heliguy™

INTERNAL QUALITY ASSURANCE POLICY

VERSION 1.5
06/01/2023

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DOCUMENT AMENDMENT RECORD

VERSION	DATE	AMENDMENT SUMMARY	AUTHOR	SIGNATURE
1.0	30/11/2021	Initial Release	BS	
1.1	13/12/2021	Addition of learner interviews as part of IQA policy	BS	
1.2	05/01/2022	Addition of Formative Sampling Section	BS	
1.3	11/03/2022	Additional IQA sampling information	AL	A.Lee
1.4	18/03/2022	Addition of Appendix A - IQA Report Form	BS	

| 1.5 | 06/01/2023 | Updated Head of Training | MB | |

REFERENCE DOCUMENTS

VERSION	DATE	DOCUMENT TITLE	SOURCE
v7.0	N/A	TQUK Centre Handbook	Internal File Path: [00.01]
v1.2	06 January 2023	Malpractice & Maladministration Policy	Internal File Path: [00.03]

TERMINOLOGY

TERM	MEANING
Audit	A systematic, independent and documented process for obtaining evidence and evaluating it objectively, in order to determine the extent to which requirements are complied with.
Corrective action	Steps that are taken to remove the causes of an existing non-conformity or undesirable situation. The corrective action process is designed to prevent the recurrence of nonconformities or undesirable situations. It aims to make sure that existing nonconformities and situations don't happen again and to prevent recurrence by eliminating causes. Corrective actions address actual problems. Because of this, the corrective action process can be thought of as a problem-solving process.
Inspection	An independent, documented conformity evaluation by observation and judgement, accompanied as appropriate by measurement, testing or gauging, in order to verify compliance with applicable requirements.
Non-compliance	Failure to meet regulatory or other requirements. A compliance audit makes findings of non-compliance
Non-conformance	Nonfulfillment of a requirement. Non-conformity or non-conformances are deviations from established procedures, programs and other arrangements related to the organisation. They may include non-compliances to regulations, but not all non-compliances are necessarily non-conformances.
Observation	Observation indicates that a situation has been discovered during an audit warranting clarification or further investigation in order to improve the overall status and effectiveness of the organisation. Observations do not involve situations where there is direct evidence indicating non-conformance. Observations may signal the potential for a future nonconformity.
Preventive action	Preventive actions are steps that are taken to remove the causes of potential nonconformities or potential situations that are undesirable. The preventive action process is designed to prevent the occurrence of non-conformities or situations that do not yet exist. It tries to prevent occurrence by eliminating causes. While corrective actions prevent recurrence, preventive actions prevent the occurrence, both types of actions are intended to prevent non-conformities. Preventive actions address potential problems, ones that haven't yet occurred. In general, the preventive action process can be thought of as a risk analysis process.

1. INTRODUCTION

The aim of this policy is to outline the procedure by which Colena Ltd trading as, and herein referred to as heliguy™, manages and monitors the training and assessment activities of regulated qualifications under its approval as a Training Qualifications United Kingdom (TQUK) recognised centre. Appropriate governance and assurance of assessment activities maintains the continuity of the qualification and ensures consistency across the organisation.

2. SCOPE

This policy applies to any employee of heliguy™, as well as candidates who are undertaking any regulated qualification with heliguy™.

3. COMMITMENT

Heliguy™ is committed to ensuring the highest standards are maintained and the prevention of any malpractice or maladministration in the development, delivery and award of qualifications. Allegations of malpractice or maladministration are harmful to the reputation of heliguy™ and the qualification(s) which it offers. This will primarily be governed by this Internal Quality Assurance (IQA) policy.

4. NOMINATED PERSONNEL

The Accountable Manager can delegate any responsibilities, of any role, to any individual deemed suitable. Changes to nominated personnel must be reflected accordingly within the affected documents and the awarding organisation informed as soon as practical. Due to factors such as, but not limited to illness, annual leave or maternity/ paternity leave, it may be necessary for the Accountable Manager to assign aspects of roles and responsibilities to an individual on a temporary basis, in which case, given the estimated duration of the absence, the Accountable Manager may decide whether the assignment should be reflected accordingly. Where responsibility is delegated on a temporary basis and the associated documents are not to be updated, the Accountable Manager is responsible for ensuring that all aspects of the aforementioned responsibility is understood and remains ultimately accountable for the responsibilities of the role.

The following personnel are assigned specific responsibilities in relation to the IQA:

ASSIGNED ROLE	NOMINATED PERSONNEL	QUALIFICATION REQUIREMENTS
Accountable Manager	Joel Ross	1. Be in a position capable of making financial and strategic decisions on behalf of the organisation.
IQA Representative/ Compliance Monitoring Manager	Amber Lee Michael Smith	1. Occupationally competent in the subject area being delivered and have experience in audit based assessment or other relevant experience in similar assessment based methodology. 2. Possess or be working towards a relevant qualification. This could include: ● Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice ● Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice ● V1 Conduct internal quality assurance of the assessment process ● D34 Internally verify the assessment process
Head of Training	Mark Blaney	1. Occupationally competent in the subject area being delivered and have experience in the provision of training. 2. Possess or be working towards a relevant qualification. This could include: ● Level 3 Award in the Education & Training

5. RESPONSIBILITIES

a.   Accountable Manager. The responsibilities of the Accountable Manager includes:

    i.   Establishing and maintaining an effective IQA system
    ii.   Ensuring the organisation has sufficient qualified personnel for tasks and activities
    iii.   Ensuring all activities can be financed

b.   IQA Representative/ Compliance Monitoring Manager. The responsibilities of the IQA Representative/ Compliance Monitoring Manager includes:

    i.   Governance of the IQA Policy
    ii.   Implementing the IQA Policy
    iii.   Communication of IQA Policy
    iv.   Dip sample audit of candidate record
    v.   Maintain a record of any non-conformance

c.   Head of Training. The responsibilities of the Head of Training includes:

    i.   Provision of quality learning material and learning experience
    ii.   Monitoring of candidate activities
    iii.   Provision of instructor/ assessor training
    iv.   Monitoring instructor/ assessor activities
    v.   Assurance of consistency in assessments
    vi.   Monitoring of internal processes
    vii. Management of digital systems (Candidate Management System/ Learning Management System)
   viii. Adherence to defined policies and procedures (internal & external)

6. **INTERNAL QUALITY ASSURANCE PROCESSES**

    1. **New Employee.** Any new employee associated with the facilitation of regulated qualifications will be mentored and monitored until such time that they can be approved by the Head of Training.

    2. **Compliance Audit.** The IQA representative/ Compliance Monitoring Manager will conduct random audits at least each quarter, whereby a random dip sample will be evaluated against defined processes and procedures. Any occurrences of malpractice or maladministration must be managed in accordance with the malpractice and maladministration policy.

    3. **Training & Continual Professional Development.** All personnel must be appropriately trained, and have their competence assessed in all required duties. Staff training is the responsibility of the Head of Training, who is also responsible for maintaining records of all training accomplished. CPD may include the following:

        a.   Peer observations;
        b.   Head of Training observations;
        c.   IQA observations;
        d.   Webinars;
        e.   Training courses – internal and external;
        f.   Update Training;
        g.   Independent activity linked to relevant subject area;
        h.   Standardisation training;
        i.   Self-assessment and evaluation.

    4. **Standardisation.** Instructors and assessors will undergo standardisation training every quarter to ensure consistency across the administration, training and assessment provision. This may also be discretionary by the Head of Training in response to an allegation of malpractice or maladministration. Standardisation ensures consistent quality of delivery, accuracy and consistency of assessment decisions, both formative and summative,and improves and develops the practice of assessors.

        The agenda for Standardisation meetings will be based on areas of practice identified through sampling, observation of delivery and assessment, feedback from EQA visits/sampling or as a result of changes to standards or the sector itself.

5. **Observation.** Each assessor will be subject to a quarterly observation of practice by the Head of Training. This may also be discretionary by the Head of Training in response to an allegation of malpractice or maladministration.

6. **EQA.** External Quality Assurance (EQA) audits will be conducted by the TQUK on an annual basis. All personnel of the delivery team will be expected to be available during audits.

7. **Learner Interview.** The IQA representative/ Compliance Monitoring Manager will conduct at least 2 learner interviews each quarter, whereby learners will be given the opportunity to discuss their experience and provide feedback on the delivery of training and assessment they have experienced.

7. **IQA SAMPLING STRATEGY**

1. **Formative Sampling.** Formative sampling will take place throughout the qualification and reports and feedback will be shared amongst the delivery team to improve delivery, ensure Awarding Body guidance is being adhered to and ensure quality of the delivery.

2. **Summative Sampling.** On conclusion of qualification, a final summative sample will be carried out and feedback provided to Assessors/Trainers and the Head of Training, prior to certification.

3. **Sampling Strategy and Rag Rating.** In line with quality assurance guidance, all training programmes under TQUK will be subject to a clear sampling plan which will include the following information:

   a. Name of Assessor/ Trainer;
   b. Learner Names;
   c. Units or sections in the programme;
   d. Units or sections of programme that will be sampled;
   e. Planned and actual dates of sampling e.g Planned Date 1.3.22 Actual 4.3.22;
   f. Assessment method and evidence submitted.

All IQA plans are based on a sampling rationale whereby Assessors are rated according to the level of risk they represent. Heliguy™ uses the Rag rating system as follows:

RED – indicates a high level of risk. Red is for existing assessors with no record of CPD, unqualified assessors, new or existing assessors with frequent actions identified on sampling (newly qualified or those new to heliguy™); any assessor identified as having made unsafe decisions or with very high caseloads. New and unqualified trainers/ assessors must be assigned a mentor through their development.

AMBER – indicates a medium level of risk. Newly qualified trainers/ assessors with few actions identified on sampling; qualified and/or experienced trainers/ assessors new to heliguy™.

GREEN - indicates a low level of risk. Green is for experienced assessors who consistently demonstrate up to date practice in line with standard requirements, and have rare action points on samplings.

Assessors/Trainers will be rag rated based on the following:

1. Qualifications
2. Competency
3. Experience

For the first year of TQUK qualifications sampling will be at 100% , this will be discussed at quality meetings to assess delivery and assessment methods.

7. COMPLIANCE AUDIT

Compliance Audits must be programmed by the Compliance Monitoring Manager. Any findings must be recorded on the appropriate audit checklist as contained as appendices to the heliguy™ Management Manual and a timescale for corrective action must be agreed with the responsible person.

The Compliance Monitoring Manager must maintain a record of any non-conformance and must ensure that a follow-up audit is completed at the end of the agreed period. Should the corrective action be ineffective, it must be reported to the Accountable Manager.

8.   NON-CONFORMANCE REPORTING

All employees of heliguy™ have access to the Non-Conformance Report Form, which must be completed and submitted to the Compliance Monitoring Manager, when an occurrence of non-conformance is identified. Corrective action must be decided upon, in conjunction with the Head of Training, and the originator of the report should be informed of progress. The Compliance Monitoring Manager must keep a record of all Non-Conformance Reports and corrective or preventative actions.

9.   SUMMARY

Internal Quality Assurance (IQA) is an integral element of maintaining the highest standards of qualification integrity and standardisation. Heliguy™ must take all reasonable steps to maintain the highest of standards and prevent occurrences of malpractice and maladministration and will manage this through the implementation of a robust and comprehensive IQA programme.

Any questions relating to the content of this document should be directed to the undersigned in the first instance.

Mark Blaney
Head of Training
Colena Ltd t/a heliguy™

IQA REPORT FORM

IQA		Trainer/ Assessor	
Date		Qualification	
Learner Name		Date of Sample	

IQA Feedback Summary
Free Text

Assessment Method(s) sampled
Free Text

Are the assessments methods demonstrating validity, sufficiency, current, reliability and authenticity
Free Text

Actions to be completed	
Free Text	
Deadline Date	

Trainer/ Assessor Signature		**Date**	
IQA Signature		**Date**	

Declaration			
I confirm that the action points have been completed and evidence requirements have been met			
Trainer/ Assessor Signature		**Date**	
IQA Signature		**Date**	