

NVQ

Code of practice

Revised 2006

# NVQ code of practice



Qualifications and  
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## Introduction

The public has a legitimate interest in the continuing availability of high-quality qualifications that are fit for purpose, command public confidence and are understood, both by those who take them and those who use them. That interest extends to the proper maintenance of consistent standards across awarding bodies and over time.

The three regulatory authorities<sup>1</sup> publish regulatory requirements for external qualifications in England, Wales and Northern Ireland. The regulatory requirements published in the *Arrangements for the statutory regulation of external qualifications in England, Wales and Northern Ireland* (2000) were revised and replaced by *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004), which specifies the regulatory criteria for accredited qualifications.

This *NVQ code of practice* supplements the requirements of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004) by specifying the additional quality assurance and control requirements that apply to, and reflect the distinctive character of, National Vocational Qualifications (NVQs). The code of practice is for use by awarding bodies rather than centres. However, approved centres need to know the code of practice and understand the regulations. Awarding bodies must therefore ensure, through their own codes of practice, that a centre is informed of its obligations as laid out in this code.

NVQ awarding bodies are responsible for ensuring that the management, administration, assessment and quality assurance of the NVQ(s) they are recognised to deliver are consistent with the regulations set out in *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004) and the *NVQ code of practice*.

This updated edition of the *NVQ code of practice* replaces the first edition published in 2001. It is designed to reflect the revised regulatory criteria in *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004), and to promote quality, consistency, accuracy and fairness in the assessment and awarding of all NVQs. It will help to ensure that standards are maintained in each occupational area and across awarding bodies from year to year. It provides a basis for securing high standards in all aspects of the implementation and assessment of NVQs and public confidence in the qualifications. To this end the *NVQ code of practice* sets out:

- agreed principles and practice for the assessment and quality assurance of NVQs and individual NVQ units

<sup>1</sup> Qualifications and Curriculum Authority (QCA) for England, Department for Education, Lifelong Learning and Skills (DELLS) for Wales, and the Council for the Curriculum, Examinations and Assessment (CCEA) for Northern Ireland.

- the responsibilities of NVQ awarding bodies and their approved centres in respect of the administration, assessment and verification of NVQs and NVQ units
- the basis upon which QCA and DELLS<sup>2</sup> will systematically monitor the performance of awarding bodies in maintaining the quality and standards across the NVQs they offer.

<sup>2</sup> Hereinafter referred to as the regulatory authorities.

## Context

An awarding body is responsible for assuring the quality of NVQs offered in its name. In addition to the general requirements for all awarding bodies as specified in *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004), NVQ awarding bodies will be required to demonstrate compliance with the following NVQ-specific requirements.

## Resources

Links to and amplifies paragraph 8 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

1. Awarding bodies must provide centres with a clear statement of the administrative procedures, requirements and responsibilities associated with NVQ delivery.

## Equality of opportunity

Links to and amplifies paragraph 9 and paragraphs 14–20 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

2. Awarding bodies must take account of current legislation in the area of access to fair assessment and equal opportunities.
3. Relevant staff, in particular external verifiers, must be made aware of the appropriate sections of current legislation related to equal opportunity.

## Expertise

Links to and amplifies paragraph 10 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

4. Awarding bodies are responsible for the quality of their external verifiers' work and for their continuing professional development. Awarding bodies are therefore required to develop a code of practice for external verifiers, specifying:
  - the key roles and responsibilities of an external verifier
  - the awarding body's requirements and expectations of external verifiers in relation to continuing professional development
  - matters of personal conduct and integrity, including a requirement to declare any conflicts of interest

- details of the awarding body's appeals procedures if a centre appeals against an external verifier's decision.

External verifiers must confirm their acceptance of these provisions in writing and must always comply with them.

5. Awarding bodies must ensure that external verifiers are provided with the appropriate information, guidance and training and development they need to meet their responsibilities. In fulfilling this requirement awarding bodies must ensure that external verifiers:
  - participate in standardisation activities that result in a consistent understanding and application of national standards. External verifiers must participate in at least two standardisation exercises totalling a minimum of two days per year
  - are kept up-to-date with best practice in external verification.

## Centre registration/approval

Links to and amplifies paragraph 11 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland (2004)*

6. Awarding bodies must ensure that centres have the necessary resources, systems, commitment and expertise to support the consistent delivery, assessment and quality assurance of an NVQ before being approved to offer the qualification.
7. Awarding bodies must ensure that only those centres that meet the approved centre criteria requirements may be:
  - given approved centre status
  - authorised to claim certificates.
8. To ensure consistency in the approval process, awarding bodies must base their decision on the centre approval criteria. These requirements are attached as Appendix 1. Before submitting a formal application for approval, a centre needs to understand the obligations associated with approved status. Centres seeking approval must therefore receive a copy of the requirements.
9. Centres must be provided with appropriate guidance and support to enable them to meet the approval requirements. To minimise unnecessary bureaucracy, awarding body guidance must seek to illustrate where a centre's existing systems are appropriate to support NVQ delivery. This includes systems developed to meet the requirements of other quality assurance regimes.

10. If a centre applying for approval is in a partnership arrangement, the roles, responsibilities and accountabilities of each partner must be clearly documented in relation to the assessment, quality assurance and administration of the award. Also, clear lines of communication must be in place between partners.
11. Centres must prepare a formal application for centre approval, including:
  - a named contact (head of centre) who will be accountable for the overall quality assurance, management and administration of the award
  - evidence that the centre meets approval requirements
  - declaration of any previous application refusals or withdrawal of approved status, including the awarding body involved and the reasons for the decision. Awarding bodies must inform centres that failure to provide accurate information will result in approval being withdrawn.
12. If a centre is applying for approval to offer an NVQ for the first time, the awarding body must visit the centre prior to approval and authenticate its application evidence. Certificates may only be issued to centres that have been authenticated in this way.
13. If this visit indicates that further action or evidence is required to meet the centre approval criteria, the awarding body must produce an action plan for the centre detailing what is to be done, by when and by whom. This must be agreed and logged with the head of centre. An awarding body may allow such centres to register candidates during this period but must not accept claims for certification until the centre approval criteria are fully met.
14. If an awarding body receives an application from one of its approved centres to extend its range of NVQ provision, the awarding body must take into account the findings of post-approval monitoring. Where this indicates that the centre has a strong quality record in managing its existing NVQ provision, the awarding body must consider whether the centre can comply with qualification-specific requirements. In particular it must consider the competence of assessors and internal verifiers in terms of their qualifications and occupational expertise, and the centre's ability to provide candidates with the required assessment opportunities. If the awarding body is satisfied, it may use its discretion as to whether a visit is necessary to confirm the details in the application. In circumstances where this discretion is used and the centre is not visited, the awarding body must keep records of, and evidence to support, its decision.
15. When an awarding body approves a centre to deliver an NVQ, the centre must be informed in writing for each NVQ concerned.



16. As part of the centre approval process, awarding bodies must provide centres with documentation and guidance on a centre's responsibilities when managing, administering and quality assuring an award. It must cover:
  - the conduct of internal and independent assessment, the maintenance of standards and the consistency of assessment decisions through internal verification
  - the requirement for assessors and internal verifiers to have appropriate qualifications and occupational expertise as specified by the relevant sector body
  - the registration of candidates
  - the provision of accurate data in respect of claims for certification
  - the authentication and recording of candidate assessments and how long these records should be retained
  - the provision of access to premises, people and records for the purposes of external quality assurance
  - the procedures for dealing with, and reporting, malpractice.
17. Awarding bodies must provide centres and assessors with:
  - clear information and guidance on their responsibilities with regards to qualification assessment requirements
  - access to specialist advice and guidance on the assessment of NVQs.
18. Awarding bodies must provide each centre with a full assessment specification for each NVQ it offers. This specification must set out the scope and principles of assessment and external quality control established by the relevant sector body. It must also ensure that assessment requirements can be consistently interpreted, specifying:
  - which aspects of the standards must always be assessed through performance in the workplace
  - when simulated working conditions may be used and to what extent; any characteristics that the simulation should have, including what would constitute a realistic work environment for the qualification concerned
  - what occupational expertise assessors and internal verifiers must have, according to the relevant sector body
  - what constitutes acceptable evidence
  - the strategy for the external quality control of assessment.
19. When independent assessors are used by an awarding body it must ensure that they receive appropriate training to:
  - perform their role competently
  - meet the requirements for occupational expertise as laid down by the relevant sector body for the NVQ in question.

## Data requirements

Links to and amplifies paragraphs 12–13 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland (2004)*

20. Awarding bodies must keep an accurate register of the centres they have approved to deliver an NVQ, listing:
- the centre's unique identifier – which could be the unique number provided by the UK Register of Learning Providers (UKRLP)
  - the date when centre approval was given
  - details of each NVQ for which approval has been given and the date on which it was approved for delivery.
- Approved centres must provide this information in a standardised format as specified by the regulatory authorities (See Appendix 2, Common data requirements)<sup>3</sup> Awarding bodies must make this information available to the regulatory authorities upon request.
21. Centres must establish and maintain reliable, auditable systems for recording assessment decisions.
22. Awarding bodies must provide centres with instructions and guidance on record keeping. Instructions must specify the minimum information required to track candidate progress and to allow for the independent authentication of certification claims. This must include:
- lists of all candidates registered for each qualification offered, including:
    - candidate name
    - date of birth
    - contact address
    - workplace address and contact details
    - assessor(s) name(s)
    - internal verifier(s) name(s)
    - date of registration with the awarding body
  - candidate assessment records detailing:
    - who assessed what and when
    - the assessment decision
    - the assessment methods used for each unit/component
    - the location of the supporting evidence
  - records of internal verification activity detailing:
    - who verified what and when
    - details of the sample selected and its rationale
    - internal verifier standardisation meetings

<sup>3</sup> Under review by the regulatory authorities.

- assessor support meetings
  - assessor and verifier competence and the monitoring of assessor/internal verifier progress towards achievement of required qualifications
  - requirements for the retention of candidate evidence
  - records of certificates claimed – including unit certificates – who claimed them and when.
23. Awarding bodies must require centres to retain these records for a minimum of three years in case any issues arise from external verification or appeals. Such records must be made available to the regulatory authorities upon request.
24. If a centre fails to comply with the requirements for maintaining auditable records and cannot substantiate claims made on behalf of candidates, the awarding body must impose the appropriate sanction from the tariff of sanctions in Appendix 3. The awarding body must inform the regulatory authorities and start agreed investigative procedures (see paragraphs 73–81).

## Awards outside England, Wales and Northern Ireland

Links to and amplifies paragraph 21 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland (2004)*

25. Centres are approved to operate only within England, Wales and Northern Ireland. If an organisation wishes to deliver NVQs outside these territories, it must seek separate approval for each centre concerned.
26. Awarding bodies must apply the same level of quality assurance requirements to centres operating outside England, Wales or Northern Ireland as to those within this territory.
27. The regulatory authorities reserve the right to take appropriate action if practices in approved centres outside of their territory could bring the education and training system of England, Wales and Northern Ireland into disrepute.

## Issue of certificates

Links to and amplifies paragraph 22 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

28. Candidates working towards an NVQ or the assessor/verifier (A/V) qualifications for assessors and verifiers must be on the awarding body's registration system for a minimum of 10 weeks before a certificate can be claimed. The issue of a unit certificate, which lists all the units or the final unit of an NVQ, is bound by the same rule. If a centre registers candidates unit by unit for the whole NVQ, the 10-week rule will be effective only from the date of registration for the *full* certificate. Certification will not be possible any earlier than if the centre had simply registered the candidates for the full award.
29. Awarding bodies must ensure that their approved centres know they are responsible for informing candidates of their registration status. Awarding bodies must also ensure that centres and candidates are aware of the value and availability of unit credit accumulation. Awarding bodies must make unit certification available in addition to full NVQ certification.
30. All claims for certification from a centre must be authenticated by an appropriately qualified and occupationally expert internal verifier. Awarding bodies must only accept certification claims that meet this requirement. If a newly approved or small centre has no qualified internal verifier, an external verifier must closely monitor the decisions of unqualified internal verifiers. Such monitoring must be carried out by sampling the internal verifier's decisions (see also paragraphs 51 and 52) and validating all claims for certification.

## Enquiries and appeals procedures

Links to and amplifies paragraphs 23–27 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

31. An awarding body must provide and publish information on its enquiries and appeals arrangements. This must be made available to all centres and provide for enquiries and/or appeals to be made against:
  - centre approval decisions
  - assessment decisions
  - verification decisions.

32. The procedures must detail the roles and responsibilities of both the centre and the awarding body in relation to appeals arrangements, and include:
- details of the circumstances in which a centre and/or candidate may appeal
  - a specified point of contact
  - response times and anticipated timescales for dealing with appeals and/or complaints
  - details of any costs or fees associated with the appeal.

## Customer service statements

Links to and amplifies paragraph 32 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland (2004)*

33. If there is a joint awarding body arrangement, responsibility for developing and monitoring performance levels against the targets specified in the customer service statements must be clearly identified.

## Monitoring and evaluation

Links to and amplifies paragraphs 33–37 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland (2004)*

34. Awarding bodies must monitor and maintain the quality, consistency and integrity of assessment practices and decisions within and between approved centres offering the same qualification(s).
35. Awarding bodies must provide centres with details of their post-approval monitoring activities. They must also inform centres of the obligation to provide the awarding body and the regulatory authorities, upon request, with access to premises, people and records relating to candidate assessment, achievement and internal verification. If a centre fails to provide access, the awarding body must suspend the centre's right to claim certification until access is provided.
36. Centres must inform awarding bodies of any change affecting their ongoing ability to meet the centre approval criteria. The awarding body must keep a record of such information and any remedial action the centre has agreed to take.

37. If an awarding body's post-approval monitoring shows that a centre is failing to meet the centre approval criteria, the awarding body must take action to maintain the integrity of the award concerned. The level of action taken must be in proportion to the problem and must set deadlines for the problem to be resolved. To ensure that all awarding bodies respond consistently to specific problems, a tariff of sanctions is attached as Appendix 3. These sanctions explain the actions that the regulatory authorities expect awarding bodies to take.
38. Where the nature of a centre's failure requires the awarding body to withdraw approval for a particular NVQ, the awarding body must inform the relevant regulatory authorities. The information provided by the awarding body must include the centre's unique identifier, its name and address and the title, level and qualification number of the NVQ(s) for which approval has been withdrawn.

## Use of languages in assessment

Links to and amplifies paragraph 40(b) of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

39. Assessment carried out in a language other than English or Welsh must provide clear evidence that the candidate is also competent in English or Welsh to the standard required for competent performance throughout the United Kingdom.

## Application of assessment methodology

Links to and amplifies paragraphs 56–62, 96–99 and paragraph 103 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

### Assessment

40. Centres must appoint assessors to carry out internal assessment. Assessors will be responsible and accountable for:
  - managing the assessment system, from assessment planning to making and recording assessment decisions as required by the awarding body
  - assessing evidence of candidate competence against the national occupational standards in the qualification
  - ensuring that candidates' evidence is valid, authentic and sufficient
  - maintaining accurate and verifiable candidate assessment and achievement records as required by the awarding body.

41. Centres must ensure that assessors are competent to perform their role. Centres must therefore provide appropriate training and development opportunities to ensure that assessors:
  - either hold the qualifications needed to carry out assessment – D32, D33, A1 or A2 – or within 18 months of commencing their role achieve A1 or A2, as appropriate, or any qualifications subsequently specified by the regulatory authorities, except where this requirement is replaced by equivalent measures contained within an assessment strategy approved by the regulatory authorities
  - carry out assessment to the A1/A2 standards as appropriate
  - have the occupational expertise specified in the relevant assessment strategy before commencing their role and maintain the currency of this expertise for the duration of their role
  - know the awarding body requirements for recording assessment decisions and maintaining assessment records.
42. Centres must ensure that the assessment decisions of unqualified assessors are checked, authenticated and countersigned by an assessor or internal verifier who is appropriately qualified and occupationally expert for the NVQ in question. The internal verifier must sample an increased proportion of assessment decisions by unqualified assessors. The internal verifier is also responsible and accountable for arranging the checking and countersigning process. Internal verifiers may verify only evidence that they did not assess.
43. Assessors and candidates must provide a written declaration that candidate evidence is authentic and that assessment took place under the conditions or context set out in the assessment specification. Failure to do this constitutes grounds for the suspension or withdrawal of approved status for the NVQ in question.
44. Centres must provide appropriate training and development opportunities to enable assessors to meet their responsibilities and gain a common understanding of relevant standards and other assessment requirements. Awarding bodies must monitor a centre's compliance with this. Therefore, centres must keep records of all such staff development.
45. Awarding bodies must ensure that assessment arrangements at their approved centres comply with those detailed in the assessment specification.
46. In developing the arrangements and methodologies for the external quality control of assessment for each NVQ, awarding bodies must follow the agreed strategy for external quality control as established by the relevant sector body and approved by the regulatory authorities.

47. Centres' internal assessment processes and practices must be effective and support the integrity and consistency of the occupational standards in the award. This is achieved through internal verification, undertaken by the approved centre (see paragraphs 48–57 inclusive below) and external verification undertaken by the awarding body (see paragraphs 58–72 inclusive below).

#### Internal verification

48. Centres must operate explicit, written internal verification procedures to ensure:
- the accuracy and consistency of assessment decisions between assessors operating at the centre
  - that assessors are consistent in their interpretation and application of the national occupational standards in the award.
49. Centres must appoint internal verifiers who will be responsible for:
- regularly sampling evidence of assessment decisions made by all assessors across all aspects of NVQ assessment. Sampling must include direct observation of assessment practice
  - maintaining up-to-date records of internal verification and sampling activity and ensuring that these are available for external verification
  - establishing procedures to ensure that all assessors interpret the national occupational standards in the same way
  - monitoring and supporting the work of assessors
  - facilitating appropriate staff development and training for assessors
  - providing feedback to the external verifier on the effectiveness of assessment
  - ensuring that any corrective action required by the awarding body is carried out within agreed timescales.
50. Centres must ensure that internal verifiers are competent to perform their role. Centres must therefore provide appropriate training and development opportunities to ensure that internal verifiers:
- either hold the qualifications needed to carry out internal verification – D34 or V1 – or within 18 months of commencing their role achieve V1, or any qualifications subsequently specified by the regulatory authorities, except where this requirement is replaced by equivalent measures contained within an assessment strategy approved by the regulatory authorities
  - carry out internal verification to the V1 standard
  - have the occupational expertise specified in the relevant assessment strategy before commencing their role and maintain the currency of this expertise for the duration of their role
  - understand the content, structure and assessment requirements for the awards they are verifying.



51. Centres must ensure that the decisions of unqualified internal verifiers are checked, authenticated and countersigned by an internal verifier who is appropriately qualified and occupationally expert as specified by the relevant sector body.
52. Awarding bodies must monitor a centre's compliance with these requirements. Centres must therefore provide evidence of their internal verifiers' development activities and qualifications.
53. Internal verifiers may undertake assessment at the centre. In such circumstances the internal verifier must have the qualifications and occupational expertise specified for assessors by the relevant sector body. Internal verifiers may verify only evidence they did not assess.
54. In exceptional circumstances, internal verification may be carried out by an external verifier. Awarding bodies may charge a centre for providing this service in line with their published costs and charges. In such cases the awarding body must ensure that the external verifier is competent to carry out internal verification and that the decisions and work of this person are subject to independent scrutiny by a different external verifier (see also paragraph 30). Awarding bodies must be able to show that these arrangements are effective.
55. Awarding bodies must provide centres with guidance on internal verification to ensure that there are accurate and consistent standards of assessment both between assessors operating within a centre and between centres offering the same award.
56. Guidance produced by the awarding body must include exemplars of:
  - procedures for standardising assessment so that assessors are operating to the same standard
  - models for developing an internal verification sampling plan appropriate to the centre's level of assessment activity. Models must ensure that over time all assessors, all assessment methods and all candidate units are included in the sample
  - procedures for standardising the judgements and decisions of internal verifiers operating in a centre
  - the types of records a centre must keep to demonstrate the effectiveness of its internal verification procedures.
57. Awarding bodies must monitor a centre's internal verification process through its own quality assurance arrangements. Centres must provide evidence demonstrating the effectiveness of such internal verification procedures against the requirements in paragraphs 48–56 above. Failure to meet these means that the integrity of assessment decisions at the centre is at risk. Therefore the awarding body must impose the appropriate sanction as specified in Appendix 3.

### External verification

58. External verifier visits to centres must be an integral part of an awarding body's quality assurance strategy. Awarding bodies must ensure that external verifiers visit only centres in which they have no direct or indirect personal or financial interest.
59. The minimum frequency of external verification visits to centres is usually two per year (a total of two days per year). The exact frequency and duration of external verifier visits must reflect the centre's performance, taking account of:
- number of assessment sites
  - number and throughput of candidates
  - number and turnover of assessors
  - number and turnover of internal verifiers.

Awarding bodies must put in place a risk management strategy for monitoring approved centres. To ensure consistency of approach to risk assessment across awarding bodies, risk assessment must identify and justify the number of external verifier visits required.

Awarding bodies must retain evidence that their risk management strategy is effective and must make this available to the regulatory authorities upon request.

60. Awarding bodies must require external verifiers to:
- confirm that centres continue to meet the centre approval criteria
  - recommend the imposition of appropriate sanctions on centres that fail to meet the requirements
  - confirm that assessments are conducted by appropriately qualified and occupationally expert assessors
  - sample assessment decisions to confirm that they are authentic and valid and that national standards are being consistently maintained
  - confirm that assessment decisions are regularly sampled, through internal verification, for accuracy against the national standards
  - check that claims for certification are authentic, valid and supported by auditable records
  - confirm that centres have carried out corrective actions as required by the awarding body
  - advise and support centres on the interpretation of national standards
  - advise and support centres on awarding body requirements and procedures, including access to fair assessment and appeals against awarding body decisions
  - provide centres with up-to-date information and advice in line with awarding body and regulatory authority guidance and requirements.

61. External verifiers must inform the centre in advance of planned activity such as a centre visit, to agree the scope of the visit and the verification and sampling activities that will take place. Awarding bodies must provide external verifiers with all the information they need to carry out the verification process effectively and to verify certification claims. Centres must understand that they are obliged to comply with any requests for access to premises, people and records for the purposes of external verification. If a centre fails to provide access, the awarding body must impose the appropriate sanction as specified in Appendix 3.
62. If a centre cancels a pre-arranged external verification visit at short notice, the awarding body must be satisfied that there was a legitimate reason to do so. If this cannot be established, the awarding body will reserve the right to withhold certification claims until a monitoring visit is completed (see also paragraph 35).
63. Awarding bodies must ensure centres are aware that the awarding bodies and the regulatory authorities reserve the right to perform such visits at short notice or without notice, to minimise the risk of unsubstantiated claims for certification.

### Sampling

64. Awarding bodies must provide external verifiers with all the information necessary for them to carry out the sampling process effectively. This includes published guidance on the sampling of assessment and internal verification decisions and of candidate and assessment records. Such guidance must ensure that the sampling strategy involves not only the inspection of evidence but also meetings with internal verifiers, assessors and candidates, in order that the external verifier can confirm whether the process of assessment, as well as the standards being used to judge candidate competence, meet national standards. The sampling strategy must also reflect the specific quality assurance needs of each centre. If external verification indicates that the consistency of assessment decisions and practices against the national occupational standards is at risk, an awarding body must increase the sample.
65. Awarding bodies must ensure that external verifiers record the sample and the rationale behind its selection, so that the awarding body can monitor the characteristics of selected samples over time as well as the effectiveness of the sampling carried out by its external verifiers. Over time, the sampling strategy must sample:
  - the assessment decisions of all assessors
  - all assessment methods
  - all assessment locations
  - candidates at different stages of their award

- the decisions and records of all internal verifiers
- assessment records.

Awarding bodies must ensure that particular attention is always paid to the decisions of unqualified or inexperienced assessors and internal verifiers.

66. Awarding bodies must ensure that the selection of candidates, assessors and internal verifiers for sampling are not left solely to the discretion or convenience of the centre. External verifiers must select some candidates without prior notification to the centre, to minimise the risk of unsubstantiated claims for certification. External verifiers must inform the awarding body if a centre fails to make available those candidates selected for interview. The centre must provide proof that these candidates exist. If this cannot be clearly established, the awarding body must:
- inform the regulatory authorities
  - suspend the centre from registering further candidates or claiming certificates
  - start investigative action as agreed with the regulatory authorities.

#### External verifier reports

67. External verifiers must provide feedback to centres at the end of each visit. This must be followed by a written report that:
- records the date of the visit
  - details the monitoring and verification activities undertaken, including information on the sample, any audits conducted and who was interviewed
  - details any changes in centre staff or their competence since the last visit
  - provides explicit feedback to the centre on the quality and consistency of its assessment process and the effectiveness of internal verification arrangements
  - highlights areas of good practice against the centre approval criteria
  - specifies what actions the centre must take if its performance does not meet the requirements, when these actions must be completed and who is responsible for completing them
  - confirms whether the centre has carried out any previously agreed action points.
68. Awarding bodies must use external verifier reports as a key component of their ongoing monitoring work with centres. If a centre's external verifier changes, the awarding body must provide the new verifier with a copy of that centre's most recent report and action plan.
69. If a centre is consistently failing to meet the centre approval criteria or has failed to implement previously agreed actions, external verifiers are responsible for recommending that the awarding body impose the appropriate sanction as specified in Appendix 3.

70. Awarding bodies must maintain rigorous quality assurance and control arrangements that ensure accurate and consistent assessment decisions against the national occupational standards specified for an award, both within and between centres approved to offer an NVQ.
71. Awarding bodies must ensure that external verifiers are competent to perform their role. Awarding bodies must therefore provide appropriate training and development opportunities to ensure that external verifiers:
- either hold the qualifications needed to carry out external verification – D35 or V2 – or within 12 months of commencing their role achieve V2, or any qualifications subsequently specified by the regulatory authorities except where this requirement is replaced by equivalent measures contained within an assessment strategy approved by the regulatory authorities
  - carry out external verification to the V2 standard
  - have the occupational expertise specified in the relevant assessment strategy before commencing their role and maintain the currency of this expertise for the duration of their role
  - understand the tariff of sanctions specified in Appendix 3 and how to apply it
  - understand the national occupational standards for the NVQs they will be verifying
  - know the awarding body's systems and documentation
  - understand the NVQ system and any national policy and guidance documents describing assessment and verification practice.
72. Awarding bodies must monitor the performance and judgements of their external verifiers for accuracy and consistency. This must include the use of performance review systems and supervised external verifier visits, plus the monitoring of centre feedback, external verifier reports and consistency in applying the tariff of sanctions. The frequency of such monitoring must reflect the prior experience and performance of the individuals concerned. If the accuracy or consistency of external verifier decisions are in doubt, the awarding body must act promptly to safeguard the integrity of the verification process.

## Dealing with malpractice

Links to and amplifies paragraphs 28–31 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland (2004)*

73. Awarding bodies must ensure that external verifiers are fully trained in the procedures for dealing with suspected centre malpractice or maladministration. This includes instances in which the external verifier must recommend that the centre's approval status be withdrawn or suspended. Awarding bodies must record such recommendations, making them available to the regulatory authorities upon request, and take the necessary measures to maintain the integrity of the award.
74. Approved centres must report any malpractice suspected after candidate registration. They must also understand that failure to cooperate may have implications for future certifications and candidate registration. If malpractice or maladministration is suspected in a centre or a partner organisation involved in the administration or assessment of the qualification, the awarding body must immediately suspend the centre from making claims for certification. This is to allow an investigation to satisfy the awarding body that safeguards at the centre are adequate to guarantee valid claims. The key factor in deciding whether to investigate is when there are reasonable grounds to doubt the integrity of the assessment process.
75. An awarding body must have the resources available to investigate alleged irregularities at its centres. Those managing and carrying out investigations must be independent of the management of normal working relationships with the centres or external verifiers involved. Unless an awarding body can support a completely separate team for this work, it must be able to show how it will manage potential conflicts of interest between its commercial activities and the investigation of its customers.
76. Centres are the responsibility of the awarding bodies that have approved them. As such, the responsibility for investigating alleged irregularities normally rests with awarding bodies unless special circumstances require the involvement of the regulatory authorities. Awarding bodies should undertake an initial evaluation, including a risk assessment to establish the scope of the matter. If awarding bodies decide to conduct a full and further investigation, they should inform the regulatory authorities when this begins and provide details of the centre, the allegations and the qualification(s) concerned.
77. An awarding body must prepare a final report of its investigation. This must detail to the regulatory authorities:

- the origin of the complaint or how the alleged irregularity(ies) was discovered
  - the investigations carried out
  - the evidence put forward
  - the conclusions drawn
  - the recommendations for action and resolution of the matter.
78. Exceptionally, the regulatory authorities may need to take over an investigation. In this case they will inform the awarding body in writing and give their reasons for taking such action.
79. An awarding body must inform the regulatory authorities whenever it finds evidence that certificates may be invalid. It must then agree the appropriate action with the regulatory authorities. NVQ certificates are in principle deemed invalid in the following circumstances:
- the evidence assessed is not the candidate's own work
  - the candidate is still working towards the qualification after the certificate has been claimed
  - the certificates have been claimed on the basis of falsified records
  - the awarding body has issued certificates contrary to the *NVQ code of practice* and the accreditation agreement.
80. These circumstances set out the reasons why a certificate may be judged to be invalid. They do not prescribe the action that can be taken. A variety of factors need to be taken into account and awarding bodies should discuss individual cases with the regulatory authorities.
81. The responsibility for the assessment and certification of candidates is shared between a centre and an awarding body. Centres therefore need to take their share of the responsibility when dealing with problems caused for candidates when certificates have been wrongly claimed. If a decision is taken to invalidate certificates the awarding body must ensure that the following actions are taken:
- follow the principle of seeking to protect the interests of candidates, in so far as is reasonable and possible in the circumstances
  - contact the candidates involved and notify them of the status of their certificates and of any arrangements for re-assessment and/or certification
  - cancel the original certificates on its database so that duplicates cannot be issued
  - give the regulatory authorities details of the invalid certificates and, if appropriate, make the information available to public funding bodies.

# Appendix 1

## Approved centre criteria

### 1 Management systems

NVQ 2006 approved centre criteria	NVQ 2001 Appendix 2 criteria – references below are for the original criteria	Criteria	Possible sources of evidence
1.0	1.1.1	The centre's aims and policies in relation to NVQs are supported by senior management and understood by the assessment team.	Documented quality procedures. Progress reports and staff updates.
1.1	1.1.2	The centre's access and fair assessment policy and practice is understood and complied with by assessors and candidates.	Documented policies and procedures. Access and fair assessment policy review mechanisms.
1.2	1.1.3	The roles, responsibilities, authorities and accountabilities of the assessment and verification team across all assessment sites are clearly defined, allocated and understood.	Documented quality assurance procedures. An organisational chart. Documented and signed agreements indicating the lines of accountability of partner organisations in relation to the management of assessment and internal quality assurance. Records of all assessment sites and personnel. CVs of the assessment team and internal verifiers.
1.3	1.1.5	There is effective communication within the assessment team and with the awarding body.	Staff handbooks and updates. Organisational charts. Minutes of team meetings. Records of communication with the awarding body.
1.4	1.2.6	Awarding bodies are notified of any changes that may affect the centre's ability to meet the centre approval requirements.	Notification of changes to the assessment and verification team. Notification of changes to resources.
1.5	1.2.5	Assessors and verifiers have sufficient time, resources and authority to perform their roles and responsibilities effectively.	A record of assessor/candidate allocation. Candidate/assessor ratios and time allocation. Oral confirmation from assessors/verifiers.
1.6	3.1.3	Information supplied to the awarding body for the purposes of registration and certification is complete and accurate.	Records of candidate entry/registration details and certificate claims.
1.7	2.2.2	Queries about the qualification specification, assessment guidance or related awarding body material are resolved and recorded.	Records of queries raised with awarding bodies. Records/minutes of queries raised with the internal verifier.



NVO 2006 approved centre criteria	NVO 2001 Appendix 2 criteria – references below are for the original criteria	Criteria	Possible sources of evidence
1.8	3.1.1	Candidate records and details of achievements are accurate, kept up to date, securely stored in line with awarding body requirements, and available for external verification and auditing.	Candidate registration details. Candidate assessment records. Evidence files/portfolios. Security and access arrangements.
1.9	2.2.6	Requests are complied with for access to premises, records, information, candidates and staff for the purpose of external verification.	Data and information management systems. Candidate tracking systems. Assessment and internal verification records.

## Appendix 1 – continued

### Approved centre criteria

#### 2 Resources

NVO 2006 approved centre criteria	NVO 2001 Appendix 2 criteria – references below are for the original criteria	Criteria	Possible sources of evidence
2.0	1.2.3	There are sufficient competent and qualified assessors and internal verifiers to meet the demand for assessment and verification activity.	CVs and development plans for the assessment team. A list of qualified assessors and internal verifiers. Assessor/candidate ratios.
2.1	1.2.4	A staff development programme is established for the assessment and verification team in line with identified needs.	Staff induction and guidance materials. Records of meetings/briefings/updates. Records of individual development plans. Action plans to acquire the relevant qualifications.
2.2	1.2.1	Resource needs are accurately identified in relation to the specific award and resources are made available.	Records of resource availability. Evidence of any additional resources obtained.
2.3	1.2.2	Equipment and accommodation used for the purposes of assessment comply with the requirements of relevant health and safety acts.	Public employee liability certificates. Records of equipment and accommodation. Maintenance schedules. Health and safety policies.

## Approved centre criteria

### 3 Candidate support

NVO 2006 approved centre criteria	NVO 2001 Appendix 2 criteria – references below are for the original criteria	Criteria	Possible sources of evidence
3.0	2.1.1	Information, advice and guidance about qualification procedures and practices are provided to candidates and potential candidates.	Candidate guidance and induction materials. Details of support services available. Appeals procedures. Oral confirmation by candidates.
3.1	2.1.2	Candidates' development needs are matched against the requirements of the award and an agreed individual assessment plan is established.	Candidate initial assessment procedures. Candidate assessment plans. Learner/trainee contracts.
3.2	2.1.3	Candidates have regular opportunities to review their progress and goals and to revise their assessment plan accordingly.	Candidate assessment plan, frequency of review meetings; examples of revisions to assessment plans.
3.3	2.2.1	Access to assessment is encouraged through the use of a range of valid assessment methods.	Assessment plans and candidate assessment records. Provision for candidates with particular assessment requirements.
3.4	2.1.4	Particular assessment requirements of candidates are identified and met where possible.	Materials/equipment/facilities to support candidates with particular requirements.
3.5	2.1.5	There is an established appeals procedure that is documented and made available to all candidates.	Documented appeals procedure, including details of grounds for appeal and timescales. Records of appeals made and their outcomes.
3.6	2.2.7	Unit certification is made available to candidates.	Records of units registered/claimed/awarded. Induction materials.

## Appendix 1 – continued

### Approved centre criteria

#### 4 Assessment and verification

NVO 2006 approved centre criteria	NVO 2001 Appendix 2 criteria – references below are for the original criteria	Criteria	Possible sources of evidence
4.0	1.1.4	Internal verification procedures and activities are clearly documented, consistent with national requirements and ensure the quality and consistency of assessment.	Internal verification plans and reports. A sampling strategy and schedule of activity. Records of assessment team meetings. Assessor networking opportunities.
4.1	2.2.4	Assessment decisions and practices are regularly sampled and findings are acted upon to ensure consistency and fairness.	Sampled assessments (observation, candidate portfolios, knowledge evidence etc). Internal verification plans and records of internal verification activity. Records of assessment sampling strategies. Minutes of assessment team meetings. Records of networking/standardisation events.
4.2	3.1.2	Records of internal verification activity are maintained in line with awarding body requirements and made available for the purposes of auditing.	Internal verification plan and sampling records. Minutes of assessment team meetings.
4.3	3.2.2	The effectiveness of the internal verification strategy is reviewed against national requirements and corrective measures are implemented.	Internal reviews of sampling strategies. External verifier reports. Evidence of corrective actions taken.
4.4	2.2.3	Assessment is conducted by qualified and occupationally expert staff.	Details of the assessment team including occupational background, experience, possession of relevant qualifications. Details of countersigning arrangements for any assessment decisions made by unqualified assessors.
4.5	2.2.5	Internal verification is conducted by appropriately qualified and experienced staff.	Details of internal verifier occupational background, experience and relevant qualifications. Details of countersigning arrangements for any internal verification decisions made by unqualified internal verifiers.

## Approved centre criteria

### 5 Records

NVO 2006 approved centre criteria	NVO 2001 Appendix 2 criteria – references below are for the original criteria	Criteria	Possible sources of evidence
5.0	3.2.4	The centre's achievements are monitored and reviewed and used to inform future centre qualification developmental activity.	Internal audit/self-assessment arrangements. Records of findings against the approval requirements. Evidence of corrective actions taken/implemented.
5.1	3.2.3	Candidate, employer and other feedback is used to evaluate the quality and effectiveness of qualification provision against the centre's stated aims and policies, leading to continuous improvement.	Evaluation forms/surveys. Users' charter/customer service statements.
5.2	3.2.1	Actions identified by external verification visits are disseminated to appropriate staff and corrective measures are implemented.	External verifier report(s) circulated to the assessment team and senior management. Action plans.
5.3	3.1.4	Information and recording systems enable candidates' achievements to be monitored and reviewed in relation to the centre's equal opportunities policy.	Achievement records in relation to the access and fair assessment policy. Statistical information on achievement and certification rates analysed by factors such as ethnic origin, disability and gender.

## Appendix 2

### Common data requirements

#### Background

All awarding bodies contributing to a national system of qualifications need to provide detailed, accurate information to measure success against agreed objectives. Comprehensive data enables providers, policy makers and other users to make informed decisions in a number of areas, including:

- planning, quality assurance and auditing
- progress towards meeting national targets for education and training, and raising skills levels within the population
- the number of individuals participating in the system and rates of completion and achievement
- demand within the qualifications market place.

Paragraphs 12 and 13 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004) sets out data requirements to be met by awarding bodies. In particular, an awarding body must ensure that for each qualification:

- data requirements, including those of the regulatory authorities are specified and met
- any requirements for centres to maintain records and evidence and to provide data are expressed clearly and with suitable guidance.

In addition, paragraphs 8–42 of *The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004) cover requirements of an awarding body's management. In particular, an awarding body's arrangements for the management of qualifications must ensure that:

- the administrative obligations for centres are as clear and streamlined as possible
- centres and candidates are systematically registered.

The following form the minimum data requirements that the regulatory authorities would expect awarding bodies to meet. There may be additional requirements for particular qualifications.

## Proposed common data requirements

Data item	Definition
-----------	------------

## a) Centre data

Centre number	The unique centre identifier.
Centre name	
Centre address	
Centre postcode	
Centre telephone no.	
Centre type	

## b) Candidate data

Candidate surname	The surname or family name of the candidate.
Candidate first name	The first name(s) or the first letter from up to three forenames of the candidate.
Date of birth	dd/mm/yyyy
Gender	M/F
Candidate ethnic group	The ethnic group of the candidate (from the Government statistical services standard list). <sup>4</sup>
Awarding body's candidate identifier	The identifier used by the awarding body to uniquely identify a candidate.
Registration date	The date on which a candidate is registered with the awarding body.
Unit certification	List of units achieved by the candidate.
Final result	The candidate's achieved result.
Award date	The date on which a certificate is issued.
Particular assessment requirements	Does the candidate have a need for particular assessment requirements? Y/N
Language(s) in which assessment undertaken, ie English and/or Welsh/Irish	

## c) Qualification and unit data

Qualification(s) code(s)	The unique qualification identifier if an accredited qualification.
Qualification level	
Qualification title(s)	The name of the qualification(s).
Unit code	The unique unit identifier.
Unit titles	The name of the units.

<sup>4</sup> See Government-approved list of ethnic groupings overleaf.

2001 Census ethnic group question for England and Wales

<b>A</b>	<b>White</b>
<input type="checkbox"/>	British
<input type="checkbox"/>	Irish
<input type="checkbox"/>	Any other white background
Please write in	
<b>B</b>	<b>Mixed</b>
<input type="checkbox"/>	White and black Caribbean
<input type="checkbox"/>	White and black African
<input type="checkbox"/>	White and Asian
<input type="checkbox"/>	Any other mixed background
Please write in	
<b>C</b>	<b>Asian or Asian British</b>
<input type="checkbox"/>	Indian
<input type="checkbox"/>	Pakistani
<input type="checkbox"/>	Bangladeshi
<input type="checkbox"/>	Any other Asian background
Please write in	
<b>D</b>	<b>Black or black British</b>
<input type="checkbox"/>	Caribbean
<input type="checkbox"/>	African
<input type="checkbox"/>	Any other black background
Please write in	
<b>E</b>	<b>Chinese or other ethnic group</b>
<input type="checkbox"/>	Chinese
<input type="checkbox"/>	Any other
Please write in	



## Appendix 3

### Sanctions for non-compliance with the centre approval criteria

#### Introduction

The regulatory authorities have developed a tariff of sanctions for dealing with approved centres whose NVQ management, assessment and quality assurance systems fail to meet the centre approval criteria. Based directly upon these requirements, which are seen to be tried and tested and widely accepted, the tariff is designed to ensure:

- a transparent, fair and consistent response by all awarding bodies when specific shortcomings are found at their approved centres
- public confidence in the quality assurance and control arrangements underpinning NVQs.

The regulatory authorities will monitor each awarding body's use of the tariff as part of their ongoing post-accreditation monitoring. An awarding body may withdraw centre approval for reasons not directly related to the quality of assessment, such as a failure to meet the awarding body's commercial terms of business. The tariff will be reviewed and updated as necessary in the light of operational experience.

#### The tariff of sanctions

The tariff links five levels of transgression against the centre approval criteria with a required sanction. These are set out in detail in Table 1 below, together with a rationale for the sanction, and represent the minimum response required of an awarding body to a particular shortcoming or problem.

Table 1: Levels of transgression

Tariff/Level of transgression	Sanction	Rationale
1	Entry in action plan	Non-compliance with centre approval criteria but no threat to the integrity of assessment decisions
2	Removal of direct claims status, ie claims for certification must be authorised by the external verifier	Close scrutiny of the integrity of assessment decisions required
3	(a) Suspension of registration (b) Suspension of certification	(a) Threat to candidates (b) Loss of the integrity of assessment decisions – risk of invalid claims for certification
4	Withdrawal of centre approval of specific NVQs	Irretrievable breakdown in management and quality assurance of specific NVQs
5	Withdrawal of centre approval for all NVQs	Irretrievable breakdown in management and quality assurance of all NVQs run by the centre

## Sanctions and centre approval criteria

### Tariff levels 1–3

For tariff levels 1–3, Table 2 links specific failure to meet requirements (non-compliances) with specific sanctions. With some requirements, more than one level of sanction may apply depending on the gravity of the infringement as indicated in the table.

### Tariff levels 4 and 5

For tariff levels 4 and 5 there may be non-compliances across a range of centre approval criteria. These would need to indicate significant faults in management and quality assurance, resulting in an ongoing failure to meet essential assessment requirements. This would apply to a specific NVQ at tariff level 4, or across all NVQs at tariff level 5. Failure to rectify non-compliances at tariff level 4 is a reason for applying a sanction at tariff level 5.

### Guidance on interpretation

The above sanctions represent a minimum response to identified non-compliances, but there will be circumstances in which an awarding body may judge that a higher level of tariff is justified.

### Combinations

A combination of non-compliances at a particular tariff might call for a more serious response. A judgement should be made against the rationale of the sanction. Thus a combination of infringements at tariff 2 could threaten the integrity of assessment decisions and thus merit a response at tariff 3.

### Persistence

A failure to implement action plan requests at tariff level 1 should invoke a tariff level 2 response. Similarly a failure to rectify faults that have given rise to a level 2 sanction must invoke a tariff level 3 response.

### Recurrences

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

### Malpractice

If the circumstances and nature of non-compliance indicate that fraudulence is involved, the procedures for dealing with malpractice should be invoked.

Table 2: Tariff of sanctions for non-compliance

Non-compliance issue	Approved centre criteria that currently applies	Sanction	Rationale
1.1 Centre's aims, policies and assessment practices, and responsibilities of personnel are not clear or well understood by assessment team 1.2 Internal verification procedures and activities not clearly documented 1.3 Communication within the assessment team and with the awarding body is ineffective 1.4 Equipment and accommodation do not comply with health and safety acts 1.5 Insufficient qualified assessors 1.6 Assessors/internal verifiers do not have adequate development plans 1.7 Candidates are not aware of their rights and responsibilities, eg no appeals procedure for candidates 1.8 There is inadequate assessment planning with candidates 1.9 Queries are not resolved or recorded 1.10 Range of assessment methods is insufficient to encourage access 1.11 Changes to personnel of the assessment and verification team are not notified to the awarding body 1.12 Unit certification is not made available to candidates 1.13 There is inadequate monitoring or review of procedures	1.0–1.2  4.0  1.3  2.3  2.0 2.1  3.0, 3.1, 3.2, 3.4, 3.5  3.1, 3.2  1.7 3.3  1.4  3.6  4.3, 5.0, 5.1, 5.2	Level 1 Entry in action plan	Non-compliance with centre approval criteria but no threat to the integrity of assessment decisions
2.1 Assessors have insufficient time, resources or authority to perform their role 2.2 Decisions of unqualified assessors have not been countersigned by qualified assessor 2.3 Assessment decisions are not consistent 2.4 Insufficient qualified internal verifiers 2.5 Decisions of unqualified internal verifier have not been countersigned by qualified internal verifier 2.6 Records are insufficient to allow audit of assessment 2.7 Previously agreed corrective measures relating to level 1 are not implemented	1.5  4.4  4.1 2.0 4.5  4.2  5.2	Level 2 Removal of direct claims status, ie claims for certification must be authorised by the external verifier	Close scrutiny of the the integrity of assessment decisions required
3A.1 Assessment process disadvantages candidates 3A.2 Assessment decisions are unfair  3B.1 No qualified internal verifier 3B.2 Assessment does not meet national standards 3B.3 The centre fails to provide access to requested records, information, candidates and staff 3B.4 Assessed evidence is not the authentic work of candidates 3B.5 Records of assessment show serious anomalies 3B.6 Certification claims made before all the requirements of assessment are satisfied 3B.7 Previously agreed corrective measures relating to level 2 non-compliance are not implemented	3.0, 3.1, 3.2, 3.4, 3.5 1.1, 3.0, 3.1, 3.2, 3.3, 3.4, 3.5, 4.1 2.0 1.7, 3.3, 4.1, 4.4 1.9  1.8  1.6, 1.8, 4.2, 5.3 1.6  5.2	Level 3A/3B Suspension of registration/certification	3A – threat to candidates           3B – loss of the integrity of assessment decisions – danger of invalid claims for certification

Table 2: Tariff of sanctions for non-compliance – continued

Non-compliance issue	Approved centre criteria that currently applies	Sanction	Rationale
<p>4.1 Significant faults in the management and quality assurance of the NVQ programme which result in an ongoing failure to meet the core requirements for the conduct of assessment.</p> <p>4.2 Previously agreed corrective measures relating to a level 3 non-compliance have not been implemented</p>		<p>Level 4 Withdrawal of centre approval for specific NVQs</p>	<p>Irretrievable breakdown in management and quality assurance of specific NVQs</p>
<p>5.1 Significant faults in the management and quality assurance of all NVQ programmes</p> <p>5.2 Previously agreed corrective measures relating to a level 4 non-compliance have not been implemented</p>		<p>Level 5 Withdrawal of centre approval for all NVQs</p>	<p>Irretrievable breakdown in management and quality</p> <p>Irretrievable breakdown in management and quality</p>

## Glossary

Term	Definition	Notes
Accreditation	The process through which the regulatory authorities confirm that a qualification and the associated specification conform to the regulatory criteria.	
Appeal	A process through which an awarding body may be challenged on the outcome of an enquiry about results or, where appropriate, other procedural decisions affecting a centre or individual candidates.	
Assessment	The process of making judgements about the extent to which a candidate's work meets the assessment criteria for a qualification or unit, or part of a unit.	
Assessment specification	A description of the methods and processes (and tasks where appropriate) to be used to assess a qualification or unit.	
Assessor	The person who assesses a candidate's work.	
Authentication	<p>Confirmation that work has been produced by the candidate who is putting it forward for assessment, and where applicable that it has been produced under the required conditions.</p> <p>Confirmation by an awarding body from its records that a candidate was awarded a qualification that he or she claims to have been awarded.</p>	Typically in the form of a statement by a candidate's tutor, employer, etc. Some qualifications also require the candidate to make a statement of authenticity. Where work is part of a collaborative effort, authentication also states the candidate's role in the work.

## Glossary – continued

Term	Definition	Notes
Awarding body	An organisation or consortium that awards qualifications.	To be eligible to award accredited qualifications, awarding bodies must meet the requirements of the regulatory authorities.
Candidate	A person who is registered with an awarding body for a qualification or unit.	
Centre	An organisation or consortium accountable to an awarding body for the assessment arrangements leading to a qualification or units.	A centre could, for instance, be an educational institution, training provider or employer. It may operate across more than one organisation or site.
Centre approval	A process through which a centre wishing to offer particular qualifications is recorded as having committed itself to maintain the required quality and consistency of assessment and comply with other expectations of the awarding body.	
Centre qualification approval	A process through which a centre wishing to offer particular qualifications is confirmed as being able to maintain the required quality and consistency of assessment and complies with other expectations of the relevant awarding body.	
Certificate	The record of attainment in a unit or qualification issued by the awarding body.	

Term	Definition	Notes
Code of practice	Principles and practices specified by the regulatory authorities against which awarding body processes and procedures for the assessing and awarding of particular qualification types are designed and evaluated.	
Competence	The ability to carry out activities to the standards required.	
Content	The coverage of a qualification, programme, module, unit or other component, expressed as the knowledge, understanding, skills or area of competence that is covered.	
External assessment	A form of independent assessment where assessment tasks are set, and candidates' work assessed, by the awarding body.	
External verifier	An individual appointed by the awarding body to ensure accurate and consistent standards of assessment, across centres and over time.	
Head of centre	A named individual in the centre responsible for the overall quality assurance, management and administration of awards.	
Independent assessment	Assessment of candidates' work that is carried out by assessors who do not have a vested interest in the outcome.	

## Glossary – continued

Term	Definition	Notes
Internal assessment	Assessment where assessment tasks are set, and candidates' work assessed, wholly within the candidate's centre, subject where appropriate to external moderation or verification.	
Internal verifier	An individual appointed by the centre to ensure accurate and consistent standards of assessment, both between assessors operating within a centre and between centres offering the same award.	
Key skills	General skills that assist in improving learning and performance regardless of the specific area of study.	<p>The regulatory authorities have developed standards for six key skills:</p> <ul style="list-style-type: none"> <li>■ application of number</li> <li>■ communication</li> <li>■ information technology</li> <li>■ improving own learning and performance</li> <li>■ working with others</li> <li>■ problem solving.</li> </ul>
Level	The level at which a qualification or unit is positioned in the National Qualifications Framework.	A qualification may be made up of units that are not all regarded as being at the same level.
Monitoring	The review of, and reporting on, the awarding body's quality assurance arrangements by the regulatory authorities or the awarding body.	
National occupational standards	Statements that describe the outcomes of competent work in an occupational field.	National occupational standards are developed by approved sector bodies and approved by the appropriate mechanism.



Term	Definition	Notes
Qualification	An award made by an awarding body for demonstration of achievement or competence.	<p>The regulatory authorities can accredit qualifications which:</p> <ul style="list-style-type: none"> <li>■ are external public awards, ie they are not internal certificates made by an employer to its staff or trainees, or by a college to its students</li> <li>■ are permanent – once achieved, they are retained by the candidate</li> <li>■ are not degrees or other higher education awards made by degree-awarding institutions acting in their own right.</li> </ul>
Regulatory authorities	Government-designated statutory organisations required to establish national standards for qualifications and secure consistent compliance with them.	The regulatory authorities for qualifications in England, Wales and Northern Ireland are respectively QCA, DELLS and CCEA.
Sector body	A body (such as a sector skills council) approved by the regulatory authorities as responsible for formulating and reviewing standards of occupational competence for an employment sector.	
Standardisation	A process to ensure that the assessment criteria for a qualification, unit or component are applied consistently by assessors, moderators and verifiers.	Standardisation can be carried out within centres (internal standardisation) as well as by awarding bodies across their centres.

## Glossary – continued

Term	Definition	Notes
Unit (of a qualification)	The smallest part of a qualification that is capable of certification in its own right.	Units may be designed as part of a specific qualification or group of qualifications, or designed independently (eg to be taken for stand-alone certification or to attract credit and be built up towards qualifications). Units may consist of separately assessed components. None of this implies that units must be taught or delivered as discrete entities.
Validity	The fitness of purpose of an assessment tool or scheme.	
Verification	A process of moderation that includes local checking of assessment processes and decisions.	

# About this publication

## Who's it for?

This document is for awarding bodies and other organisations involved in the provision of NVQs.

## What's it about?

This document specifies the processes and procedures required to ensure high-quality, consistent and rigorous standards in the assessment and awarding of NVQs.

It replaces *The NVQ code of practice* (2001).

## Related materials

*The statutory regulation of external qualifications in England, Wales and Northern Ireland* (2004)

## What next?

The regulatory authorities will keep the NVQ code of practice under review to ensure that it continues to reflect best practice.

## This publication has been sent to:

All NVQ awarding bodies, sector bodies and inspection and funding agencies.

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