

Consultant's Report



Centre Approval

Form CAPV/ QAPV

Transaction number

800000-----

Centre name

Pre-populated information

Address

Pre-populated information

Telephone number

Pre-populated information

Name of Centre Contact

Pre-populated information

Name of Consultant

Your name

Date shown on corresponding Form CAP:

Pre-populated information

To be completed at the end of the visit

Please indicate whether the organisation satisfies the requirements below:

Requirements met Yes No

Approval Recommended Yes No

Date of activity

Pre-populated information

Duration of activity

To be completed by the EQA: 00.00hrs

If approval not recommended, date application to be reviewed (approx)

To be completed if approval not recommended DD:MM:YYYY

Physical resources

Staff resources

Assessment

Quality assurance

Tick the box/s where the centre has met the requirements. Leave the box/s blank where requirements have not been met

With reference to the corresponding QAP, I recommend that approval be granted for all the Qualifications and (or) units, for which approval is sought, except for those listed below

Only complete this section if approval is **not** recommended

Delete	Qualification number & title	Level	Report section no(s)	Unit no(s)	Comments
<input type="checkbox"/>	Insert the qualification number and title for which approval is not recommended. Six digit number 0000-00	Clearly identify the level of the qualification	Clearly specify the section of the report where your comments relate to why approval is not recommended	Clearly specify any unit/s where the evidence seen does not meet requirements	Add comments to support the recommendation that approval is not recommended

Notes Commentary to provide a clear overview of what evidence has been seen and discussed to justify the recommendation made. Identify if the activity is a remote or centre visit. Who was met/role if it is a visit or who was

Section 1 Supporting evidence

1.1 Please indicate whether the evidence you inspected was consistent with the evidence identified on Section 12 of Form CAP.

Yes No

1.1-a If the evidence is not consistent, please provide a brief summary of any additional evidence which was not identified on Form CAP but which the organisation presented during the visit in support of its approval application.

Commentary to provide a clear overview of what evidence has been seen and discussed to justify the recommendation made.

1.2 Please indicate whether the evidence you inspected was valid, authentic, current and sufficient to confirm the organisation's capability to become an approved City & Guilds assessment centre.

Yes No

1.2-a Please provide any additional comments you wish to make concerning this organisation's approval application.

Provide any additional comments to support the recommendation made above

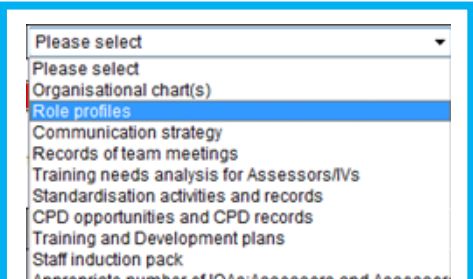
In relation to the areas of operation listed below and from the evidence identified on the corresponding Form QAP, please comment on the centres capability to offer the Qualifications and Units(s) for which approval is sought.

1.3 Physical resources

Delete?	Sources of evidence Please select the relevant sources of evidence from the drop-down box below. Add a new line and highlight the evidence source.	Good Practice	Areas for improvements
<input type="checkbox"/>	<div data-bbox="430 1390 913 1576" style="border: 2px solid blue; padding: 5px;"> <p>Health & Safety Policy</p> <p>Please select</p> <p>Records of remote, satellite or corporate</p> <p>Health & Safety Policy</p> <p>Equipment checklists</p> <p>RWE Criteria</p> </div>	Your comments should reflect what	Where necessary clearly identify,

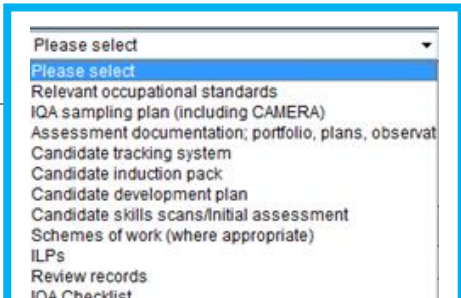
		<p>evidence you have seen [as selected from the drop down box in the previous column] and how the centre uses the evidence to good effect and it's practical application</p> <p>Good practice would be to give examples of;</p> <ul style="list-style-type: none"> • How the evidence seen is used to manage the qualification • How RWE requirements have been met and anomalies re-adjusted [Include managing partners organisations] • Details of remote, satellite or partnership sites/ agreements and details of pre-agreement checks 	<p>against the specific evidence source, if the evidence seen does not meet requirements and why. These comments will contribute to the action plan at the end of the report.</p>
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1.4 Staff resources

Delete?	Sources of evidence Please select the relevant sources of evidence from the drop-down box below. Add a new line and highlight the evidence source.	Good Practice	Areas for improvements
<input type="checkbox"/>		<p>Your comments should reflect what evidence you have seen [as selected from the drop down box in the</p>	<p>Where necessary clearly identify, against the specific evidence source, if the evidence seen does not meet</p>

		<p>previous column] and how the centre uses this evidence to good effect.</p> <p>Good practice would also include;</p> <ul style="list-style-type: none"> • How the evidence seen is used to manage the qualification. • Are there adequate numbers of staff to deliver the qualification and the names of assessors and IQAs • if original certificates and CPD have been seen • Does CPD meet the qualification requirements • How often standardisation activities are held 	<p>requirements and why. These comments will contribute to the action plan at the end of the report.</p>
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1.5 Assessment

Delete?	Sources of evidence Please select the relevant sources of evidence from the drop-down box below. Add a new line and highlight the evidence source.	Good Practice Types of evidence that can be commented upon are:	Areas for improvements
<input type="checkbox"/>		<p>Your comments should reflect what evidence you have seen [as selected from the drop down box in the</p>	<p>Where necessary clearly identify, against the specific evidence source, if the evidence seen does not meet</p>

		<p>previous column] and how the centre uses the evidence to good effect. Good practice would be to give examples of;</p> <ul style="list-style-type: none"> • How the evidence seen is used throughout the learner journey [from selection to achievement] • How documentation meets C&G requirements • Details of tracking system to be used to monitor learner progress • if e-portfolios are to be used and if so which system • Is there a working RPL process • Sampling plans in line with qualification requirements 	<p>requirements and why. These comments will contribute to the action plan at the end of the report.</p>
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1.6 Quality assurance

Delete?	Sources of evidence	Good Practice	Areas for improvements
<input type="checkbox"/>	<p>Please select the relevant sources of evidence from the drop-down box below. Add a new line and highlight the evidence source.</p>	<p>Your comments should reflect what</p>	<p>Where necessary clearly identify,</p>

A screenshot of a dropdown menu with a blue border. The menu is open, showing a list of options. The top option is 'Please select' in blue. Below it are several text-based options: 'Quality assurance strategy', 'Quality assurance processes', 'City & Guilds - Our Quality Assurance Arrangements', 'Supporting Customer Excellence Centre Manual', 'Guidance on internal quality assurance of N/SVQs', 'Equal opportunities policy and monitoring', and 'Records of Centre Update Form'.

		<p>evidence you have seen [as selected from the drop down box in the previous column] and how the centre uses the evidence to good effect.</p> <p>Good practice would be to give examples of;</p> <ul style="list-style-type: none"> • How documentation used meets C&G requirements • How the evidence seen is used to risk manage the qualification • IQA strategy, plans and records meet requirements • How quality assurance within remote, satellite or partnership sites/ agreements will be monitored and managed • is the centre/ partner organisations, signed up to receive Focus alerts • How the appeals process is communicated to learners 	<p>against the specific evidence source, if the evidence seen does not meet requirements and why. These comments will contribute to the action plan at the end of the report.</p>
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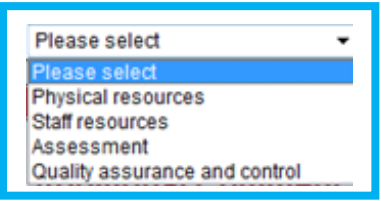
Section 2 Action plan

2.1 Please note any follow-up action required to satisfy the centre approval criteria overall arrangements and the date by which such action should be taken.

Where possible Action/ Improvement points must be referenced to Our Quality Assurance Requirements, City & Guilds Centre Manual, the Qualification Handbook or SSC requirements

Delete?	Relation to Add a new line for each action point	Action required	By when (date)	By whom
<input type="checkbox"/>	Centre Approval	Using your comments made in the above sections. Write a SMART action plan to enable the centre to meet the requirements.	Against each action identify a date for its completion. DD:MM:YYYY	Insert the name and position of the person responsible for each action.

2.2 Please note any follow-up action required to satisfy the qualification approval criteria overall, in relation to the following areas of operation and the date by which the action should be taken.

Delete?	Relation to Please select the relevant sources of evidence from the drop-down box below. Add a new line and highlight the evidence source	Action required	By when (date)	By whom
<input type="checkbox"/>		Using your comments made in the above 4 sections in areas for improvement. Chose a section from the drop down box in the previous column. Write a SMART action plan to enable the centre to meet the requirements.	Against each action identify a date for its completion. DD:MM:YYYY	Insert the name and position of the person responsible for each action.

Section 3 Additional Comment

Please add any additional comments here

Provide any additional comments to support the recommendation made in the report