

Centre Number: 07687
Centre Name: ALLANFEARN CONSULTANCY, CONFERENCING AND TRAINING LTD
EV Number: 904756
EV Name: MRS L MACARTHUR
Sampling Method: Visit
Visit/Sampling Date: 26/01/09
Duration of visit/sampling (hours): 6
Number of assessment site: 1
Assessment site visited: WOODFORD GREEN

Records required prior to the sampling were forwarded to EV by the centre as specified in the VRP: Yes

Reason why programmes not sampled:

Early visit to new centre to assess paperwork and give guidance and advice. One candidate ready to be certificated and so limited certification allowed.

Programmes

| Programme Number | Level | Programme Name | Visit No. | No. of Candidates Registered | No. of Active Candidates | No. being Sampled | Candidates Interviewed | Candidates Observed | Sanction | Direct Claim Status |
|------------------|-------|------------------------|-----------|------------------------------|--------------------------|-------------------|------------------------|---------------------|----------|---------------------|
| Q5000150 | 2 | HEALTH AND SOCIAL CARE | 1 | 20 | 20 | 4 | No | No | 0 | L |

| | Criterion | Sanction Ref | Yes/ No |
|------|--|--------------|---------|
| 1 | MANAGEMENT SYSTEMS | | |
| 1.0a | The centre's aims and policies in relation to NVQs are supported by senior management. | 1.1 | Yes |
| 1.0b | The centre's aims and policies in relation to NVQs are understood by the assessment team. | 1.1 | Yes |
| 1.1 | The centre's policies, procedures and practices ensure fair assessment for all candidates. | | Yes |
| 1.2a | The roles, responsibilities, authorities and accountabilities of the assessment and verification team across all assessment sites are clearly defined and allocated. | 1.1 | Yes |
| 1.2b | The roles, responsibilities, authorities and accountabilities of the assessment and verification team across all assessment sites are understood | 1.1 | Yes |
| 1.3 | There is effective communication within the assessment team and with Edexcel. | 1.3 | Yes |
| 1.4 | Edexcel is notified of any changes which may affect the centre's ability to meet the approved centre criteria. | 1.11 | Yes |
| 1.5 | Assessors and verifiers have sufficient time, resources and authority to perform their roles and responsibilities effectively. | 2.1 | Yes |
| 1.6 | Information supplied to Edexcel for the purposes of registration and certification is complete and accurate. | | Yes |
| 1.7 | Queries about the qualification specification, assessment guidance or related awarding body material are resolved and recorded. | | Yes |
| 1.8 | Candidate records of assessment are accurate, authentic, up to date, securely stored in line with Edexcel requirements and made available for external verification and auditing. | | Yes |
| 1.9 | Requests are complied with for access to premises, records, information, candidates and staff for the purpose of external verification. | 3B.3 | Yes |
| 2 | RESOURCES | | |
| 2.0 | There are sufficient competent and qualified assessors and internal verifiers to meet the demand for assessment and verification activity. | | Yes |
| 2.1 | A staff development programme is established for the assessment and verification team to support identified needs. | 1.6 | Yes |
| 2.2a | Resource needs are accurately identified in relation to the specific award. | 0 | Yes |
| 2.2b | Resource needs identified are made available. | 0 | Yes |
| 2.3 | The centre has a process for ensuring that equipment and accommodation used for the purposes of assessment comply with the requirements of relevant health and safety acts. | 1.4 | Yes |
| 3 | CANDIDATE SUPPORT | | |
| 3.0 | Information, advice and guidance about qualification procedures and practices are provided to candidates and potential candidates. | | Yes |
| 3.1 | Candidates' development needs are matched against the requirements of the award and an agreed individual development/action plan is established. | | Yes |
| 3.2 | Candidates have regular opportunities to review their progress and goals and to revise their assessment plan accordingly. | | Yes |
| 3.3 | Access to assessment is encouraged through the use of a range of valid assessment methods. | | Yes |
| 3.4 | Particular assessment requirements of candidates are identified and met where possible. | | Yes |
| 3.5 | There is an established appeals procedure which is documented and given to all candidates. | | Yes |
| 3.6 | Unit certification is explained to and made available to candidates. | 1.12 | Yes |
| 4 | ASSESSMENT and VERIFICATION | | |
| 4.0a | Internal verification procedures and activities are clearly documented. | 1.2 | Yes |
| 4.0b | Internal verification procedures and activities are consistent with national requirements including assessment strategy and ensure quality and consistency | 1.2 | Yes |
| 4.1a | Assessment practice and decisions are systematically and regularly sampled. | | Yes |
| 4.1b | Results of sampling are acted upon as part of internal quality assurance processes. | | Yes |
| 4.2a | Records of internal verification activity are maintained in line with Edexcel requirements. | | Yes |
| 4.2b | Records are made available for the purposes of auditing. | | Yes |
| 4.3a | The effectiveness of the internal verification strategy is reviewed against national requirements including Joint Awarding Body Guidance on Internal Verification. | 1.13 | Yes |
| 4.3b | Corrective measures identified as to the effectiveness of the internal verification strategy are implemented. | 1.13 | Yes |
| 4.4 | Assessment is carried out by occupationally competent, accredited staff. | | Yes |
| 4.5 | Internal verification is conducted by appropriately qualified and experienced staff. | 2.5 | Yes |
| 5 | RECORDS | | |
| 5.0 | The centre's achievements are monitored and reviewed and used to inform future centre qualification developmental activity. | 1.13 | Yes |
| 5.1 | 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. | 1.13 | Yes |
| 5.2 | Actions identified by external verification visits are disseminated to appropriate staff and corrective measures are implemented. | | Yes |
| 5.3 | Candidate achievement and assessment outcomes are monitored and reviewed in relation to the centre's equal opportunities policy. | 3B.5 | Yes |

Direct Claim Status

| Prog No | Level | Programme Name | Yes/No | Certification Override | Sanction Level | Sanction Level Override |
|----------------|--------------|------------------------|---------------|-------------------------------|-----------------------|--------------------------------|
| Q5000150 | 2 | HEALTH AND SOCIAL CARE | YES | L | 0 | |

EV comments when direct claim status/sanction level changed:

This is a small new centre with only one portfolio just ready for certification hence limited certification allowed. However it is anticipated that following the next visit full certification will be granted as the centre has some very robust systems.

Actions for centre

| Criterion Reference | Action | Target Date |
|----------------------------|---------------|--------------------|
|----------------------------|---------------|--------------------|

Action points from previous report(s)

| Criterion Reference | Action | Target Date |
|----------------------------|---------------|--------------------|
|----------------------------|---------------|--------------------|

Actions needed by External Verifier

| Action | Target Date |
|--------|-------------|
|--------|-------------|

Additional Comments

Management System:

The centre's management is fully committed to running a robust quality centre and is keen to be fully involved in the EV visits in order to integrate any feedback into the systems

Resource:

The centre is appropriately resourced at present with plans to grow incrementally in a quality driven manner

Candidate Support:

Candidates are well supported

Assessment and Certification:

Both the assessment and verification seen today demonstrate a full understanding and integration of the A1 standards and the code of practice

Records:

Record keeping is very good. Each assessor has a portfolio of qualifications and training attendance, however, I would recommend each assessor have a precised 'log' of their CPD activity.

Review:

Areas of good practice:

A very conscientious and motivated team and senior management with excellent assessment records.

Candidate support review completed: Yes

At the centre, action points were discussed and agreed with...

Name: SUE LIVINGSTONE GEORGE LIVINGSTONE

Position: CENTRE MANAGER DIRECTOR

Are systems in place to make sure that mistaken or fraudulent claims for certification are not made and the 10 week rule is fully understood and followed?

Yes

Staff seen on visit:

SUE LIVINGSTONE ASSESSOR SINEAD TURNER IV GEORGE LIVINGSTONE DIRECTOR

Next visit Date: 10/03/09