East Suffolk and North Essex NHS Foundation Trust

QUALITY ASSURANCE POLICY

Version 3.0

Purpose:	To advise and inform all Trust staff of our Quality Assurance Policy for Apprenticeship delivery
For use by:	All ESNEFT Employees and Apprentices involved in the delivery of an Apprenticeship Standard **Pre-registration students should be encouraged to participate in all aspects of the related practice. The level of supervision from direct to indirect should decrease with the students' increasing proficiency as assessed by an appropriate registered professional who displays competence in the area of practice**
This document is compliant with/ supports compliance with:	Quality standards as laid out by Ofsted, the Institute for Apprenticeships and Technical Education (IfATE) and Awarding Organisations for accredited qualifications
This document supersedes:	Quality Assurance Policy v2.0 – ESNEFT
Approved by:	Apprenticeships Steering Group and Faculty of Education Management Group – Chair's Actions
Approval date:	28th August, 2024
Implementation date:	27th September, 2024
Review date	27th September, 2025 **(extended to 31 December 2026)**
In case of queries contact Responsible Officer:	Head of Apprenticeships and Leadership Development
Division and Department	Faculty of Education, Apprenticeship Delivery Team
Archive Date i.e. date document no longer in force	*To be inserted by Information Governance Department when this document is superseded. This will be the same date as the implementation date of the new document.*
Date document to be destroyed:	*To be inserted Information Governance Department when this document superseded*

Version and document control:

Version number	Date of issue	Change Description	Author
0.1	March 2022	First Draft	
0.2	April 2022	Second Draft	
1.0	May 2022	First Approved/Ratified version	
1.1	August 2022	Re-draft to new format	
2.0	September 2023	Policy renewals, name changes only	
3.0	September 2024	Policy renewal. Job title changes only	

This is a Controlled Document

Printed copies of this document may not be up to date. Please check the Trust intranet for the latest version and destroy all previous versions.

Trust documents may be disclosed as required by the Freedom of Information Act 2000.

Sharing this document with third parties

As part of the Trust's networking arrangements and sharing best practice, the Trust supports the practice of sharing documents with other organisations. However, where the Trust holds copyright to a document, the document or part thereof so shared must not be used by any third party for its own commercial gain unless this Trust has given its express permission and is entitled to charge a fee.

Release of any strategy, policy, procedure, guideline or other such material must be agreed with the Lead Director or Deputy/Associate Director (for Trust -wide issues) or Business Unit/ Departmental Management Team (for Business Unit or Departmental specific issues). Any requests to share this document must be directed in the first instance to the Responsible Officer.

For further advice see the Development and Management of Trust wide Procedural Documents Policy

Contents

Section 1 – Introduction

1.1 Policy Statement and Rationale

East Suffolk and North Essex NHS Foundation Trust is committed to ensuring, as part of our ongoing programme of personal development, that the ESNEFT Apprenticeships Delivery team provides high quality teaching, learning and assessment as part of its Apprenticeship offer. Our commitment is to ensure that all delivery meets the standards required by those bodies who regulate our activity which is underpinned by a robust process of quality assurance and quality improvement.

1.2 Key Principles

- The basis of the quality cycle and the various stages within it which will be subject to inspection or audit depending upon the activity. The quality cycle (see Appendix A) is designed to maintain the integrity of all apprenticeship delivery as well as the qualifications as set out by the Awarding Organisation (if applicable). The quality cycle activities will include:
- robust initial assessment in order to provide a truly individualised learning plan for each apprentice, including the identification of any individual learning needs, especially those which have previously been undiagnosed
- development of key performance indicators (KPIs) for delivery staff that allow for high quality interactions with all apprentices
- clear procedures in place for observations of teaching, learning and assessment
- standardisation across all apprenticeship standards to ensure cohesion in all assessment decisions
- sampling plans designed to capture all types of teaching, learning and assessment activity and in line with a RAG rated system (see Appendix B)
- relevant policies to support the quality assurance cycle which are updated and reviewed annually as a minimum

1.3 Definitions

Term	Definition
ESNEFT	East Suffolk and North Essex Foundation Trust
RAG	Red, Amber, Green
KPIs	Key Performance Indicators
TLA	Teaching Learning and Assessment
EPA	End Point Assessment
Ofsted	Office for Standards in Education
IfATE	Institute for Apprenticeships and Technical Education
SAR	Self-Assessment Report
QIP	Quality Improvement Plan
Ofqual	Office of Qualifications and Exam Regulations
TAQA	Training Assessment and Quality Assurance
CAVA	Certificate in Assessing Vocational Achievement

Section 2 – Duties and Responsibilities

This policy will be overseen and implemented by the Head of Apprenticeships and Leadership Development who has responsibility for ensuring the quality process is carried out effectively across all apprenticeship programmes.

All staff with internal quality assurance responsibilities will also be required to ensure that their team operate in line with this policy and provide feedback to support quality improvement.

The Assessor/Coaches will be responsible for ensuring that they understand and follow the internal quality process and highlight any areas where they feel improvements or adjustments could be made.

2.1 Assessor/Coach: to carry out assessment practices in accordance with the standards set out by Ofsted, Ofqual and the Awarding Organisation (as appropriate); suitably qualified or working towards: TAQA, CAVA.

2.2 Lead Technical Trainer: to carry out TLA practices in accordance with the standards set out by Ofsted, Ofqual and the Awarding Organisation (as appropriate); suitable qualified or working towards: Cert Ed (or equivalent), TAQA, CAVA

2.3 Head of Apprenticeships and Leadership Development: to carry out Quality Assurance activities in line with the Awarding Organisation (as appropriate) requirements and the overarching standards expected by Ofsted and Ofqual.

2.4 Head of Apprenticeships and Leadership Development: Responsible Officer

Section 3 – Requirements

3.1 Documentation to support implementation of this policy

- Additional Support Policy
- Initial Assessment Policy
- Assessment Appeals Policy
- Sampling Strategy

3.2 Initial Assessment

Initial assessments will be conducted for **ALL** learners *prior to* acceptance on to an apprenticeship programme to ensure that funding can be drawn down for the training to be delivered. Further information can be found in the Initial Assessment Policy and Additional Support Policy.

3.3 Key Performance Indicators

KPIs will be developed to support the ‘on programme’ element of the apprenticeship ensuring that all apprentices are fully supported to achieve. These will be discussed at case load reviews and will include:

- Progression of learners
- Attendance and timeliness of visits
- Completion of learners on programme learning
- Preparation for Gateway against planned dates
- Successful completion of EPA to include level of achievement and first time pass

3.4 Observations of teaching, learning and assessment (TLA)

All staff will be subject to regular TLA observations. Where staff are carrying out classroom based teaching and work based learning and assessment, they will observed across both types of activity. Observations will be carried out within the first three months of joining the Apprenticeships team and annually thereafter, unless there is a performance need or high risk. Whilst observations will not be formally graded, they will be rated in line with Ofsted outcomes i.e. outstanding, good or requires improvement.

Any member of staff delivering a session which 'requires improvement' will be re-observed and may be subject to a performance improvement plan and given a 'buddy' for ongoing support. Where continued performance issues prevail, they will be performance managed in line with the relevant HR policy.

3.5 Standardisation

Standardisation activities will be carried out across all apprenticeship programmes and focus on the specific knowledge, skills and behaviours of that standard. Details of these activities can be found in the Sampling Plan.

3.6 Sampling

Sampling activities will take place in line with a range of factors:

- competence of the Assessor on a risk rating of high (red), medium (amber), and low (green)
- the introduction of a new standard or an existing standard that has been reviewed and updated by IfATE
- across the whole range of knowledge, skills and behaviours
- across the whole range of assessment methods

To support apprentices with successful completion of their End Point Assessment sampling, activities will also be carried out on:

- pre-gateway portfolios
- pre-EPA portfolios

Each delivery team will develop their own sampling strategy to meet the requirements of their standard(s).

Where there is a mandatory qualification within the standard, sampling may also be driven by feedback from the External Quality Assurer who is provided by the Awarding Organisation.

Section 4 – Training and Education

All staff involved in the delivery of an apprenticeship programme will be required to familiarise themselves with the requirements of this policy at induction and to fully participate with all quality assurance and improvement procedures. Quality Processes including how to appeal against an assessment decision will be disseminated to all apprentices during their induction.

Education/Training Need	Staff group	Method of training/education	Responsibility for training	Timescale to complete
Appropriate TLA qualifications	Lead Technical Trainers Assessor/ Coach	Attending structured education programmes	Head of Apprenticeships and Leadership Development	Assessor award: 1st year Teaching qualification: Start in 2nd year and complete in 2 years.

Standardisation	Lead Technical Trainers Assessor/ coach	Attending Standardisation meetings	Head of Apprenticeships and Leadership Development	3 months

Section 5 – Development and Implementation including Dissemination

All staff will read this policy and it will form part of any standardisation process for quality assessment or improvement. The actions and activities carried out as part of this policy will inform the delivery team's Self Assessment Report document (SAR) and Quality Improvement Plan (QIP).This policy will be reviewed annually, or sooner if there are changes to funding or apprenticeship legislation with affects the contents.

Section 6 – Monitoring Compliance and Effectiveness

Compliance to be measured	Monitoring Tools	Responsibility for training (nominated by department)	Timescale
Effective TLA in the classroom	Observation and Audit	Head of Apprenticeships and Leadership Development	Twice per annum
Effective assessment in the workplace	Observation and Audit	Head of Apprenticeships and Leadership Development	Twice per annum

Section 7 – Control of Document including Archiving Arrangements

7.1 Once ratified by the Faculty of Education Management Group, the Responsible Officer will forward this document to the Information Governance Department for a document index registration number to be assigned and for the document to be recorded onto the central hospital master index and central document library of current documentation.

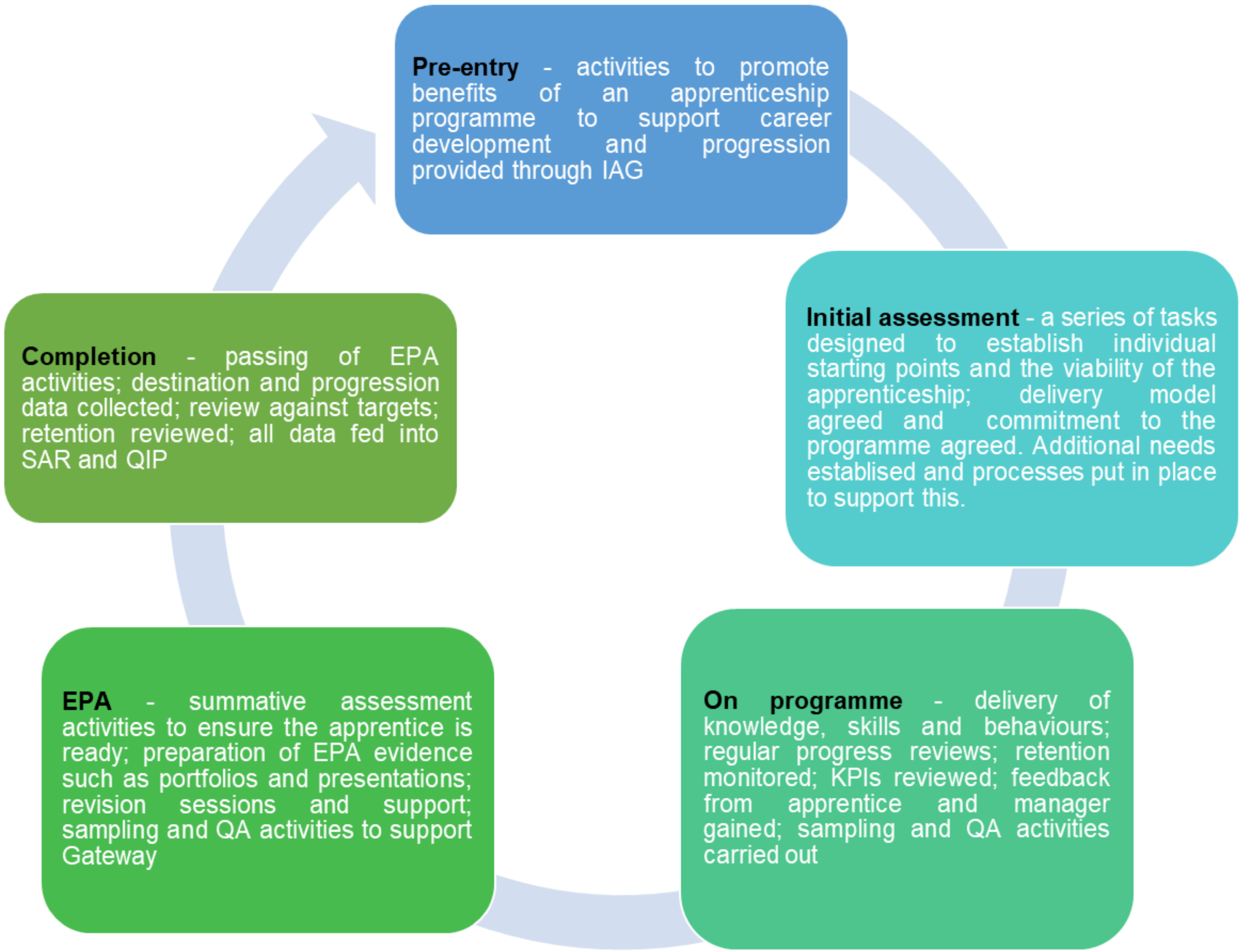
7.2 In order that this document adheres to the Hospital's Records Management Policy, the Information Governance Department will:

- Ensure that the most up-to-date version of this document is stored on the documentation library.
- Archive previous versions of this document.
- Retain previous versions of this guideline for a period of time in accordance with the NHS Records Retention and Disposal Schedule.

Section 8 – Supporting Compliance and References

8.1 This document supports compliance with quality standards as laid out by Ofsted, the Institute for Apprenticeships and Technical Education (IfATE) and Awarding Organisations for accredited qualifications.

Appendix A – The quality cycle



Appendix B – Risk rating for delivery staff

Assessor/Coaches will move between risk ratings from time to time, depending upon a range of factors. There is no correlation between the level of risk, and an Assessor/Coaches' level of experience.

HIGH RISK	MEDIUM RISK	LOW RISK
New to the Apprenticeship Delivery team	New to the delivery team but has shown good quality assessment decisions, but employment is less than 6 months	Experienced Assessor/Coach who has been working with the trust for over 6 months
Trainee Assessor/Coach during their training		
Trainee Assessor/Coach after their training until the required standards of independent assessment decisions are established	Trainee Assessor/Coach post qualification who has been in post for less than 6 months – depending upon quality checks	Trainee Assessor/Coach post qualification who has been in post for over 6 months – depending upon quality checks
An Assessor/Coach who is subject to a PIP	Assessor/Coach who is working well under supervision and making progress according to quality checks	Assessor/Coach who has been at medium risk for a minimum of 6 months

Sampling percentages for each category are flexible and will take into account case load volume, prior experience and the reason for their place in any particular category:
High risk – 75% to 100%
Medium risk – 25% to 75%
Low risk – 10% to 25%

Appendix C – Equality Impact Assessment Form

The purpose of this Equality Impact Assessment form is to determine the extent to which policies, procedures and practices impact upon individuals and groups in relation to one or more of the equality categories.
If the policy, procedure or practice is found to have an adverse impact, the author/s must consider all other alternatives, which may more effectively achieve the promotion of equality of opportunity. This may include the development of specific measures to mitigate the adverse impact.

This Equality Impact Assessment form must be completed and forwarded to Human Resources Administration Office, Post Point N020 attached to the draft document prior to it being considered for approval. The Responsible Officer must retain the original. In the event that the document appears to be discriminatory, please refer to your Human Resources Manager/Adviser who will be able to advise you in accordance with employment legislation.

DOCUMENT TITLE:	Quality Assurance Policy
GROUP/DIVISION/DEPARTMENT:	Apprenticeship Delivery Team – Faculty of Education
NAME AND JOB TITLE OF RESPONSIBLE OFFICER	Head of Apprenticeships and Leadership Development

1. SERVICE USERS – Check for DIRECT discrimination against any minority group						
Does your document contain any statements which may exclude people from using services who otherwise meet the criteria under the grounds of:	**Response**		**Action Required**		Resource Implication	
	Yes	**No**	**Yes**	**No**	**Yes**	**No**
Age		X		X		
Gender		X		X		
Disability		X		X		
Race		X		X		
Religion or Belief		X		X		
Sexual Orientation		X		X		
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						

2. EMPLOYEES – Check for DIRECT discrimination against any minority group						
Does your document contain any statements which may exclude employees from operating under the grounds of:	**Response**		Action Required		Resource Implication	
	Yes	**No**	**Yes**	**No**	**Yes**	**No**
Age		X		X		
Gender		X		X		
Disability		X		X		
Race		X		X		
Religion or Belief		X		X		
Sexual Orientation		X		X		
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						

3. SERVICE USERS – Check for INDIRECT discrimination against any minority group			
Does your document contain any conditions or requirements which are applied equally to everyone, but may disadvantage certain individuals or groups because they cannot comply due to:	**Response**	**Action Required**	Resource Implication

	Yes	No	Yes	No	Yes	No
Age		X		X		
Gender		X		X		
Disability		X		X		
Race		X		X		
Religion or Belief		X		X		
Sexual Orientation		X		X		
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						
4. EMPLOYEES – Check for INDIRECT discrimination against any minority group						
Does your document contain any statements which may exclude employees from operating under the grounds of:	**Response**		**Action Required**		Resource Implication	
	Yes	**No**	**Yes**	**No**	**Yes**	**No**
Age		X		X		
Gender		X		X		
Disability		X		X		
Race		X		X		
Religion or Belief		X		X		
Sexual Orientation		X		X		
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						
5. Check for ACCESS Discrimination						
Is your document accessible:	**Response**		**Action Required**		Resource Implication	
	Yes	**No**	**Yes**	**No**	**Yes**	**No**
In a variety of languages		X		X		
To specific disabled service users/employees	X			X		
If no is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						

Name of group/s consulted with on document:	
Signature of Responsible Officer:	
Date:	