



The group of businesses covered under this document are:

- Paul R Salmon
- PRSGC
- UK First Aid & Safety Training
- UK Pool Lifeguards
- UK Professional Care Training



Paul R Salmon Group Consortium (PRSGC) Operating Manual V10 (Dec 21)

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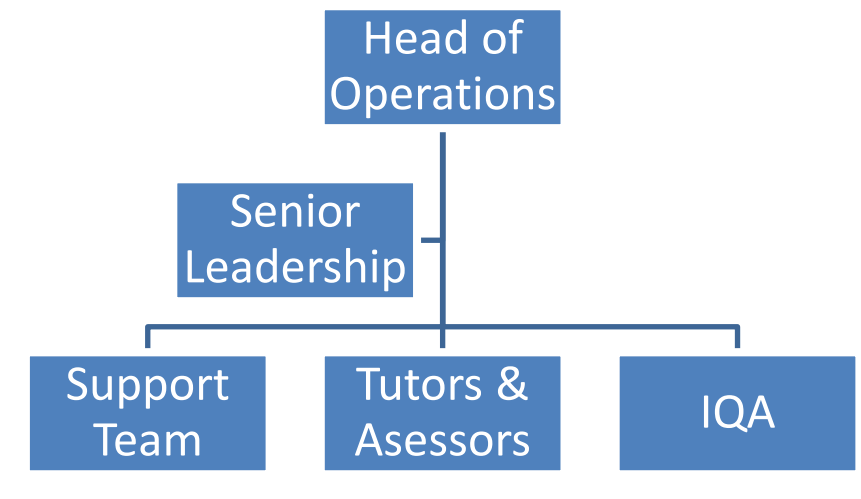
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Forward

Mission Statement

Simply to provide the highest standard of training, customer care and service available. Provide the best staff and offer the best price. If it is not PRSGC, it is not the best!

Staffing Structure – As of November 2021



Contact Details

Mail Forwarding Address: c/o 11 Blake Cl, Lawford, Essex, CO11 2JR

Telephone: 01245 92 82 72 Head Office & 07957 186 313 (mobile consultant)

Email: prs@paulsalmon.co.uk and **Website:** www.paulsalmon.co.uk

Insurers: Hiscox

Business Banking: NatWest Bank, Colchester

Accountants: MRBC, Brantham, Suffolk

Legal Team: DAS Legal

Communications Policy

Preferred Centre Communications Methods

PRSGC preferred communications is via email and centre portal software. PRSGC will keep all licenced centres updates with changes to qualifications, polices, procedures, operations and administration via email or centre portal. It's important centre check regular the centre portal for PRSGC communications.

PRSGC Communication Methods

Email – we will answer you email in 1 hour and reply within 48 hours during normal opening times. We expect centres to reply within 48 hours to any of PRSGC emails.

Website Portal – For uploading changes and introducing new items.

Telephone – Lines open with dedicated customer support team, in busy times we will have an answer service and all message will be answered and replied to within 24 hours (workdays). In addition, we have a duty consultant that answers out of hours.

Mail – We will email a response and send a reply within 14 working days of receipt, for urgent reply's use email.

Customer Services Charter Statement

Paul R Salmon Group Consortium (PRSGC) excels to offer exceptional levels of customer services. We aim to be the markets leading in customer care, support and dedication in awarding qualifications and training providing. We set out to do this by enforcing the following polices:

1. You will get from PRSGC the upmost respected, care and individual attention. We will listen to you and do all in our control to resolve any issues or answer any questions.
2. We aim to answer your telephone call within 5 rings or have an automatic answer machine to take you telephone call. All answer phone messages will be returned in 24 hours or less.
3. All emails will be acknowledged within one hour and replied to within 24 hours.
4. Will reply to any mail within 72 hours. Please note our preferred contact is email for speed and efficiency and may email an attachment of the reply.
5. We will listen to you and ask for feedback improving our services and development our products.
6. We will take care of your personal data and items sending to PRSGC .
7. We will go the extra mile to make sure our learners and centres have an exceptional positive experience.
8. We will treat everyone equal and not discriminate in any way.
9. We respect those that respect us, we treat those that care about our organisation with the upmost respect. Those that don't care about us will not be respected or tolerated at PRSGC. Following our high standards of quality assurance gains our respect.
10. Customer services available more days and hours than a standard awarding office to support and care for the customer.

Complaints Procedure

Should learners wish to complain about any services provided by Paul R Salmon (PRSGC) they are advised to follow the procedure stated below.

It is ultimately the responsibility of the Head of operations, Paul Salmon to ensure that this procedure is published and accessible to all personnel, learners and any relevant third parties.

Stage 1- Raising the Complaint

Complaints for courses must be notified during the course to the appropriate course staff or emailing complaints@paulrsalmon.co.uk. Learners taking part in courses or other services that require a course evaluation sheet to be completed, must clearly indicate a complaint in the relevant boxes and give details, PRSGC will not accept any complaints once a course has finished if the learner has not made them aware prior to leaving the course.

All complaints must be emailed to complaints@paulrsalmon.co.uk with the following:

- Full details of complaint with, evidence supporting and any witnesses.
- What outcome you are after.

This must be done within 3 working days of any course or issue.

Stage 2 – Investigation by PRSGC

PRSGC will acknowledge the complaint normally within 5 working days and investigate and offer a resolution or outcome within 28 working days:

Stage 3 – Escalation of the Complaint

The complaint must be escalated to seniorleadershipteam@paulrsalmon.co.uk within 3 working days with the full reason you are not happy with out come and provide any new evidence you have.

Stage 4 – SLT Intervention

Our senior leadership team will make a full investigation and report their finding back with a resolution or outcome within 28 days.

Stage 5 – External Escalation

You must confirm you wish the complaint to be escalated by emailing seniorleadershipteam@paulrsalmon.co.uk within 3 working days.

PRSGC will give you details of the awarding body or our external complaints company that is independent of us as well as let you know of any fees applicable (our external charges a fee that is refunded by us if found to be in the third party favour) .

Learner Appeals Procedure

Learners wishing to appeal must do so within 3 working days of receiving the disputed assessment decision and are advised to keep copies of all documents relating to the appeal.

It is ultimately the responsibility of the **Head of operations Paul Salmon** to ensure that this procedure is published and accessible to all personnel, learners and any relevant third parties.

Stage 1 – initiating an Appeal

All appeals should be made to the appeals officer@paulrsalmon.co.uk within 3 working days of the dispute. Full details of why you are appealing, and any evidence should be forwarded.

Stage 2 – Investigation by PRSGC

PRSGC will acknowledge the appeal normally within 3 working days and investigate and offer a resolution or outcome within 28 working days:

Stage 3 – Escalation of the Appeal

The appeal must be escalated to seniorleadershipteam@paulrsalmon.co.uk within 3 working days with the full reason you are not happy with outcome and provide any new evidence you have.

Stage 4 – SLT Intervention

Our senior leadership team will make a full investigation and report their findings back with a resolution or outcome within 28 days.

Stage 5 – External Escalation

You must confirm you wish the appeal to be escalated by emailing seniorleadershipteam@paulrsalmon.co.uk within 3 working days.

PRSGC will give you details of the awarding body or our external appeals company that is independent of us as well as let you know of any fees applicable (our external charges a fee that is refunded by us if found to be in the third party favour) .

Safeguarding – Child / Vulnerable Adult Protection Policy

PRSGC has a professional duty to provide children and vulnerable adults with appropriate safety and protection. As the welfare of the child/vulnerable adult is paramount, we are committed to providing safe equipment and facilities so that children/vulnerable adults may participate in courses/programmes in a secure environment. Additionally, we promote ethical behaviour, providing children/vulnerable adults with a sense of being valued. On this basis, we aim to ensure safe recruitment practices are always followed, to establish the suitability of personnel to work with children and/or vulnerable adults.

It is ultimately the responsibility of the **Head of Operations, Paul salmon** to ensure that this policy is published and accessible to all personnel, learners and any relevant third parties.

To provide safety, protection and security to children/vulnerable adults throughout our operations, we will adhere to our child/vulnerable adult protection policy/statement and aim to:

- protect all children and vulnerable adults from abuse, whatever their age, culture, disability, gender, language, ethnic origin, religious beliefs or sexuality
- raise awareness of child and vulnerable adult protection issues and promote good practice
- conduct risk assessments to minimise potential hazards to children's and vulnerable adults' welfare
- provide support to learners who have been abused and act proactively by preventing any similar incidents through risk assessment
- ensure all personnel fully understand their responsibilities and are provided with the appropriate training/regular updates of the legislation.

In achieving our policy aims and being proactive, we have developed procedures related to the recruitment of personnel and how allegations of child/vulnerable adult abuse should be dealt with. Considering this, we implement safe recruitment practices, in checking the suitability of personnel to work with children and vulnerable adults.

Summary of the Personnel Recruitment Procedure

Applicants are required to complete an application form (which may lead to a subsequent interview) which contains explicit information about their past. These are required to be returned to the relevant department and the member of personnel managing the recruitment process. Where applicants will take significant responsibility for safeguarding children during activities within Professional development Qualifications, they will be required to complete a Criminal Record Bureau (CRB) check.

Personnel are selected on their suitability to meet the job/role-related requirements and responsibilities and their ability to demonstrate that they can work safely with children and/or vulnerable adults. Applicants will receive confirmation in writing relating to the outcome of their application/interview. If the outcome is positive, arrangements are made for induction and any relevant training, which includes clarification of activity

requirements, responsibilities and child/vulnerable adult protection procedures and further identification of training needs. New members of personnel are then required to confirm their agreement to abide by the Professional development Qualifications, policies and procedures, including the child/vulnerable adult protection policy, in writing. Awareness of child/vulnerable protection practice will continue to be addressed via on-going training.

All members of personnel who work with children and vulnerable adults are required to adhere to this policy. **Centre personnel/learners/individuals identifying possible abuse must report the allegation to:** Safeguarding Office: kirk@paulrsalmon.co.uk

Allegations will be taken seriously and dealt with as soon as practicable, in line with the recognised centre's child/vulnerable adult protection policy. The Child/Vulnerable Adult Protection Officer is also responsible for conducting any investigation and demonstrating the results if the child/vulnerable abuse is suspected to be committed by a member of staff. Throughout this procedure, records will be maintained and kept securely and confidentially, separately from the learners' file. In the event of an allegation of child/vulnerable adult abuse being committed by any Professional development Qualifications personnel or tutors/assessors/internal verifiers who appear on a Professional development Qualifications partner list (where applicable), the Child/Vulnerable Adult Protection Officer is required to report any allegation to Professional development Qualifications.

Data Protection Policy / Statement

Introduction

We are fully committed to compliance with the requirements of the Data Protection Act 1998 (“the Act”), which came into force on the 1st March 2000. We will therefore follow procedures that aim to ensure that all employees, contractors, agents, consultants, or other persons of the company who have access to any personal data held by or on behalf of the company, are fully aware of and abide by their duties and responsibilities under the Act.

Statement of policy

In order to operate efficiently, we must collect and use information about people with whom it works. These may include members of the public, current, past and prospective employees, clients and customers, and suppliers. In addition, it may be required by law to collect and use information in order to comply with the requirements of central government. This personal information must be handled and dealt with properly, however it is collected, recorded and used, and whether it be on paper, in computer records or recorded by any other means, and there are safeguards within the Act to ensure this.

As regards the lawful and correct treatment of personal information as very important to its successful operations and to maintaining confidence between the company and those with whom it carries out business. The company will ensure that it treats personal information lawfully and correctly. To this end we fully endorse and adheres to the Principles of Data Protection as set out in the Data Protection Act 1998.

The principles of data protection

The Act stipulates that anyone processing personal data must comply with **Eight Principles** of good practice. These Principles are legally enforceable.

The Principles require that personal information:

1. Shall be processed fairly and lawfully and, shall not be processed unless specific conditions are met;
2. Shall be obtained only for one or more specified and lawful purposes and shall not be further processed in any manner incompatible with that purpose or those purposes;
3. Shall be adequate, relevant and not excessive in relation to the purpose or purposes for which it is processed.
4. Shall be accurate and where necessary, kept up to date.
5. Shall not be kept for longer than is necessary for that purpose or those purposes;
6. Shall be processed in accordance with the rights of data subjects under the Act;
7. Shall be kept secure i.e. protected by an appropriate degree of security;
8. Shall not be transferred to a country or territory outside the European

Economic Area, unless that country or territory ensures an adequate level of data protection.

The Act provides conditions for the processing of any personal data. It also makes a distinction between **personal data and” sensitive” personal data.**

Personal data is defined as, data relating to a living individual who can be identified from:

- That data;
- That data and other information which is in the possession of, or is likely to come into the possession of the data controller and includes an expression of opinion about the individual and any indication of the intentions of the data controller, or any other person in respect of the individual.

Sensitive personal data is defined as personal data consisting of information as to:

- Racial or ethnic origin;
- Political opinion;
- Religious or other beliefs;
- Trade union membership;
- Physical or mental health or condition;
- Sexual life;
- Criminal proceedings or convictions.

Handling of personal/sensitive information

We will, through appropriate management and the use of strict criteria and controls: -

- Observe fully conditions regarding the fair collection and use of personal information;

- Meet its legal obligations to specify the purpose for which information is used;
- Collect and process appropriate information and only to the extent that it is needed to fulfil operational needs or to comply with any legal requirements;
- Ensure the quality of information used;
- Apply strict checks to determine the length of time information is held;
- Take appropriate technical and organisational security measures to safeguard personal information;
- Ensure that personal information is not transferred abroad without suitable safeguards;
- Ensure that the rights of people about whom the information is held can be fully exercised under the Act.

These include:

- The right to be informed that processing is being undertaken;
- The right of access to one’s personal information within the statutory 40 days;
- The right to prevent processing in certain circumstances;
- The right to correct, rectify, block or erase information regarded as wrong information.

In addition, we as a centre will ensure that:

- There is someone with specific responsibility for

data protection in the organisation;

- Everyone managing and handling personal information understands that they are contractually responsible for following good data protection practice;
- Everyone managing and handling personal information is appropriately trained to do so;
- Everyone managing and handling personal information is appropriately supervised;
- Anyone wanting to make enquiries about handling personal information, whether a member of staff or a member of the public, knows what to do;
- Queries about handling personal information are promptly and courteously dealt with;
- Methods of handling personal information are regularly assessed and evaluated;
- Performance with handling personal information is regularly assessed and evaluated;
- Data sharing is carried out under a written agreement, setting out the scope and limits of the sharing. Any disclosure of personal data will be following approved procedures.
-

All elected members are to be made fully aware of this policy and of their duties and responsibilities under the Act.

All managers and staff within the company's directorates will take steps

to ensure that personal data is always kept secure against unauthorised or unlawful loss or disclosure and will ensure that:

- Paper files and other records or documents containing personal/sensitive data are kept in a secure environment;
- Personal data held on computers and computer systems is protected using secure passwords, which where possible have forced changes periodically;
- Individual passwords should be such that they are not easily compromised.

All contractors, consultants, partners or other servants or agents of our company must:

- Ensure that they and all their staff who have access to personal data held or processed for or on behalf of the company, are aware of this policy and are fully trained in and are aware of their duties and responsibilities under the Act. Any breach of any provision of the Act will be deemed as being a breach of any contract between the company and that individual, company, partner or firm;
- Allow data protection audits by the company of data held on its behalf (if requested);
- Indemnify the company against any prosecutions, claims, proceedings, actions or payments of compensation or damages, without limitation.

All contractors who are users of personal information supplied by the

company will be required to confirm that they will abide by the requirements of the Act regarding information supplied by the company.

Implementation

The company has appointed an Office Manager who will also act as Office Manager. Implementation will be led and monitored by the Office Manager. The Office Manager will also have overall responsibility for:

- The provision of cascade data protection training, for staff within the company
- For the development of best practice guidelines.
- For carrying out compliance checks to ensure adherence, throughout the authority, with the Data Protection Act.

Notification to the Information Commissioner

The Information Commissioner maintains a public register of data controllers. The company is registered as such.

The Data Protection Act 1998 requires every data controller who is processing personal data, to notify and renew their notification, on an annual basis. Failure to do so is a criminal offence.

To this end the designated officers will be responsible for notifying and updating the Office Manager of the processing of personal data, within their directorate.

The Office Manager will review the Data Protection Register with designated officers annually, prior to notification to the Information Commissioner.

Any changes to the register must be notified to the Information Commissioner, within 28 days.

To this end, any changes made between reviews will be brought to the attention of the Office Manager immediately.

Paul R Salmon Group Consortium (PRSGC) is fully committed to protecting the rights and privacy of individuals, in accordance with the Data Protection Act 1998. Information about our personnel, learners and other individuals will only be processed in line with established regulations. Personal data will be collected, recorded and used fairly, stored safely and securely and not disclosed to any third party unlawfully. As the lawful and correct treatment of personal information is critical to our successful operations and to maintaining confidence, Professional development Qualifications is committed to:

- protecting learners' personal details, records and assessment outcomes
- keeping learners' and other individuals' personal data up to date and confidential
- maintaining personal data only for the time period required
- releasing personal data only to authorised individuals/parties and not unless permission is given to do so
- collecting accurate and relevant data only for specified lawful purposes
- adhering to regulations and related procedures to ensure that all employees who have access to any personal data held by or on behalf of Professional development

Qualifications are fully aware of and abide by their duties under the Data Protection Act 1998.

Learners are required to report any allegation in relation to the unlawful treatment of personal data via the Professional development Qualifications learner complaint procedure. A complaint should be made if learners feel that records of their personal data have been:

- lost
- obtained through unlawful disclosure or unauthorised access
- recorded inaccurately and/or in a misleading manner
- provided to a third party without permission.

Where required, Professional development Qualifications will take appropriate action/corrective measures against unauthorised/unlawful processing, loss, destruction or damage to personal data.

It is ultimately the responsibility of the **Head of Operations, Paul R Salmon Group Consortium (PRSGC)** to ensure that this policy is published and accessible to all personnel, learners and any relevant third parties. However, the quality coordinators (QCs) specific to each qualification are responsible for ensuring this information is fully understood by their qualification team and by the learners who commence courses/programmes in their area.

General Data protection Regulations GDPR

1. Data protection principles

PRSGC is committed to processing data in accordance with its responsibilities under the GDPR.

Article 5 of the GDPR requires that personal data shall be:

- a. processed lawfully, fairly and in a transparent manner in relation to individuals;
- b. collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes; further processing for archiving purposes in the public interest, scientific or historical research purposes or statistical purposes shall not be considered to be incompatible with the initial purposes;
- c. adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed;
- d. accurate and, where necessary, kept up to date; every reasonable step must be taken to ensure that personal data that are inaccurate, having regard to the purposes for which they are processed, are erased or rectified without delay;
- e. kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the personal data are processed; personal data may be stored for longer periods insofar as the personal data will be processed solely for archiving purposes in the public interest, scientific or

- historical research purposes or statistical purposes subject to implementation of the appropriate technical and organisational measures required by the GDPR in order to safeguard the rights and freedoms of individuals; and
- f. processed in a manner that ensures appropriate security of the personal data, including protection against unauthorised or unlawful processing and against accidental loss, destruction or damage, using appropriate technical or organisational measures.”
2. General provisions
- a. This policy applies to all personal data processed by the Business.
- b. The Responsible Person shall take responsibility for the Business’s ongoing compliance with this policy.
- c. This policy shall be reviewed at least annually.
- d. The Business shall register with the Information Commissioner’s Office as an organisation that processes personal data.
3. Lawful, fair and transparent processing
- a. To ensure its processing of data is lawful, fair and transparent, the Business shall maintain a Register of Systems.
- b. The Register of Systems shall be reviewed at least annually.
- c. Individuals have the right to access their personal data and any such requests made to the business shall be dealt with in a timely manner.
4. Lawful purposes
- a. All data processed by the business must be done on one of the following lawful bases: consent, contract, legal obligation, vital interests, public task or legitimate interests ([see ICO guidance for more information](#)).
- b. The Business shall note the appropriate lawful basis in the Register of Systems.
- c. Where consent is relied upon as a lawful basis for processing data, evidence of opt-in consent shall be kept with the personal data.
- d. Where communications are sent to individuals based on their consent, the option for the individual to revoke their consent should be clearly available and systems should be in place to ensure such revocation is reflected accurately in the Business’s systems.
5. Data minimisation
- a. The Business shall ensure that personal data are adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed.
- b. [Add considerations relevant to the Business’s systems]
6. Accuracy
- a. The Business shall take reasonable steps to ensure

personal data is accurate.

- b. Where necessary for the lawful basis on which data is processed, steps shall be put in place to ensure that personal data is kept up to date.
- c. [Add considerations relevant to the Business's systems]

7. Archiving / removal

- a. To ensure that personal data is kept for no longer than necessary, the Business shall put in place an archiving policy for each area in which personal data is processed and review this process annually.
- b. The archiving policy shall consider what data should/must be retained, for how long, and why.

8. Security

- a. The Business shall ensure that personal data is stored securely

using modern software that is kept-up to date.

- b. Access to personal data shall be limited to personnel who need access and appropriate security should be in place to avoid unauthorised sharing of information.
- c. When personal data is deleted this should be done safely such that the data is irrecoverable.
- d. Appropriate back-up and disaster recovery solutions shall be in place.

9. Breach

In the event of a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data, PRSGC shall promptly assess the risk to people's rights and freedoms and if appropriate report this breach.

Security of Examinations Procedure

Examinations are stored either electronically or manually at our office. The procedures we follow are as follows:

Computer based / online examinations

Examinations stored on computer or online platform on, we require the following procedure:

All online platforms must have unique passwords that only the assessment staff no and are not shared with each other.

Computers must have anti-virus and protection to safeguard against unauthorised access.

Assessment staff must make sure prior to using computers they have not been compromise and meet awarding bodies requirements.

Centre staff must report any compromises to the head of centre.

Paper Based Examination

Papers will be held in secure office safe / locked cabinets prior to distributions.

Distributions of examination papers to assessment staff must be done securely and remain unopened until authorised to open at the test.

All papers and associated packs must return securely to the head of centre.

Centre staff must report any compromises to the head of centre.

Identification Checking Procedure

PRSGC will check learner's individual identification on enrolment and prior to any assessments.

PRSGC will require to see one official photograph document in date (i.e passport, driving licence, ID card etc). If the learner to not have photographic identification, then three official household bills from last two months in the learner's name will be accepted.

If any identification raises concerns the learner must not be enrolled or take assessment until this has been rectified, PRSGC has the right to refuse enrolment or examinations with giving a reason.

Equal Opportunities Policy

PRSGC recognise that everyone has a contribution to make to our society and a right to equal opportunity. PRSGC is therefore committed to promoting a best-practice environment, where all individuals and groups are treated with respect and dignity. All staff, learners and any related third party are required to adhere to this policy and to the requirements of the Equality Act 2010 (as amended from time to time).

All staff, learners and any related third party are required to contribute to the effective implementation of this policy treating others equally and ensuring access for all. No one should feel threatened or degraded on the grounds of the following nine protected characteristics identified within the Equality Act 2010: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation. This policy aims to prevent and tackle all types of discrimination also identified through the Equality Act 2010

Direct discrimination	Where someone is treated less favourably than another person because of a protected characteristic.
Associative discrimination	Direct discrimination against someone because they are associated with another person who possesses a protected characteristic.
Discrimination by perception	Direct discrimination against someone because others think that they possess a protected characteristic. They do not necessarily have to possess the characteristic, just be perceived to.
Indirect discrimination	Occurs when there is a rule or policy that applies to everyone but disadvantages a person with a protected characteristic.
Harassment	Behaviour that is deemed offensive by the recipient. Employees can now complain of the behaviour they find offensive even if it is not directed at them.
Harassment by a third party	Employers are potentially liable for the harassment of their staff or customers by people they don't themselves employ, i.e. a contractor.
Victimisation	Occurs when someone is treated badly because they have made or supported a complaint or grievance under this legislation.

Objectives

Effective implementation of this policy ensures that we promote equal opportunities, eliminate discrimination, eradicate harassment and ensure access for all. This is achieved by:

- ensuring that all staff, learners and any related third parties are always treated equally
- ensuring all staff, learners and any related third parties are made aware of this policy and any related responsibilities
- ensuring that all staff are responsible for creating an open and friendly learning environment
- ensuring that staff selection for employment, volunteering, promotion, training or any other benefit will be based on aptitude and ability
- ensuring that learner and participant selection for courses and related initial assessments are conducted in accordance with the qualification pre-requisites and specific selection and initial assessment criteria
- ensuring that all selection/rejection decisions are recorded for staff, learners and any relevant third parties.
- ensuring that an effective access arrangements procedure is in place and deployed through conduct of reasonable adjustments and special considerations
- opposing all forms of unlawful and unfair discrimination.
- taking any allegations or incidents of discrimination or any type of unfair treatment extremely seriously and responding to them swiftly
- ensuring zero tolerance on any acts of discrimination on the grounds of the nine protected characteristics outlined within the Equality Act 2010. Where such instances of malpractice are proven, action will be taken in accordance with the [Insert name of organisation] Malpractice Policy.

It is ultimately the responsibility of the Head of the Centre, [insert name], to ensure that this policy is published and accessible to all personnel, learners and any relevant third parties. However, to further support effective implementation, Qualification Coordinators (QCs) specific to each qualification are responsible for ensuring this information is fully understood by their qualification team and by the learners who commence courses/programmes in their area.

Equal Opportunities Policy

PRSGC is committed to promoting a best-practice environment, where every learner is treated with respect and dignity. No personnel or learner or any related third party should feel threatened, degraded on the grounds of race, colour, nationality, ethnic or national origin, sex, marital status, sexual orientation, disability, physical characteristics, health, religious or political beliefs.

PRSGC is responsible for ensuring that all individuals receive the same treatment, regardless of race, colour, nationality, ethnic or national origin, sex, marital status, sexual orientation, disability, physical characteristics, health, religious beliefs or political beliefs.

This policy aims to prevent/tackle any potential/current discrimination, whether indirect or direct, which involves learners and any member of Professional development Qualifications personnel.

PRSGC is responsible for:

- equal treatment of all individuals who have the right to participate and enjoy sport, recreation and allied occupations
- all personnel involved with Professional development Qualifications are, responsible for creating an open and friendly environment for all learners
- preventing discriminatory behaviour, which will not be tolerated in Professional development Qualifications
- taking any allegations or incidents of discrimination or any type of unfair treatment extremely seriously and responding to them swiftly.

It is ultimately the responsibility of the **Head of Operations, Paul Salmon** to ensure that this policy is published and accessible to all personnel, learners and any relevant third parties. However, the quality coordinators (QCs) specific to each qualification are responsible for ensuring this information is fully understood by their qualification team and by the learners who commence courses/programmes in their area.

Should you wish to discuss any matter or voice a grievance in relation to the above in confidence, please contact Paul salmon alternatively, learners may follow the **PRSGC** Learner Complaints Procedure.

Reasonable Adjustments, Special Considerations & Access to Fair Assessment Policies

Commitment

PRSGC is committed to providing ongoing support to learners with requirements and aspires to eliminate discrimination. On this basis, we ensure accessible services, making reasonable adjustments and applying special considerations where these are required, to facilitate learners in completing each course/programme as independently as possible.

Access arrangements ensure that the conduct of reasonable adjustments and special considerations reduce substantial disadvantage caused due to a learner's disability or difficulty. In accordance with the Equality Act 2010, we have a commitment to provide access for learners with needs to prevent discrimination in the delivery of qualifications and the assessment of learners.

Reasonable adjustments

Reasonable adjustments are any arrangements made prior to the delivery or assessment of a qualification to reduce the effect of a disability or difficulty that places a learner at a substantial disadvantage. These arrangements are required to be granted by the awarding organisation for the assessment of learners with a permanent, long-term, or temporary disability, a learning difficulty, illness or indisposition.

Special Consideration

Special consideration is the implementation of arrangements at the time of an assessment to allow competence to be demonstrated by learners who have been disadvantaged or were unable to attend the assessment due to emotional/physical difficulties or adverse circumstances. These arrangements are required to be granted by the awarding organisation for the assessment of learners who have experience temporary difficulties.

Objectives

Our personnel are committed to contributing to this practice and the overall aims are to assist learners in managing their individual situation and create a more accessible learning and assessment environment for all. For this to be achieved, we aim to determine learners' requirements and requests for the provision of access arrangements at an early stage. To ensure sure we give access to fair assessment and treating all learners equally we intent to:

- ensure the access to fair assessment statement and practice are understood and complied with by any personnel involved in assessment and by learners
- promote equality within of each learning programme and in the conduct of all qualification assessments

- adhere to related procedures and regulations regarding reasonable adjustments and special consideration; requesting permission to grant these for each learner from the relevant awarding organisation
- ensure buildings and assessment sites used for delivery and assessment are accessible to all learners, as far as is practicable
- ensure appropriate equipment/personnel (including technological equipment or any assistant personnel, i.e. reader, scribe, practical assistant, etc) is available for selected adjustments to delivery and/or assessment
- use assistive equipment and personnel within the reasonable adjustment's framework, as outlined by the awarding organisation, without disadvantaging others who are not affected by requirements.

Access Arrangements Procedure

Stage	Reasonable Adjustments	Special Considerations
<p>Stage 1:</p>	<p>The learner must request reasonable adjustments from the centre at the application stage of their course or by informing their tutor/assessor of the difficulty.</p> <p>This information will be passed to the Access Arrangements Coordinator Paul Salmon, Head of Centre who will evaluate the request and will liaise with the learner to validate their difficulty/disability and to ensure the relevant reasonable adjustments are identified. At this stage, the learner must provide all necessary evidence (medical evidence/certification, diagnostic test results, a statement from the invigilator/tutor/assessor or any other appropriate information) to support their request. Outcomes will be confirmed via email to the learner (Validated requests will then be forwarded to the relevant AO. For invalidated outcomes, no further action will be taken).</p>	<p>The learner must request all special considerations by contacting the centre's appointed Access Arrangements Coordinator Paul Salmon, Head of Centre</p> <p>The Access Arrangements Coordinator will evaluate the need for the special consideration. At this stage, the learner must provide all necessary evidence (medical evidence/certification, diagnostic test results, a statement from the invigilator/tutor/assessor or any other appropriate information) to support their request. Outcomes will be confirmed via email to the learner (Validated requests will then be requested from the relevant Awarding Organisation. For invalidated outcomes, no further action will be taken).</p>

Stage 2:	The Access Arrangements Coordinator will request reasonable adjustments or special considerations from the relevant awarding organisation in accordance with the standard procedure.
Stage 3:	The Access Arrangements Coordinator will ensure all reasonable adjustments and special consideration are implemented in accordance with outcomes confirmed by the Awarding Organisation. They will evaluate the implementation and audit all outcomes. All records relating to the application, relevant evidence and monitoring forms are securely retained for five years.

Equality and Access Appeals

Where learners have requested reasonable adjustments or special considerations from but are unhappy with the outcomes, they have a right to make an appeal via the PRSGC Learner Appeals Procedure

Equality and Access Complaints

Learners have the right to raise any issues related to equal treatment and/or the implementation of access arrangements or make a formal complaint via the PRSGC Complaints Procedure.

Introduction

This policy is primarily aimed at learners who are delivering/registered on or have taken an PRSGC qualification or unit. It is also for use by our staff to ensure they deal with all reasonable adjustment and special consideration requests in a consistent manner and in accordance with the relevant awarding organisation requirements.

Each awarding organisation will have specific guidelines to follow when applying for reasonable adjustments for individual learners and what can be automatically approved by centres.

Centre Responsibility

To ensure the following:

- Every learner is given the opportunity to achieve the qualification/unit without changing the assessment criteria or achievements.
- Identification of learners who require reasonable adjustments prior to delivery of course.
- Where identification of a learner who requires, reasonable adjustments, PRSGC will apply to the relevant awarding organisation for approval if required, see individual guidance provided by different awarding organisations.

- Where reasonable adjustment is approved, make necessary provision, however ensuring that assessment demand is not lowered.
- Inform Internal Quality Assurer of learners on a qualification that is completing the assessment using a reasonable adjustment method.
- Maintain accurate records of learners with reasonable adjustments as this will be monitored through the External Quality Assurance system.
- Supply information to the relevant awarding organisation on the use of reasonable adjustments with learners as requested.

Review Arrangements

We will review the policy annually as part of our self-evaluation arrangements and revise it as and when necessary in response to customer and learner feedback, changes in our practices, actions from the regulatory authorities or external agencies or changes in legislation.

Access to Fair Assessment

PRSGC is committed to providing on-going support to learners with requirements and aspires to eliminate discrimination. On this basis, we ensure accessible services and make appropriate adjustments, where required, to facilitate learners in completing the course/programme as independently as possible. Our personnel are committed to contributing to this practice and the overall aims are to assist learners in managing their individual situation and create a more accessible learning and assessment environment for all. For this to be achieved, we aim to determine learners' requirements and requests for the provision of access arrangements at an early stage. In making sure our access to fair assessment statement is implemented effectively and all learners are treated fairly, we aim to:

- ensure the access to fair assessment statement and practice are understood and complied with by any personnel involved in assessment and by learners
- promote equality in relation to the provision of the learning programme and assessment of the qualification
- adhere to related procedures and regulations regarding reasonable adjustments to assessment and special consideration
- ensure buildings and assessment sites used for delivery and assessment are accessible to all learners, as far as is practicable
- request permission for the implementation of specific adjustments from the awarding body where required
- ensure appropriate equipment/personnel (technological equipment or any assistant personnel, i.e. reader, scribe, practical assistant, etc) is available for selected adjustments to delivery and/or assessment
- use assistive equipment and personnel within the reasonable adjustment's framework, as outlined by Professional development Qualifications without disadvantaging others who are not affected by requirements.

It is ultimately the responsibility of the **Head of Operations, Paul Salmon** to ensure that this statement and related procedures are published and accessible to all

personnel, learners and any relevant third parties. However, the quality coordinators (QCs) specific to each qualification are responsible for ensuring this information is fully understood by their qualification team and by the learners who commence courses/programmes in their area.

Learners have the right to raise any issues related to the implementation of access arrangements or make a formal complaint via the **PRSGC** learner complaints procedure or the **PRSGC** learner appeals procedure, if they are not satisfied with the outcome of the decision in relation to the access arrangements applied.

Procedure for Access Arrangements

Stage 1:

PRSGC evaluates and identifies the need for the implementation of access arrangements due to a learner's requirements where a learner reports the request to the tutor/assessor or where it is identified via other acceptable means. At this stage, the learner must provide all necessary evidence (medical evidence/certification, diagnostic test results, a statement from the invigilator/tutor/assessor or any other appropriate information) to demonstrate the condition or reason(s) affecting his/her performance.

Stage 2:

The tutor/assessor communicates the request to the qualification-specific quality coordinator (QC), who checks the learner's eligibility. The QC collates all evidence required and helps the learner to make the application for reasonable adjustments/special consideration.

Stage 3:

If access arrangements as requested by the learner are not appropriate and the application is rejected by Professional development Qualifications, other alternatives will be suggested, where required. If the application for access arrangements is accepted, the decision is communicated to all personnel involved in the delivery and/or assessment and arrangements are made as soon as practicable to assist the learner.

Stage 4:

Monitoring of the eligibility of decisions made outcomes of the applications and effectiveness of the procedure is conducted via the established Professional development Qualifications procedure. The QC will ensure that the learner completes an evaluation of the effectiveness of the access arrangements and reports this.

All records relating to the application, relevant evidence and monitoring forms are securely retained for five years.

Conflicts of Interest Policy

Introduction

This document outlines conflict of interest policy of PRSGC covering:

- broad approach to identifying and monitoring all actual/potential conflicts of interest that may affect PRSGC both now and in the foreseeable future; and
- the possible conflicts of interest that have been identified and arrangements put in place to prevent these from occurring.
- the declaring and managing conflicts of interest.
- Declaration of conformance.

This and supporting documents may be requested by Appropriate body to satisfy them of our ability to comply with their requirements in relation to conflicts of interest and to prevent such conflicts becoming 'Adverse Effects' (as defined by body).

Review Arrangements

We'll review this document annually as part of our self-evaluation arrangements. However, a review will be commissioned earlier should an issue arise in relation to an actual or potential conflict of interest and/or in response to customer, learner or regulatory feedback.

Definition of a Conflict of Interest

For the purposes of this policy we have adopted the definition used by AoFAQ in relation to conflict of interest. A conflict of interest exists in relation to PRSGC where:

- its interest in any activity undertaken by it, on its behalf, or by a member of its staff have the potential to lead it to act contrary to its interest in the delivery of qualifications in accordance with the requirements of the regulator's Conditions of Recognition,
- a person who is connected to the delivery of qualifications at PRSGC has interest in any other activity which have the potential to lead that person to act contrary to his or her interests in that delivery and impact on our compliance with the requirements of body,
- an informed and reasonable observer would conclude that either of these situations was the case.

Interests in presenting and assessment

PRSGC will take all reasonable steps to avoid any part of the assessment of a Learner (including by way of moderation) being undertaken by any person who has a personal interest in the result of the assessment. Trainers, Moderators and Markers should be considered if their actions could affect the validity of the qualification or assessment outcome.

If a person who does have a conflict of interest with the assessment of a learner, PRSGC will take reasonable steps to ensure the relevant part of the assessment is subject to scrutiny by another person.

Examples of potential Conflict of Interest:

Where the Trainer, Assessor, Marker or Moderator:

- is employed by the Learner
- is a close family relationship / close friend with the Learner
- has a business relationship with the Learner
- where the Learner is a Manager / Supervisor of the said person
- Financial gain either direct or indirect is involved

Conflict of Interest Principles

In implementing our approach to identifying and managing actual/potential conflicts of interest staff are required to abide by the following principles:

- All managers and staff must buy into and commit to identifying and managing all actual/potential conflicts of interest that may affect PRSGC and in doing so raise possible conflicts of interest with the Head of Centre if in doubt.
- Staff must be proactive in the identification and management of conflicts of interest that may affect our effectiveness, level of regulatory compliance and/or reputation.
- Staff must be open about the nature of any potential/actual conflicts of interest and not try to hide or present them in a better light – managing conflicts of interest is about preventing issues from occurring that may impact on our operational effectiveness and/or regulatory compliance.
- Strive to identify and deal with conflicts of interest sooner rather than later.
- Our controls to managing any potential conflicts of interest must be proportionate to the risks associated with the identified conflict(s).

If the breach is also classified as an Adverse Effect then the Head of Centre shall promptly inform awarding body stating the reasonable steps that we have taken or intend to take to prevent, correct or mitigate the Adverse Effect. Including a detail of any reviews we are/will carry out. Body will also offer advice where applicable.

For information, the Ofqual definition of an Adverse Effect is:

- An act, omission, event, incident, or circumstance has an Adverse Effect if it –*
- a) gives rise to prejudice to Learners or potential Learners, or*
 - b) adversely affects –*
 - i. the ability of the awarding organisation to undertake the development, delivery or award of*

- qualifications in accordance with its Conditions of Recognition,*
- ii. the standards of qualifications which the awarding organisation makes available or proposes to make available, or*
 - iii. public confidence in qualifications.*

Declaring a Conflict of Interest

- PRSGC will take all reasonable steps to ensure that a Conflict of Interest does not occur, if this is not possible:
 - A declaration of actual or potential conflicts of interest must be notified to the Head of Centre as soon as possible.
 - Where an actual conflict of interest has occurred PRSGC will notify body
- PRSGC will keep a log of all actual or potential conflicts of interest.

Health and Safety Policy and Risk Assessments

PRSGC is committed to providing a safe working, coaching, teaching and learning environment for all personnel, learners and any related third parties. Responsibility for health and safety ultimately lies with the head of Operations of Professional development Qualifications, Paul Salmon; However, all learners and personnel have a legal responsibility, as stated under Section 7 of the Health and Safety at Work Act 1974, to do everything practicable to prevent an accident or injury to themselves and to fellow learners and/or personnel. The quality coordinators (QCs) specific to each qualification are responsible for ensuring this information is fully understood by their qualification team and by the learners who commence courses/programmes in their area.

Professional development Qualifications aims to promote health and safety, so far as reasonably practicable, by ensuring:

- the provision and maintenance of safe equipment that poses no risk to health
- the provision of relevant information to learners, personnel and any related third parties, including instruction, training and supervision, as is necessary to ensure health and safety
- maintenance of safe environments, including a means of access in a condition that is safe and without risk to health
- progressive identification and assessment of all risk, taking measures to eliminate or control it
- compliance with statutory regulation on health and safety and welfare of learners, personnel and any related third parties

- the health and safety and welfare of vulnerable learners is addressed through positive action
- all required and appropriately qualified members of personnel are given training to identify and control potentially hazardous situations/environments
- effective measures, such as fire alarms, are in place to deal with emergencies.

This list is not exhaustive and represents general principles followed by [insert name of organisation] in respect of health and safety.

First Aid

The nominated/appointed individuals(s) are: All our full-time staff hold First Aid at Work, a list can be obtained from info@paulrsalmon.co.uk All confirmed nominees are appropriately qualified first aiders, holding current first-aid certificates. Therefore, one of the first aiders listed above must be contacted in the event of an incident occurring, to administer any first aid required. It is important that all issues where a first aider has been involved are recorded in the necessary incident logbook(s) which accompany the first-aid box(es). Whenever learners are present, to attend for a component of a course/programme, their tutor/assessor is responsible for making them aware of who their nominated first-aiders are and where they can be found (they are required to be on site at the time of a course/programme taking place). The first aid box(es) are located: With tutor / assessor or verifier and at venues notified to learners at start of the

course. Nominated first aiders are also provided with appropriate first-aid equipment.

Risk Assessment Procedures

Tutors/assessors must ensure that suitable and sufficient control measures are in place to reduce identified risks when they are delivering any component of a course/programme. Any information a tutor/assessor has identified in relation to risk should be shared with/distributed to other members of personnel. All personnel required to conduct risk assessments will be given the appropriate training and/or will be made aware of what is

expected of them in advance. Prior to conducting a course/programme, the tutor/assessor will conduct a risk assessment and record relevant findings in line with the Professional development Qualifications health and safety policy. Where tutors/assessors complete a session where they would not normally complete a session, a risk assessment must be conducted, to ensure the health and safety of all present. Additionally, a risk assessment is required to be conducted prior to any practical activity. A risk assessment form has been created for these purposes.

Risk Assessment Version July 20
(Covid Risk Assessment Available as separate)

PRSGC employee less than 5 and therefore are exempt from written procedures, however our policy is to have them in place were learners and public are our responsibility.

Location:	Generic for training rooms check prior to learner's attendance by			
Subject/Activity:	Training course			
Assessed by:	Paul salmon			
Number of learners:	Max 20	Event Authorisation Number (EAN):		Date: various

HC and Hazard Description	Severity (without control)	Risk-control Measures in Place (if any)	Likelihood (with control)	Risk
Glare 11	Low to med	Blinds, position of screens	Low	low
Wires trailing 7	Med to high	Protectors in place	Low	low
Electrical equipment 1	high	Pat tested and checks in place and servicing	low	low
Back strain 10	Med	Chairs, vdu assessments, guidance to learners and staff, health checks	low	low
Slips trips falls 7	high	Protectors, signs, spillage reports and dealt with at once	Low	Low
Hearing damage 10	high	Limited use of audio and keep below 80db	Low	low
Manual handling 9	high	Training and use of aids	Low	Low
Fire 15	high	Training, checks, no smoking, drills	Low	Low
Violence 7	Low	Awareness training and procedures	Low	Low
Signed:	prs	Time risk assessment completed:		

2020 Update Covid 19 Risk Assessment in Place

Malpractice Statement and Policy

PRSGC is committed to pursuing the highest standards of probity and the elimination of malpractice in the management of our organisation and aims to promote accountability and a climate of openness, to encourage the disclosure of allegations of malpractice. Personnel/learners/individuals must report allegations to. It is ultimately the responsibility of the **Head of operations, Paul Salmon**, to ensure that this policy is published and accessible to all personnel, learners and any relevant third parties. However, the quality coordinators (QCs) specific to each qualification are responsible for ensuring this information is fully understood by their qualification team and by the learners who commence courses/programmes in their area. Information contained within this documentation applies to all personnel/learners/individuals involved with **PRSGC** Arrangements in place offer individuals a safe and accessible procedure for reporting allegations of malpractice in a confidential manner, on the basis that **PRSGC** will take appropriate steps to ensure that individuals reporting allegations of malpractice are not penalised and are protected and that individuals accused will be protected against false, malicious or anonymous accusations. **PRSGC** is keen to encourage personnel/learners/individuals to report allegations without fear and will ensure that any disclosure is treated with the utmost confidentiality.

Anonymous allegations will only be considered if they are of a serious nature and the evidence is sufficient to warrant an investigation and for appropriate action to be taken. All allegations will be recorded and submitted to the awarding body for investigation. Instances of malpractice that may be committed by personnel or learners include:

- committing plagiarism by copying and passing off the whole or part(s) of another person's work, with or without the originator's permission and without appropriately acknowledging the source
- failing to comply with the assessor's/invigilator's instructions and/or Professional development Qualifications regulations in relation to the assessment and security
- misusing assessment material
- impersonating other learners by pretending to be someone else, in order to produce the work for another, or arranging for another to take one's place in an assessment
- fabricating and/or altering results and/or evidence, documents and/or certificates
- using unauthorised material in relation to the requirements of supervised assessment
- behaving in such a way as to undermine the integrity of the assessment.

Personnel and/or learners who commit malpractice and who fail to comply with the guidance on regulations for assessment will lead Professional development Qualifications to withhold the learners' results. Withholding information or failing to report promptly any suspected cases of malpractice or non-compliance by centre personnel and/or learners may result in the imposition of sanctions/penalties Professional development Qualifications with a possible outcome being the suspension of certification/registration or even recognised centre status. Learners are required to be aware of the penalties for/consequences of breaching regulations, which may include one or more of the following:

- written warning
- disqualification from entering one or more (re)assessments
- disqualification from the whole qualification.

Learners must understand that if the allegations are proven, Certificates may be invalid and those already issued may be withdrawn. Personnel who commit malpractice, which is confirmed after investigation, may be subject to penalties, including:

- exclusion from the delivery of the qualification
- exclusion from the assessment of the qualification
- exclusion from the internal verification/moderation of the qualification
- exclusion from the financial/quality management/administration of the qualification
- temporary suspension
- work only under supervision
- undertake specific training.

The Reporting of Malpractice In order to make an allegation of malpractice, you are required to contact Malpractice Officer **PRSGC** Paul Salmon prs@paulsalmon.co.uk:

Contingency Policy

If something was to change, go wrong at PRSGC then we have contingency planning in place to make sure we can carry on operating as normal and prevent any interruption to the learners journey, prevent disadvantaging the learner or bring the professional integrity of the qualifications in to jeopardy.

PRSGC has controls measures in place that monitor and aim for prevention:

- Staff qualified to EQA that are highly trained to detect issues and reduce the risk rating to them
- Administration systems, quality systems and internal auditing to detect any shortfalls or potential risks.
- Support network from external consultants.
- Internal checks of staff observations, learner interviewing and random IQA.

The following examples are set out bellow and this is not an exhausted list.

Potential Issue	Contingency in place
Incorrect course staff or non-registered course staff running the qualifications	PRSGC make strict vetting checks of qualifications, experience etc. Awarding bodies will conduction further checks. Staff must complete correct qualifications failure to do so will be a sackable offence.
PRSGC running courses in appropriate venues, not comply due-diligence checks.	PRSGC will not do this. They will vet all staff and will recruit new suitable staff if required.
PRSGC staff signing off learners not meeting required standards.	PRSGC operate strict IQA on all assessors. Certificate claims will only be by approval of IQA and company director. Anyone found signing off below achievement will be investigated, retrained, or have their contact of employment revoked.
PRSGC staff not running full course hours	PRSGC operate strict IQA on all assessors. Certificate claims will only be by approval of IQA and company director. Anyone found signing off below achievement will be investigated, retrained, or have their contact of employment revoked. Learners will be contacted by the IQA to check course hours on some spotted checks to prevent this.

<p>PRSGC Staff Leave or do not turn up for training due to sickness or other.</p>	<p>PRSGC will have a minimum of 2 staff per area to cover any issues with staff not turning up, illness etc.</p>
<p>PRSGC staff qualifications run out and are not renewed.</p>	<p>PRSGC monitor centre staff and will recruit new staff if existing members of staff have not renewed within 28 days or be scheduled to renew.</p>
<p>PRSGC staff falsifying paperwork that disadvantages the learner or advantages the learner.</p>	<p>Strict IQA in place, staff will be suspended and investigated, and another member of staff allocated to make sure it put right. Awarding office will be notified.</p>
<p>PRSGC staff delivering the course unavailable due to</p> <ul style="list-style-type: none"> ➤ Family issue or personal reason ➤ Issue with transport getting to venue or accident / hold up. ➤ Unwell or unforeseen medical issue ➤ Lack of funds to get to venue ➤ Not turning up to venue ➤ Staff falsifying qualifications ➤ Staff strike or protest 	<p>PRSGC will have a minimum of 2 staff per area to cover any issues with staff not turning up, illness etc.</p>
<p>Qualification been unable to be delivered at the venue due to any of the following:</p> <ul style="list-style-type: none"> ➤ Venue does not open on time for unforeseen reasons by venue staff. ➤ Centre overbooked the venue ➤ Centre no meeting safety, equal opportunities, or welfare issues when centre arrive. ➤ Centre closed due to acts of god i.e. floods, fire, damage, building defected or other issue 	<p>PRSGC will have reserve centres that they can use in the event of the centre having any unforeseen issues.</p>

<ul style="list-style-type: none"> ➤ Centre evacuated because of fire, bomb threat, security issue or other evacuation. ➤ Venue did not meet the contract agreement with the venue i.e. fees or other. ➤ Learners complaint 	
<p>PRSGC use poor inadequate facilities</p>	<p>PRSGC check all facilities prior to use and will not commit to using if any shortfalls are detected. In the event shortfalls found on the day then we would follow the contingency of another venue being used.</p>
<p>PRSGC staff teaching inappropriate content or incorrect syllabus.</p>	<p>Staff checked by IQA and quality team. Standardisation in place. All staff must be observed teaching a course prior to delivering on their own.</p>
<p>Breach of Data protection by PRSGC.</p>	<p>All staff trained in requirements and only authorised staff allowed to handle data. All records are kept securely and authorised by lock or password on electronic systems. Data is not permitted to be opened in public i.e. trains etc.</p>
<p>Administration systems are deleted or lost.</p>	<p>All administration systems kept electronically are backed up to a secure cloud or drive. All records are kept for 3 years after the learner has completed.</p>
<p>Centre go out of business.</p>	<p>Centre have a list of companies that will help and take over the learners through the consortium.</p>

Improvement of Staff, CPD & Standardisation Policy

Continues Professional Development

PRSGC Staff are required to achieve continuous professional development (CPD)

Staff are required to do the following:

- Achieved the required amount of CPD points each year to remain competent.
- Keep CPD logs for so they remain occupationally competent, up to date and experts in their subjects.
- Attend face to face training, Webinars, membership of bodies, read journals, follow latest best practice and other relevant.
- Complete log and return to SLT on an annual basis

Standardisation

PRSGC are required to conduct regular standardisation included at least one each year when all staff are together either directly or remotely.

Standardisation meetings should include the following:

- Review of past meetings
- Update of any legal requirements
- Update on best practice
- Feedback to centre staff on IQA activity during the year
- Training of centre staff in areas required
- Review any complaints centre have had and how they have resolved
- Update polies or procedures with centre staff
- Review CPD logs with all staff
- Introduce new qualifications, practices and discuss new ideas to improve centre performance.

PRSGC will keep a full log of all standardisation this will include:

- Emails to all centre members inviting them to attend
- Agendas sent out to centre members
- Minutes of the meeting
- Report of the meeting including actions and out comes
- Emails the documents have been forwarded to each staff member.

Internal Quality Assurance Policy

1 Introduction

It is essential that all deliverers of qualifications have quality assurance systems in place to ensure all assessment is fair, consistent and meets Professional development Qualifications and national requirements. This policy has been designed to promote quality, consistency and fairness throughout the assessment and internal verification activities. It aims to ensure that standards of assessment are maintained over time.

This document is applicable to everybody involved in assessment administration, management, verification and moderation of any Professional development Qualifications delivered within the breadth of this centre's activities. Any activity related to Professional development Qualifications within a satellite, delivery and/or assessment site is also obliged to abide by this policy.

For qualifications where, because of the size or geographic spread of assessments, more than one internal verifier is required to ensure the quality, an Internal Verification Team (IVT) must be established. Where an IVT is required, one verifier must be identified/allocated to take on the role of Coordinating IV, ensuring that the internal verification strategy and sampling plans are effectively established, implemented and maintained by the IVT.

Where only one IV is needed to cover the centre's activities for a specific qualification, the IV will be responsible for establishing the IV sampling strategy, sampling plan and subsequent implementation.

2 Verification Aim

The Internal Verification aim is to ensure effective management of assessment and verification processes, effective support for assessment and verification personnel, and to quality assure the outcomes of assessment in-line with Professional development Qualifications and national requirements.

3 Verification Objectives

Internal verification objectives propose to:

- operate from established verification policy and procedures that are reviewed where required in-line with the centres' quality control arrangements
- ensure an effective induction is provided for all members of the assessment and verification teams, as required
- ensure effective appraisal and continued professional development for all members of the assessment and verification teams
- ensure that the assessment and verification teams understand and follow all the centre policies and procedures

- ensure the centre will embed equality and diversity throughout the internal verification and assessment activities
- ensure quality via accurate and effective assessment of all candidates
- monitor and ensure consistency of assessment outcomes via appropriate interpretation of Professional development Qualifications specific qualifications and/or national requirements
- review and evaluate the quality and consistency of assessment at different stages of the assessment process
- maintain accurate and current records of internal verification and moderation
- standardise all components of the assessment where appropriate
- carry out continuous improvement activities to ensure all corrective actions best practice guidelines requested by the external verifier/ Professional development Qualifications are complied with.

Internal Verification Strategy

Introduction

The purpose of this strategy is to provide realistic strategic objectives devised to ensure that we will effectively comply with Professional development Qualifications internal verification/moderation requirements and/or the national standards. In devising an IV strategy, we are also effectively complying with our own IV policy.

Strategic objectives

There are several strategic objectives whereby we propose to ensure:

- all personnel with internal verification/moderation responsibilities are suitably qualified to undertake this role
- that all assessment, internal verification and/or moderation personnel are aware of the internal verification policy and strategic objectives and can facilitate the implementation
- assessment/internal verification/moderation personnel development needs are taken into consideration
- that developing and newly qualified internal verifiers are given the necessary support to fulfil their duties effectively
- a selected sample across assessors of 25% (or one candidate if less than four are registered within a cohort) of candidate evidence and assessor feedback is internally verified from 100% of the courses/candidate cohorts authorised
- all assessors and all types of assessment (including direct observation of assessment practice) are internally verified across all active assessment sites, over a twelve-month period
- one standardisation activity is conducted per eight courses/100 candidates within a cohort programme (or two standardisation activities annually where the take up of candidates is not great enough to achieve this objective)
- that records and documentation of assessment, internal verification and moderation decisions are maintained for external verification purposes

- that all assessment and internal verification records per candidate are maintained for a period of five years after certification has occurred.

Internal Verification Interventions

The following internal verification interventions aim to ensure the consistency of assessment across all assessors, at all sites. IVs should aim to make an intervention to every course/candidate cohort, on at least one occasion.

Internal Verification interventions include:

- observation of assessments
- sampling of assessment evidence
- candidate interviews (face to face/via telephone)
- standardisation activities and/or meetings.

IQA Plan & Rational (Strategy)

Rational for IQA

1. All new assessors / trainers will be IQA on the first cohort, if the risk rating is low or medium, they will join the IQA cycle.
2. If a complaint is received about a course, then that teacher / assessor will be IQA for all course to date early in the cycle.
3. If a teacher / assessor becomes high risk each course they run will be subject for IQA it may bae a full sample to a course visit.
4. If a teacher / assessor is at red risk after a review, then they will have to shadow a low risk assessor until become low to medium risk.
5. New courses or awarding bodies will be IQA on first course and if red risk continued to be IQA until reduced to medium or low risk.

Planned Dated for IQA

New or High Rated Staff – After each training course or assessment takes place.

Low or experienced staff – Activities take place every quarter (3 Months)



Dates Range of IQA:

Visit Dates:

IQA Name:

IQA 2 if working towards:

Justification for sampling strategy / plan:

Sampling Plan

Internal quality assurance has taken place on the following cohorts.

Ref	Date(s)	Assessor(s) (If working towards assessor quals add counting signing assessor)	Course	No of Learners	Notes

IQA Report

Has the following been completed for each course above (Leave blank if not sampled)?

Learning outcomes tracked	<input type="checkbox"/> Yes <input type="checkbox"/> No
Feedback to learners	<input type="checkbox"/> Yes <input type="checkbox"/> No
Course registers – have they been fully completed and has the learner complete the required teaching hours / guided learning hours.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Course practical sheets have they been marked and signed, has all learners passed all parts / result clear if not pass.	<input type="checkbox"/> Yes <input type="checkbox"/> No
examinations papers and have been second marked, has the learning completed and passed. Have all parts been signed? If any retakes on multi choice papers has the tutor given support and feedback	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Any conflict of interests with the teacher. / assessor / learner	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you interviewed any learners in this sample, if so, please give a brief overview of the interview?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the centre used any reasonable adjustments for any learners in these cohorts?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are all course staff approved by awarding office and have met suitable qualifications / experience for these qualifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has all learning out comes been achieved by all learners?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Have you found any areas that need further support or investigating?

Yes No

Comments of any finding above:

**Has this been the trainers / assessor's years subject observation YES or NO?
Any comments below:**

Feedback and support

Action Plan

Action Set By IQA	Person accountable for Action	Review Date	Achieved

All Evidenced Safe, Authentic, Current, Sufficient, reliable, valid

Yes No

Any Malpractices / maladministration identified

Yes No

Any conflict of interests identified

Yes No

Cohort rating sampled

High / Medium / Low

Internal verifier Signature:

Date:

Assessor Signature:

Date:

Environmental Policy

We are committed to minimising the environmental impact of our operations through the adoption of sustainable practices and continual improvement in environmental performance. We aim to develop a sustainable business that is financially viable, environmentally sustainable and socially equitable.

To achieve this, we will:

1. Ensure we comply with legislation, regulations, and codes of practice on environmental matters relevant to our operations
2. Be conscious of the environment beyond our immediate operations and take steps to prevent pollution and minimise environmental harm and nuisance through:
 - a. Minimising our business travel and focusing on greener travel where possible
 - b. Reducing the consumption of resources such as paper and plastic
 - c. Minimising the volume of waste generated and maximise reuse, recycling and energy recovery from waste.
3. Monitor and continually improve our environmental performance through:
 - a. Reassessing changing technology, business requirements and best environmental practices
4. Develop sustainable supply chains by using wherever appropriate suppliers that have environmental standards compatible with our own.

Policy Review and Authenticity of Policies, Procedures and Statements

Policy Review

The SLP team will review this policy annually or when the need to arises to meet required standards. The policy available on our website or centres portal will be the most up to date one.

- Approved by PRSGC SLT – 31 Dec 21
- Submitted and accredited by PTDQ – 31 Dec 21
- Submitted to RLSS and Accredited – 31 Dec 21
- Available on www.paulrsalmon.co.uk and other websites - 31 Dec 21

I the responsible individual as listed below authorise the use of the policy and have signed and dated it.

Company Name	Professional Training & Development (PTDQ) Qualifications	Company Address	As companies house
Responsible Person Name	Paul Salmon	Position	Director
Responsible Person Signature		Date	31 Dec 21

This policy will be reviewed at least on a yearly basis and signed and dated on review

Next Review Due 31 Dec 22