

**NVQ**

**Code of  
Practice**

**2001**

# **NVQ Code of Practice**

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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. To that end, new statutory arrangements came into effect in 1997 to regulate external qualifications in England, Wales and Northern Ireland.

Following extensive consultation with key partners, the three regulatory authorities, the Qualifications, Curriculum and Assessment Authority for Wales (Awdurdod Cymwysterau Cwricwlwm Ac Asesu Cymru), the Council for Curriculum, Examinations and Assessment (CCEA) and the Qualifications and Curriculum Authority (QCA) published the Arrangements for the statutory regulation of external qualifications in England, Wales and Northern Ireland in September 2000. The arrangements specify, in the form of criteria, the characteristics necessary for any qualification to be accredited and admitted into the national qualifications framework. It also specifies in the form of a Common Code of Practice, the processes and procedures required to ensure high quality, consistency and rigorous standards in assessment and awarding across all qualifications within the framework and over time.

This NVQ Code of Practice supplements the requirements of the Common Code of Practice by specifying the additional quality assurance and control requirements which apply to, and reflect the distinctive character of, NVQs. NVQ awarding bodies and their approved centres will be responsible for ensuring that the management, administration, assessment and quality assurance of the NVQ(s) they are authorised to deliver is consistent with the regulations set out in the Common Code and NVQ Code of Practice. For ease of use, this first edition of the NVQ Code of Practice contains the requirements of the Common Code in full as Appendix 1. Linkages between the requirements of the NVQ code and the Common Code are highlighted within the text.

The NVQ Code of Practice, which replaces the Awarding Bodies' Common Accord published by QCA in July 1997, is designed 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 NVQ units;
- 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 ACCAC and QCA<sup>1</sup> will systematically monitor the performance of awarding bodies in maintaining the quality and standards across the NVQs they offer.

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<sup>1</sup> Hereafter referred to as the regulatory authorities. Under the terms of the 1997 Education Act QCA has sole regulatory responsibility for NVQs offered in Northern Ireland.

## **Section A: General matters**

*Awarding bodies are responsible for assuring the quality of NVQs offered in their name. In addition to the general requirements specified in Section A of the Common Code of Practice (see Appendix 1 paras 1–15 inclusive) NVQ awarding bodies will be required to demonstrate compliance with the following NVQ specific requirements.*

### **Customer service (Links to and amplifies para 11 of the Common Code of Practice)**

1. Where there is a joint awarding body arrangement responsibility for developing and monitoring actual performance levels against the targets specified in the customer service statements must be clearly identified.
2. Awarding bodies must monitor their performance against their specified targets and provide opportunities for centres to contribute to this process of evaluation. Awarding bodies must make the results of their monitoring activity available to the regulatory authorities upon request.

### **Awarding bodies' relationships with centres (Links to and amplifies para 14 of the Common Code of Practice)**

3. An awarding body's arrangements for the management of NVQs must ensure that centres are provided with a clear statement of the administrative procedures, requirements and responsibilities associated with the delivery of the award. This must include details of any measures required of centres in respect of maintaining the confidentiality of external assessments and the arrangements for carrying them out.

### **Centre approval (Links to and amplifies para 14 of the Common Code of Practice)**

4. An awarding body is responsible for ensuring that only those centres which have the necessary resources, systems, commitment and expertise to support the consistent delivery, assessment and quality assurance of an NVQ are approved to offer the qualification.
5. Awarding bodies must ensure that only those centres which meet the full requirements of the approved centre criteria are:
  - given approved centre status;
  - authorised to submit claims for certification.
6. To ensure consistency in the approval process, awarding bodies must use the approved centre criteria as the basis for making the approval decision. These criteria are attached as Appendix 2. Awarding bodies must ensure that each centre seeking approval receives a copy of the approved centre criteria, to ensure that the centre fully understands its obligations in respect of managing the assessment and quality assurance of an NVQ before submitting a formal application for approval.

7. An awarding body must provide centres with appropriate guidance and support to enable centres to meet the requirements of the approved centre criteria. In order to minimise unnecessary bureaucracy awarding body guidance must seek to illustrate where a centre's existing systems, or systems developed to meet the requirements of other quality assurance regimes, are appropriate and fit for purpose in respect of supporting the effective delivery of NVQs.
8. Where a centre applying for approval is a partnership arrangement between organisations, the awarding body must ensure that the respective roles, responsibilities and accountabilities of each partner are clearly documented in relation to the assessment, quality assurance and administration of the award and that clear lines of communication between the partners are established. Awarding bodies must ensure that the operation of such partnership arrangements complies with the requirements of the Common Code of Practice and NVQ specific requirements.
9. An awarding body must:
  - ensure that approved centres do not extend their operations beyond England, Wales and Northern Ireland;
  - ensure that centres operating outside of England, Wales and Northern Ireland are approved in their own right against the requirements of the approved centre criteria;
  - apply the same level of scrutiny to such centre's operations as it would to a centre operating in England, Wales or Northern Ireland.

The regulatory authorities reserve the right to take appropriate action in cases where practices in approved centres outside of their territory could bring the education and training system of England, Wales and Northern Ireland into disrepute.
10. Under the Education Act of 1997, QCA can only accredit NVQs for use in England, Wales and Northern Ireland; if a qualification is for use solely outside these territories QCA cannot accredit it. QCA's quality assurance function is similarly restricted. Where NVQs or unit certificates are awarded outside England, Wales and Northern Ireland awarding bodies must:
  - inform its clients that the QCA logo on the certificate indicates that the qualification is accredited for use in England, Wales and Northern Ireland;
  - ensure that the qualification is offered to the exact specification accredited for use in England, Wales and Northern Ireland. If not the award may carry neither the QCA logo nor the same title as that approved for use in England, Wales and Northern Ireland.
11. Each awarding body must keep an accurate register of the centres they have approved to deliver an NVQ. This must list the centre's unique identification number, the date of each centre's approval, details of each NVQ for which approval has been given and the date of each approval. Awarding bodies must require their approved centres to make this information in a standardised format, as specified by the regulatory authorities (See Appendix 3, Common Data Requirements), in order to contribute to the development of a provider database. Awarding bodies must make this information available to the regulatory authorities upon request.

## ***The approval process***

12. Awarding bodies must require each centre to prepare a formal application for approval. Awarding bodies must ensure that the application for approval requires each centre to:
  - establish a single named point of accountability for the overall quality assurance, management and administration of the award;
  - provide evidence which demonstrates the centre's compliance against the full requirements of the approved centre criteria;
  - declare whether it has had a previous application for approval refused or its approval status withdrawn, the awarding body involved and the reasons for the decision. Awarding bodies must make centres aware that a failure to provide accurate information will result in the centre having its approval withdrawn.
13. Where a centre is applying to an awarding body for centre approval to offer an NVQ for the first time, the awarding body must ensure that the centre is visited prior to approval. This visit must authenticate the validity of the evidence provided by the centre in its application for approval. Awarding bodies must not issue NVQ or unit certificates to centres which have not been visited in order to authenticate their application for approval.
14. Where this visit indicates that further actions are required in order to meet the approved centre criteria in full the awarding body must specify what further actions are required by the centre to meet the requirements of the approved centre criteria in the form of an action plan. This must be agreed, and logged, with the named individual in the centre who is responsible for the overall quality assurance, management and administration of the award and specify what has to be done, by when and by whom. An awarding body may allow such centres to register candidates during this period but must not accept any claims for certification until the approved centre criteria are met in full.
15. Where an awarding body receives an application from one of its existing approved centres to extend its range of NVQ provision the awarding body must take into account the findings of its post approval monitoring activities. Where this indicates that the centre has a strong track record in managing the quality of its existing NVQ provision, the focus of the awarding body in considering the application must be on whether the centre can comply with qualification specific requirements and, in particular, the competence and occupational expertise of assessors and internal verifiers and the centre's ability to provide access to the required assessment opportunities for its candidates. Where 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, such decisions.
16. An awarding body must inform each centre to which it grants approval to deliver an NVQ of this decision in writing for each NVQ that the centre is approved to offer.

## **Candidate registration and certification (Links to and amplifies para 14 of the Common Code of Practice)**

17. Awarding bodies must require centres to ensure that all candidates working towards an NVQ, Key Skills or the D units<sup>2</sup> (D31 to D36) for assessors and verifiers are entered into the awarding bodies' registration system for a minimum of 10 weeks before a claim for certification can be made<sup>3</sup>. Where a centre is attempting to utilise unit registration to circumvent the 10-week rule by registering candidates unit by unit for the whole NVQ, awarding bodies must deem the 10-week rule to be effective from the date of registration for the full certificate. Awarding bodies must ensure that the issue of certificates of unit credit, which list all the units in an NVQ, observes the 10-week rule.
18. Awarding bodies must ensure that their approved centres are aware of their responsibility to inform 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 certificates for candidates achieving the full award.

## **Support and guidance**

19. As part of the centre approval process an awarding body must provide each centre with appropriate documentation and guidance which makes explicit the centre's responsibilities in respect of the effective management, administration and quality assurance of the award. This must be consistent with the regulations set out in the Common Code and the NVQ code and cover:
  - the conduct of internal and independent assessment, including external assessment;
  - the maintenance of standards and the consistency of assessment decisions through internal verification;
  - the requirement that staff involved in the process of assessment and internal verification are appropriately qualified and possess any requirements for occupational expertise as specified by the relevant standards-setting body or National Training Organisation (NTO)<sup>4</sup>;
  - the registration of candidates;
  - the provision of accurate data in respect of claims for certification;
  - the authentication and recording of candidate assessments and the retention of these records;
  - the provision of access to premises, meetings, documents, data, candidates and staff for the purposes of external quality assurance;
  - the procedures for dealing with, and reporting, malpractice.

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<sup>2</sup> *The Employment NTO, funded by the Department for Education and Skills, and the regulatory authorities are currently undertaking a review of the D units. Guidance will be issued in due course concerning transitional arrangements should this review result in a change to the D unit numbering.*

<sup>3</sup> *This requirement does not, however, apply to the September 2000 version of the Key Skills.*

<sup>4</sup> *The Government has recently announced its intention to replace the existing network of NTOs and standards-setting bodies with a new network of Sector Skills Councils. All references to standards-setting bodies and NTOs should be read to include Sector Skills Councils as they come on stream.*

### ***Post approval monitoring of centres***

20. Awarding bodies must monitor and maintain the quality and consistency of assessment practices and decisions within and between their approved centres offering the same qualification as part of their quality assurance and control arrangements.
21. Awarding bodies must provide centres with details of their post approval monitoring activities and ensure that centres are aware of their obligation to provide the awarding body, and the regulatory authorities as appropriate, upon request with access to premises, meetings, candidate assessment records and records of achievement, internal verification records, documents and data, candidates and staff. Where a centre fails to respond to such requests the awarding body must suspend the centre's right to claim certification until such access is given.
22. Awarding bodies must require centres to inform them of any change which affects the centre's ability to continue to meet the full requirements of the approved centre criteria. The awarding body must keep a record of such information and any response agreed with the centre to rectify this situation.
23. Where an awarding body's quality assurance activities provides evidence that a centre is failing to meet the full requirements of the approved centre criteria the awarding body must institute procedures to maintain the integrity of the award. These must be commensurate with the nature of the identified problem as well as establishing dates by which the centre must implement the required corrective action. In order to ensure consistency of response between awarding bodies to identified shortcomings, a tariff of sanctions and penalties is attached as Appendix 4. These represent the response expected by the regulatory authorities of awarding bodies to specified centre transgressions.
24. In circumstances where the nature of the centre's failure to comply with the requirements of the approved centre criteria requires the awarding body to formally withdraw the centre's approval to offer a particular NVQ the awarding body must inform, as appropriate, 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 Q number of the NVQ(s) for which approval has been withdrawn.



## **Section B: Assessment and awarding**

*In addition to the general requirements specified in Section B of the Common Code of Practice (see Appendix 1 paras 16–47 inclusive) NVQ awarding bodies will be required to demonstrate compliance with the following NVQ specific requirements.*

### **Internal assessment (Links to and amplifies paras 33-38 of the Common Code of Practice)**

25. Awarding bodies must ensure that internal assessment processes and practices within centres are effective and support the integrity and consistency of the standards contained within the award through the processes of internal verification, undertaken by the approved centre (see paras 36–47 inclusive below) and external verification undertaken by the awarding body (see paras 51–69 inclusive below).
26. Awarding bodies must require centres to appoint assessors to carry out internal assessment. Assessors will be responsible and accountable for:
  - managing the system of assessment from assessment planning through to making and recording assessment decisions as required by the awarding body;
  - assessing evidence of candidate competence against the national standards of occupational competence within the qualification;
  - ensuring the validity, authenticity and sufficiency of evidence produced by candidates;
  - maintaining accurate and verifiable candidate assessment and achievement records as required by the awarding body.

### **Assuring quality in internal assessment**

27. Awarding bodies will require centres to ensure that assessors:
  - hold appropriate assessor qualifications as approved and specified by the regulatory authorities within 18 months of commencing their role;
  - meet any requirements for occupational expertise, as specified by the appropriate standards-setting body before commencing their role;
  - are fully familiar with awarding body requirements for the recording of assessment decisions and the maintenance of candidate assessment records.
28. Awarding bodies must require centres to ensure that the assessment decisions of uncertificated assessors are checked, authenticated and countersigned by an assessor or internal verifier who has the appropriate assessor and/or internal verifier qualification and relevant occupational expertise as specified by the standards-setting body for the NVQ in question. The internal verifier must sample an increased ratio of assessment decisions by uncertificated assessors and must be responsible, and accountable, for arranging the checking and countersigning process. Awarding bodies must ensure that internal verifiers do not verify evidence that they have assessed.

29. An awarding body must require confirmation that evidence provided by candidates for assessment has been produced and authenticated in accordance with the requirements of the assessment specification. Assessors and candidates must provide a written declaration that the evidence is authentic and that the assessment was conducted under the specified conditions or context. Awarding bodies must ensure that centres understand that a failure to comply with such requirements constitutes grounds for the suspension or withdrawal of a centre's approved status for the NVQ in question.
30. Awarding bodies must require centres to provide appropriate training and development opportunities to enable assessors to meet these requirements and to ensure that they have a common understanding of the standards and other assessment requirements that apply. Awarding bodies must monitor a centre's compliance with this requirement and require centres to keep relevant records of such activity, for example, staff development records, as evidence.

### ***Support and guidance***

31. Awarding bodies must ensure that centres and assessors:
  - are provided with information and guidance which ensures that they understand their responsibilities in relation to the assessment requirements of the qualification;
  - have access to specialist advice and guidance on the assessment of NVQs.
32. Awarding bodies must ensure that centres are in possession of a full assessment specification for the NVQ in question which takes into full account the general parameters and principles for assessment and external quality control established by the relevant standards-setting body. The assessment specification must ensure that assessment requirements can be consistently interpreted and:
  - specify which aspects of the standards must always be assessed through performance in the workplace;
  - specify the extent and limits to which simulated working conditions may be used to assess competence and any characteristics that the simulation should have including, as appropriate, what would constitute a realistic work environment for the qualification concerned;
  - specify the occupational expertise requirements for assessors and internal verifiers as required by the relevant standards-setting body;
  - specify the nature and type of acceptable evidence;
  - detail the strategy for the external quality control of assessment.
33. Awarding bodies must ensure that assessment arrangements within their approved centres comply with those detailed in the assessment specification.

***External quality control of assessment including independent assessment (Links to and amplifies paras 26–33 of the Common Code of Practice)***

34. In developing their arrangements and methodologies for the external quality control of assessment for each NVQ awarding bodies must follow the strategy for external quality control established by the relevant standards-setting body and agreed with the awarding bodies and approved by the regulatory authorities.
35. When independent assessors are used by an awarding body, the awarding body must ensure that they receive appropriate training to:
  - enable them to perform their role competently;
  - meet any requirements for occupational expertise as required by the relevant standards-setting body for the NVQ in question.

***Internal verification of internal assessment (Links to and amplifies paras 39–47 of the Common Code of Practice)***

36. Awarding bodies must require centres to operate explicit and documented internal verification procedures to ensure:
  - the accuracy and consistency of assessment decisions between assessors operating within the centre;
  - that assessors are consistent in their interpretation and application of the national occupational standards contained within the award.
37. Awarding bodies must monitor and review the effectiveness of a centre's internal verification process through their own quality assurance arrangements. Awarding bodies must require centres to provide evidence which demonstrates the effectiveness of the centre's internal verification procedures against these requirements. Where this indicates that a centre's internal verification procedures are failing to meet the requirements specified above, the awarding body must implement the appropriate sanction or penalty as specified in Appendix 4 to secure the integrity of assessment decisions within the centre.
38. Awarding bodies must require centres to appoint internal verifiers who will be responsible for:
  - regularly sampling evidence of assessment decisions made by all assessors across all aspects of NVQ assessment in order to monitor, and ensure, consistency in the interpretation and application of standards within the centre. 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 the purposes of external verification;
  - establishing procedures to develop a common interpretation of the national occupational standards between assessors;
  - monitoring and supporting the work of assessors within the centre;
  - facilitating appropriate staff development and training for assessors;
  - providing feedback to the external verifier on the effectiveness of assessment;
  - ensuring that any corrective actions required by the awarding body are implemented within agreed timescales.

### ***Assuring quality in internal verification***

39. An awarding body must require centres to ensure that the individuals appointed to perform the internal verification function are competent to do so. Awarding bodies must require centres to provide appropriate training and development opportunities in order to ensure that internal verifiers:
  - hold appropriate internal verifier qualifications as approved, and specified by, the regulatory authorities within 18 months of commencing their role;
  - meet any requirements for occupational expertise as specified by the relevant standards-setting body before commencing their role;
  - understand the content, structure and assessment requirements for the awards they are verifying.
40. Awarding bodies must require centres to ensure that the decisions of uncertificated internal verifiers are checked, authenticated and countersigned by an internal verifier who has the appropriate internal verification unit and occupational expertise as specified by the standards-setting body for the NVQ in question.
41. Awarding bodies must monitor a centre's compliance with these requirements and require centres to provide evidence of development activities undertaken, and qualifications held, by their internal verifiers.
42. Internal verifiers may undertake assessment within the centre. In such circumstances awarding bodies must require centres to ensure that the internal verifier meets any requirements for occupational expertise as specified by the relevant standards-setting body and is qualified to the appropriate national standard for assessors. Awarding bodies must also require centres to ensure that internal verifiers do not verify evidence that they have assessed.
43. Awarding bodies must ensure that all claims for certification from a centre have been confirmed and authenticated by an appropriately qualified and occupationally expert internal verifier. Awarding bodies must not accept claims for certification submitted by centres that have not demonstrated that they have met this requirement. Where a newly approved or small centre does not have a qualified internal verifier the awarding body must ensure that the decisions of unqualified internal verifiers are subject to close monitoring by the external verifier through sampling the internal verifier's decisions and formally confirming the validity of all claims for certification.
44. In exceptional circumstances the internal verification function may be performed 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 perform the internal verification function. The awarding body must ensure that the decisions and work of the external verifier are subject to independent scrutiny by a different external verifier. Awarding bodies must provide evidence of the effectiveness of these arrangements.

## **Support and guidance**

45. Awarding bodies must provide centres with guidance on internal verification in order to secure accurate and consistent standards of assessment both between assessors operating within a centre and between centres offering the same award.
46. Guidance produced by the awarding body must include exemplars of:
  - procedures for standardising assessment to ensure that assessors are operating to the same standard together with models for developing an internal verification sampling plan which is appropriate to the centre's level of assessment activity<sup>5</sup>. Awarding body models must ensure that over time all assessors and all assessment methods are included in the sample;
  - procedures for standardising the judgements and decisions between internal verifiers operating in a centre;
  - the types of records and evidence that must be kept by a centre in order to demonstrate the effectiveness of their internal verification procedures.

## **Record keeping**

47. Awarding bodies must require centres to establish and maintain systems for recording assessment decisions which are reliable and auditable.
48. Awarding bodies must provide centres with instructions and guidance on record keeping. The requirement for record keeping must specify the minimum information required to track candidate progress and to allow for the independent authentication of any claims for certification. This must include:
  - lists of all candidates registered with the awarding body for each qualification offered and include:
    - ⇒ candidate name;
    - ⇒ date of birth;
    - ⇒ contact address;
    - ⇒ workplace address and contact details;
    - ⇒ assessor(s) name;
    - ⇒ internal verifier(s) name;
    - ⇒ 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 and 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, records of internal verifier standardisation meetings, records of assessor support meetings, assessor and verifier competence records and monitoring records of assessor/internal verifier progress towards achievement of the relevant assessor and internal verifier qualifications;
  - requirements for the retention of candidate evidence;
  - records of certificates claimed including unit certificates including who claimed the certificate and when.

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<sup>5</sup> *Examples of sampling strategies for internal verifiers can be found in Internal Verification of NVQs: a guide to internal verifiers. See back cover for order details.*

49. Awarding bodies must require centres to retain these records for a minimum of three years to make them available for the purposes of resolving any issues arising from external verification or appeals. Such records must be made available to the regulatory authorities upon request.
50. Where 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 take appropriate measures to safeguard the consistency and integrity of the award. These actions must be consistent with the tariff of sanctions and penalties as specified in Appendix 4. The awarding body must inform the regulatory authorities of such cases and initiate agreed investigative procedures (see section D below, Malpractice).

### ***Awarding body quality assurance and control arrangements***

#### ***External verification of internal assessment (Links to and amplifies paras 39–47 of the Common Code of Practice)***

51. Awarding bodies must maintain rigorous quality assurance and control arrangements which ensure the accuracy and consistency of assessment decisions against the national occupational standards specified for the award within and between the centres they have approved to offer an NVQ.
52. To achieve this, each awarding body must maintain suitably trained and appropriately qualified external verifiers. External verifiers are responsible for:
  - visiting centres to monitor the quality and consistency of assessment practices and procedures against the national occupational standards contained within the award;
  - providing feedback to the awarding body on the performance of its centres in maintaining the consistent application of the national occupational standards;
  - providing assurance to the awarding body that approved centres are continuing to operate in accordance with the requirements of the approved centre criteria;
  - recommending to the awarding body the imposition of an appropriate sanction or penalty, as specified in Appendix 4, in cases where a centre is failing to comply with the requirements of the approved centre criteria. Awarding bodies must monitor the consistency of external verifiers in applying the tariff of sanctions and penalties. The regulatory authorities will, in turn, monitor the awarding bodies' use of the tariff.
53. Awarding bodies must ensure that external verifiers are competent to perform their role. External verifiers must:
  - hold, or obtain within 12 months of commencing their role, appropriate external verifier qualifications as approved and specified by the regulatory authorities;
  - meet any specified requirements for occupational expertise as defined by the standards-setting body prior to commencing their role;
  - be fully conversant with the requirements of the tariff of sanctions and penalties specified in Appendix 4 and their implementation;
  - have a thorough understanding of the national occupational standards for the NVQs that they will be verifying;
  - have a detailed knowledge of the awarding body's systems and documentation;
  - have a thorough understanding of the NVQ system and the national policy and guidance documents produced by the regulatory authorities describing assessment and verification practice.

54. Awarding bodies must keep a register of their external verifiers which details their compliance with, or progress towards, these requirements. Awarding bodies must ensure that the performance and judgements of their external verifiers are monitored for accuracy and consistency. This must include the use of performance review systems, supervised external verifier visits, the monitoring of external verifier reports and feedback from approved centres and the consistency with which external verifiers apply the tariff of sanctions and penalties specified in Appendix 4. The frequency of such monitoring must reflect the prior experience and performance of the individuals concerned. In cases where the accuracy and consistency of external verifier decisions are in doubt, the awarding body must take prompt action to safeguard the integrity of the verification process.
55. Awarding bodies are responsible for the quality of their external verifiers' work and continuing professional development. In order to ensure consistency between awarding bodies in this matter they must provide their external verifiers with a Code of Practice which specifies:
- the key roles and responsibilities of the role;
  - the awarding body's requirements and expectations of external verifiers in relation to continuing professional development;
  - matters of personal conduct and probity, including a requirement on the external verifier to declare any conflicts of interest;
  - details of the awarding body's appeals procedures in respect of a centre appealing against an external verifier's decision.
  - awarding bodies must require external verifiers to confirm their acceptance of the provisions of the Code of Practice in writing and ensure their continued compliance.
56. Awarding bodies must ensure that external verifiers:
- confirm that centres continue to meet the requirements of the approved centre criteria;
  - recommend the imposition of appropriate sanctions and penalties, as specified in Appendix 4, on centres that fail to meet the requirements of the approved centre criteria;
  - confirm that assessments are conducted by appropriately qualified and occupationally expert assessors;
  - sample assessment decisions to confirm that they are authentic, valid and that the national standards are being consistently maintained;
  - confirm that assessment decisions are regularly sampled through internal verification to ensure the accuracy of assessment decisions against the national standards;
  - check claims for certification to ensure that they are authentic, valid and supported by auditable records;
  - confirm that centres have implemented any corrective actions required by the awarding body;
  - advise centres on the interpretation of national standards;
  - advise 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.
56. Awarding bodies must ensure that external verifiers are provided with the information, guidance and training and development opportunities appropriate to their needs in order to ensure that they are able to meet their responsibilities in relation to the conduct of external verification. 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. Awarding bodies must ensure that external verifiers participate in a minimum of two standardisation exercises totalling a minimum of two days per year;
- external verifiers are kept up-to-date with best practice in external verification.

### ***External verification***

58. External verifier visits to centres must be an integral part of an awarding body's quality assurance strategy. In establishing the overall deployment strategy, awarding bodies must ensure that external verifiers do not visit centres in which they have a direct or indirect personal or financial interest.
59. The normal frequency of external verification visits to centres is two per year (a total of two days per year). However, the exact frequency and duration of external verifier visits must reflect the centre's performance and volume and throughput of candidates. Awarding bodies must develop and implement a risk management strategy in relation to the monitoring of its approved centres and the deployment of its external verifiers. Awarding bodies must retain evidence which demonstrates the effectiveness of their risk management strategy and make this available to the regulatory authorities upon request.
60. The awarding body must require the external verifier to inform the centre in advance of the planned activity, such as a centre visit, in order to agree the scope of the visit and the verification and sampling activities that will take place. Awarding bodies must ensure that external verifiers are provided with all the information they require to carry out the verification process effectively and to allow any claims for certification to be verified. Awarding bodies must ensure that centres understand their obligation to comply with any requests for access to premises, records, information, candidates and staff as requested for the purposes of external verification. Where a centre fails to provide such access the awarding body must take appropriate remedial action in line with requirements of the tariff of sanctions and penalties specified in Appendix 4.
61. Where 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. Where this cannot be established the awarding body will reserve the right to withhold any claims for certification until a monitoring visit has been completed.
62. Awarding bodies must, however, ensure that centres are aware that they, and the regulatory authorities, reserve the right to perform such visits at short notice or without prior notification in order to minimise the risk of unsubstantiated claims for certification.



## Sampling

63. Awarding bodies must ensure that external verifiers are provided with all the information necessary for them to carry out the sampling process effectively. In performing the sampling function, awarding bodies must provide external verifiers with published guidance on the sampling of assessment and internal verification decisions and candidate and assessment records. Such guidance<sup>6</sup> must ensure that the sampling strategy used by the external verifier involves the external verifier in meeting internal verifiers, assessors and candidates in addition to the inspection of paper-based records and portfolios in order to confirm whether the process of assessment, as well as the standards being used to judge candidate competence, meets national standards. The sampling strategy must also reflect the specific quality assurance needs of each centre. Where this analysis indicates that the consistency of assessment decisions and practices against the national occupational standards is at risk, an awarding body must ensure that a higher level of sampling is undertaken.
64. Awarding bodies must ensure that external verifiers record the sample and the rationale behind why it was selected, to enable the awarding body to monitor the characteristics of selected samples over time, and the effectiveness of the sampling being carried out by its external verifiers. Over time, the sampling strategy must ensure that the assessment decisions of all assessors are sampled, that all assessment methods are sampled, that all assessment locations are sampled, that candidates at different stages of their award are sampled, that the decisions and records of all internal verifiers are sampled and that assessment records are sampled. Awarding bodies must ensure that particular attention is given in any selected sample to the decisions of unqualified or inexperienced assessors and internal verifiers.
65. The selection of candidates, assessors and internal verifiers for sampling must not be left solely to the discretion or convenience of the centre. Awarding bodies must ensure that external verifiers select some candidates without prior notification to the centre in order to minimise the risk of unsubstantiated claims for certification. External verifiers must inform the awarding body where candidates selected for interview are not made available by the centre. The awarding body must require the centre to provide proof that these candidates exist. Where this cannot be satisfactorily established the awarding body must:
- inform the regulatory authorities;
  - suspend the centre from registering further candidates or claiming certificates;
  - institute investigative actions as agreed with the regulatory authorities.
66. Awarding bodies must ensure that external verifiers are fully trained in, and conversant with, the procedures for dealing with suspected malpractice or maladministration on the part of a centre and the 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 these available to the regulatory authorities upon request, and institute the necessary measures to maintain the integrity of the award.

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<sup>6</sup> *Guidance on the development of sampling strategies can be found in "External Verification of NVQs: a guide for external verifiers" (see back cover for order details).*

### ***External verifier reports***

67. Awarding bodies must ensure that external verifiers provide feedback to centres at the end of each visit. This must be followed by a written report which:
- 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 during the visit;
  - 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 the assessment process and the effectiveness of its internal verification arrangements;
  - highlights areas of good practice against the requirements of the approved centre criteria;
  - specifies any actions to be taken by the centre where its performance does not meet the requirements of the approved centre criteria along with timescales for their implementation and the names of those individuals responsible for their implementation;
  - confirms whether the centre has implemented any previously agreed action points.
68. Awarding bodies must use external verifier reports as a key component of their ongoing monitoring work with centres. Awarding bodies must ensure that where there is a change in the deployment of an external verifier, the new verifier is provided with a copy of the most recent external verification report and action plan for the centre in question.
69. Where a centre is consistently failing to meet the requirements of the approved centre criteria or has not implemented previously agreed action points, awarding bodies must ensure that external verifiers understand their responsibility for recommending that the awarding body take the appropriate action in line with the agreed sanctions and penalties specified in Appendix 4.

## **Section C: Arrangements for candidates with particular assessment requirements**

*In addition to the general requirements set out in Section C of the Common Code of Practice (see Appendix 1 paras 51–57 inclusive) NVQ awarding bodies must demonstrate compliance with the following NVQ specific requirements.*

### **Access to fair assessment**

70. Awarding bodies must take account of full current legislation in the area of access to fair assessment and equal opportunities. This must include:
  - The Race Relations Act Amendment;
  - The Disability Discrimination Act;
  - The SEN and Disability Rights in Education Bill;
  - The Human Rights Act.
71. Awarding bodies must ensure that relevant staff, in particular external verifiers, receive training on the relevant sections of current legislation.

## **Section D: Malpractice**

*In addition to meeting the general requirements set out in Section D of the Common Code of Practice (see Appendix 1 paras 58–61 inclusive) NVQ awarding bodies must demonstrate compliance with the following NVQ specific requirements.*

72. An awarding body must require its approved centres to report any malpractice suspected after candidates have been registered, making clear any possible implications of a failure to cooperate for the future issuing of certificates and the registration of candidates. Where 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 any claims for certification. This is to allow an investigation to be initiated and the awarding body satisfied that adequate safeguards are in place to guarantee the validity of the certificates being claimed. Whilst the details may vary, the key factor to be decided by the awarding body in determining when to investigate a centre, is when it has reasonable grounds to doubt the integrity of the assessment process.
73. An awarding body must maintain a capacity to undertake investigations into alleged irregularities within their centres. Those responsible for managing and carrying out investigations must be independent of the management of normal working relationships with the centres or external verifiers involved. Where an awarding body is not able to support a completely separate team for this work, it must be able to demonstrate how potential conflicts of interest will be managed between its commercial activities and the investigation of its customers.

74. Centres are the responsibility of the awarding bodies who have approved them. As such, the responsibility for investigating alleged irregularities normally rests with the awarding bodies unless there are special circumstances which require the regulatory authorities to be involved. Awarding bodies must notify the regulatory authorities when commencing an investigation and provide an estimated timescale for its completion.
75. An awarding body must prepare a final report of its investigation. This must detail to the regulatory authorities:
- the origin of the complaint or mode of discovery of the alleged irregularity(ies);
  - the investigations carried out;
  - the evidence adduced;
  - the conclusions drawn;
  - the recommendations for action and resolution of the matter.
76. Exceptionally the regulatory authorities may need to take over an investigation. In such circumstances the regulatory authorities will provide a written instruction to the awarding body informing them of this and the reasons for taking such action.
77. An awarding body must inform the regulatory authorities whenever it finds evidence that certificates may be invalid and 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.
78. These circumstances set out the reasons why a certificate may be judged to be invalid. They do not prescribe the action that automatically has to be taken. A variety of factors need to be taken into account, and awarding bodies should discuss individual cases with the regulatory authorities.
79. 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. Where 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;
  - ensure that the original certificates are cancelled on their database to ensure that duplicates cannot be issued;
  - inform the regulatory authorities of the details of the invalidated certificates and, where appropriate, make the information available to public funding bodies.

## **Section E: Enquiries and appeals**

*In addition to the general requirements specified in Section E of the Common Code of Practice (see Appendix 1 paras 62–69 inclusive) NVQ awarding bodies must demonstrate their compliance with the following additional criteria.*

80. An awarding body must provide and publish information on its complaints and appeals arrangements. These must be made available to all centres and provide for complaints and or appeals to be made against:
  - centre approval decisions;
  - internal and/or external assessment and verification decisions;
  - external verifier decisions.
  
81. The procedures must detail the respective roles and responsibilities of the centre and the awarding body in relation to the complaints and 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.

# Appendix 1

## The Common Code of Practice

The criteria specified in the Common Code of Practice apply to all accredited qualifications. They specify the processes and procedures required to ensure high quality, consistency and rigorous standards in assessment and awarding. Section A deals with general matters; Sections B, C, D and E set out in more detail the criteria that govern assessment, awarding and other matters affecting quality and standards. The Common Code of Practice is complemented by category-specific codes of practice specifying additional requirements for qualifications of a particular category or type.

### **Section A: General matters**

1. An awarding body must have:
  - a thorough knowledge and understanding of the national qualifications framework and a high level of expertise in the intended areas of provision, appropriate assessment methods and the languages to be used in assessment, principally English and, where relevant, Welsh or Irish;
  - the capacity to make provision generally available, avoiding unnecessary barriers to achievement, ensuring access and equality of opportunity wherever possible, and guaranteeing fair assessment for all candidates, including those with particular assessment requirements.
2. An awarding body may be a single organisation or a consortium. For a consortium, there must be a clear written statement of the responsibilities of each member organisation.
3. An awarding body must have robust and transparent arrangements for organisation, management and governance and for resolving any conflict of interest, together with sufficient resources to implement the necessary arrangements.
4. An awarding body must designate a single, named point of accountability for the quality and standards of each qualification, and set in place systematic arrangements for ensuring comparability over time, across options and, where appropriate, across qualifications.
5. An awarding body must have a plan of proposed provision available, in confidence, for scrutiny and review against targets agreed with the regulatory authorities.
6. Awarding bodies should cooperate with the regulatory authorities to ensure adequate national provision and must inform the regulatory authorities of any intention to withdraw a qualification from the national framework. Adequate notice of such withdrawal must be given to centres so that the interests of candidates are protected.
7. Where an awarding body is also a standards-setting body, it must take robust measures to manage the potential for a conflict of interests between these roles. A clear distinction must be established between its awarding body activities and its other roles. These roles should constitute neither a barrier to access, nor a restrictive practice.

8. Where an awarding body provides training or instruction for candidates in respect of its own qualifications, it must have a clear separation of governance arrangements. A clear distinction must be established between its awarding body activities and its other roles. These roles should constitute neither a barrier to access nor a restrictive practice.
9. An awarding body must inform the regulatory authorities of any arrangements to franchise or license other organisations to offer its qualifications. Agreements between awarding bodies and the franchised or licensed organisation must be approved by the regulatory authorities. Any organisation offering qualifications on behalf of an awarding body must meet the requirements of the Common Code of Practice, and the awarding body must guarantee compliance.
10. An awarding body must, on request, provide the regulatory authorities, in confidence, with information and supporting evidence regarding any fees which are demanded in respect of any award or authentication of an accredited qualification.

### **Assessment and quality assurance**

11. An awarding body must maintain rigorous quality assurance and quality control arrangements which include:
  - thorough procedures for appointing, training, deploying and monitoring specialists to oversee assessment and awarding in all accredited qualifications and ensure consistency of standards, as applicable, across options, centres and time;
  - the provision of guidance and support and, where appropriate, training opportunities to ensure that centres can meet their obligations regarding the security and robustness of both independent and internal assessment (see Section B);
  - a customer service statement which specifies, according to guidelines provided by the regulatory authorities
    - ⇒ the quality of service customers can expect in relation to qualifications provision, information and guidance, and complaints procedures
    - ⇒ relevant points of contact and communication mechanisms
    - ⇒ the fee structure that will apply to the award or authentication of qualifications
    - ⇒ associated performance measures and feedback arrangements, focusing particularly on manageability, responsiveness and value for money
  - systematic arrangements for monitoring and reporting on all aspects of its own work in respect of accredited qualifications and acting decisively and promptly to maintain quality and standards.
12. An awarding body must provide access, in confidence, to premises, meetings, documents and data to the regulatory authorities in order that they may satisfy themselves that the appropriate standards are being met in the awarding or authentication of qualifications.
13. An awarding body must ensure for each qualification that:
  - it retains (or its centres retain) assessment materials and representative samples of candidates' work sufficient to monitor provision over time and contribute, under the guidance of the regulatory authorities, to national archives;
  - 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 with suitable guidance. The requirements must involve a minimum of bureaucracy while guaranteeing the integrity of the qualification and associated awards.

### ***Awarding bodies' relationships with centres***

14. 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;
  - candidates who complete the requirements for an award promptly receive a certificate in the format, and within the period agreed, with the regulatory authorities;
  - adequate safeguards exist against fraudulent or mistaken claims for certification;
  - replacement certificates, whatever their form, are explicitly labelled as such and only issued subject to all reasonable steps being taken to authenticate the claim.
  
15. An awarding body must work to guidelines set by the regulatory authorities in administering and publishing details of:
  - arrangements for candidates with particular assessment requirements (see Section C);
  - enquiry and appeals procedures (see Section E).



## **Section B: Assessment and awarding**

### ***Principles of assessment***

16. All qualifications must be awarded on the basis of rigorous, accurate and consistent assessments of candidate performance conducted in accordance with published criteria and the standards specified for each accredited qualification.
17. An awarding body's assessment procedures and systems must be capable of establishing:
  - whether or not there is evidence to determine that candidate performance meets defined standards;
  - the validity, authenticity and sufficiency of that evidence.
18. An awarding body must ensure that assessments guarantee the consistency and integrity of the standards of each accredited qualification.
19. The chosen format and method of assessment must be appropriate to the qualification. The method(s) of assessment used for each qualification is (are) the responsibility of the awarding body or, where appropriate, the awarding body in consultation with the standards-setting body, taking into account any accreditation criteria that apply. Any variations to assessment methods specified in criteria must be agreed in advance with the regulatory authorities.
20. Assessments must be based on published specifications of the required skills, knowledge and understanding and, where appropriate, competence, and must provide opportunities for candidates to demonstrate their ability to meet the full range of specified assessment requirements.
21. Where qualifications offer candidates alternative routes or methods of assessment, awarding bodies must ensure that the level of demand is comparable.
22. Assessments must be manageable and cost-effective for centres and awarding bodies to operate with minimum disruption and bureaucracy. The minimum equipment and material requirements for any assessment must be specified by the awarding body in advance of the assessment taking place.
23. Assessment materials must be presented in clear and unambiguous language and must differentiate only on the basis of a candidate's skills, knowledge and understanding. They must be free from any overt or covert discrimination against an individual, either in wording or content.
24. Where relevant, an awarding body must ensure that adequate mechanisms are in place to guarantee the consistency of assessment decisions across the languages of English, Welsh and Irish.

25. An awarding body must specify the knowledge, understanding, skills and – where appropriate – competence required for assessors to be acceptable in the area being assessed, following principles established by the standards-setting body where appropriate. The awarding body must provide information, guidance and, where appropriate, training to enable assessors to meet their responsibilities in relation to standards and assessment.

***Independent assessment, including external assessment***

26. Assessment must be carried out in a manner that is demonstrably independent of anyone who might have a vested interest in the outcome. The method must be appropriate to the qualification and include one or more of:
- assessment carried out by a visiting assessor who is independent of the centre;
  - tasks designed by the centre according to awarding body guidance and assessed by the awarding body;
  - tasks set or defined by the awarding body, taken under specified conditions (which must include details of supervision and duration) and assessed by the awarding body (external assessment);
  - assessment taking another equally rigorous form acceptable to the regulatory authorities.
27. An awarding body must ensure, where it sets tasks, that the materials are evaluated by individuals not involved in their development, to check that the tasks meet the assessment requirements set out in the specification. Tasks must be evaluated alongside associated assessment criteria or mark schemes.
28. An awarding body must maintain the demand of independent assessment year on year with reference, where appropriate, to materials from previous years.
29. An awarding body must set down assessment criteria, including mark schemes, where relevant, to ensure valid and consistent assessment. The awarding body must provide external assessors/markers with exemplar work, where feasible, showing clearly how defined standards are to be met.
30. In the interests of reliability, an awarding body must ensure that independent assessment is undertaken by the minimum number of assessors that is consistent with high-quality work. In establishing this minimum, awarding bodies must consider the number and distribution of candidates and centres, the nature of the assessment requirements and the assessors' previous experience.
31. Independent assessors will normally assess the performance of candidates from a number of centres. They must not normally assess work from any centre in which they have a personal interest. Where this requirement cannot be met, the awarding body must make arrangements to ensure that assessment decisions are scrutinised.
32. The work of each independent assessor must be checked by the awarding body to ensure accuracy and consistency, including consistency across the languages of English, Welsh and Irish. Assessors who do not meet requirements in these respects must not be allowed to continue assessing and their work must be reallocated.

### ***Internal assessment***

33. Assessment must be conducted in accordance with the standards and procedures specified for the qualification. To this end, awarding bodies must:
  - provide centres and internal assessors with a full assessment specification;
  - provide guidance to ensure that any tasks set are consistent with the demands of the specification and enable candidates to demonstrate their knowledge, skills and understanding and, where appropriate, competence against the defined standards;
  - provide guidance on the nature and type of acceptable evidence;
  - provide guidance to ensure that assessment requirements can be interpreted consistently;
  - specify arrangements, appropriate to the qualification concerned, to be made by centres to ensure the assessment decisions and practices within centres are standardised;
  - set out the arrangements for external moderation.
34. An awarding body must set down assessment criteria, including mark schemes where relevant, to ensure valid and consistent assessment. The awarding body must provide centres with exemplar work showing clearly how defined standards are to be met.
35. Where a centre wishes to use assessment arrangements or methods other than those defined by an awarding body, it must seek written endorsement for the use of any specified alternative. The awarding body must ensure that alternative arrangements do not:
  - reduce the validity and reliability of the assessment in any way;
  - compromise the integrity of assessment and the standards required of the award.
36. An awarding body must require confirmation that assessment evidence provided by candidates has been produced and authenticated according to specified requirements.
37. An awarding body must require centres, as appropriate to the qualification, to arrange training and guidance to ensure that assessors within a centre have a common understanding of the standards and other assessment requirements that apply.
38. Where a serious problem or weakness is identified in the assessment of a particular qualification within a centre, the awarding body must institute procedures to maintain the integrity of the award. In such circumstances one or more of the following actions by the awarding body may apply until the awarding body is satisfied that appropriate corrective measures have been taken:
  - approval of assessment tasks and assessment criteria or mark schemes proposed by the centre;
  - an increased level of monitoring activities;
  - a moratorium on candidate registrations and claims for certification;
  - suspension or withdrawal of a centre's registered status.

### ***Moderation of internal assessment***

39. All internal assessment must be subject to moderation to ensure alignment of assessment decisions with required standards. An awarding body must specify, for each qualification, internal and external moderation arrangements that will ensure that internal assessment is valid, reliable, fair and consistent with required standards. For NVQs, the processes are known as internal and external verification.

40. An awarding body must specify the size and nature of any sample for moderation. Samples for external moderation must cover the full range of attainment within a centre, all assessors involved and the different types of assessment used, providing sufficient evidence for secure decisions. If initial samples indicate that required standards are not being applied but provide insufficient evidence to determine appropriate remedial action, additional samples must be taken.
41. An awarding body must specify the knowledge, understanding, skills and – where appropriate – competence required for moderators to be acceptable in the area being assessed following principles established by the standards-setting body. The awarding body must provide information, guidance and training to enable moderators to meet their responsibilities in relation to standards and moderation.
42. External moderators must not check work from any centre in which they have a personal interest. Where this requirement cannot be met, the awarding body must make arrangements to ensure that decisions are scrutinised.
43. In the interest of reliability, an awarding body must ensure that moderation is undertaken by the minimum number of moderators that is consistent with high-quality work. In establishing this minimum, awarding bodies must consider the number and distribution of candidates and centres, the nature of the assessment requirements, and the moderators' previous experience.
44. An awarding body must ensure that the work of each moderator is checked for accuracy and consistency. The awarding body must ensure remedial action is taken to adjust moderation decisions in cases judged to be unsatisfactory. Where moderation determines that internal assessment decisions are inconsistent, the awarding body must ensure that all relevant work is reassessed.
45. Where relevant, an awarding body must ensure that adequate mechanisms are in place to guarantee the consistency of moderation decisions across the languages of English, Welsh and Irish.
46. An awarding body must compile reports on the work of each external moderator. The regularity of such reports will depend on the frequency of assessment and the prior experience and performance of the individuals concerned. In cases where the accuracy and consistency of decisions is in doubt, the awarding body must take appropriate action to safeguard the integrity of the moderation process.
47. An awarding body must, through suitable channels, provide written feedback to centres on the accuracy and consistency of their assessment decisions. This feedback may also cover the adequacy of centres' internal quality assurance arrangements.

## ***Arriving at an overall result***

### *Principles of awarding*

48. An awarding body must, through its awarding procedures:
  - ensure that the basis on which judgements are made is transparent and open to monitoring by the regulatory authorities;
  - ensure that standards are maintained from year to year, across centres and across specifications with the same title;
  - ensure that awarding decisions are based on a sufficiently large sample of candidate performance;
  - keep comprehensive records of decisions taken and standards achieved;
  - ensure that awarding personnel are expert in the area being assessed and are fully conversant with the required standards;
  - ensure that awarding personnel are adequately supported by the awarding body;
  - minimise errors in the awarding process;
  - review awards and adjust assessments in cases where errors are identified;
  - conform to other specific requirements as laid down in qualification-specific codes of practice.
49. An awarding body must provide information to centres on how the overall award will be derived from candidate performance. This information must indicate how elements of assessment will be combined as part of that process.
50. An awarding body must make every effort to ensure that assessments are accurate and consistent, recognising that there may be occasions when decisions made by assessors need to be changed to secure these objectives. Adjustments to the outcomes of assessment may be made at any appropriate stage before or after overall results have been determined.

## **Section C: Arrangements for candidates with particular assessment requirements**

### ***Principles***

51. An awarding body must ensure that there are no unnecessary barriers to assessment which prevent candidates from effectively demonstrating their attainment. Arrangements for candidates with particular assessment requirements (special arrangements) must also ensure that such candidates are not given, or do not appear to be given, an unfair advantage. Special arrangements are generally not appropriate where the candidate's particular difficulty directly affects performance in the actual attributes that are the focus of assessment.
52. An awarding body must make special arrangements according to the needs of the individual candidate, reflecting the candidate's usual method of working, the assessment requirements as set out in the specification and any guidelines set down by the regulatory authorities.
53. An awarding body must ensure in making special arrangements that the validity, reliability and integrity of the assessment are preserved and that certificates accurately reflect candidate attainment.

### ***Procedures***

54. An awarding body must provide centres with details of its arrangements for authorising special arrangements. This information must specify procedures for:
  - arrangements which must be determined by the awarding body, indicating how and when applications should be made on behalf of candidates;
  - those arrangements which give the centre some discretion, indicating the associated requirements for decision making and record keeping.

### ***Monitoring and reporting***

55. An awarding body must have procedures in place for monitoring, evaluating and reporting annually on the use of special arrangements. Relevant data must be shared with the regulatory authorities on request.

### ***Special consideration***

56. An awarding body must make provision for special consideration to ensure that candidates who suffer temporary illness, injury or indisposition at the time of independent (including external) assessment are treated fairly in accordance with any guidelines from the regulatory authorities particular to the qualification.
57. An awarding body must specify conditions for eligibility and application procedures for special consideration. The awarding body must also specify the minimum requirements for an award to be made.

## **Section D: Malpractice**

58. An awarding body must have procedures in place for dealing with malpractice on the part of candidates, centre staff or others involved in providing a qualification, and must ensure that all centres, its own staff and the regulatory authorities receive copies of those procedures.
59. An awarding body must require centres to report to it any malpractice suspected after candidates have been registered, making clear any possible implications of a failure to cooperate for the issue of certificates and the future acceptance of entries.
60. An awarding body must report significant cases of malpractice to the regulatory authorities automatically, and report all cases on request. The awarding body must initiate investigations, and cooperate fully with any follow-up investigations required by the regulatory authorities, sharing information with other awarding bodies or with other agencies as necessary.
61. An awarding body must inform the regulatory authorities whenever it finds evidence that certificates may be invalid and agree appropriate remedial action with the regulatory authorities.

## **Section E: Enquiries and appeals**

62. An awarding body must provide and publish information on its enquiry service. The service must provide for centres to seek a check on assessment decisions affecting candidates' results and, where appropriate, other decisions affecting centres and individual candidates.
63. An awarding body must provide and publish information on its appeals arrangements. The arrangements must provide for appeals to be made against assessment decisions and, where appropriate, other decisions affecting centres and individual candidates. The published arrangements must explain how an unresolved appeal can be put to independent review.
64. An awarding body's appeals mechanism must include the involvement of at least one independent member (who is not and has not been a member of that awarding body's board or committees, or an employee or examiner at that awarding body, at any time during the past seven years).
65. Appeals against assessment decisions must focus on whether the awarding body:
  - used procedures which were consistent with the relevant codes of practice;
  - applied procedures properly and fairly in arriving at judgements.
66. An awarding body must ensure that fees are set at a level that does not deter those with reasonable grounds from submitting an appeal. A full refund of fees must be made in respect of any candidate whose result improves following an appeal. In the case of a group appeal, the awarding body must refund either the total fee or a proportion appropriate to the outcome.

67. The awarding body must send all centres or individual candidates who submit an appeal a written acknowledgement of receipt of the application and an indication of the period within which the appeal will be heard. On completion of the appeals process, applicants must be sent a written account of the outcome. The awarding body must keep records of all appeals.
68. Where the outcome of an appeal against an assessment decision is such as to bring into question the accuracy of results for other candidates in the same assessment, an awarding body must take appropriate steps to protect the interests of all candidates and the integrity of the qualification.
69. An awarding body must have arrangements in place for monitoring, evaluating and reporting annually on the operation of its enquiry service and appeals arrangements. The work must cover the number and nature of enquiries and appeals submitted and the outcomes. Relevant data must be shared with the regulatory authorities on request.



## Appendix 2

### Approved centre criteria

#### **Planning**

##### 1a Management systems

	Criteria	Possible sources of evidence
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.
1.1.2	The centre's access and fair assessment policy and practice is understood and complied with by candidates and assessors.	Documented policies and procedures. Access and fair assessment policy review mechanisms.
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.
1.1.4	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.
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.

1b Resources

	Criteria	Possible sources of evidence
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.
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.
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.
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 D units.
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.
1.2.6	Awarding bodies are notified of any changes which may affect the centre's ability to meet the approved centre criteria <sup>2</sup> .	Notification of changes to the assessment and verification team.  Notification of changes to resources.

## **Delivery**

### 2a Candidate support

	Criteria	Possible sources of evidence
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.
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.
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.
2.1.4	Particular assessment requirements of candidates are identified and met where possible.	Materials/equipment/facilities to support candidates with particular requirements.
2.1.5	There is an established appeals procedure which 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.

2b Assessment and verification

	Criteria	Possible sources of evidence
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.
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.
2.2.3	Assessment is conducted by qualified and occupationally expert staff.	Details of the assessment team including occupational background, experience, possession of D units.  Details of countersigning arrangements for any assessment decisions made by unqualified assessors.
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.
2.2.5	Internal verification is conducted by appropriately qualified and experienced staff.	Details of internal verifier occupational background, experience and D units obtained.  Details of countersigning arrangements for any internal verification decisions made by unqualified internal verifiers.
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.
2.2.7	Unit certification is made available to candidates.	Records of units registered/claimed/awarded.  Induction materials.

## **Monitoring and review**

### 3a Records

	Criteria	Possible sources of evidence
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.
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.
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.
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.

3b Review

	Criteria	Possible sources of evidence
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.
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.
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.
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 criteria.  Evidence of corrective actions taken/implemented.
3.2.5		

## Appendix 3

### 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 Common Code of Practice states:

*An awarding body must ensure for each qualification that:*

- *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, paragraph 14 of the Common Code of Practice states:

*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

##### **a) Centre data**

Data item	Definition
Centre number	The unique centre identifier.
Centre name	
Centre address	
Centre postcode	
Centre telephone no.	
Centre type	The centre type (chosen from the attached list of standard categories).

**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).*
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.

---

\* See Government approved list of ethnic groupings overleaf.



## 2001 Census ethnic group question for England and Wales

A White

British

Irish

Any other white background  
please write in

.....

B Mixed

White and black Caribbean

White and black African

White and Asian

Any other mixed background  
please write in

.....

C Asian or Asian British

Indian

Pakistani

Bangladeshi

Any other Asian background  
please write in

.....

D Black or black British

Caribbean

African

Any other black background  
please write in

.....

E Chinese or other ethnic group

Chinese

Any other

please write in

.....

## Appendix 4

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

#### **Introduction**

Following consultations with awarding bodies, 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 requirements of the approved centre criteria. Based directly upon the approved centre criteria, which were seen to be tried and tested and widely accepted, the tariff is designed to ensure:

- transparency, equity and consistency of treatment between awarding bodies and their approved centres in response to identified shortcomings;
- public confidence in the quality assurance and control arrangements that underpin the implementation and assessment of NVQs.

The regulatory authorities will monitor each awarding body's use of the tariff as part of their ongoing post accreditation monitoring arrangements. The existence of the tariff does not preclude an awarding body from withdrawing approval from centres 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 of sanctions links five levels of transgression against the requirements of the approved centre 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**

Tariff / Level of transgression	Sanction	Rationale
1	Entry in action plan	Non-compliance with approved centre 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 – danger of invalid claims for certification
4	Withdrawal of centre approval of specific NVQs	Irrecoverable breakdown in management and quality assurance of specific NVQs
5	Withdrawal of centre approval for all NVQs	Irrecoverable breakdown in management and quality assurance of all NVQs run by the centre

## ***Sanctions and approved centre criteria***

### ***Tariff levels 1-3***

For tariff levels 1–3, Table 2 links specific failure to meet criteria (non-compliances) with specific sanctions. With some criteria, 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 the non-compliances may be evidenced across a range of the approved centre criteria. These would need to indicate significant faults in the management and quality assurance which result in an ongoing failure to meet the core requirements for the conduct of assessment. This would apply to a specific NVQ at tariff level 4, or across all NVQs at tariff level 5. A failure to rectify non-compliances at tariff level 4 constitutes a reason for applying a sanction at tariff level 5.

### ***Guidance on interpretation***

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

### ***Recurrence***

A centre may temporarily rectify non-compliances in response to action plans (or higher level sanctions) only to display the same weakness 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***

Where 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 and reference to approved centre criteria	Sanction	Rationale
0.1 Centre's aims, policies and assessment practices, and responsibilities of personnel are not clear or well understood by assessment team (1.1.1 – 1.1.3) 0.2 Internal verification procedures and activities not clearly documented (1.1.4) 0.3 Communication within the assessment team and with the awarding body is ineffective (1.1.5) 0.4 Equipment and accommodation do not comply with health and safety acts (1.2.2) 0.5 Insufficient qualified assessors (1.2.3) 0.6 Assessors/ internal verifiers do not have adequate development plans (1.2.4) 0.7 Candidates are not aware of their rights and responsibilities, eg, no appeals procedure for candidates (2.1.1, 2.1.5) 0.8 There is inadequate assessment planning with candidates (2.1.2 – 3) 0.9 Queries are not resolved or recorded (2.2.2) 0.10 Range of assessment methods is insufficient to encourage access (2.2.1) 0.11 Changes to personnel of the assessment and verification team are not notified to the awarding body (1.2.6) 0.12 Unit certification is not made available to candidates (2.2.7) 0.13 There is inadequate monitoring or review of procedures (3.2.1 – 4)	Level 1 Entry in action plan	Non-compliance with approved centre criteria but no threat to the integrity of assessment decisions
1.1 Assessors have insufficient time, resources or authority to perform their role (1.2.5) 1.2 Decisions of unqualified assessors have not been countersigned by qualified assessor (2.2.3) 1.3 Assessment decisions are not consistent (2.2.4) 1.4 Insufficient qualified internal verifiers (1.2.3) 1.5 Decisions of unqualified internal verifier have not been countersigned by qualified internal verifier (2.2.5) 1.6 Records are insufficient to allow audit of assessment (3.1.2) 1.7 Previously agreed corrective measures relating to level 0 are not implemented (3.2.1)	Level 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
2A.1 Assessment process disadvantages candidates (2.1.1 – 5) 2A.2 Assessment decisions are unfair (1.1.2, 2.1.1 – 5, 2.2.1, 2.2.4) 2A.3 No qualified internal verifier (1.2.3) 2A.4 Assessment does not meet national standards(2.2.1 – 4)	Level3A/3B Suspension of Registration / Certification	3A – threat to candidates  3B – loss of the integrity of assessment decisions – danger of invalid claims for certification

Non-compliance and reference to approved centre criteria	Sanction	Rationale
2B.3 The centre fails to provide access to requested records, information, candidates and staff (2.2.6) 2B.4 Assessed evidence is not the authentic work of candidates (3.1.1) 2B.5 Records of assessment show serious anomalies (3.1.1 – 3.1.4) 2B.6 Certification claims made before all the requirements of assessment are satisfied (3.1.3) 2B.7 Previously agreed corrective measures relating to level 2 non-compliance are not implemented (3.2.1)		
3.1 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. 3.2 Previously agreed corrective measures relating to a level 3 non-compliance have not been implemented	Level 4 Withdrawal of centre approval for specific NVQs	Irretrievable breakdown in management and quality assurance of specific NVQs
4.1 Significant faults in the management and quality assurance of all NVQ programmes	Level 5 Withdrawal of centre approval for all NVQs	Irretrievable breakdown in management and quality
4.2 Previously agreed corrective measures relating to a level 4 non-compliance have not been implemented	Level 5 Withdrawal of centre approval for all NVQs	Irretrievable breakdown in management and quality

## About this publication

<b>Who's it for</b>	This document is for awarding bodies and other organisations involved in the provision of NVQs.
<b>What's it about?</b>	This document specifies the processes and procedures required to ensure high quality, consistent and rigorous standards in the assessment and awarding of NVQs.
<b><i>It replaces</i></b>	The Awarding Bodies' Common Accord (July 1997)
<b><i>Related material</i></b>	<p>Arrangements for the statutory regulation of external qualifications in England, Wales and Northern Ireland (Order ref: QCA/00/589);</p> <p>External verification of NVQs (Order ref QCA/98/163);</p> <p>Internal verification of NVQs (Order ref QCA/98/164);</p> <p>Assessing NVQs (Order ref: QCA/98/135);</p> <p>Developing an assessment strategy for NVQs and SVQs (Order ref: QCA/99/396)</p>
<b>What next?</b>	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:***

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