

NVQ Centre Handbook



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QUALITY STATEMENT

Alpha Health & Safety Training Solutions will work within the parameters set by the Awarding Organisations to the best of its ability. Management, IQA, Assessors and Trainers will work to maintain the high standards in training and assessment set by those lead organisations. All records will be kept as accurately as possible. Management, IQA, assessors and trainers will be made aware at all times of the need to maintain the integrity and credibility of the Training Centre.

The Training Centre will work to develop the qualifications of its trainers and assessors. The administrative staff will be supported and encouraged in their endeavours to achieve any qualification, which will add to the efficient running of the Training Centre. Staff working towards assessing or verifying qualifications will be required to complete their qualifications within 12 months of starting the role.

Alpha Health & Safety Training Solutions will deal honestly and openly with Training Organisations, Awarding Organisations, assessors and trainers and candidates alike to maintain the highest of standards.

ASSESSMENT POLICY

It is the aim of Alpha Health & Safety Training Solutions to have a clear policy for dealing with assessment which complies with both internal and external quality requirements. External requirements will vary between awarding organisations.

Assessment takes a variety of forms such as assignments, examinations, practical tests, and direct observation. However, this list should not be seen as exhaustive or exclusive.

This procedure applies to all courses where formal assessment takes place, the Centre Coordinator in conjunction with Directors will be responsible for ensuring all assessment by staff in their department complies with this policy.

This policy aims:

1. To implement a systematic and constructive approach to assessment at Alpha Health & Safety Training Solutions To maintain assessment processes meeting both internal and external quality requirements
2. To manage any occurrences of malpractice by candidates or staff effectively
3. To ensure that reasonable adjustment, for example to room and location, is in place to enable fair access to assessment

ASSESSMENT PROCEDURES

1. At all times the awarding organisation practices and procedures should be followed. Assessors and Internal Quality Assurers must meet the experience and qualification requirements of the appropriate awarding organisation. Assessors and Internal Quality Assurers who are working towards their assessing or quality assurance qualifications must complete this qualification within a maximum of 12 months of starting a role as an assessor or IQA.
 2. Assessors and IQAs are required to familiarise themselves with the standards of all **QUALIFICATIONS THEY ARE TO ASSESS, INCLUDING ATTENDING ALL PLANNED STANDARDISATION** meetings, as well as taking time prior to assessing a qualification to read and understand is assessment criteria, how the evidence can be gathered, any cross-referencing opportunities and acceptable types of evidence. Guidance can be obtained by contacting and discussing with your IQA.
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3. All candidates will receive an assessment plan within induction including planned assessment dates. However, if there are extenuating circumstances then revised assessment dates can be agreed.
 4. Staff involved in the assessment and quality assurance process should not train, assess or quality assure work from candidates that they have a vested interest in; this would include for example, candidates who are family members. Conflict of interest. Where this is not possible, there must be a record of the conflict of interest.
 5. All assessments should be planned to give candidates the best opportunity to succeed.
 6. In normal circumstances, all work should be marked promptly (within 2-3 weeks maximum), including internal quality assurance sampling, and appropriate recorded feedback given to the candidate.
 7. Alpha Health & Safety Training Solutions documentation should be used where appropriate and available.
 8. Assessors must ensure that all assessments conform to the awarding organisation requirements and are: -
 - Valid
 - Authentic
 - Current
 - Sufficient
 9. Assessors and candidates must sign the declaration sheet on completion of their portfolio to confirm that the evidence submitted is authentic, valid, reliable, current, and sufficient and conducted under the specified assessment conditions.
 10. Assessors must use the assessment feedback to record all assessments made detailing when and what occurred and use this document to record assessment decisions made. This must be explained to and signed by the candidate as well as the assessor.
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ASSESSMENT MALPRACTICE AND MALADMINISTRATION

Maladministration is essentially any activity or practice that results in non-compliance with administrative regulations and requirements, including the application of persistent mistakes or poor administration.

Malpractice consists of those acts which undermine the integrity and validity of assessment, the certification of qualifications and/or damage to the authority of those responsible for conducting the assessment and certification.

Alpha Health & Safety Training Solutions Ltd does not tolerate actions (or attempted actions) of malpractice by candidates or staff.

Assessors are responsible for checking the validity of candidates work.

Candidates will have to declare that their work is their own.

Candidate malpractice could include the following although this list is not exhaustive. Where malpractice has taken place the candidate may be withdrawn without refund.

- Plagiarism – the act of taking someone else’s work and passing it off as your own.
- Collusion – where work that is submitted as an individual has been worked on collaboratively.
- Impersonation.
- Fabrication.
- Failing to abide by instructions from an assessor or invigilator.
- Misuse of assessment material.
- Cheating to gain an unfair advantage.
- Alteration of documents.
- Behaving in a way to undermine the integrity of the assessment.

Staff malpractice could include the following although this list is not exhaustive:

- Failing to keep marks secure.
 - Alteration of mark schemes, grading criteria or assessment criteria.
 - Assisting candidates in production of work for assessment, where the support has the potential to influence the outcomes of the assessment, for example where the assistance involves producing work for the candidate.
 - Producing falsified witness statements.
 - Allowing evidence, which is known not to be the candidate’s own, to be included for assessment.
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- Falsifying records or certificates.
- Fraudulent certificate claims.
- Failing to keep candidates' computer files secure.
- Failing to keep assessment/examination papers secure prior to the assessment/examination.

Process for making an allegation of malpractice or maladministration

Anybody who identifies or is made aware of suspected or actual cases of malpractice or maladministration at any time must immediately notify the Centre Coordinator. In doing so they should put them in writing/email and enclose appropriate supporting evidence.

All allegations must include (where possible):

- Candidate's name
- Alpha Health & Safety Training Solutions staff members name and job role - if they are involved in the case.
- Details of the course/qualification affected, or nature of the service affected.
- Nature of the suspected or actual malpractice and associated dates, details and outcome of any initial investigation carried out by the centre or anybody else involved in the case, including any mitigating circumstances.

The Centre Coordinator will then conduct an initial investigation prior to ensure that staff involved in the initial investigation are competent and have no personal interest in the outcome of the investigation.

In all cases of suspected malpractice and maladministration reported we will make every effort to protect the identity of the 'informant' in accordance with our duty of confidentiality and/or any other legal duty.

1. Introduction

Alpha Health & Safety Training Solutions is committed to upholding the integrity and authenticity of candidate submissions. This policy outlines the acceptable use of AI and the rules regarding plagiarism in knowledge task submissions. It also details the process followed when plagiarism or AI use is suspected and confirms that such actions constitute malpractice.

As an approved centre offering NVQs and qualifications through Awarding Organisations, we require all candidates to submit work that reflects their own knowledge and understanding. Any use of AI-generated content or plagiarism in knowledge tasks is considered malpractice and will not be tolerated.

Assessors are required to explain this policy during candidate inductions. Candidates must sign a statement confirming they understand and agree to comply with this policy. Additionally, Alpha Health & Safety Training Solutions will send occasional reminders via the Quals Direct message system or email to reinforce the importance of compliance.

2. Definitions and Acceptable Use

2.1 Plagiarism

Plagiarism occurs when a candidate presents someone else's work as their own without proper attribution. This includes, but is not limited to:

- Copying and pasting text from online sources without referencing.
- Submitting another person's work as their own.
- Rewording someone else's content without proper citation.

Acceptable Use:

- Candidates may use direct quotes from external sources if they are fully referenced and included as part of a wider response that demonstrates understanding.
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2.2 Use of Artificial Intelligence (AI)

The use of AI tools (e.g., ChatGPT, Bard, Microsoft Copilot or other AI-generated content) to create answers for knowledge tasks is strictly prohibited. Candidates must provide responses based on their own knowledge and experience.

Acceptable Use:

AI may be used in the workplace to assist with generating evidence, such as creating risk assessments or reports. However, any AI-generated workplace evidence must be reviewed for accuracy and suitability by the candidate before submission.

3. Detection and Investigation Process

Common signs an answer is AI-generated include: overly generic responses, repetitive language, lack of personal experience or opinion, factual inaccuracies, inconsistent tone, excessive use of keywords, broad explanations without details, and an inability to answer nuanced or context-specific questions, often appearing too polished or "perfect" without any minor errors or quirks that a human might make. Format of text and bullet points are also a sign that AI has generated the response.

If an assessor suspects that a knowledge task has been completed using AI or plagiarised content, the following steps will be taken:

Initial Review – The assessor will evaluate the submission for signs of AI-generated content or plagiarism.

Centre Coordinator Involvement – If concerns remain, the assessor will email the Centre Coordinator (info@allstarsafety.co.uk) with the following details -

- Candidate's name
- Unit and specific assessment criteria suspected of AI use/plagiarism

Verification Using GPTZero – The Centre Coordinator will run the candidate's submission through GPTZero (or a similar detection tool) and generate a report.

Determining AI/Plagiarism Presence –

- If the report indicates with over 50% confidence that the submission is AI-generated or plagiarised, the assessor will issue a formal warning and return the submission to the candidate with feedback. Questioning of the candidate about their answers by the assessor may be used to confirm the AI use, and potentially the option for re-answering via written answers could be withdrawn, with the candidate only being allowed to answer verbally, either face to face or over the phone. The assessor
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should consult the Head of Centre for advice in this situation and ensure all contact and decisions are clearly documented in the candidate's portfolio.

- If there is no conclusive evidence of AI or plagiarism, the assessment process will continue as normal, and the report will be stored internally.
- Should other evidence point to AI use or plagiarism that has not been detected by the online tools, the assessor must investigate further by discussing with the candidate and asking about specific portions of their submissions to make a judgement as to whether this is their own work. Should the conclusion be drawn by the assessor the option for re-answering via written answers could be withdrawn, with the candidate only being allowed to answer verbally, either face to face or over the phone. The assessor should consult the Head of Centre for advice in this situation and ensure all contact and decisions are clearly documented in the candidate's portfolio.

Further Action:

- The Centre Coordinator will check whether the candidate has previous confirmed instances of AI use or plagiarism.
- If this is a repeated offence, the candidate will be withdrawn from the course without a refund.
- If this is a first offence, the candidate may be given the opportunity to resubmit their work after receiving feedback and a warning.

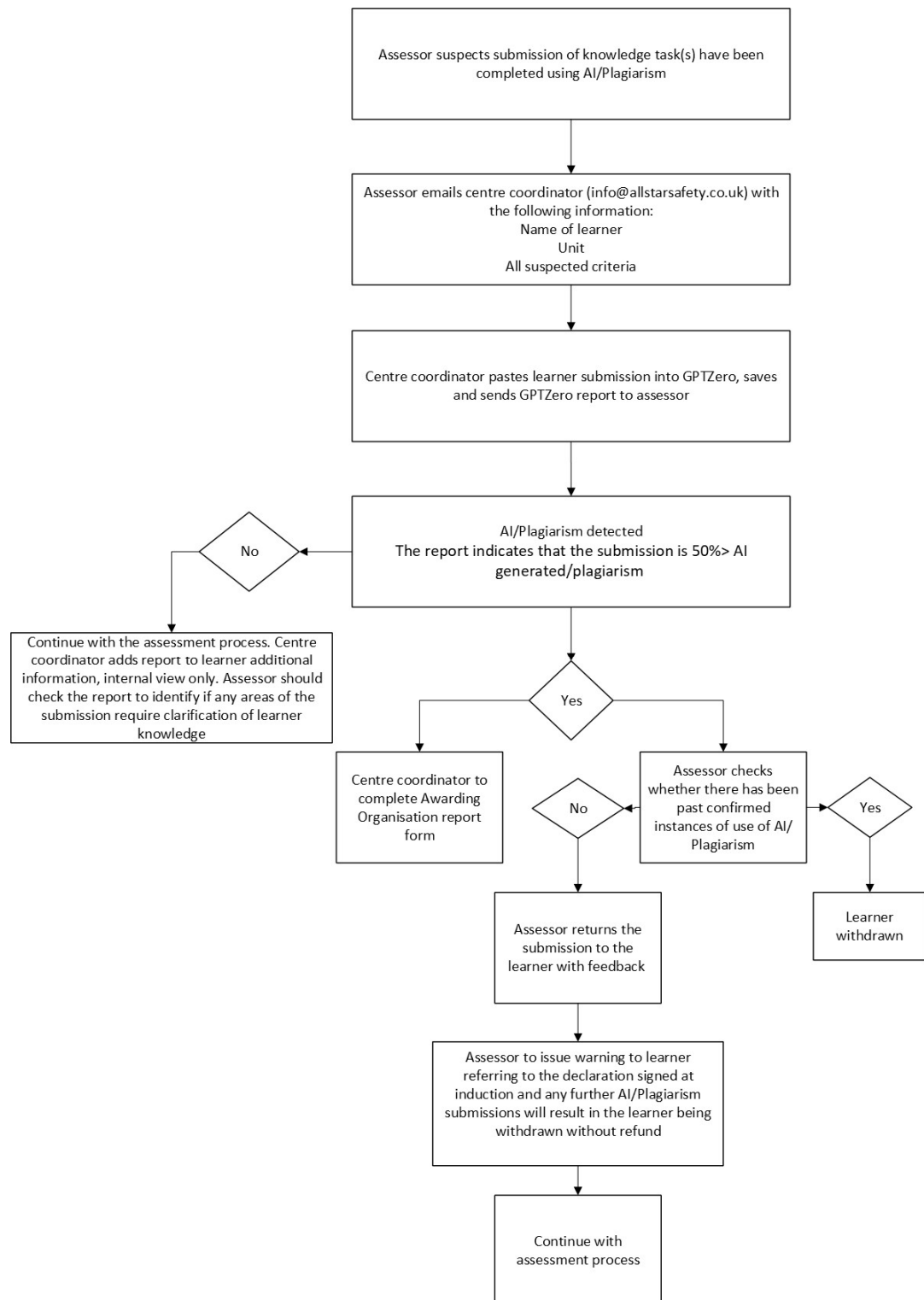
Reporting to the Awarding Organisation – The Centre Coordinator will complete and submit the relevant Awarding Organisation report form if AI or plagiarism is confirmed.

4. Consequences of AI Use and Plagiarism

Alpha Health & Safety Training Solutions considers plagiarism and the use of AI to generate knowledge task answers as malpractice. The consequences include:

- **First Offence** – candidate may receive a warning and be required to resubmit their work. Written knowledge tasks may not be allowed if the assessor chooses to use verbal Q&A to reassess ensuring the knowledge is the candidate's own.
 - **Repeated Offence** – Candidates will be withdrawn from their qualification without a refund.
 - **All Cases** – The case will be reported to the Awarding Organisation, which may result in further penalties or disqualification from future qualifications.
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Process



CONFIDENTIALITY AND WHISTLE BLOWING

Sometimes, a person making an allegation of malpractice or maladministration may wish to remain anonymous. Although it is always preferable to reveal your identity and contact details to us; however, if you are concerned about possible adverse consequences, you may request that the Directors do not divulge your identity.

While we are prepared to investigate issues which are reported to us anonymously, we shall always try to confirm an allegation by means of a separate investigation before taking up the matter with those the allegation relates.

Responsibility for the investigation

In accordance with regulatory requirements, all suspected cases of maladministration and malpractice will be investigated promptly by Alpha Health & Safety Training Solutions Ltd to establish if malpractice or maladministration has occurred and will take all reasonable steps to prevent any adverse effect from the occurrence as defined by Ofqual.

We will acknowledge receipt, if required, to external parties within 5 working days of receiving the allegation. The Centre Coordinator will be responsible for ensuring the investigation is carried out in a prompt and effective manner and in accordance with the procedures in this policy and will allocate a relevant member of staff to lead the investigation and establish whether or not the malpractice or maladministration has occurred, and review any supporting evidence received or gathered by Alpha Health & Safety Training Solutions Ltd.

Notifying relevant parties

Where applicable, the Centre Coordinator will inform the appropriate regulatory authorities if we believe there has been an incident of malpractice or maladministration which could either invalidate the award of a qualification or if it could affect another awarding organisation.

Where the allegation may affect another awarding organisation and their provision, we will also inform them in accordance with the regulatory requirements and obligations imposed by the regulator Ofqual. If we do not know the details of organisations that might be affected, we will ask Ofqual to help us identify relevant parties that should be informed.

Investigation timelines and summary process

We aim to action and resolve all stages of the investigation within 15 working days of receipt of the allegation.

The fundamental principle of all investigations is to conduct them in a fair, reasonable and legal manner, ensuring that all relevant evidence is considered without bias. In doing so investigations will be based around the following broad objectives:

- To establish the facts relating to allegations/complaints in order to determine whether any irregularities have occurred.
- To identify the cause of the irregularities and those involved.
- To establish the scale of the irregularities.
- To evaluate any action already taken
- To determine whether remedial action is required to reduce the risk to current registered candidates and to preserve the integrity of Alpha Health & Safety Training Solutions and the qualification.
- To identify any adverse patterns or trends.

The investigation may involve a request for further information from relevant parties and/or interviews with personnel involved in the investigation. Therefore, we will:

- Ensure all material collected as part of an investigation must be kept secure.
- If an investigation leads to invalidation of certificates, or criminal or civil prosecution, all records and original documentation relating to the case will be retained until the case and any appeals have been heard and for five years thereafter.
- Expect all parties, who are either directly or indirectly involved in the investigation, to fully co-operate with us.

Either at notification of a suspected or actual case of malpractice or maladministration and/or at any time during the investigation, we reserve the right to withhold a candidate's results.

Where a member of All Staff Safety Ltd staff is under investigation, we may suspend them or move them to other duties until the investigation is complete.

Throughout the investigation our Centre Coordinator will be responsible for overseeing the work of the investigation team to ensure that due process is being followed, appropriate evidence has been gathered and reviewed and for liaising with and keeping informed relevant external parties.

Investigation report

After an investigation, the Centre Coordinator will produce a report for the parties concerned to check the factual accuracy. Any subsequent amendments will be agreed between the parties concerned and ourselves. The report will:

- Identify where the breach, if any, occurred.
- Confirm the facts of the case.
- Identify who is responsible for the breach (if any)
- Confirm an appropriate level of remedial action to be applied.

We'll make the final report available to the parties concerned and to the regulatory authorities and other external agencies as required.

If it was an independent/third party that notified us of the suspected or actual case of malpractice, we'll also inform them of the outcome – normally within 15 working days of making our decision - in doing so we may withhold some details if to disclose such information would breach a duty of confidentiality or any other legal duty.

If it's an internal investigation against a member of our staff the report will be agreed by the Managing Director, along with the relevant internal managers and appropriate internal disciplinary procedures will be implemented.

Investigation outcomes

- If the investigation confirms that malpractice or maladministration has taken place, we will consider what action to take in order to:
- Minimise the risk to the integrity of certification now and in the future.
- Maintain public confidence in the delivery and awarding of qualifications.
- Discourage others from carrying out similar instances of malpractice or maladministration.
- Ensure there has been no gain from compromising our standards.

The action we take may include:

- Imposing actions in order to address the instance of malpractice/maladministration and to prevent it from reoccurring.
 - In cases where certificates are deemed to be invalid, inform the Awarding Organisation concerned and the regulatory authorities why they're invalid and any action to be taken for reassessment and/or for the withdrawal of the certificates.
 - Informing the affected candidates know the action we're taking and that their original certificates are invalid and ask – where possible – to return the invalid certificates to Alpha Health & Safety Training Solutions .
 - Informing relevant third parties (e.g. funding Organisations) of our findings in case they need to take relevant action in relation to the centre.
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- In addition, to the above the Centre Coordinator will record any lessons learnt from the investigation and pass these onto relevant internal colleagues to help prevent the same instance of maladministration or malpractice from reoccurring.

Retention of records

Records of all malpractice investigations will be kept for a minimum of 7 years.

INTERNAL QUALITY ASSURANCE STRATEGY

Aim

Internal Quality Assurance is a quality management process. IQA are responsible for the management of the assessment process to ensure that assessment consistency meets the qualification and credit framework requirements for approved centres.

Compliance with QCF Requirements for Approved Centres

IQA is responsible for the accuracy and consistency of assessors' judgements against the requirements of the national standards.

All assessments and verification strategies and procedures will comply with qualification and credit framework requirements for approved centres.

MAINTAINING QUALITY STANDARDS

Monitoring Customer feedback

Alpha Health & Safety Training Solutions Ltd will carry out a range of different activities as a centre to capture and learn from assessment activities. This includes; learner feedback captured throughout the courses, employer feedback captured throughout the courses, learner interviews carried out by the IQA and Lead IQA. Feedback is analysed and themes added to standardisation agendas, shared with assessors and IQAs.

Communicating awarding body updates

Updates from awarding bodies will be shared with assessors and IQAs on a monthly basis through assessor reviews, during standardisations where minutes will be shared, or more frequently as required. Updates will be saved and referred to as required

Standardisation

Standardisations are planned in every quarter, assessors and IQAs are required to attend a minimum of two standardisations per year. Standardisation agendas are shared prior to the date of meeting and minutes shared post meeting. Assessors and IQAs are required to sign standardisation minutes to confirm they have understood the content. Further standardisations may be added to the normal calendar at the request of the Lead IQA.

SAMPLING PLAN/ STRATEGY

The aim of the sampling plan/ strategy is to view a range of evidence to a depth which varies to the competence and experience of the assessor concerned.

- All assessors will be sampled over a 12-month period.
- All units that assessor is to deliver will be sampled across the range.
- All sampling will be recorded by IQA.
- The Lead IQA will produce a sampling plan and update as Internal quality assurance is carried out which they will use to identify candidates and units for sampling.
- Sign off all the portfolio/ units when completed.

When the portfolio has been submitted for the IQA to sample it must then be returned to the assessor within a week with written feedback. The IQA will also contact the assessor to discuss the feedback and to answer any of the assessor's questions.

RAG RATING

Rag rating for assessors are in place to ensure that the evidence of assessor's performance and development is monitored and evaluated for each qualification type and level, duration of delivery and previous development (including action) points

Assessors are to be rated within different colour bands which will reflect the different levels of sampling for the qualification delivered. The ratings are based on the assessor's ability within the different delivery of qualifications. At any point the assessor can be up/down graded through the RAG ratings provided evidence for this is: -

Red Assessor

Red assessors are unqualified or newly qualified assessors. Assessor has made assessment decisions for units and unit closures but may not have completed a full qualification. Unqualified assessors require 100% verification of units. IQAs are to include evidence of verification of all assessment methods required including minimal observational requirements. Evidence is required of the assessor's assessment decisions for formative and summative assessment including planning, progress, and feedback documentation. This should be recorded on the company documentation for verification, observation, and candidate surveys. Observation of the assessor's assessment practice must be carried out every three months including one observation of teaching and learning. All units are to be included within the sample plan for red assessors including evidence of development planning for action units/assessment methods.

Amber Assessor

Assessor is TAQA qualified (or equivalent). Assessor has been consistent in completing assessment of candidates with consistent achievement of units for NVQ, however may not have achieved the full qualification. Assessor demonstrates good practice of use of varied assessment methods, including planning for unit closure. Assessor complies with VACS and is able to demonstrate progress with candidates. Documentation of planning, progress and feedback is consistent throughout the portfolios. Observation of the assessor's assessment practice is required every 3-6 months including one observation of teaching and learning. Development plan is provided by the IQA to cover areas within assessment/teaching and learning. All units are to be included within the sample plan for amber assessors including evidence of development planning for action units/assessment methods.

Green Assessor

Assessor is TAQA qualified (or equivalent) and may be working towards PLTS or IQA qualification. Assessor has demonstrated consistent completion of the candidate's full framework within a timely manner. Assessor has demonstrated use of varied assessment

methods and has demonstrated use of additional assessment methods where appropriate to aid achievement. Assessor has minimal/no actions within their files however has some development areas for CPD. Assessor has demonstrated good use of resources and teaching and learning materials. Assessor has scored good/outstanding observations of assessment practice/teaching and learning consistently. Observation of assessment practice is required every 6-9 months including one observation of teaching and learning. This assessor is considered a mentor to other assessors and countersigner where appropriate.

RAG	Interim Sample	Final Sample	Observation	Candidate Interview
Red	100%	100%	6 Months	3 Months
Amber	50%	50%	6-9 Months	3 Months
Green	25%	25%	12 Months	6 Months

STAFF CHANGES

All planned changes to the assessment team will be notified to the IQA together with copies of CVs and relevant qualifications and certificates. If approved by the IQA the Centre Coordinator will notify the Awarding Organisation of the changes. Copies of all documentation will be kept by the IQA and the Centre Coordinator in the centre file.

STAFF COMPETENCE

In order to remain competent all staff must be actively involved in Continued Professional Development (CPD). Staff must meet the required standard to carry out their rolls in the centre. Each Assessor/Verifier will keep up to date record of CPD and is required to submit to the Centre once per quarter or as requested by the Centre Admin Team.

ROLES AND RESPONSIBILITIES OF THE IQA

IQA must ensure that accurate, auditable records of assessment are maintained. For each assessment decision the following information is required.

- Who was assessed.
- Who carried out the assessment.
- What was assessed.
- Date of the assessment.
- What was the assessment decision.
- Feedback was given.
- Where the evidence is located.

All the information should be endorsed with the candidates and the assessor's signature and dates.

The tasks of the IQA will include.

- Attend and conduct at least 2 meetings / standardisation meetings per year.
- Being responsible of the monitoring of the assessors.
- Observing those designated assessors in compliance with RAG rating.
- Provide support to assessors and candidates where necessary.
- Liaise with the centre to provide support, advice and guidance.

The IQA may be required to give advice on a variety of situations; over the phone, during individual and team meetings with assessor or candidate and during an observation to do with.

- Interpretation of the standards.
- Help in completing work.
- Details in the assessment process.
- General advice about the assessment systems.
- Information about levels of awards, unit credit and certification.

IQA must ensure that they follow the standards set out by them, so the advice and guidance is accurate.

- To support assessors in the completion of their tasks.
 - To meet assessors to standardise assessments.
 - Carry out the IQA to the standards.
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- To observe assessments of the assessor to ensure correct procedures are being implemented. Provide feedback.
- Sample portfolios of evidence and to check the quality of assessment.
- To sign candidates records for registration of certification.
- To meet the EQA as required.
- To advise the centre, candidates, and assessors.
- Help identify any training needs.
- To provide and explain new information as it becomes available.
- Ensure all records are stored correctly.
- Maintain records of IQA and sampling strategy and plans
- To be committed to equal opportunities
- To ensure the rules of combination have been followed.
- To ensure unit credits meet the qualifications requirements.

CREATION AND APPROVAL OF ASSESSMENT DOCUMENTATION

All documentation to be used for assessment and IQA purposes must be written and approved by the Lead IQA and Centre Coordinator prior to be putting into use by the assessment and quality assurance team. Once signed off they will be made available to the assessment and QA team via email and at standardisation meetings. Only approved documents are to be used. These will be reviewed at least annually by the Lead IQA and Centre Coordinator.

APPEALS PROCEDURE

Alpha Health & Safety Training Solutions Ltd should provide fair assessments. Candidates can appeal if they think their assessment was unfair.

The appeals procedure includes: -

- A formal system of recording appeals.
- Prompt responses within clearly stated times.
- Stages that give all parties the opportunity to put their case.
- Clear outcomes at each stage.
- Constructive feedback to you, the candidate.

The appeals procedure has three stages, as follows: -

Stage 1 Assessor with Candidate

If candidates disagree with the assessment, they must first discuss their reasons with the assessor concerned as soon as possible. Normally this will be immediately after they receive the assessment decision. If this is not convenient, they should arrange an appointment with the assessor.

The assessor must consider the reasons and look again at what they did for their assessment. He or she must then give an immediate response, which must be:

- A clear explanation, backed up in writing, of the assessment decision; and
 - A new decision or confirmation of the original decision.
 - If you agree with the assessor's response, then the appeal stops at this point.
 - Candidates must tell the assessor if they are still unhappy with the decision. The appeal will go to stage 2.
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Stage 2 Internal Quality Assurer

If candidates are still dissatisfied after Stage 1, the assessor must give the internal quality assurer the following information within 48 hours of the appeal reaching Stage 2:

- The original assessment record and candidate's evidence, where appropriate
- The written explanation and confirmation of the assessment decision.

The Internal quality assurer will reconsider the assessment decision, taking account of the following: -

- The candidate's reason for appeal.
- The candidate's evidence and associated records.
- The assessor's reason for the decision.
- The Internal Quality Assurer must then give you the reconsidered decision, in writing, within five working days of receiving the appeal.
- You must tell the Internal Quality Assurer if you are still unhappy with the reconsidered assessment decision. The appeal will go to stage 3.

Stage 3 Appeals Panel

If candidates are still dissatisfied with the decision after Stage 2, they have the right to go to an appeals panel. The Internal Quality Assurer who acted at Stage 2 must send the following details to the Centre Coordinator: -

- The written explanation and confirmation of the assessment decision
- Assessment record sheet(s)
- Any written comments of the Internal Quality Assurer (providing any relevant background details)
- The Centre Coordinator must call an appeals panel to meet within 10 working days of receiving the appeal. The panel will consist of three independent persons, for example: -
 - The Centre Coordinator
 - A different assessor
 - An independent assessor/internal verifier

Both the candidate and the assessor will be invited to make their case to the panel. The panel will reach its decision within 10 working days.

Results of the Appeals Panel will be final.

Records of all appeals will be kept by the Centre Coordinator for 5 years.

If candidates have gone through all the stages of Alpha Health & Safety Training Solutions internal assessment appeals procedure and remain dissatisfied with the outcome or the way in which the appeal has been handled, they can:

- Appeal to the awarding organisation.
 - Appeal to Ofqual if they feel that the centre and/or the awarding organisation has not dealt with the appeal appropriately. Ofqual cannot overturn assessment decisions or academic judgements but may investigate the effectiveness of the centre and/or the awarding organisation's appeals process and require corrective action.
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COMPLAINTS PROCEDURE

Alpha Health & Safety Training Solutions Ltd values feedback on all aspects of the service we deliver, and input allows us to continuously improve our offer. Feedback should initially be discussed with the assessor. Should the complaint be about the service received, the assessor should be made aware in the first instance to allow them the opportunity to rectify this in an informal manner. The assessor is required to inform the Centre Coordinator of any issues reported to them and the steps they have taken to resolve them at monthly meetings.

If candidates or clients are unsatisfied with the assessor's attempt to resolve the issue or for some reason have a formal complaint or grievance against any aspect of Alpha Health & Safety Training Solutions Ltd conduct or performance in relation to programme delivery they do not wish to first discuss with their assessor, complaints should be made in writing to: -

Centre Coordinator

Alpha Health &

Safety Training

Solutions

3 Penfold, High Street, Brotton, Saltburn by the sea,

TS122PX

Info@Alphahsts.com

If you require assistance putting the complaint into writing, please contact the Centre Coordinator on 01287 280 137. We will acknowledge receipt of your complaint within 5 working days. An investigation will be undertaken by the Centre Coordinator or a senior member of the centre staff in their absence. All complaints will be responded to in writing within 15 working days. All formal complaints will be recorded, and records kept for 5 years. Should candidates or clients be unsatisfied with the response from the Centre Coordinator, they should discuss with them to try to find a solution. Candidates or clients may escalate the formal complaint to the awarding organisation should a satisfactory solution not be found. The awarding organisation will investigate the process that has taken place to try to resolve the complaint with the organisation, they will request copies of all documentation of the complaint to identify whether the correct processes have been completed. If all options to resolve the complaint have been exhausted the awarding organisation will investigate and report on the outcome of the complaint

Should candidate or clients be unsatisfied with the response from the awarding organisation and have fully exhausted Alpha Health & Safety Training Solutions internal procedures and that of the awarding organisations, they can escalate their complaint further to the relevant qualification regulator should they remain dissatisfied with the response received.

EQUAL OPPORTUNITIES POLICY

Alpha Health & Safety Training Solutions recognises that discrimination and victimisation is unacceptable and that it is in the interests of the company and its employees to utilise the skills of the total workforce. It is the aim of the company to ensure that no employee or job applicant receives less favourable facilities or treatment (either directly or indirectly) in recruitment or employment on grounds of age, disability, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion or belief, sex, or sexual orientation (the protected characteristics).

Our aim is that our workforce will be truly representative of all sections of society and each employee feels respected and able to give of their best. We oppose all forms of unlawful and unfair discrimination or victimisation. To that end the purpose of this policy is to provide equality and fairness for all in our employment.

All employees and sub-contractors, whether part-time, full-time, or temporary, will be treated fairly and with respect. Selection for employment, promotion, training, or any other benefit will be on the basis of aptitude and ability. All employees will be helped and encouraged to develop their full potential and the talents and resources of the workforce will be fully utilised to maximise the efficiency of the organisation. Our staff will not discriminate directly or indirectly, or harass customers or clients because of age, disability, gender reassignment, marriage/civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation in the provision of the company's goods and services.

This policy and the associated arrangements shall operate in accordance with statutory requirements. In addition, full account will be taken of any guidance or Codes of Practice issued by the Equality and Human Rights Commission, any Government Departments, and any other statutory Organisations.

The overall responsibility for monitoring the effectiveness of this policy lies with the Managing Director.

CONFLICT OF INTEREST POLICY

For all the employed and peripatetic Assessors, Testers, IQA and staff.

When working for Alpha Health & Safety Training Solutions Ltd you are to work within the guidelines with all paperwork, documents and relevant information belonging to the training centre and are not to be used for any other purpose than when conducting work for the centre.

All staff working for Alpha Health & Safety Training Solutions Ltd will be given instruction on what information they can hand out to candidates, employers, and other assessors. If there is to be any other information to be given out, then they must first consult the Centre Coordinator to obtain permission.

Contact with candidates and employers is to be polite, helpful and to promote our centre and not their own interests.

Staff who train, assess, quality assure or test any candidates that they have an existing personal relationship which may result in their decisions or treatment of the candidate being influenced by this relationship must declare this conflict of interest and proportionate additional monitoring measures will be put into place. If you become aware of any of the above or other conflicts of interest, you must inform the Centre Coordinator in writing at the first possible opportunity.

All identified actual or potential conflicts of interest are to be recorded on the conflict of interest log, and monitored by the Centre Coordinator and IQA staff to ensure the organisation and other stakeholders' integrity is maintained. Appendix B demonstrates this log.

RPL POLICY

Candidate's information will be inputted into the Awarding Body system as well as the LARS checking system to look for RPL. This information can then be used by the assessor to identify what units/qualifications is needed to be carried out for the desired qualification.

Assessors and/or centre staff will liaise with candidate before they are registered on a qualification and complete a skills match, this will determine any RPL they have completed, and which units are needed and that they are able to carry out and complete the qualification.

Candidates are responsible for providing accurate information on any RPL in order to validate checks, assessors responsible for ensuring that RPL is used effectively in order to make assessment decisions and as required by Awarding Organisations. Quality managers are responsible for ensuring compliance with the RPL policy.

REASONABLE ADJUSTMENTS POLICY

Candidates are required to declare any additional learning needs within their application form, which will be recorded on the “candidate details” spreadsheet. If any learning needs are declared the assessor completing the candidate induction is responsible for discussing this with the candidate and documenting on the candidate’s induction paperwork. If the candidate is aware of the support that will best assist them in completing the qualification, this should be taken into consideration by the assessor, with any additional expenses authorised by the Head of Centre.

If additional help is required for the assessment staff to decide how best to support a candidate with ALN, the lead IQA should be consulted for advice or to arrange additional training.

If a candidate declares additional learning needs during the programme which they have not previously declared, this must be recorded on the next assessment review and feedback form including the additional support requirements and what actions the assessor and candidate need to take.

If an assessor suspects that a candidate has additional learning needs but has not declared them, they should initially discuss this discreetly with the candidate and suggest how they can support the candidates’ progress. Care should be taken not to patronise or upset the candidates during this process. Any discussions should be documented on the assessment review and feedback form for that visit. Candidates with ALN needs will be discussed at each monthly meeting.

Reasonable adjustments must not affect the integrity of what needs to be assessed but not disadvantage candidates to achieve their demonstration of knowledge and skills.

Examples of support that Alpha Health & Safety Training Solutions Ltd can provide for those candidates that have additional learning needs:

- Extra time to complete assessments.
- Adapted assessment materials for example Braille.
- Assistance in assessment for example sign language interpreter or reader.
- Assessment location.
- Varied assessment method, for example recorded spoken assessment.

All reasonable adjustments to assessment must be agreed and documented on the candidates file and Alpha Health & Safety Training Solutions Ltd is responsible for ensuring that assessment activities that have used reasonable adjustments are monitored in line with the IQA strategy.

Policy Statement

This policy applies to all persons working for us or on our behalf in any capacity, including employees at all levels, directors, consultants, and administration.

Alpha Health & Safety Training Solutions Ltd strictly prohibits the use of modern slavery and human trafficking in our operations and supply chain. We have and will continue to be committed to implementing systems and controls aimed at ensuring that modern slavery is not taking place anywhere within our organisation or in any of our supply chains. We expect that our suppliers will hold their own suppliers to the same high standards.

Commitments

Modern Slavery and Human Trafficking

Modern slavery is a term used to encompass slavery, servitude, forced and compulsory labour, bonded and child labour and human trafficking. Human trafficking is where a person arranges or facilitates the travel of another person with a view to that person being exploited. Modern slavery is a crime and a violation of fundamental human rights.

- We shall be a company that expects everyone working with us or on our behalf to support and uphold the following measures to safeguard against modern slavery:
- We have a zero-tolerance approach to modern slavery in our organisation and our supply chains.
- The prevention, detection and reporting of modern slavery in any part of our organisation or supply chain is the responsibility of all those working for us or on our behalf. Workers must not engage in, facilitate, or fail to report any activity that might lead to, or suggest, a breach of this policy.
- We are committed to engaging with our stakeholders and suppliers to address the risk of modern slavery in our operations and supply chain.
- We take a risk based approach to our contracting processes and keep them under review. We assess whether the circumstances warrant the inclusion of specific prohibitions against the use of modern slavery and trafficked labour in our contracts with third parties. Using our risk based approach, we will also assess the merits of writing to suppliers requiring them to comply with our Code of Conduct, which sets out the minimum standards required to combat modern slavery and trafficking.

Consistent with our risk based approach we may require:

- Employment and recruitment agencies and other third parties supplying workers to our organisation to confirm their compliance with our Code of Conduct
- Suppliers engaging workers through a third party to obtain that third parties' agreement to adhere to the Code.
- As part of our ongoing risk assessment and due diligence processes we will consider whether circumstances warrant us carrying out audits of suppliers for their compliance with our Code of Conduct.
- If we find that other individuals or organisations working on our behalf have breached this policy, we will ensure that we take appropriate action. This may range from considering the possibility of breaches being remediated and whether that might represent the best outcome for those individuals impacted by the breach to terminating such relationships.

Awareness-raising programme

As well as training staff, the organisation has raised awareness of modern slavery issues by distributing flyers to staff/putting up posters across the organisation's premises/circulating a series of emails to staff.

The flyers/posters/emails explain to staff:

- the basic principles of the Modern Slavery Act 2015.
 - how employers can identify and prevent slavery and human trafficking.
 - what employees can do to flag up potential slavery or human trafficking issues to the relevant parties within the organisation; and what external help is available, for example through the Modern Slavery Helpline.
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CHILD PROTECTION & SAFEGUARDING POLICY

It is the policy of Alpha Health & Safety Training Solutions to safeguard the welfare of all children and vulnerable adults by protecting them from physical, sexual, and emotional harm. This policy has a two- fold purpose of safeguarding the children from abuse by another child, young adult, stranger, volunteer, or other adult and also protecting Alpha Health & Safety Training Solutions Ltd Centre staff from false allegations of abuse.

Staff, who have face-to-face contact with children and young people, should comply with the following guidelines when planning and working with young children or vulnerable adults.

- All those involved have a duty to prevent the physical, emotional, and sexual abuse of all children and young people with whom they come into contact.
- Work should always be organised with a view to minimising situations where abuse could occur.
- Where other training organisations are involved, they must provide suitability qualified adults e.g. teachers, trainers, tutors, youth workers, leaders etc. In order to ensure adequate supervision.
- Alpha Health & Safety Training Solutions Ltd will, wherever possible, avoid taking direct supervisory responsibility for children and young people.
- Children will never be left without adult supervision.
- Staff must never work in a one-to-one situation with a child or young adult when out of sight or earshot of the rest of the group. If a situation requires a degree of privacy (e.g. to administer first aid) then another member of staff must be made aware of this.
- All attempts should be made to avoid accidental one to one situations.
- Where staff suspect that a child or young adult has been or is being abused, or is at risk, they must inform a named employee or named Director immediately, who will take appropriate steps with the relevant Organisations.

In any situation where there is suspected or potential risk of abuse to a child or young adult, it is the responsibility of ALL Alpha Health & Safety Training Solutions Directors to discuss such concerns. All discussions will be fully recorded.
