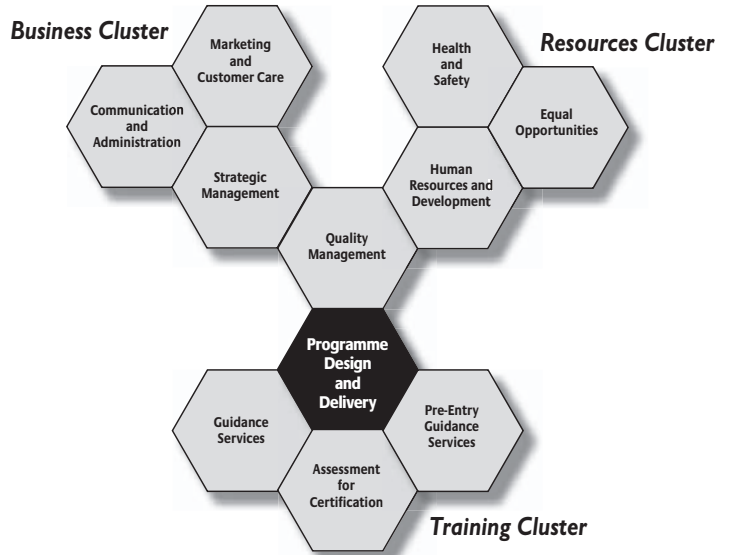


Pointer 9g requires some explanation. This is concerned with an aspect of the quality of learning and teaching which is difficult to define but easy to recognise – particularly by learners. When surveys are taken of training methods, often the strongest reactions relate to the quality of relationships between staff and learners and the extent to which learners feel valued and well supported in their learning tasks. Effective teachers and trainers make learning interesting and enjoyable, they form friendly (but not over-familiar) relationships with learners and they communicate a strong sense of the value of the work being done to the highest possible standard. Another aspect of effective support for learning is ongoing assessment linked to teaching (formative assessment or trainee-centred reviewing), providing learners with guidance on how they are progressing and the next steps.

Programme delivery should be effectively managed and all aspects should be reviewed.

Organisations whose learners are mainly in employment-related training schemes (e.g. in employers' premises, on work experience or with placement subcontractors), should ensure that systems are in place for communicating the standards to be applied. They will also need to communicate to such organisations the need to co-operate in gathering evidence to show that the pointers are met.

Programme Design and Delivery is closely linked to and may be heavily influenced by standard 5 Equal Opportunities.





PROGRAMME DESIGN AND DELIVERY – STANDARD OVERVIEW

STANDARD MET

YES NO

Management/
Staff Responsibilities

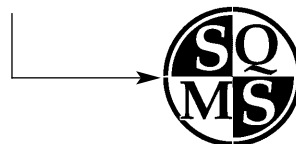
9. Programme design is effective when the programme’s content and outcomes are relevant and encourage access. Programme delivery is effective when delivery methods are appropriate, varied, emphasise activity and responsibility and are responsive to the needs of the learner.

- a) Are the purposes of each programme clearly related to the needs of clients and learners?
- b) Are the components of each programme relevant to its purposes and to the needs of the clients and learners?
- c) Do the planned mode (e.g time, place and methods), sequence and organisation of delivery of each programme help clients and learners to access the programme and are they effective?
- d) Are relevant guidelines and support materials available for staff use?
- e) Does the organisation ensure that premises, facilities, equipment and materials are suitable for the range and number of learners, staff and visitors and the education and training programmes and services?
- f) Are the planned training, teaching and assessment methods for each programme appropriate to its purposes and learners. Do they conform to awarding body requirements and are they delivered effectively?
- g) Is teaching and training in each programme characterised by a sense of purpose and structure, and does it show a concern for learners as individuals?
- h) Wherever possible, is learning active and are learners given responsibility for their own learning?

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S Q M S S T A N D A R D S

PROGRAMME DESIGN AND DELIVERY – CRITERIA

COMMENTS & ACTION POINTS

9. Programme design is effective when the programme’s content and outcomes are relevant and encourage access. Programme delivery is effective when delivery methods are appropriate, varied, emphasise activity and responsibility and are responsive to the needs of the learner.

POINTER MET
YES NO

a) Are the purposes of each programme clearly related to the needs of clients and learners?

- Training needs analysis data linked to particular programmes.
- Data on client and learner satisfaction with the purposes of programmes.
- Data on post-programme destinations of learners.
- Documented procedures covering the control, planning, resourcing, review and design of new courses and programmes.

● Other:

POINTER MET
YES NO

b) Are the components of each programme relevant to its purposes and to the needs of the clients and learners?

- Data on client and learner satisfaction with the content of programmes.
- Data on learner attendance, retention and success rates.
- Programme plans which comply with the specifications for the qualifications to which they lead.
- Training needs analysis data and plans for organisation-devised programmes which demonstrate that the components and standards are appropriate and match the criteria specified by clients and learners.
- Evidence from programme plans that account is taken of "best" work practices and up-to-date advice from relevant bodies (e.g. employers, trade and professional bodies, national education and training bodies, and relevant statutory and regulatory authorities etc.).

● Other:





PROGRAMME DESIGN AND DELIVERY – CRITERIA

COMMENTS & ACTION POINTS

	POINTER MET	
	YES	NO
c) Do the planned mode (e.g. time, place and methods), sequence and organisation of delivery of each programme help clients and learners to access the programme and are they effective?	<input type="checkbox"/>	<input type="checkbox"/>

- Data on client and learner satisfaction with access to training, teaching and assessment in programmes.
- Data on client and learner satisfaction with sequencing and organisation of programmes.
- Data on learner attendance, retention and success rates.
- Plans and rationales for the modes, sequence and organisation of delivery of programmes.
- Evidence of facilities for flexible learning and assessment (e.g. ranging from libraries to distance learning packs to e-learning to assessment on demand) appropriate to client and learner needs.

● Other: _____

POINTER MET
YES NO

d) Are relevant guidelines and support materials available for staff use?	<input type="checkbox"/>	<input type="checkbox"/>
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- Award and unit specifications; assessment guidelines and proforma easily accessible to all staff.
- Organisational/sectional guidelines on programme design and delivery.
- Staff views on their satisfaction with access to relevant guidelines and support materials.
- Guidelines and support materials from funding bodies and other relevant agencies.

● Other: _____





S Q M S S T A N D A R D S

PROGRAMME DESIGN AND DELIVERY – CRITERIA

COMMENTS & ACTION POINTS

e) Does the organisation ensure that premises, facilities, equipment and materials are suitable for the range and number of learners, staff, visitors and the education and training programmes and services?

POINTER MET
YES NO

- Data on user satisfaction with premises, facilities, equipment and materials.
- Means for checking that work areas are used to maximum effect; utilisation of accommodation statistics.
- Examples of provision of specialist areas (e.g. staff rooms, common rooms, toilets, storage areas, libraries, resource centres, childcare centre, canteen or other facilities for the consumption of food) which meet the needs of users.
- Cleaning specifications and schedules.
- A repair and renovation programme.
- Records of routine inspections of accommodation.
- Procedures for regular maintenance and updating of equipment; servicing records; upgrading schedules.
- Stock records and audits.

● Other:

POINTER MET
YES NO

f) Are the planned training, teaching and assessment methods for each programme appropriate to its purposes and learners. Do they conform to awarding body requirements and are they delivered effectively?

- Data on client and learner satisfaction with training, teaching and assessment methods.
- Data on learners' attendance, retention and success rates.
- Evidence of staff review of learning, training, teaching and assessment methods.
- Records of checks on the quality of the learning experience at work placements.
- Plans and rationales for the methods of delivery of programmes.
- Confirming evidence from internal and/or external verifiers.

● Other:





PROGRAMME DESIGN AND DELIVERY – CRITERIA

COMMENTS & ACTION POINTS

POINTER MET
YES NO

g) Is teaching and training in each programme characterised by a sense of purpose and structure, and does it show a concern for learners as individuals?

- Data on learner satisfaction with staff-learner relationships.
- Data on learner attendance, retention and success rates.
- Evidence of staff review of staff-learner relationships, attendance, retention, and success rates (e.g. programme team reviews, self and peer reviews).
- Evidence which shows that staff have realistic expectations of learner potential and that learners are encouraged to pace themselves as demandingly as possible, with support available when difficulties are encountered.
- Evidence that learners have received regular feedback from staff on their progress.
- Other: _____

POINTER MET
YES NO

h) Wherever possible, is learning active and are learners given responsibility for their own learning?

- Data on learner satisfaction with learning, training and teaching methods.
- Data on learner attendance, retention and success rates.
- Evidence which shows that activity-based approaches are encouraged.
- Data on staff review of learning, training and teaching methods (e.g. programme team review, self and peer review).
- Other: _____



10. Assessment for Certification

This standard is concerned with the effectiveness of the organisation's arrangements for assessments related to the award of certificates.

Most organisations will be offering programmes and assessment services leading to a number of nationally recognised qualifications, and one of their key functions will be to ensure that assessment arrangements are in total accordance with awarding body specifications so that national standards are maintained. Whilst the pointers in this section are generally applicable, the lines of evidence are tailored to the requirements for SVQ awarding bodies, thus setting a high standard of good practice. Organisations offering other awards approved by LECs and other funding bodies should ensure that they have evidence which satisfies any variation in the requirements of the awarding bodies concerned.

The pointers in this section are met when there is evidence that the assessment instruments for each unit or award comply with awarding body specifications; arrangements for assessments are clearly set out for candidates, including their rights of appeal, and that staff know and understand the procedures; staff prepare valid and reliable assessment instruments to provide candidates with opportunities to demonstrate their sustained competence against the standards defined for the award (whether a single unit or a complete VQ). The assessments are carried out in as natural conditions as possible to avoid unnecessary pressure and to ensure that irrelevant factors do not intrude on the assessment. The evidence of candidates' competence is judged correctly and objectively by the assessor against the standards required for the award; the



evidence of candidates' work and the record of its assessment are retained for verification.

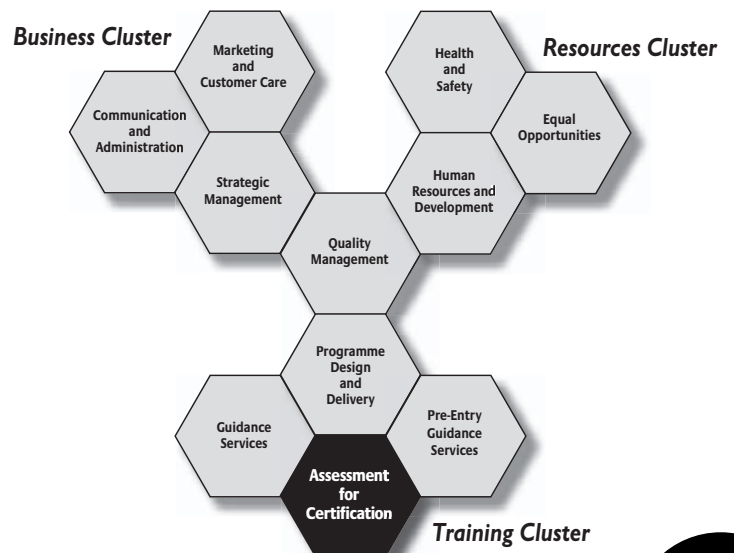
There should be an internal verification system to monitor the quality of design and operation of assessment instruments and methods and to check that the design of assessment and evaluation of candidates' work is consistent across all assessors for an award. Corrective action should be taken promptly where identified by the internal verification system.

The appeals system should make clear to candidates the grounds on which appeals can be based, the mechanism for appeals and the timescale within which the mechanism operates (as defined by the organisation).

When the external verifier visit is to take place, evidence of candidates' work, of assessors' judgements of that work and of internal verification should be available. Corrective action should be taken promptly where identified by the external verifier:

There should be a mechanism for systematic review of assessment and internal verification so that necessary refinement to programme design or delivery can be effected.

Responsibilities for assessment should be clearly allocated. There should be evidence of the systematic review of the assessment system.





S Q M S S T A N D A R D S

ASSESSMENT FOR CERTIFICATION – STANDARD OVERVIEW

10. Assessment for certification confirms that the learner has achieved the standards required by the awarding body for the award.

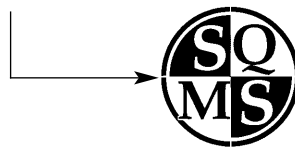
- a) Does the organisation and/or its subcontractor(s) have awarding body approval to run all the awards they offer?
- b) Is the evidence of candidates' work accurately judged by assessors against the awarding body standards required for the award?
- c) Are the evidence of candidates' work, records of achievement, records of assessors' judgements and records of internal verification retained in accordance with awarding body and client requirements?
- d) Is there an effective and accessible system of appeals?
- e) Are learners registered, within the prescribed period, with the appropriate key bodies for all the elements of their programme?

STANDARD MET	
YES <input type="checkbox"/>	NO <input type="checkbox"/>
Management/ Staff Responsibilities	

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S Q M S S T A N D A R D S

ASSESSMENT FOR CERTIFICATION – CRITERIA

COMMENTS & ACTION POINTS

10. Assessment for certification confirms that the learner has achieved the standards required by the awarding body for the award.

POINTER MET
YES NO

a) Does the organisation and/or its subcontractor(s) have awarding body approval to run all the awards they offer?

- Awarding body approval documents.
- Up-to-date copies of certificates of approval.
- Procedures for monitoring continued organisational compliance with awarding body criteria for internal verification, for approval as a centre and for approval to offer specific awards.

● Other:

POINTER MET
YES NO

b) Is the evidence of candidates' work accurately judged by assessors against the awarding body standards required for the award?

- Data on staff review for consistency of demands made on candidates and judgements made (e.g. programme team review, staff and peer review).
- Evidence from internal verifier and/or external verifiers.

● Other:

POINTER MET
YES NO

c) Are the evidence of candidates' work, records of achievement, records of assessors' judgements and records of internal verification retained in accordance with awarding body and client requirements?

- Records of instruments of assessment used and candidates' achievements and examples of assessed work are securely retained for internal and external verification.
- Confirming evidence from internal and/or external verifiers.

● Other:





**ASSESSMENT FOR
CERTIFICATION – CRITERIA**

d) Is there an effective and accessible system of appeals?

POINTER MET
YES NO

- The appeals system includes the appeals mechanism, clearly defined grounds for appeal and the timescale for the appeals mechanism to progress.
- Evidence that the appeals system has been communicated to all staff and candidates.
- Evidence that the appeals system is accessible to all candidates within stated time limits (as defined by the organisation) and available for scrutiny by an external agency (if applicable).

● Other:

POINTER MET
YES NO

e) Are learners registered, within the prescribed period, with the appropriate key bodies for all the elements of their programme?

- Evidence of accurate and complete: awarding body, NTO and candidate registration documents.
- Confirmation of candidate registration from awarding bodies.
- Evidence that candidate registration conforms to the awarding body, NTO and client criteria.

● Other:

COMMENTS & ACTION POINTS

[Large grey rectangular area for entering comments and action points]





In many cases you will be using SQMS to satisfy external bodies that your organisation meets certain quality criteria. This may be for a variety of reasons, e.g. in order to gain approval to offer awards or to gain a training contract. In this circumstance it is usual for the external body to undertake or require a confirming process to attest the accuracy of an internal audit.

The process of external auditing and dealing with external auditors is dealt with in the publication *Scottish Quality Management Systems: Arrangements for External Auditing and Credit Transfer* (organisations should make sure they have the latest issue of this document). Here the focus is on the operation of internal auditing.

The process of conducting an internal audit within an organisation is summarised in Figure 2 and elaborated in the following pages.

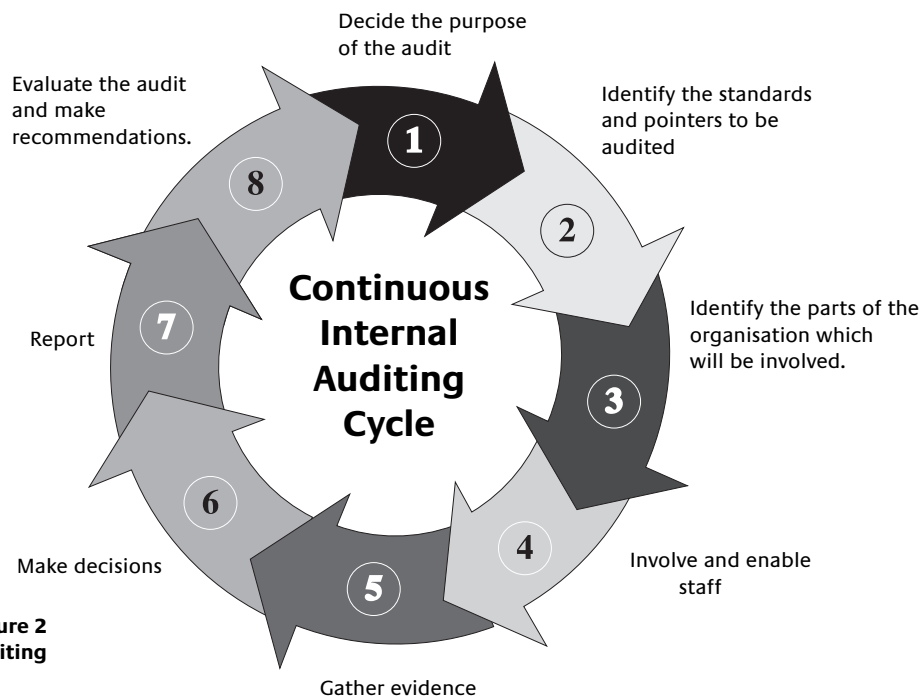


Figure 2
The process of internal auditing



1. DECIDE THE PURPOSE OF THE AUDIT

One of the most important stages of the audit process is to establish its purpose. If the purpose is unclear or ill-defined then the potential benefit that can be accrued to the organisation by carrying out an internal audit will be lost.

The organisation/internal auditor has to decide what the purpose of the audit is. Is it for:

- Contracting with LECs and other funding bodies
- Seeking approval from an awarding body (e.g. Scottish Qualifications Authority, City and Guilds, British Horse Society, etc.) so that the organisation can offer a selected range of qualifications
- Seeking devolved responsibility from the Scottish Qualifications Authority in a quality contract
- Working towards Investors in People, BS EN ISO 9001 or another quality standard
- Accounting to boards of management and funding bodies
- Assisting organisational and quality development in education and training?

It is good practice to record the purpose of the audit, for future reference by the auditor, in order to keep the focus of the audit in the right direction.



2. IDENTIFY THE STANDARDS AND POINTERS TO BE AUDITED

Steps 2 and 3 of the continuous internal auditing cycle involve defining the scope of the audit. The scope defines the breadth and depth of the audit and is established as a direct result of defining the purpose of the audit.

- When carrying out the internal audit the focus of the audit has to be controlled to suit its purpose as defined under step 1.
- The organisation/internal auditor has to decide which standards and pointers will be included in the audit.
 - The SQMS standards pages could be used to identify the standards and pointers which you decide to include in your audit.
 - The introductions to each standard provide guidance on the content of the standard.
- For organisational development purposes, the focus of the audit (i.e. all standards and pointers or a sub-set) will be determined by organisational needs and development strategy. Certainly in large organisations it would be unusual to apply the whole audit to the entire organisation. Rather, over a number of years, there could be a complementary suite of audits, some organisation wide, some section based.

An SQMS internal audit schedule PI has been included to assist the auditor in planning the audit.

It should be noted that the SQMS standards and pointers cover the interests and requirements of a number of bodies. This implies that if the organisation has all the suggested lines of evidence (or equivalent evidence) for all of the standards and pointers, in a form which satisfies the external auditor as to its substance and quality, then the organisation will be in a strong position to go forward for approval by an awarding body. For example City and Guilds, the Scottish Qualifications Authority (or, in the case of experienced centres, to seek devolved responsibilities from SQA), Investors in People, BS EN ISO 9001, etc. Evidence might have to be tailored and marshalled according to the rules and procedures of these bodies.



3. IDENTIFYING THE PARTS OF THE ORGANISATION INVOLVED

Steps 2 and 3 of the continuous internal auditing cycle involve defining the scope of the audit. The scope defines the breadth and depth of the audit and is established as a direct result of defining the purpose of the audit.

- The organisation/internal auditor will have to decide which sections or departments of the organisation will be involved. This will depend on the purpose of the audit and on the standards and pointers which are being audited.
- The organisation will require evidence that not only the organisation itself but also any subcontractors for education and training achieve the relevant standards and pointers.
- If the organisation is seeking awarding body approval to offer specific awards in a number of vocational areas it will be involved in a fairly extensive exercise.
- Information will need to be collected at organisation level and from all the training/teaching sections/departments involved in the awards.
- Decisions can be recorded on P2: Audit Plan.



4. INVOLVING THE STAFF

If the audit is to be successful both in terms of the report fulfilling its purpose(s) and the development which it stimulates, the purpose of the audit must be acceptable to the staff and they must see the advantage for the organisation and its learners. This implies briefing, consultation, and involvement of everyone in some way. Remember that subcontracted service staff may need to be involved also.

The organisation/internal auditor should address the following questions:

- Who will manage the audit?
- What roles will staff play?
- Who will be involved in planning overseeing audit activities?
- Who will prepare for the audit by collecting evidence?
- Who will complete the audit instruments?
- By what means will you secure the commitment of staff?
- What are the staff development implications?
- What are the communication needs at various stages of the audit?
- How is the independence of the auditor maintained?

Plans for managing the audit and involving and motivating staff can be recorded on form P2.

5. GATHERING EVIDENCE

SQMS LINES OF EVIDENCE

There are many different types of evidence which can form the basis on which judgements can be made as to whether an organisation meets the requirements of the quality standards and pointers.

The SQMS standards criteria contain suggestions on the kind of evidence that supports each pointer and help to show that the organisation is achieving the standard. Internal auditors may mark the standards criteria document to indicate that they have evidence as suggested. There is also an open section for other evidence relevant to the organisation; this should be filled in by the internal auditor(s) where needed.

There are two main lines of evidence when conducting an SQMS audit:

1. Data on client, learner, and staff satisfaction
2. Documentary evidence.

1. DATA ON CLIENT, LEARNER AND STAFF SATISFACTION

Data from surveys or discussion with clients, learners, and staff about the quality of services is the key form of evidence for many pointers. Data can be collected by structured questionnaires, through discussions or less formally through testimonials and personal descriptions.



Data collection, when carefully planned, need not be onerous. It is likely that one questionnaire for samples of clients and one for learners set up on a rolling basis could cover 90% of evidence on clients' and learners' satisfaction. External agencies may provide guidelines on sample size, otherwise the organisation should take care to ensure that statistics are based on a sufficiently sized sample. For example, if an organisation had less than 25 learners, they should probably all be asked for their views on the pointer(s) being considered. Larger organisations should aim for a sample of around a third of the total, with attention given to the proportions of sub-groups (e.g. males and females) included in the sample. Similarly, decisions are needed about the amount of learning, teaching, or assessment materials or number of examples of learners' work which should be evaluated.

2. DOCUMENTARY EVIDENCE

Documentary evidence is usually easier to provide than evidence of client, learner, and staff satisfaction and is essential to show that the organisation has a quality management system. Written documentation is the basis for BS EN ISO 9001 recognition and the normal expectation of good practice in an SQMS audit is that there are written policies and procedures for all key areas of practice.

A written format helps to ensure that the organisation's policies and procedures are sound and greatly increases the likelihood that they are understood and used consistently.



U S I N G S Q M S

The kinds of documents suggested as evidence in SQMS include:

- Development and business plans, policies, and procedures
- Programme information, including methods of learning and assessment
- Examples of learners' work
- Placement information
- Notes of meetings (e.g. management or programme team meetings) which provide evidence of planning and action taken as a result of monitoring and review
- Records such as those on recruitment, selection, induction, guidance, attendance, learner success, staff development, safety risk assessments and many others.
- Statistical data (e.g. on performance indicators).

Internal auditors should note that the existence of documents is not in itself evidence that a pointer has been met. The content of the documents should also be examined (e.g. SQMS contains a pointer concerned with checking that responsibilities for functions are clearly allocated. Job descriptions are suggested as potential sources of evidence – but samples will need to be checked to ensure that job descriptions do indeed set out responsibilities).



EVIDENCE THROUGH PERFORMANCE INDICATORS

It is not necessary to collect all the evidence suggested for each pointer – indeed often two levels of evidence are suggested, with documentation requirements included with the particular interests of BS EN ISO 9001 seekers in mind. However, organisations should seek to provide more than one source of evidence for each selected pointer (e.g. evidence from a written procedure should be backed up by some evidence from staff or learners or both that the procedure is effective).

A key source of evidence suggested is that there is a systematic use of appropriate performance indicators (PIs) which provide, usually in a quantitative form, information about resources deployed and the education and training services provided.

Performance indicators are best used as a balanced set: commonly used PIs include measures of client and learner satisfaction, learner success, post-programme destinations, resource levels (unit costs, staff/learner ratios, etc.) and the quality of learning and teaching.



USING SQMS

Figure 3 provides examples of performance indicators which might be appropriate for SQMS.

The first six indicators are recommended as a good set of primary performance indicators. They are likely to provide a good picture of the extent to which any education and training organisation has succeeded in achieving its aims and objectives. They may be supplemented by a range of other, secondary indicators, useful in providing detailed information and suggesting solutions where primary indicators suggest problems.



Where there is discretion in the selection of indicators, those chosen by the organisation should arise naturally out of its operation. The indicators should be based on factors in the control of the organisation and be acceptable to those whose work is being evaluated.

They should stress results or outcomes and offer minimum opportunity for manipulation by the staff being evaluated. They should be associated with targets which are realistic and challenging.

PRIMARY PERFORMANCE INDICATORS	SECONDARY PERFORMANCE INDICATORS
Learner success (e.g. SVQs, ECDLs achieved)	Staff satisfaction
Post-programme success (e.g. fulltime employment, higher qualifications)	Programme cost
Client satisfaction	Staff/learner ratios
Learner satisfaction	Learner progress
Quality of learning and teaching profile	Learner attendance
Unit costs profile	Learner enrolment (e.g. success in meeting target numbers)
	Average group size
	Utilisation of accommodation
	Participation rates for induction
	Participation ratios for staff development
	Recruitment of diverse groups of learners (e.g. ethnic minorities, etc.)
	Accident prevention statistics

Figure 3 Examples of Performance Indicators



PROVISION FOR ADDITIONAL SUPPORT NEEDS

Special provision for learners with additional support needs raises some particular issues with the use of performance indicators. These fall into two main areas:

1. The identification of appropriate indicators (e.g. Evidence of achievement of individual learning goals)
2. Some potential challenges in gauging learner and client satisfaction.

1. THE IDENTIFICATION OF APPROPRIATE INDICATORS

The first issue arises because much provision for learners with additional support needs aims to develop personal rather than vocational skills and does not always lead to nationally recognised qualifications. When this is the case, indicators such as post-programme success must be modified to take account of the purposes of the programme as progression to employment or further education opportunities may not be appropriate to the aims of the provision. Similarly if learner success cannot be measured in terms of nationally recognised qualifications then other measures must be devised which are consistent with the purpose of the programme concerned.



2. POTENTIAL PROBLEMS IN GAUGING LEARNER AND CLIENT SATISFACTION

The second issue centres on the difficulties that some people with additional support needs may have in expressing learner satisfaction. Some are able to express views openly and this should be encouraged and given a framework in which to operate. Others might lack the confidence or fluency of language to express their views. However, they will have views which must be sought sensitively and may often be gathered through informal conversation rather than in a formal framework. Sometimes views might be gathered through an intermediary. Many programmes for people with additional support needs are arranged in conjunction with specialist services such as social work departments or health boards and staff from these institutions may be able to assist in gathering information on learner satisfaction. Satisfaction can also be gauged indirectly through changes in behaviour patterns, for example, growth in confidence.

One other issue should be mentioned in this context. In most circumstances the failure to achieve adequate measures of success is seen to reflect deficiencies in the providing institution. In the case of learners with significant additional support needs such failures can often be deflected by the institution and attributed to the inherent difficulties of the learner. It is important that appropriate goals, which are both attainable and challenging, are set for people with additional support needs and that progress towards these goals is measured and recorded.



6. MAKING DECISIONS

The next step is making judgements and decisions. The questions that need to be answered are:

- Who will decide whether the pointers are met and whether the organisation has achieved the standard it aspires to
- What further development is needed
- What examples of excellence, innovation, and creative work should be highlighted
- What action should be taken?

The self audit process obviously requires these decisions to be made by people from the organisation itself. A sound approach is to involve a small group of people who know the area being audited but are not all directly involved.

Using professional judgement, internal auditors will decide whether the evidence is sufficient for a "Yes" decision in relation to each pointer. "Yes" is the response when there is clear evidence from more than one source that the pointers indicate achievement of the standard. A "No" decision is the initial response when internal auditors are doubtful.



Auditors should then decide whether to probe more deeply, i.e. follow up with further questioning and fact-finding. This may lead to an eventual "Yes" response. If doubt persists the correct response is pointer/standard Not Satisfied. Where there is a deficiency, this should be stated as a description in the Comments/Action points column of the SQMS standards criteria page. This column may also be used to indicate plans to close the gap between a "Yes" and "No" decision. The action point should make it clear whether the gap is small or large and the priority which will be given to closing it. It is worth noting that SQMS does not require crude measures or scores. It relies on the accuracy of the description of quality in the organisation backed up by verifiable evidence.



7. REPORTING

The focus here is on ways of compiling the internal report. Reporting for other purposes such as contracting with LECs will involve arrangements which are not dealt with here.

Internal auditors will have investigated their allocated areas, collected information and collated it. They will have completed the audit instruments to provide information for each selected pointer, including a note of the evidence available (and perhaps its location) and key findings about action needed.

The information recorded on the various audit overviews can be summarised using form P3: Audit Report.

Figure 4 opposite illustrates the kind of contents which might be included in such a report.



ORGANISATION

Name, address, contact people.

PURPOSE OF AUDIT

Aim, rationale, objectives.

PROCEDURES

Indication of the standards and pointers selected for the audit and the parts of the organisation involved.

Summary of auditing activities.

Auditors used.

SUMMARY OF FINDINGS AND ACTION PLANNED

For example:

- *Statement linking the audit to diagnosis of readiness in relation to Investors in People and BS EN ISO 9001*
- *Summary of key action points.*

Figure 4: Audit Report

8. EVALUATING THE AUDIT AND MAKING RECOMMENDATIONS

Once the internal audit is completed there should be a debriefing of everyone involved to establish whether the audit aims have been met as efficiently and effectively as possible. Recommendations for undertaking internal audits in the future should be made on, e.g. the focus, scope, processes, and reporting procedures of the audit.

It is at this stage that any audit findings need to be actioned and addressed. The actions taken to address the findings will need to be recorded as complete.

At the next internal audit cycle it is good practice to re-evaluate the actions you have taken to show, or otherwise, that the process has improved.



U S I N G S Q M S

P1: SQMS INTERNAL AUDIT SCHEDULE

Organisation..... Audit Year.....

	January	February	March	April	May	June	July	August	September	October	November	December
Strategic Management												
Quality Management												
Marketing and Customer Care												
Human Resources and Development												
Equal Opportunities												
Health and Safety												
Communication and Administration												
Guidance Services												
Programme Design and Delivery												
Assessment for Certification												





USING SQMS

P2: AUDIT PLAN

Organisation..... Audit Year.....

Purpose(s) of audit		Focus			
Activities	Person(s) responsible	Operational Notes	Target Dates		
			Start	Interim	Completion
a) Briefing centre staff and awareness raising; selecting people to carry out the audit and identifying auditing training needs					
b) Collecting evidence and making decisions					
c) Reporting					
d) Evaluating the audit and making recommendations					

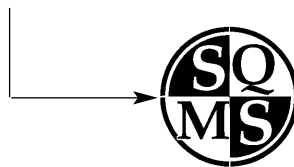




USING SQMS

P3: AUDIT REPORT

Organisation
Purpose of audit
Procedures
Summary of findings and action planned



Matrix of SQMS relationships with other standards

All the SQMS standards and pointers are required by the Local Enterprise Companies.

KEY TO CODES

In the SVQ column of the matrix the references are matched to the centre approval requirements specified by the Scottish Qualifications Authority for SVQ awarding bodies. An organisation which can meet the



standards and pointers which have references in the SVQ column should be able to provide evidence which will meet the requirements of all SVQ awarding bodies (see References for further details on arrangements for external auditing and credit transfer).

In the Investors in People column, the references are to the new version (2000) of the Investors in People standard (see References for further details).

In the SFEFC column, the references are to the quality requirements for the Scottish Further Education Funding Council.

In the BS EN ISO 9001 column the references are to clauses and sub-clauses of BS EN ISO 9001 Quality Systems – model for quality assurance (see References for further details).

As new standards are mapped against SQMS they will be included in the matrix of SQMS relationships with other standards and issued as appropriate.

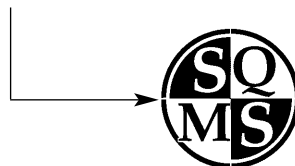




S U P P L E M E N T S

MATRIX OF SQMS RELATIONSHIPS WITH OTHER STANDARDS - AMENDED JANUARY 2004

SQMS STANDARDS 2001	SVQ	IIP (2000)	SFEFC	ISO Standards (2000)
STRATEGIC MANAGEMENT				
1a			●	
1b			●	5.1,5.3
1c			●	
QUALITY MANAGEMENT				
2a			●	4.1,4.2.1,4.2.2,5.3,5.4,2.7.1
2b			●	4.2.3
2c			●	4.2.3,8.5.1
2d			●	8.1
2e			●	5.5.1
2f			●	5.3,5.6.1,5.6.2,5.6.3,8.2.2,8.2.3,8.2.4
MARKETING AND CUSTOMER CARE				
3a		●	5.2,7.2.1	
3b			●	5.2
3c			●	
3d			●	7.2.1,8.2.1
HUMAN RESOURCES AND DEVELOPMENT				
4a ●		●	5.5.1,6.1	
4b		●	●	6.2.1,6.2.2
4c	●		●	5.5.1,6.2.2
4d	●	●	●	4.2.4
4e	●	●	●	6.2.2
4f	●	●	●	6.2.2
4g	●	●	●	4.2.2,6.2.2
EQUAL OPPORTUNITIES				
5a			●	
5b	●	●	●	
5c			●	
HEALTH AND SAFETY				
6a				
6b				
6c				
6d				





S U P P L E M E N T S

MATRIX OF SQMS RELATIONSHIPS WITH OTHER STANDARDS - AMENDED JANUARY 2004

SQMS STANDARDS 2001	SVQ	IIP (2000)	SFEFC	ISO Standards (2000)
HEALTH AND SAFETY				
6e				
6f				
6g				
6h				
COMMUNICATION AND ADMINISTRATION				
7a	●		●	5.5.3
7b	●		●	
7c			●	
7d			●	7.2.1,7.2.2,7.2.3
7e			●	7.4.1,7.4.2,7.4.3
7f	●		●	4.2.4
GUIDANCE SERVICES				
8a	●		●	
8b	●		●	
8c	●		●	
8d	●		●	
8e	●		●	
8f	●		●	
PROGRAMME DESIGN AND DELIVERY				
9a		●	7.2.1	
9b			●	7.3.6
9c			●	7.2.3
9d			●	6.1
9e	●		●	6.3
9f			●	7.2.1,7.2.2,7.2.3
9g			●	
9h			●	
ASSESSMENT FOR CERTIFICATION				
10a		●		
10b			●	
10c			●	
10d	●		●	
10e			●	



Health and Safety

GUIDANCE NOTES

This guidance note provided for Standard 6 – Health and Safety is intended for all types of organisations in both the public and private sectors. It will help ensure that the health and safety risks arising from organisational activities are properly managed.

The intention of the guidance note is to provide sufficient information in relation to what may be expected in order to satisfy the requirements of the standard and also to provide the basis of an internal review/development tool.

The standard is divided into 8 pointers, each pointer relates specifically to a particular focal area:

- Pointer a)** – Safety Management Systems.
- Pointer b)** – Registration and Insurance.
- Pointer c)** – Workplace and Work Equipment.
- Pointer d)** – Emergency Arrangements.
- Pointer e)** – Staff, Learners and Others.
- Pointer f)** – Placement Providers.
- Pointer g)** – Provision of a service by/from a third party other than a placement provider.
- Pointer h)** – Monitor, Review and Performance Measurement.

Each pointer is then further divided into sub-pointers [●] it is at the sub-pointer level that guidance is provided.



It must be emphasised that the information provided is only guidance and does not provide a definitive audit tool. The content of the guidance note should be adapted to suit the nature of activities and the size of the organisation.

The information contained in this guide is correct at the time of publishing. Organisations must ensure that they are using the latest edition of any relevant Health and Safety legislation, regulation, code of practice or HSE guidance note.



Pointer a) Does the organisation have suitable health and safety management systems?

- **Evidence that the organisation implements a current, up-to-date health and safety policy.**

GUIDANCE

A health and safety policy statement sets out how health and safety is managed in an organisation. It is a unique document that shows **who** does **what** and **when** and **how** they do it.

The health and safety policy statement is the starting point to manage health and safety in the workplace. *By law if five or more people are employed by an organisation then there must be an appropriate recorded health and safety policy as specified by the Health and Safety at Work etc. Act 1974 section 2(3).* The policy contains information in relation to a statement of general policy on health and safety at work and the organisation and arrangements for putting that policy into practice.

For “small” firms the Health and Safety Executive have produced a guidance leaflet titled “Stating your Business, Guidance on preparing a Health and Safety Policy Document for small firms”.



Help is also available on the HSE web page, www.open.gov.uk/hse/hsehome.htm, this will assist with preparation.

It is reasonable to expect that a health and safety policy will include the following:

- A **Statement** signed and dated by the senior person within the organisation.
- **Organisation** – clearly identifying health and safety responsibilities of all employees. This should also state who is the nominated person responsible for health and safety.

(Note - health and safety responsibilities may be included in job descriptions but if sufficient information is provided in the policy this will suffice).

- **Arrangements** – the arrangements should include, how things are done and implemented. This can be achieved by use of work instructions or procedures contained within the policy or held in a separate manual. The requirement for the work instructions or procedures should be based on the degree of “risk” within the organisation.



- **Evidence which demonstrates that an appropriate risk assessment programme is in place and is effective.**

GUIDANCE

Risk assessments are a fundamental part of any safety management system and should be in place for any activity where there is a potential for risk of injury to employees, contractors, visitors, the general public or damage to property/equipment.

There is not a legal requirement to record a risk assessment where an organisation employs less than 5 people. However, for the purposes of SQMS certification a little further clarification is required:

- In relation to employing less than 5 people. Recorded risk assessments will be expected where an organisation is “responsible” for a cumulative total of 5 or more people. The cumulative total will include staff (both full time and part time) and learners – always remember that a duty of care is owed to the learner.
- In the event that a significant risk is present the auditor will always advise that a risk assessment should be recorded, even if the organisation employs less than 5 people.

The system will facilitate a mechanism to appropriately assess, record and review risk assessments. There are a number of “mandatory” risk assessments, some of which are listed below, where recorded risk assessments are required. In addition there are a



number of other activities that will probably require a specific assessment to be conducted and recorded, for example:

- Fire (see Pointer D)
- COSHH (see Pointer C)
- Manual Handling (see Pointer C)
- Display Screen Equipment / Workstations
- Work Place and Work Equipment (see Pointer C)
- Noise
- Other areas of significant risk

The assessment must be relevant to the organisation and directly proportional to the risks/hazards and control measures associated with the activity. Risk assessments must be either “adequate” or “suitable and sufficient”. The statements mean the same thing and tell you that you do not have to be overcomplicated. In deciding the amount of effort you put into assessing risks, you have to judge whether the hazards are significant and whether you have them covered by satisfactory precautions so that the risks are small. Identified control measures should be reasonable/practical and must be implemented.

The following HSE publications provide appropriate guidance and advice for conducting and recording risk assessments:

- Management of Health and Safety at work: Approved Code Of Practice (L21 : ISBN 0 7176 2488 9)
- Five steps to Risk Assessment (INDG163)
- Five steps to Risk Assessment: Case studies (HSG183)
- A guide to Risk Assessment requirements – Common provisions in health and safety law (INDG218)



- **Evidence, including views from staff and learners, which demonstrates that an appropriate induction programme is implemented.**

GUIDANCE

All new starts including staff/learners and site visitors must be provided with an appropriate induction programme. The induction programme must be relevant to the organisation and will include information in relation to, for example:

- Prohibitions/Restrictions, e.g. smoking policy, equipment not to be used, out of bounds areas etc.
- Welfare facilities, e.g. domestics, toilets, changing areas etc.
- Accidents, e.g. who to report to and how, and where to get first aid treatment if required.
- Information in relation to any specific/known risks/hazards on site. Also what to do in the event of a risk/hazard being identified.
- Emergency procedures, e.g. what the fire evacuation alarm sounds like, the best means of escape, where to assemble and the time of any known alarm tests.
- Any other relevant site specific information/instruction.

A record should be kept that specifies, e.g. who received the training, topics covered during induction, who delivered the training and when it was delivered.



Induction will probably have to be provided at a number of different stages leading up to and during delivery of training. Although the following examples will not always be required, they illustrate when induction should be provided:

- On arrival at the training provider's and/or college premises
- On arrival at the placement/employer's premises
- On arrival at a department within the employer's/placement premises
- On arrival at the particular work area/shop floor; e.g. construction site, machine shop etc.

Note

There may be specific induction requirements defined by the terms of LEC contracts held, e.g. most LECs require learners to be issued with a copy of the "Be Safe" booklet during induction.

- **Evidence to demonstrate that an appropriate and effective incident reporting, investigation and recording system/procedure is employed.**

GUIDANCE

To demonstrate that appropriate systems are employed it would be reasonable to expect that the following are available:

- A readily accessible, in use and correctly completed Accident Book.
- Records of accident investigations. The investigation should identify the root cause and the actions required to introduce preventative measures. Although there is not, as yet, a legal requirement to record accident investigations, this is considered best practice and is therefore desirable.

- Reportable incidents, as defined in the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), must be covered by a suitable procedure for reporting to the enforcing authority and records of any notifications held.
- Incident Reports that cover such things as e.g. violence at work and “near miss” incidents.

If the organisation has LEC funded trainees a system will need to be in place for reporting incidents to the LEC in accordance with LEC guidance.

Pointer b) Are the premises registered with the appropriate enforcing authority and are all staff, learners and visitors covered by suitable insurance.

- **Evidence of registration with the HSE, Local Authority Department and any others as appropriate.**

GUIDANCE

The organisation should be able to demonstrate that steps have been taken to register with the appropriate enforcing authority. The evidence should include communication between both parties to confirm registration requirements.

Note. Premises, which should be registered, are: Factories and significant construction sites to the HSE; Shops and offices to the local authority. “Any others” can be defined, e.g. Environmental Protection Agency.



- **Where applicable a current valid fire certificate or evidence of correspondence with the Local Fire Prevention Officer.**

GUIDANCE

Similar to the requirements of the above pointer but this pointer deals exclusively with fire certification requirements.

In general terms fire certification is required in the following instances:

- There are 20 or more people located on a ground floor
- There are 10 or more people on any other floor other than the ground, e.g. basement, 1st floor etc.
- Activity based, e.g. welding, fabrication, paint spraying etc.

Note

Particular attention should be paid to fire certification especially where activities and/or building design/layout has changed.

- **Completed HSE Law Poster on display or evidence that the leaflet outlining British health and safety law has been issued.**

GUIDANCE

There is a legal duty to display the current HSE Law Poster in a prominent position in each workplace or alternatively provide a copy of the leaflet outlining British health and safety law to all staff and learners.

Evidence for this pointer can be satisfied in two ways.

- Display fully completed HSE Law Poster. It will be expected that the “white boxes” are filled in with appropriate detail in relation to safety representatives, competent people appointed by the employer and registration details.



- Confirmation by portfolio, induction materials and/or interview that the leaflet outlining British health and safety law has been issued. This leaflet is available at www.hse.gov.uk/pubns/law.pdf.

- **Employer's Liability (Compulsory) Insurance/Public Liability Insurance which includes cover for learners.**

GUIDANCE

Employer's Liability (Compulsory) Insurance certificate should be on display in a prominent position in each workplace. Where Public Liability Insurance cover is appropriate it will be detailed in the Insurance Policy Schedule.

The organisation should ensure that the insurance company has been informed that learners are present and/or involved in company activities. Checks for any other appropriate insurance requirements will also be conducted, e.g. contract work, specific risks etc.

- **Suitable insurance cover for the use of company-owned vehicles including a mechanism to check the validity of the user's licence.**

GUIDANCE

Suitable insurance cover for personnel using company-owned vehicles must be available and in date for all user groups. The organisation should also employ a system



whereby the user's licence is checked on a regular basis so as to ensure that the insurance policy requirements do not exclude drivers from policy cover; e.g. accumulation of points, age barring etc.

- **Mechanism/process to check the validity of insurance, licence and MOT (where applicable) for staff and learners using their own vehicle for company business.**

GUIDANCE

Where an employee or learner (company representative) is conducting business on behalf of the organisation, the organisation owes a duty of care to the company representative and "others". Others can be defined as an individual, group or body that may be affected by the act or omission of said company representative.

In this instance it is extremely prudent for the organisation to implement a system to check, as far as reasonably practicable, the validity of the company representative's driving licence, insurance and MOT where applicable. When checking insurance ensure that there is cover for company business – normal fully comprehensive insurance does not automatically provide this type of cover.

- **Pointer c) Are appropriate systems in place to provide and promote a safe place of work, work equipment and safe use, transportation and storage of materials/substances?**

The following guidance must be adapted to suit the nature of activities and the sheer physical size of the organisation.

S U P P L E M E N T S

Safety systems relating to the workplace, work equipment and materials/substances should be proactive rather than reactive, e.g. the maintenance of work equipment should be planned and systematic to ensure it is safe and reliable rather than only maintaining the equipment when it breaks down.

NOTE : Maintenance of work equipment applies to both fixed and portable equipment.

WORKPLACE

- **Evidence, including views from staff and learners, which demonstrates that a safe and healthy workplace is provided.**

GUIDANCE

This is an extremely robust and all-encompassing pointer. To suitably assess achievement a “holistic” view of all of the organisation’s premises and operations will be required. The following list is not exhaustive but is intended to provide a fair indication of what should be considered:

- Is general housekeeping and cleanliness of a suitable standard?
- Are floors/walkways of a suitable condition and segregated from clearly defined and organised traffic routes?
- Are heating, lighting (including natural), ventilation and floor space adequate?
- Are systems in place to reduce the risks from falling objects or falls from height?
- Are windows, including those in doors/walkways, of a suitable construction/design?



- Suitable access/egress including provision of disabled facilities where appropriate.
- Are safety signs in relation to premises, e.g. fire action, emergency evacuation, first aid, warnings for electricity, traffic, overhead appliances etc., clear, unambiguous and appropriate?
- Are welfare facilities; e.g. rest, toilet, washing, eating, access to drinking water; changing, clothes storage etc., suitable and sufficient?
- Are maintenance (including mandatory inspection/test) procedures and controls appropriate for the work place and premise, e.g. pressure systems including compressed gas and electrical systems, hand rails and stairs, boilers, heating and ventilation systems, lifting equipment including lifts and escalators, the fabric of the building, power presses?
- **Are appropriate controls in place to promote the health, safety and welfare of employees who discharge their employer’s responsibilities away from the organisation’s premises?**

GUIDANCE

If it is recognised that a person’s home is their normal place of work then consideration must be given to the risks associated with their work activities and suitable control systems by means of assessment. Consideration should be given to, e.g. other people that could be affected by the activities, maintenance of company supplied work equipment, suitability of the work station, additional/supplementary instruction and training etc. It would be advisable that all such assessments are recorded.



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HSE publication "Homeworking – Guidance for Employers and Employees on Health and Safety" (INDG226) provides guidance on what should be considered.

Other factors involved in this pointer include peripatetic staff, e.g. assessors or verifiers, who work away from the organisation's premises. Consideration has to be given to the risks, hazards and controls associated with "lone working". HSE publication "Working alone in Safety – Controlling the risks of solitary work" (INDG73) provides guidance on the considerations to be taken.

WORK EQUIPMENT

- **Evidence, including views from staff and learners, which demonstrates that appropriate controls are in place and routinely monitored in relation to work equipment.**

GUIDANCE

- **Provision of Work Equipment.**

Work equipment is any item of equipment used by persons as part of their work or training. The equipment should be suitable for the purpose for which it is provided and should not be misused.

If the work equipment presents significantly high risks, the use of such equipment should be restricted to persons with appropriate training and knowledge.



If the work equipment has dangerous parts, access will need to be controlled/restricted as appropriate by, e.g. guarding, locking mechanisms, exclusion zones, prohibitions etc.

New work equipment should have the CE mark posted on it, and the user should have a copy of the certificate of conformity provided by the supplier.

- **Use of Work Equipment.**

Significant and specific risks associated with the presence and use of work equipment must have suitable and sufficient recorded risk assessments. The assessments should define the element of risk and specify appropriate control measures for equipment use in the particular working environment.

- **Maintenance of Work Equipment.**

Work equipment should be suitably inspected and maintained to ensure risks are minimised for both the users and other persons who may be affected by its use. Procedures should be in place to ensure suitable proactive maintenance of work equipment is conducted at appropriate intervals. Any such maintenance can only be conducted by suitably trained/competent persons.

Equipment that should have a planned and recorded maintenance schedule includes e.g. ladders, hand tools, powered machinery, lift equipment, fixed and portable equipment (which includes electrical items/systems), transportation equipment etc.

It is reasonable to expect that the employer should be able to demonstrate that they have a management system to monitor that guards and safety devices are maintained: these could be simple checklists.



- **Training in the use of Work Equipment.**

Before any person uses work equipment appropriate training should be provided. The person's ability to use the equipment in a safe manner, so as not to present a hazard to themselves or others, must be assessed whilst determining the individual's competence.

The organisation should be able to demonstrate that such training has been provided. Please note that the use of some specific equipment requires the user to demonstrate an enhanced level of competence with certification achieved, normally through a professional body, e.g. Fork Lift Truck operators.

- **Appropriate supervision.**

Supervision of the work place and use of work equipment is particularly important. A large proportion of work related accidents are directly attributed to the lack of appropriate supervision.

The organisation must demonstrate that the degree of supervision provided is proportional to the risks encountered, the competence and vulnerability of the supervised person, e.g. the equipment operator must demonstrate competence before relaxing the degree of supervision and/or increasing supervision due to use of higher risk equipment.

- **Control mechanisms.**

Control mechanisms employed during the use of work equipment may be numerous and varied. The majority of the controls will be identified during the risk assessment process; these are normally attributed to



the controls associated with the equipment and operation. From a "holistic" point of view the relationship between people, plant/machinery/equipment and the working environment needs to be assessed to determine overall effectiveness and to ensure appropriate controls are in place.

Examples of factors to take into consideration should include:

- *Are safety signs in relation to equipment/process hazards (Noise, Dust, Vibration, Exclusions, Required PPE, Vehicles etc) clear, unambiguous and appropriate?*
- *Is there a requirement to segregate activities, e.g. personnel/pedestrians from vehicles, open flame work from painting etc?*
- *Are only certain people allowed in a specific area or allowed to operate particular equipment, is there a requirement for an exclusion area or prohibitions, e.g. removing keys from fork lift trucks, locking rooms or machines?*

MATERIALS/SUBSTANCES

- **Are systems for the transportation and storage of work equipment and materials appropriate?**

GUIDANCE

This pointer requires "transportation" and "storage" of work equipment/materials to be assessed to determine suitability.



S U P P L E M E N T S

Whilst conducting an assessment there are a number of considerations that are appropriate to transportation and storage requirements, e.g. weight, size, physical state, blocking escape routes/passageways, stability etc.

In particular there are considerations that are pertinent to each individual area, the following provides an indication of the considerations to be taken and is not a definitive list:

Transportation

- Is a manual handling risk assessment required?
- How and when will the item be transported without causing a hazard/risk to others in the area?
- Is there a clearly defined traffic route that is clear from obstructions and segregated from pedestrian access?
- Is the mode of transport, e.g. forklift truck, pallet truck, lifting equipment including overhead cranes etc. suitable for the item being moved and has the operator received appropriate training?

Storage

- Are the shelves/racking suitable?
- Is ventilation required and if so is it adequate?
- Are access control arrangements adequate?
- Are non-compatible materials segregated?
- Are flammable materials, e.g. paint, solvents, stored in suitable areas?



- **Are controls implemented for the use, storage, transport and handling of materials/substances hazardous to health?**

GUIDANCE

In fairly broad terms the objective of this pointer is to promote recognition of the required controls associated with the Control Of Substances Hazardous to Health (COSHH) Regulations. The considerations to be taken are very similar to those discussed during the “Work Equipment” Pointer but the objective is to suitably assess and control materials/substances in use taking the complete work process, work environment and personnel into account.

The use of materials/substances hazardous to health must be assessed to ensure that the risks associated with the use, transport, storage, spillage procedures and disposal are suitably controlled.

It will not be unreasonable to expect a current list of all COSHH substances to be maintained which will include current copies of manufacturer's safety data sheets.

Note: Suppliers of hazardous materials/substances provide data sheets detailing information on the nature of the item, the hazards and recommended procedures for first aid, emergencies, health surveillance etc. This information shall be used to assist in the recording of COSHH assessments and relevant controls in relation to the specific working environment.



Personal Protective Equipment (PPE)

- **Evidence, including views from staff and learners, which demonstrate that management systems for the provision and use of PPE is appropriate and effective.**

GUIDANCE

The provision and use of PPE can only be suitably defined during the process of assessment. In general terms there are two different types of assessment:

- Risk Assessment (Pointer A) – focuses on a process, e.g. using a hand held drill where it may be appropriate to wear goggles to prevent cuttings entering the eyes.
- COSHH Assessment – focuses on the material/substance in use, e.g. welding operations where respiratory protective equipment is required to prevent inhalation of weld fume.

It should be demonstrated that the “process” that requires PPE to be used has been suitably assessed. Arrangements should be in place to ensure that users receive appropriate information, instruction, and training in relation to the use, storage and maintenance of PPE. The user should also receive information in relation to the “limitation” of protection, e.g. what the item will not protect them against.



There will probably be a need to operate and manage a PPE record system. The actual requirements for this system will be defined by a combination of the following:

- Records that identify what item(s) of PPE have been issued, to whom and when.
- Records of any instruction/training relevant to the use and maintenance of PPE should be maintained. The record should contain information in relation to who received the training and when.
- There are some items of PPE that require specific records of maintenance/inspection/test, e.g. air fed respirators.

In the event that the use of PPE has been specified, it is particularly important to ensure that such PPE is used correctly where and when required.

Note: PPE should be regarded as a last option – it is preferable to control the risk at source or avoid the risk altogether where practicable.

Pointer d) Are suitable processes, procedures and equipment in place to cater for any potential emergency situation?

- **Recorded fire risk assessment and evacuation procedures suitable for the environment and learners/staff?**

GUIDANCE

Fire Risk Assessment

In accordance with the Fire Precautions (Workplace) Regulations all organisations are required to conduct and record a fire risk assessment. The assessment must take



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account of the physical nature of the premises, potential sources of ignition, controls in place to minimise the potential for ignition and the personnel that may be affected by fire. The assessment should also consider the diversity of people, e.g. physical ability, age etc.

The organisation's premises and activities will dictate the type of fire assessment required. There are two different "broad" scenarios:

- Generic. Where a general/composite assessment has been conducted of the organisation's premises and activities.
- Task / Risk Assessment specific. Where the potential for fire is included in a task specific assessment, e.g. welding, painting, electrical installation.

It will be expected that all organisations will have conducted a "generic" assessment and "specific" assessments only recorded when the activity warrants such attention.

Please Note. Being in possession of a current valid fire certificate does not negate the requirement for a fire risk assessment.

Evacuation Procedures

It should be demonstrated that the emergency evacuation procedures, e.g. for fire, bomb threats/warnings, radiation etc., are well known, practiced, publicised and where applicable recorded by



procedure. This will be verified during the audit by checking escape arrangements, evacuation notices, procedures as appropriate and interviews with staff and learners. It will be expected that everyone knows exactly what to do, where to go and what to do when assembled at the meeting point – remember this is also applicable to site visitors.

● Are fixed and portable fire appliances suitable by type, number and location?

GUIDANCE

In general this should be considered as an integral part of the fire risk assessment. There are two potential scenarios applicable:

- Where an organisation does not have a fire certificate. Activities, location and personnel should be considered whilst assessing the suitability of fixed appliances, e.g. alarm systems, smoke detectors, spray systems etc, and portable appliances, e.g. extinguishers, fire blankets etc.
- Where an organisation does have a current valid fire certificate. Ensure that everything still complies with the detail of the certificate, e.g. activities, types of extinguishers, numbers of people etc.



- **Are all records pertaining to fire equipment test/maintenance and awareness training available?**

GUIDANCE

Records should be available to demonstrate that fire equipment has been maintained at appropriate intervals and also to identify any specific fire related training provided.

A good way to achieve this is to keep all the information in a "Fire Log Book". The book should include records of:

- Weekly fire alarm tests. With information in relation to test date, which call point was tested and the result, e.g. satisfactory or otherwise.
- Evacuation exercise. This should be conducted on a minimum of an annual basis, or as defined by risk assessment or the fire certificate, with records kept to verify the time/date of the exercise and to record any observations.

Note : For educational establishments, e.g. a college, an evacuation exercise should be conducted at least once a term.

- Fixed and portable appliance maintenance/test. Fixed appliances, e.g. smoke detectors, spray systems, emergency lighting etc., should be tested /maintained on an annual basis or in accordance with the manufacturer's operating instructions.



Portable appliances, predominantly extinguishers, should be maintained on an annual basis. As most organisations arrange for all extinguishers to be maintained at the same time records of the contract, e.g. confirmation letter; invoice etc., will suffice (all extinguishers are individually identified with test stickers).

- Fire training/awareness. Record any specific fire related training, in addition to induction, provided to staff and/or learners. This should include detail in relation to who the training was provided to, what the training was and when delivered.
- To reflect industry best practice a recorded daily check of emergency escape routes should be conducted. Please note that this is not mandatory but is desirable.

- **Are fire/emergency signs suitable and unambiguous?**

GUIDANCE

To a person familiar with the emergency arrangements the following considerations may appear to be common sense. The importance of signage is to provide information to people that are not familiar with the location, or confused, therefore directions and information must be clear, concise and unambiguous.

- Is the Fire Action Plan prominently displayed and is the information, e.g. assembly points, telephone numbers etc, clear and correct?



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- Are the emergency exits clearly and correctly identified, are evacuation route arrows (incorporating a running man logo) pointing towards the nearest safe point of exit and are assembly point signs (where fitted) clear and unobstructed?
- Are fire points, location of extinguishers, alarm points etc., clearly identified?
- Are safe havens, e.g. a location where a disabled person can be left in safety awaiting evacuation by the fire service, clearly identified?

Note : All signs should comply with The Health and Safety (Safety Signs and Signals) Regulations 1996.

- **Is the provision of first aid adequate to meet legal and organisational requirements?**

GUIDANCE

The most effective way to determine this is to conduct an assessment of the organisational activities where numbers of people, type of activities, working hours/shift patterns and geographical spread are considered whilst determining:

- Are there sufficient first aid facilities, e.g. first aid kits, equipment and treatment rooms, provided?
- Is there a process/procedure in place to ensure the appropriate maintenance of first aid facilities and training?



- **Information about what to do in the event of an incident or first aid treatment being required, e.g. by procedure, communication and signage.**

GUIDANCE

Is the action to be taken in the event of first aid treatment being required clearly publicised, e.g. first aid box/treatment room location, where and how to get treatment, who to contact, how to report etc?

- Pointer e) Are suitable systems in place to ensure the health, safety and welfare of staff, learners and others that may be affected by any process, act or omission?**

- **Are risk assessments suitable for the activities undertaken and do they take account of inexperienced staff and in particular learners?**

GUIDANCE

The requirement for this pointer should be read in conjunction with those identified for risk assessment under pointer a.

When conducting a risk assessment it is not only the hazards/risks associated with the process that should be addressed. The following vulnerabilities are often associated with people and may result in additional hazards/risks being realised:

- Age: this can apply equally to young and old but predominantly refers to young people. A young person through lack of maturity can unwittingly expose themselves and others to risks/hazards without realising what they are doing. There are

specific requirements contained within the Management of Health and Safety at Work Regulations 1999 which are fully explained within the approved code of practice (L21 : ISBN 0 7176 2488 9). Another useful source of information is the [website www.young-worker.co.uk](http://www.young-worker.co.uk).

- Physical stature, this has to be considered when allocating jobs, e.g. it would not be entirely prudent to expect a slightly built person to carry out frequent heavy manual handling or someone with restricted movement to be put in a position where fast reflexes were required.
 - Experience, knowledge or training, the considerations associated with these are all similar. Due to a young person's age and lack of exposure to the workplace they can often be unaware of potential hazards/risks. There can also be instances where due to the young person's eagerness to impress they unwittingly expose themselves and others to danger, e.g. drive and operate a forklift truck without appropriate training.
- **Is the level of supervision provided for staff, learners or others appropriate for the nature of activities undertaken?**

GUIDANCE

This pointer is directly linked to the "appropriate supervision" section defined under work equipment in pointer c and also requires to be assessed in conjunction with the pointer above.



Whilst determining how appropriate the level of supervision is the following points should be considered:

- The level of supervision must be proportional to the risks encountered.
- The competence and potential vulnerability of the supervised person must be ascertained.
- The competence of the supervisor must be appropriate to the process.

- **Evidence, including views of staff and learners, that suitable training for the specific task/process has been provided.**

GUIDANCE

Training should be appropriate to the risks/hazards that may be encountered and in direct ratio to staff/learner vulnerabilities.

When training, e.g. induction, has been provided it is not sufficient to assume that everything has been correctly understood or that the information provided will be retained for any given period of time.

It would be expected that some sort of follow up or check is conducted so as to determine understanding and retention as appropriate.

- **Are records of training maintained?**

GUIDANCE

Records that clearly illustrate what training has been provided, who it was provided to, who the provider was, when it was delivered and where appropriate renewal/refresher dates should be maintained.



- **Is sufficient health and safety information provided and updated that is appropriate to the organisation and its activities?**

GUIDANCE

The purpose of this pointer is to ascertain the suitability of the mechanism employed to keep staff, learners or others informed of current/potential hazards and any “changes” that require to be introduced as a result of legislation, regulations or HSE guidance etc.

Appropriate up-to-date H&S information should be provided that details any current or proposed exclusions, prohibitions, do’s, don’ts, potential interferences etc.

Pointer f) Are suitable management systems in place to ensure the health, safety and welfare of learners at placement premises for training and work experience?

- **Evidence that the vetting/monitoring checklists are relevant to the learning/training environments.**

GUIDANCE

The vetting/monitoring checklists employed must be relevant to the learning/training environments. It would not be acceptable to use a “low risk” checklist, e.g. for an administration office, to vet a “high risk” placement, e.g. an engineering workshop.



The “risk factor” associated with the placement will ultimately determine the extent of the type of checks being conducted. At higher risk placements an in depth check of the employer’s safety systems, safe systems of work, risk/COSHH assessment etc. will probably be required but may not be required at the low risk placement.

The checklist should incorporate a mechanism for recording observations/comments and a way to demonstrate that any follow up actions required have been closed out, e.g. that the organisation’s insurance has been renewed by the required date. It should also be signed and dated by the person conducting the check.

- **Evidence which demonstrates that pre-placement vetting is conducted and routinely monitored thereafter to ensure arrangements remain satisfactory.**

GUIDANCE

Vetting should always be conducted prior to the learner being placed and each placement provider must have individual records of the pre-placement vetting visit.

The placement provider must be routinely monitored thereafter so as to ensure that arrangements remain satisfactory. Monitoring frequency will be dictated by a number of elements which will include, e.g. the work experience/ programme being delivered, the “risk factor” associated with the placement provider and any potential vulnerabilities associated with the learner:

Note: The contract held with the placement provider has to specify required health and safety performance standards and these should also be monitored.

The checklist and/or procedure for vetting/monitoring should include a mechanism to ensure that any “follow up” checks are conducted, e.g. on initial vetting it was found that the placement providers’ insurance expires in one month’s time. There should be a follow up action to verify that the insurance policy has been renewed.

Note: Computer generated reports or checklists maintained/held within a computer are acceptable as long as the required principles of vetting/monitoring are incorporated.

- **Is the level of supervision provided by the placement provider appropriate for the nature of activities undertaken?**

GUIDANCE

The principles associated with assessing the level of supervision provided in pointers c and e are directly related to this pointer. The only difference being that the considerations/questions have to be applied directly to the placement provider. In summary points to be considered include:

- The level of supervision must be proportional to the risks encountered.
- The competence and potential vulnerability of the supervised person must be ascertained.
- The competence of the supervisor must be appropriate to the process.



- **Are the staff responsible for conducting ‘pre’ and ‘in’ placement vetting/monitoring occupationally competent to do so?**

GUIDANCE

The person(s) responsible for conducting pre and in placement vetting/monitoring must be occupationally competent to do so. Whilst determining a person’s occupational competence there are a number of considerations that have to be applied:

- The placement provider’s “risk factor”. It would probably not be advisable to expect a person from a low risk background, e.g. administration, to conduct a reasonable vetting/monitoring visit at a high-risk provider, e.g. an engineering workshop.
- The work experience being provided. It may well be the case that administration type work experience is being provided at an engineering workshop. Although the vetting/monitoring will initially focus on the administration type duties etc., it is essential that the person responsible for vetting/monitoring is aware of other hazards/risks that may directly affect the learner as a result of engineering activities, e.g. noise, fume, forklift trucks etc.
- Qualification/experience. Although not absolutely essential in all instances it is advisable that the person conducting the vetting/monitoring should have received some formal recognised H&S training. In some cases a person’s experience is sufficient for them to conduct appropriate vetting/monitoring, e.g. a fully qualified Nursery Nurse vetting/monitoring a Nursery.



- **Are Vetting/monitoring checklists for each placement provider maintained and kept on file?**

GUIDANCE

Quite simply the requirement for this pointer is exactly as the pointer states. Each placement provider has to have an individual vetting/monitoring form. The form has to include detail in relation to the name of the organisation, who conducted the vetting/monitoring, when the visit was carried out, any follow up actions and evidence to demonstrate that follow up action has been taken.

Pointer g) Is there evidence to demonstrate that appropriate systems are employed for the management/control of subcontractors?

For clarity within this pointer the following definitions are applicable:

Organisation: The body to which the service is provided.

Subcontractor: A body providing a service which is not directly employed by the organisation.



When a service is delivered/provided, e.g. cleaning, maintenance, training etc, by a subcontractor the organisation has a duty of care for its employees and others that may be affected by the subcontractor's activities. In addition the subcontractor also has a duty to ensure that its employees or others are not exposed to unnecessary risks/hazards.

As a direct result, where controls are required to manage risks/hazards the responsibility for implementing suitable health and safety systems is shared between the organisation and the subcontractor:

- **Evidence that an appropriate subcontractor vetting/selection process is in place?**

GUIDANCE

Reasonable steps, which will depend entirely on the nature of work to be conducted, should be taken to ensure that a subcontractor is competent to conduct the work in a safe manner prior to the contract being agreed and work commencing.

It would be reasonable, in most cases, to expect the subcontractor to supply, e.g. a relevant safety policy, Risk and COSHH Assessments, insurances and any other proof of competence.

Although this will not absolutely guarantee subcontractor competence it will provide a reasonable indication of the subcontractor's commitment to and compliance with health and safety requirements.

● **Are suitable subcontractor monitoring mechanisms/procedures employed?**

GUIDANCE

Monitoring of a subcontractor's activity is a requirement in order to ensure that they do not expose any person to unnecessary risks/hazards. This should be conducted to confirm that all safety management systems are being complied with, e.g. controls identified by Risk/COSHH Assessment and/or method statements are being adhered to, provision and use of safe work equipment etc.

● **Are subcontractors provided with relevant information in relation to the organisation's activities?**

GUIDANCE

Subcontractors should be provided with all relevant information for their safety and to enable them to conduct their work in a safe manner. There are a lot of considerations to be taken in respect of information to be supplied to a subcontractor but this invariably depends on site conditions, e.g. other activities and work location, when the subcontractor arrives.

The following provides an indication of what sort of information should be supplied to the subcontractor:

- Site specific induction.
- Current prohibitions or hazards.
- Other work activities in the same area.
- Permit to work systems etc.
- Health and safety policy, relevant risk assessments and safe systems of work.



● **Are subcontractors, who deliver training, adequately assessed to ensure that adequate Safety Management Systems are employed?**

GUIDANCE

Subcontractors who deliver training on behalf of the organisation are also under the control of the organisation. As such the organisation is required to verify that the subcontractor has suitable health and safety systems to ensure the safety of the learner:

For SQMS Certification purposes, if the subcontractor has current SQMS Certification for the areas of training concerned it is reasonable to use this as evidence that suitable health and safety systems are employed.

However, if the subcontractor does not have current SQMS accreditation for the area(s) of training concerned then the organisation shall ensure that suitable health and safety systems are in place relating to the learner:

It will be reasonable to expect that a system similar to pre-placement vetting and monitoring, identified at pointer f, is conducted and recorded. Only when the subcontractor has been acknowledged to have suitable health and safety systems can the organisation permit trainees to undertake training.

Any such vetting and monitoring should be conducted by person(s) with suitable competence.



Pointer h) Are processes, procedures and organisational activities adequately monitored and reviewed, incorporating overall performance measurement, to ensure and promote continued development and awareness of H&S?

- **Is there evidence, including staff and learner views, to demonstrate that an effective review process is employed.**

GUIDANCE

A suitable review mechanism should be in place. Reviews of all systems, e.g. assessments, procedures etc., should be conducted and recorded regularly as a matter of course, it is not unreasonable to expect such reviews to be conducted on an annual basis. There are a number of circumstances that will require a review to be conducted outwith the defined frequency. The basic guidelines are that if anything significantly changes, then a review has to be conducted. Changes can take place in relation to equipment, e.g. machinery used; the process, e.g. how a particular task is performed; material, e.g. different chemicals or metals; legislation, e.g. introduction of new regulations or HSE guidance notes; people, e.g. different or new staff/learners who have diverse requirements or capabilities.



It is beneficial to be able to demonstrate that a review has been conducted and changes implemented as appropriate. To do this it would be prudent to maintain a record of all reviews.

- **Evidence that formal planned premise inspections are conducted and recorded on a regular basis.**

GUIDANCE

The whole concept behind this is to have a pro-active approach to Health and Safety Management, exercise a duty of care and to demonstrate that the condition of the workplace, e.g. cleanliness and housekeeping, maintenance of equipment, emergency arrangements etc., are reviewed on a regular basis.

Records of the premise inspection should be kept even if there are no “problems” to report (positive recording) and it is not unreasonable to expect recorded monthly inspections as a minimum. The record of inspection should be proportional to the sheer physical size and nature of the organisation. It would be acceptable for a “small” organisation to record the inspections over a variety of required documents, e.g. escape route examination, fire log book etc.

The record can be as simple as a “check” or “tick” list (that can be derived from the list identified under workplace in pointer c) with sufficient space for comments, observations, required actions and detail of who carried out the inspection and when.

The record of inspection should be relative to the organisation, e.g. by activity, location, geographical spread, hazards and sheer physical size. It is not reasonable to expect a “large” organisation, e.g. a college that caters for

thousands of people with a considerable number of buildings, equipment etc., to include every item, e.g. portable electrical appliance, emergency exit, fire extinguisher etc., at each inspection. In this sort of or similar situation it is reasonable to expect a “rolling” programme of inspection with random samples.

- **Evidence, including staff and learner views, that there is a recognised forum for consultation/communication in relation to health, safety and welfare-specific issues.**

GUIDANCE

One of the best sources of information to determine and measure the effectiveness of a safety management system is to receive feedback from the end user/the people at the “coal face”.

The forum available can take many forms and can include one or a combination of the following, e.g. meetings, discussions, team briefing sessions, safety committee meetings etc. The mechanism available should be available to all, easily accessible, well known and take place on a regular basis.

It is good practice to be able to demonstrate that the forum exists and operates effectively by being able to show records of meetings, briefings, discussions, feedback and any actions that have arisen.

Note : There is a statutory requirement to consult with people in your care (not just employees) in matters relating to health and safety.



- **Evidence that training or development has been delivered or planned as a result of review.**

GUIDANCE

During review it is not uncommon to identify activities/processes that would benefit from training and/or development being delivered to staff/learners. For example a review of accident reports/book shows an increase in the number of recorded back injuries, it is then identified that people involved in the incidents have not received any manual handling training or instruction.

Records of training detailing what has been delivered, to whom, where and when should be maintained.

- **Is there a system/procedure or physical evidence to demonstrate that reviews and corrective action plans (as appropriate) are instigated as a result of incident analysis.**

GUIDANCE

Are reviews conducted and corrective actions put in place as a result of incident analysis? An “incident” can be deemed as, e.g. an injury – where physical harm has occurred, a dangerous occurrence/near miss – where something has happened that could have resulted in an injury being sustained, contracting a disease – for example dermatitis. The organisation should be able to demonstrate that “incidents” are investigated/reviewed to try and identify any common root causes and appropriate corrective actions put in place.

Note: There is not a legislative requirement to investigate “incidents” and as such the requirements of this pointer are not mandatory but they are desirable.



- **Have desired performance indicators been established, how is achievement measured/monitored and are recovery action plans instigated when required?**

GUIDANCE

Actual performance targets can vary a great deal between organisations and will depend almost entirely on the maturity of the safety management system. Performance targets could vary from, e.g. completing a risk assessment programme to reducing/eliminating a particular type of injury.

The organisation should be able to demonstrate that targets have been set which aim to improve overall safety performance and performance against the target is routinely monitored with corrective actions taken as appropriate.



- **How is relevant up to date H&S information/guidance accessed?**

GUIDANCE

The organisation should have access to relevant up-to-date H&S information/guidance. This will depend on the nature of the organisation's business, e.g. "high" risk organisations will probably employ a H&S professional or consultant and "lower" risk organisations may subscribe to a H&S publication or receive guidance from their professional body.



Equal Opportunities Standard Guidance Notes

Legislation is now in place making it unlawful to discriminate on the grounds of sex, race, disability, sexual orientation and religion and belief.

Schedule V of the Scotland Act states that: - 'Equal Opportunities means the prevention, elimination or regulation of discrimination between persons on grounds of sex or marital status, on racial grounds, or on grounds of disability, age, sexual orientation, language or social origin, or of other personal attributes, including beliefs or opinions, such as religious beliefs or political opinions.'

This guidance note provided for Standard 5 – Equal Opportunities – is intended for all types of organisations in both the public and private sectors. It will help ensure that equal opportunities policy and practices are effectively managed. The intention of this guidance note is to provide sufficient information in relation to what might be expected in order to meet the requirements of the standard and also to provide the basis of an internal review and development framework.



The standard is divided into three pointers:-

Pointer a) – Equal Opportunities Policy

Pointer b) – Equal Access to Services

Pointer c) – Active Promotion of Equal Opportunities

Each pointer is then divided into a number of sub-pointers [●].

It is at the sub-pointer level that guidance is provided.

It must be emphasised that the information provided is only guidance and does not provide a definitive audit tool.

The information contained in this guide is correct at the time of publishing. Organisations must ensure that they are using the latest edition of any relevant equality legislation or code of practice.

Pointer a) Does the organisation have, operate and monitor an equal opportunities policy?

- **Evidence of an up-to-date equal opportunities policy for the organisation and, where applicable, its subcontractors.**

GUIDANCE

An equal opportunities policy is a statement of intent on how an organisation plans to demonstrate, implement and monitor its equality practice. Policies should cover sex, race, disability, sexual orientation, age, religion and belief, harassment and bullying, language or social origin, and other personal attributes, including beliefs or opinions, such as religious beliefs or political opinions.



S U P P L E M E N T S

As well as a statement of commitment and intent, the equal opportunities policy should include an implementation strategy which makes it clear to all staff, clients, learners and subcontractors what is expected of them in the promotion of equality practice.

Equal opportunities policies should contain a short, clear statement of the organisation's commitment to promoting equality; have the strong, visible support of top management; set out clear objectives which enable priorities for action to be identified and an effective programme to implement them; be explicit and measurable.

For the equality policy to be effectively integrated into organisational culture, there needs to be clear leadership on the issue. There needs to be a visible commitment to promoting equality and diversity at senior levels of the organisation. Commitment can be demonstrated in a number of ways including public statements about the importance of the policy to the organisation, and a commitment to making the resources available to actively pursue the actions required.

Subcontractors should be asked about their policy on equal opportunities and the organisation should make it clear that they operate an equal opportunities policy in all aspects of the business, and that therefore, it is preferable that all subcontractors have an equal opportunities policy too.

Guidance on how to write an equal opportunities policy is available through the following websites/organisations: -



Advice on sex discrimination
Equal Opportunities Commission
www.eoc.org.uk

Advice on race discrimination
Commission for Racial Equality
www.cre.gov.uk

Advice on disability discrimination
Disability Rights Commission
www.drc-gb.org

Advice on age discrimination
Age Concern Scotland
www.ageconcern.org.uk

Advice on sexual orientation discrimination
Equality Network
www.equality-network.org

Advisory, Conciliation and Arbitration Service (ACAS)
www.acas.org.uk
Note - ACAS now includes 'Equality Direct' on-line information

Scottish Executive guidance
www.scotland.gov.uk
See Mainstreaming Equality Home Page

Department of Trade and Industry
www.dti.gov.uk
www.womenandequalityunit.gov.uk

- **Procedures (e.g. recruitment, admission, placement, premises, assessment, guidance, etc.) which show how the organisation promotes equality of opportunity that complies with or exceeds appropriate and current legislation**



GUIDANCE

The equal opportunities policy should include a checklist or guidance on how the policy will be implemented in practice. This should ensure that all procedures are carried out in a fair and equal manner.

Applying the organisation's equal opportunities policy to recruitment and selection procedures will mean that the organisation will draw applicants from as wide a pool as possible. Make sure there are procedures in place for reviewing, for example, person specifications and job descriptions. In the organisation's advertising, make it clear that applications are welcomed from all sections of the community. It may also be appropriate to consider opportunities offered by legislation for positive action in relation to opening out vacancies to groups (for example, of a particular sex or racial group) who are currently under-represented. Positive Action relates specifically to provisions contained within the Sex Discrimination Act and the Race Relations Act. Advice should be sought from the Equal Opportunities Commission or the Commission for Racial Equality before undertaking any positive action measures.

- **Data on client, learner and staff views on the implementation and monitoring of the organisation's equal opportunities policy and arrangements**

Like any policy, the equal opportunities policy should be regularly reviewed and monitored. In order to collect information and data on how successful (or otherwise) the policy is, there should be opportunities for clients, learners and staff to feed into the monitoring and review process. This can be done quite simply by seeking information at the entry stage of the client, learner or member of staff, and then also at other points during the employment or training period.



Questionnaires seeking views may be used at particular points. However, it is important that clients, learners and staff have the opportunity to feed into the process at any time.

As well as positive feedback on how a policy is being implemented, the organisation should be prepared on how to deal with negative feedback. It may be important, in some instances, for this information to be fed back anonymously. For example, harassment and bullying is often covered within equal opportunities policies. Harassment and bullying can take many forms e.g. name calling, derogatory comments, ignoring someone's presence, etc.

To be able to deal with such issues, the policy and procedures should always be well publicised and also make it clear how any individual can get help and/or complain.

- **Performance indicators linked to the business plan which demonstrate active promotion of equal opportunities**

GUIDANCE

Indicators on how the organisation is performing under its equal opportunities policy should be linked to the business plan - the implementation of equal opportunities should be core to the business planning process. The organisation can evaluate the effectiveness of the equal opportunities policy by setting objectives and targets in its business plan.

Equality indicators could be: -

- Set in relation to a particular group of clients, learners or staff
- Set following the monitoring and evaluation of the current situation of that particular group
- Set following an evaluation of the historical situation of that particular group of clients, learners or staff (for example, they may have suffered from discrimination in the past)



S U P P L E M E N T S

- Set following an evaluation of what might be possible to achieve in the future

Equality indicators should always be:-

- Realistic and achievable within a specific timescale
- Capable of being monitored

The process of setting equality indicators should always be cyclical – **MONITOR > EVALUATE > SET TARGETS > TAKE ACTION > MONITOR**

- **Procedures for addressing infringements of the organisation's equal opportunities policy**

GUIDANCE

There will be areas covered in the equal opportunities policy that are clearly covered by law - for example, discrimination on the grounds of race, sex or disability. However, there will be some aspects of the policy that should be treated as a disciplinary offence in the organisation - for example, harassment or bullying. The policy should clearly state that this is the case and that all groups - clients, staff, learners and contractors - will be covered by the policy. It should be the duty of managers to ensure that the policy is understood. This is a reason for making sure that everyone is aware and understands the organisation's policy and procedures on equal opportunities.

- Pointer b) Does the organisation ensure that everyone eligible has an equal chance of benefiting from the services it provides?**



- **Data on learner and staff applications to the organisation, analysed by factors such as race and gender, and correlated with entry statistics for the same criteria.**
- **Data on learner achievement analysed by factors such as race and gender, etc.**
- **Data on retention and dropout, progression and post-learning destinations by factors such as race and gender.**

GUIDANCE

The equal opportunities policy should be monitored regularly to ensure that it is working in practice. Monitoring will show, for example, whether members of one sex do not apply for training, education, employment or promotion, or whether people with disabilities are not recruited, promoted or selected for training opportunities. By operating a comprehensive monitoring system, the organisation will not only be able to see the effects of the equal opportunities policy, but also be able to evaluate the effects of the policy over time.

Each organisation's culture and history may be taken into consideration when statistical monitoring information is evaluated. It is not possible to establish the extent to which equal opportunity practices are succeeding without taking into account the context in which such practices are operating. Collecting useful data should make it possible to identify particular barriers within an organisation - for example, men or women may have been restricted to particular areas of training or development. Staff responsible need to be equipped with the appropriate skills and tools to analyse data and be able to make use of what the data shows, in order to feed into the continuous improvement process.

Effective evaluation of data will enable the organisation to identify and therefore begin to dismantle barriers that are affecting outcomes for clients, learners or staff. (These outcomes may be recruitment, promotion, access to learning, progression of learning, etc.) Through the use of the analysed data, the

organisation may then make informed decisions on the setting of equality objective and targets, thus continually ensuring access to services.

- **Teaching and learning methods and materials which demonstrate promotion of equal opportunities, freedom from discrimination and encourage an inclusive learning environment (e.g. learning materials take account of cultural diversity, programmes take account of physical/psychological factors).**

GUIDANCE

Some teaching and learning methods and materials can inadvertently perpetuate prejudice and discrimination. The organisation should ensure that its methods, materials and general approach to teaching and learning are sensitive to the risk of patronising, offending or excluding learners through e.g. discriminatory language, images or assessment tools.

For example, examinations should avoid any ethnic, gender, religious or inappropriate cultural bias in questions; images in learning materials should depict a diverse range of people; examples and case studies should avoid stereotyping by including people of different ethnic groups and cultures in a range of different roles, characteristics and lifestyles; and thought should be given to both the written and the unwritten curriculum, including staff attitudes and awareness. The organisation should explore a variety of learning methods to enhance inclusion, e.g. the use of mixed-sex groups or pairings. The structure and timetabling of programmes should take into account the needs of different groups of learners from the point of programme design.



The organisation should also recognise the link between the provision of high quality teaching and equal opportunities, as evidence suggests that where quality is unsatisfactory, males tend to respond more negatively than females, e.g. through indifference or disruptive behaviour:

- **Where appropriate, evidence that the organisation makes provision for learners with additional support needs.**

GUIDANCE

Some learners may have additional support needs, arising from disabilities, learning difficulties or personal circumstances, such as having caring responsibilities, mental health problems, or problems associated with drug misuse, homelessness, offending etc.

The organisation should have appropriate and effective monitoring procedures to enable them to identify these learners, and should make appropriate provision for these learners. This will often be achieved most effectively through establishing and developing partnerships with key agencies such as local authorities, health services and the voluntary sector:

Providing for learners with additional needs might involve e.g. providing staff development to raise awareness of the issues involved and change attitudes; procuring equipment, and assistive and enabling learning technologies; and making physical adjustments to the learning environment.

There are a number of organisations working in this field which can advise the organisation further; including Skill: The National Bureau for Students with Disabilities; Lead Scotland; and the Disability Rights Commission.



Pointer c) Does the organisation actively promote its equal opportunities arrangements to all clients, learners and staff?

- **Marketing materials (e.g. leaflets, brochures, advertisements, website etc.) which demonstrate promotion of equal opportunities and freedom from discrimination.**

GUIDANCE

The image of an organisation is extremely important and can say a lot about the culture and operations of the organisation. When the organisation has an established equal opportunities policy and programme, it should be first publicised to the staff. Staff may then relay this message to other organisations, clients, learners or contractors. However, consider the organisation's external image too - does it encourage applications from under-represented groups in staff advertisements, client or learner literature? Does the recruitment literature use images of the range of people represented in our society today? Does the publicity and promotional material of the organisation demonstrate positive images reflecting the diversity of society?

As well as taking care of images present on literature, other ways organisations promote equality messages is by including a statement on all literature. For example: -

"This organisation is committed to equal opportunities and applications are welcomed from anyone - irrespective of sex or marital status, race, disability, age, sexual orientation, language or



social origin, or of other personal attributes, including beliefs or opinions, such as religious beliefs or political opinions." Consideration should also be made on the use of specialist press and journals to reach as wide a target group as possible.

- **Evidence from staff which confirms that they know in practice about the organisation's equal opportunities policy and procedures and know how to avoid bias.**
- **Performance indicators linked to the business plan, which demonstrate active promotion of equal opportunities.**

GUIDANCE

Linking the implementation of the equal opportunities policy with the organisation's business plan objectives is one way of ensuring that staff are aware of the process and their responsibilities to promote equality practice. Including an action plan within the equal opportunities policy, with a clear set of objectives and targets, will enable staff not only to understand the process, but also to be clear about the allocation of responsibilities – including their own.

By listing performance indicators it will help focus everyone's attention on the key tasks and will enable equal opportunities to be tackled like any other management task. Staff should be able to demonstrate through examples of their working practices that they have understood clearly the organisation's intent to promote equality and how they apply it in their own work plans. Staff should also be made aware of what the organisation expects from its staff in their treatment of other staff, clients, learners and contractors and also their personal obligations under the law. There is also evidence to suggest that an organisation where people feel valued and respected is likely to have greater productivity and staff loyalty.



S U P P L E M E N T S

Staff may require training to fully understand the importance and implications for their day-to-day work. Training can play a number of roles – help brief senior managers who are developing policy; convince staff of the benefits of the policy and gain support; deliver technical advice, information and skills essential to the effective implementation of the equal opportunities policy.

ADDITIONAL SUPPORT

An organisational strategic goal should be to mainstream equality throughout the organisation. Mainstreaming will ensure that in delivering services the organisation has taken full account of the inequalities and difficulties faced by the diverse needs of communities and individuals in Scottish society and has made appropriate adjustments.

There are range of organisations, including statutory agencies, offering free, practical advice on the implementation of equal opportunities.

When implementing the Equal Opportunities Standard, organisations should refer to information and guidance listed on the websites below. These websites will provide up-to-date relevant information on legislation and how to implement best practice in equal opportunities. Documents are often free and available to download. Helpline numbers and contact details will also be given if a more personal approach is preferred.

Specific areas of discrimination

Advice on sex discrimination

Equal Opportunities Commission

www.eoc.org.uk

Advice on race discrimination

Commission for Racial Equality

www.cre.gov.uk



Advice on disability discrimination

Disability Rights Commission

www.drc-gb.org

Advice on age discrimination

Age Concern Scotland

www.ageconcern.org.uk

Advice on sexual orientation discrimination

Equality Network

www.equality-network.org

For general advice, covering a range of equality issues

Advisory, Conciliation and Arbitration Service (ACAS)

www.acas.org.uk

ACAS now includes 'Equality Direct' on line information

Fair Play Scotland

www.fairplayscotland.com

Government sites

Scottish Executive guidance

www.scotland.gov.uk

- See Mainstreaming Equality Home Page

Department of Trade and Industry

www.dti.gov.uk

www.womenandequalityunit

www.dti/work-lifebalance.gov.uk

Department for Education and Skills

www.dfes.gov.uk

Department of Work and Pensions

www.dwp.gov.uk



Guide to using SQMS for providers of Pre-Entry Guidance Services

INTRODUCTION

The Scottish Quality Management System (SQMS) provides a quality auditing system for organisations involved in education and training in Scotland, including guidance providers involved in Skills Choice, Learning for Work, New Deal and Training for Work programmes. It is a comprehensive quality management system which organisations can use to plan and check the quality of their provision.

This guide customises SQMS for providers involved in Skill Choice, Learning for Work, New Deal and Training for Work schemes who are contracting with LECs for the provision of pre-entry guidance services. It states the standards and pointers for organisations involved in these schemes and provides notes on the standards specific to pre-entry guidance services.

The section, **SQMS Standard 8A: Pre-Entry Guidance Services**, is designed to be incorporated into the SQMS files, as an alternative or addition to the education and training provider version. The difference between the two versions is that Standard 8: Guidance Services relates to services delivered for individuals within the education and training process and Standard 8A relates to guidance as a "stand alone" service.



STANDARDS FOR PRE-ENTRY GUIDANCE SERVICES

Required Standards

1. STRATEGIC MANAGEMENT

The organisation has a clear sense of purpose and direction.

2. QUALITY MANAGEMENT

A quality system ensures that clients', learners' and staff needs are met.

3. MARKETING AND CUSTOMER CARE

The needs of the organisation's clients and learners are identified, its education and training services are effectively promoted and the needs of clients and learners satisfied.

4. HUMAN RESOURCES AND DEVELOPMENT

The structure, level, and type of staffing is appropriate for the education and training services provided. Staff development provision meets the needs of both the organisation and the individual.

5. EQUAL OPPORTUNITIES

Equal opportunities are ensured for all clients, learners, and staff.

6. HEALTH AND SAFETY

There is a safe and healthy environment for all learners, staff and visitors.

7. COMMUNICATION AND ADMINISTRATION

Communication and administrative arrangements meet the needs of the organisation, external bodies, clients, learners and staff.

8A. PRE-ENTRY GUIDANCE SERVICES

The initial needs and abilities of individual clients and potential learners are identified and action plans/personal training plans are formulated and consistent with assessment, learning, and career opportunities.

OVERVIEW

Pre-Entry Guidance Services Standards 1-7 are the same as those for the full SQMS version. The next section contains brief notes on their use. Standard 8A: Pre-Entry Guidance Services, which replaces or is an addition to Standard 8: Guidance Services, is adapted to the needs of the Skill Choice Network and Learning for Work, New Deal and Training for Work schemes. Standards 9 and 10 of the standard SQMS do not apply to Skills Choice Network functions, but may apply to those involved in Learning for Work, New Deal or Training for Work programmes. Standard 10, Assessment for Certification may not apply directly to guidance providers. However, providers of services which lead to action plans for learners to access assessment for certification will need to ensure that services such as accreditation of existing competence (through APL and assessment on demand) meets Standard 10 of SQMS.

Note: The term “Client” under the Pre-Entry Guidance Standard also includes the learner within the list contained in the glossary.

NOTES ON SQMS STANDARDS 1-10

Providers involved in Skills Choice, Learning for Work, New Deal and Training for Work schemes should use the documentation from the SQMS Standards 1-7. It is important to note that in using the SQMS Standards 1-7:



- Pre-entry guidance services offered within Skill Choice, Learning for Work, New Deal and Training for Work programmes are included in references to “education and training services”
- Pre-entry guidance is included in references to “training and teaching”.

There are no additional features or special requirements for those involved in such schemes for the following standards:

2. Quality Management

6. Health and Safety

The notes below highlight features of the remaining standards particularly relevant to providers involved in Skill Choice, Learning for Work, New Deal and Training for Work schemes.

1. Strategic Management

The business plan should make clear the range of services offered. It should also make clear the scope of the service (e.g. outreach for rural areas, disabled access, provision for speakers of languages other than English). Policies for pre-entry guidance services should describe the entitlements and outcomes of the service for users. They are likely to cover activities such as those described below (adapted from UDACE 1986).



S U P P L E M E N T S

- Informing

Providing unbiased information about learning opportunities and related support facilities available, without any discussion of the relative merits of options for particular clients. Individuals involved in the delivery of pre-entry guidance should be aware of bias in marketing materials.

- Advising

Helping clients to interpret information and choose the most appropriate option. To benefit from advice, clients must already have a fairly clear idea of what their needs are.

- Counselling

Working with clients to help them discover, clarify, assess and understand their learning needs and the various ways of meeting them. Clients requiring counselling are likely to be unclear about their needs and require time to explore their feelings about the options. Counselling is likely to involve a series of contacts with a single client.

- Initial Assessing

Helping clients, by formal or informal means, to obtain an adequate understanding of their personal, educational and vocational development, in order to enable them to make sound judgements about the appropriateness of particular learning opportunities.



- Enabling

Supporting the client in dealing with the agencies providing education or training, or in meeting the demands of particular assessment services. This may involve simple advice on completing application forms, advice on ways of negotiating changes in training programmes or course arrangements, assistance to independent learners, or advice on the most appropriate assessment opportunities. A further kind of enabling is provided through “Access” and “Wider Opportunities” courses which may offer both group guidance and the teaching of study skills.

- Advocating

Negotiating directly with institutions or agencies on behalf of individuals or groups for whom there may be additional barriers to access or to learning (e.g. negotiating exceptional entry arrangements or modifications to training programmes or courses).

- Feeding Back

Gathering and collating information on unmet, or inappropriately met, needs and encouraging providers of assessment services and learning opportunities to respond.



3. Marketing and Customer Care

There should be evidence of research of the market for guidance services and tailoring of the services to meet the demand.

The organisation should have information about the potential demand for their services (e.g. numbers, locations and characteristics of potential clients). The target client groups for the organisation should be clearly stated. There should be evidence that the form of promotion and the appropriateness of promotion to a particular target group is justified. The promotion of the service should include reference to the quality features of impartiality, client-centredness and confidentiality.

4. Human Resources and Development

There should be evidence that sufficient staff are deployed for the management of quality services and that staff are competent in delivering pre-entry guidance services. There should be some staff who are trained according to recognised standards, e.g. British Psychological Society, in the use of initial diagnostic assessments with learners. For example, staff should be able to use self-help diagnostic packages, psychometric tests or computer assisted guidance programmes. Staff should be experienced and trained in reviewing, target setting and the use of action plans.



5. Equal Opportunities

There should be evidence of consistent practice where more than one person is responsible for deciding which clients have access to guidance services and initial assessment and levels of guidance. There should be a planned approach to training in equal opportunities issues and practice as well as updating in equal opportunities legislation.

7. Communication and Administration

In pointer 7(a), documentation showing there are structured links with relevant bodies should include evidence of liaison with and referrals to other organisations and specialist agencies.

For pointer 7(c), the management information system should include information as required by the LEC on the individuals who access the service and the employers involved.



S U P P L E M E N T S

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8a. Pre-Entry Guidance Services

The approach to needs identification and action planning in this section is linked to providers involved in pre-entry guidance services within Skill Choice, Learning for Work, New Deal and Training for Work programmes.

Quality guidance and assessment services are impartial, client centred and confidential. The services increase self-awareness and opportunity awareness in individuals and help to eliminate inappropriate choices of training, education or occupations. This in turn benefits education and training providers and employers through improved completion and success rates, and better motivated trainees or employers. This links directly to strategic objectives that aim to make optimum use of human resources to contribute to the economic success of Scotland.

This standard is concerned with ways of ensuring that potential learners (clients) have the opportunity to clarify their goals and relate them to the learning, assessment and accreditation opportunities available. This process of identifying skills, abilities, interests and experience, gathering information on available opportunities, clarifying goals and making realistic choices can take place in a variety of locations, through different modes and involve a range of different services.



Locations: - schools; training organisations; further education colleges; adult and community education centres; employers' premises; specialist advice agencies; careers service centres.

Modes: - work-based learning; in-house vocational qualifications; flexible and open learning; APL; assessment on demand.

Services: - careers guidance; employment service; labour market information; financial support information; learning support services.

Information on the full range of current available options should be displayed, researched and discussed and the appropriate information selected to suit client needs.

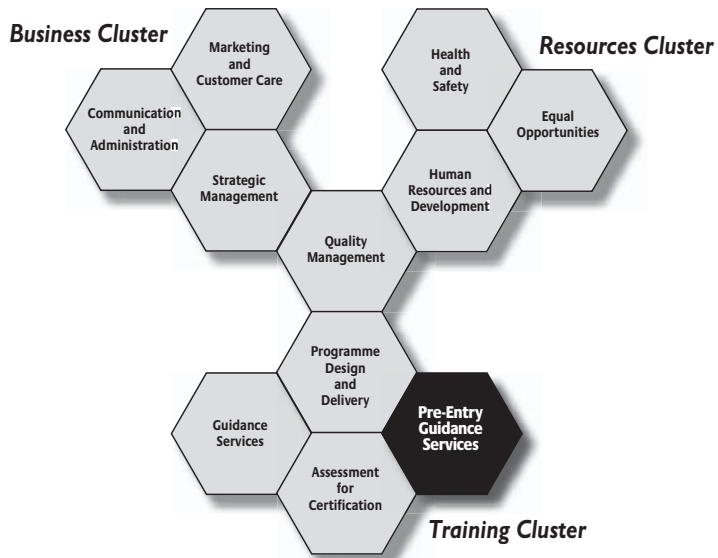
The process of gathering information about an individual's strengths, difficulties, aspirations and needs should be undertaken in partnership with the individual and where appropriate, others whose views contribute significantly. It should ensure that clients have the opportunity to access a service, e.g. APL, assessment on demand or embark on a learning programme that will enable them to achieve legitimate and realistic goals to which they subscribe, e.g. to improve their skills, enhance career progression, compete more effectively in the labour market and/or progress in education and training programmes.





There should be properly designated, experienced and trained staff, suitable accommodation, guidelines on procedures and confidentiality and appropriate links to specialised services.

Management responsibilities should be clearly allocated and arrangements should be regularly reviewed.





**8a. PRE-ENTRY GUIDANCE SERVICES
STANDARD – OVERVIEW**

STANDARD MET

YES NO

Management/
Staff Responsibilities

8a. The initial needs of individual clients and potential learners are identified and action plans/personal training plans are formulated consistent with assessment, learning and career opportunities.

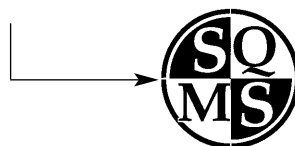
- a) Do clients and potential learners have the opportunity through systematic pre-entry guidance to discuss their starting points, individual personal circumstances and possible goals and relate these to assessment and learning opportunities through action plans/personal training plans?
- b) Is the pre-entry guidance offered impartial, without bias to any one opportunity, provider or type of provision?
- c) Are clients' and potential learners' prior achievements taken into account?
- d) Are clients and potential learners referred to specialist services if reviews show that this is needed?
- e) Are responsibilities for pre-entry guidance services clearly and appropriately allocated?
- f) Is the operation of pre-entry guidance services systematically reviewed and findings acted upon?

SCHEDULE OF REVIEWS

January	February	March	April	May	June	July	August	September	October	November	December

SUMMARY OF FINDINGS AND ACTION POINTS

Blank area for recording findings and action points.





S U P P L E M E N T S

PRE-ENTRY GUIDANCE SERVICES – CRITERIA

8a. The initial needs of individual clients and potential learners are identified and action plans/personal training plans are formulated consistent with assessment, learning and career opportunities.

POINTER MET
YES NO

a) Do clients and potential learners have the opportunity through systematic pre-entry guidance to discuss their starting points, individual personal circumstances and possible goals and relate these to assessment and learning opportunities through action plans/personal training plans?

- Data on client satisfaction with the initial identification of needs and action planning; the confidentiality of the service; the exercise of freedom of choice in relation to services and recommendations.
- Procedures for initial identification of needs which are appropriate to the purposes of the organisation's services and provide:
 - A framework (e.g. structured interview in an appropriate and confidential environment)
 - Initial diagnostic assessment, to include core skill assessment where appropriate
 - Referral services as appropriate
 - A focus on the individual
 - A supportive environment
 - A link to ongoing review
 - Means for taking account of occupational choice or other valid goals of learners (e.g. skill improvement and progression to education and training programmes)
 - Means for identifying special circumstances and needs.
- Procedures for the preparation of action plans/personal training plans which:
 - Recognise existing competence (skills, knowledge and abilities) evidenced through records of achievement, CVs, etc. and offer a match between learner needs, prior learning and placement on a programme
 - Outline the learner's aspirations (employment/career aims or further education and training goals).
 - Note any special circumstances and needs which must be taken into account
 - Identify the vocational qualification to be achieved if appropriate

COMMENTS & ACTION POINTS





PRE-ENTRY GUIDANCE SERVICES – CRITERIA

- Ensure that clients are aware of content, level and demands of the vocational programme
- Log the planned programme.

- Action plans which are:
 - Prepared for all
 - Agreed, evidencing client understanding and any planning to meet additional needs
 - Used as a record for the guidance service
 - Capable of use in the learning programme.

- Evidence that initial pre-entry guidance for individuals is available on demand or by appointment within a specified time period.

- Other: _____

POINTER MET
 YES NO

b) Is the pre-entry guidance offered impartial, without bias to any one opportunity, provider or type of provision?

<input type="checkbox"/>	<input type="checkbox"/>
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- Data on client, employer and provider satisfaction with impartiality of the service.

- Data on client destinations.

- Other: _____

COMMENTS & ACTION POINTS





S U P P L E M E N T S

PRE-ENTRY GUIDANCE SERVICES – CRITERIA

COMMENTS & ACTION POINTS

POINTER MET

YES NO

c) Are clients' and potential learners' prior achievements taken into account?

- Data on client, employer and provider satisfaction with the extent to which prior experiences and achievements are taken into account.
- Procedures for ensuring that clients are encouraged to build on prior achievements.
- Procedures for encouraging and helping learners to take up certification of relevant prior achievement (APL), if initial identification of needs suggests they have already achieved a goal.

● Other:

d) Are clients and potential learners referred to specialist services if reviews show that this is needed?

- Data on learner satisfaction with referral to specialist services.
- Data on referrals.
- Evidence that information and advice is provided in relation to support available, in order to help clients top up achievements so that they can enter appropriate programmes.
- A list of specialist support services available (e.g. internal trained specialists, external agencies) with details of how they may be contacted.
- Guidelines on when and how staff should refer learners to these services.

● Other:





S U P P L E M E N T S

PRE-ENTRY GUIDANCE SERVICES – CRITERIA

COMMENTS & ACTION POINTS

	POINTER MET	
	YES	NO
<p>e) Are responsibilities for pre-entry guidance services clearly and appropriately allocated?</p> <ul style="list-style-type: none"> ● Organisation chart; job descriptions and remits showing responsibilities of staff, including senior management. ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>
	POINTER MET YES	NO

<p>f) Is the operation of pre-entry guidance services systematically reviewed and findings acted upon?</p> <ul style="list-style-type: none"> ● Systematic use of appropriate performance indicators. ● Reports, notes of meetings and action plans related to monitoring, review and development activity. ● Examples of changes in arrangements over time as a result of review. ● Examples of staff development activity as a result of review. ● Other: _____ 	<input type="checkbox"/>	<input type="checkbox"/>
	POINTER MET YES	NO



Financial Management

This section is concerned with the soundness and effectiveness of the organisation's financial arrangements related to the provision of education and training services.

Although Financial Management does not form part of the SQMS standards, it has been included in this edition of the SQMS standards pack, as an annex, for continuous business improvement purposes.

The pointers are met when there is evidence that the organisation has, or will have, the financial capability to enable it to implement agreements; that it operates effective financial systems and controls and maintains up-to-date and accurate financial records.



Without impinging on commercial confidentiality, internal auditing should reasonably assure that the organisation is sufficiently financially sound and that its finances are, and will be, efficiently and appropriately managed to implement its various education and training services and take on new business.

Responsibilities should be clearly allocated and arrangements regularly reviewed.



FINANCIAL MANAGEMENT OVERVIEW

The organisation is financially sound and can make a reliable provision.

- a) Does the organisation have adequate financial resources to meet its obligations in relation to the provision?
- b) Is there an appropriate level of financial control?
- c) Is there a system of financial record keeping which is appropriate to and meets the organisation's needs?
- d) Are there effective budgetary control, monitoring and reporting mechanisms appropriate to the size of the organisation and the nature of its business?
- e) Are the responsibilities for management of finance clearly and appropriately allocated?
- f) Are financial operations systematically reviewed and findings acted upon?



FINANCIAL MANAGEMENT - CRITERIA

The organisation is financially sound and can make a reliable provision.

- a) Does the organisation have adequate financial resources to meet its obligations in relation to the provision?
 - Financial history, major sources of funding.
 - Banker's reference
 - Signed statement from the head of the organisation, assuring stability of provision over the period of the contracts.
 - Audited statutory accounts.
 - Other: _____
- b) Is there an appropriate level of financial control?
 - Procedures for ensuring that all income due is received, that bills are paid timeously and opportunity for diversion of funds is minimised.
 - Auditor's report on statutory accounts.
 - Other: _____





c) Is there a system of financial record keeping which is appropriate to and meets the organisation's needs?

- A nominal ledger, purchase ledger, sales ledger, cash book, income receipts, assets register, etc.

● Other: _____

d) Are there effective budgetary control, monitoring and reporting mechanisms appropriate to the size of the organisation and the nature of its business?

- Evidence of costing of key activities and objectives and allocation of budgets to cost centres.
- Examples of monthly or quarterly reports of actual expenditure and commitment against budget, including variance analysis where appropriate.

● Cash flow forecasts.

● Other: _____

e) Are responsibilities for management of finance clearly and appropriately allocated?

- Profile of budgets and budget holders.
- Organisation chart or responsibilities chart; job descriptions and remits showing responsibilities of staff including senior management responsibilities for, e.g. authorising expenditure, itemising income receipt processes.

● Other: _____

f) Are financial operations systematically reviewed and findings acted upon?

- Systematic use of appropriate performance indicators.
- Reports, notes of meetings and action plans related to monitoring, review and development activity.
- Examples of changes in arrangements over time as a result of review.
- Internal financial audit arrangements and/or external audit review (or statement of review from external auditors).

● Other: _____

