

# Apprenticeship Certificates England

## ACE Quality Manual

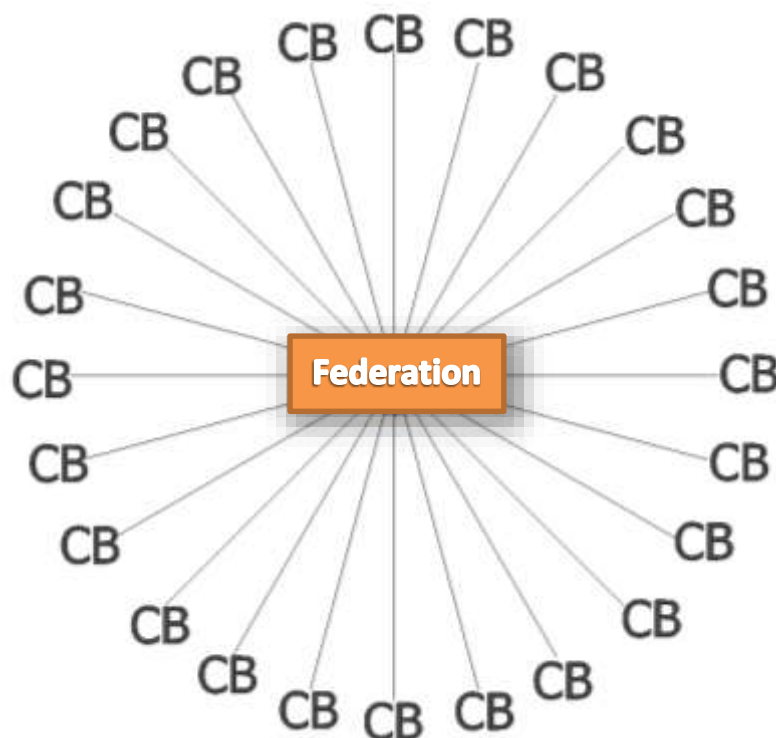
### Introduction

This quality manual defines the 'standard' and audit processes used to maintain a high quality ACE (Apprenticeship Certificates England) certification service. It is intended to assist our Certification Bodies (CBs) in the maintenance and continuous improvement of their function. It describes in practical terms the features of a high quality service based on the requirements of the Apprenticeships, Skills, Children and Learning Act (ASCL) November 2010, and agreements between our Certification Bodies and the Federation for Industry Sector Skills & Standards (Federation).

Our aim is to ensure that the service offered is robust and consistent, offering our customers straight forward access to apprenticeship certification without undue delay or bureaucracy.

### Roles and Responsibilities

ACE is operated with a 'hub and spoke' model.



## Roles and Responsibilities continued...

**The Federation** - The Federation is the designated Certifying Authority for Apprenticeships in England. To manage its responsibilities the Federation has developed a bespoke, online system, known as Apprenticeship Certificates England (ACE). The Federation's Apprenticeship Services Team oversees and manages the entire process, and produces guidance and supporting documentation for both Certification Bodies and certificate claimants.

The ACE system enables apprentices or training providers/employers acting on their behalf, to apply for their Apprenticeship completion certificate. It is a centralised system that meets all of the relevant regulatory and quality assurance requirements of the Apprenticeship certification process. Although the main focus of the system is to certificate Apprenticeships it also aims to reduce the administrative burden of certification and introduce consistency and standardisation across all occupational sectors.

The Federation provides an ACE helpline (email and phone) to support claimants. The Federation have an active involvement in issues that cannot be resolved by a CB. The Federation Apprenticeship Services Team supports both the CBs and ACE claimants in their roles by providing guidance, training manuals, meetings and training.

**Certification Bodies (CBs)** - Certification Bodies (Sector Skills Councils and Sector Skills Bodies) process Apprenticeship certification claims on behalf of the Federation. Each CB has a sector specific remit and uses knowledge of its occupational area to review claims to ensure that the evidence provided meets specified apprenticeship framework requirements. If the evidence provided meets the requirements of the framework the CB confirms framework completion and issues an Apprenticeship completion certificate. If the claim does not meet specified requirements, the claim is rejected and feedback is provided to the claimant. The feedback contains the reason for rejection and advice on how to correct the deficiency before the claim is re-submitted.

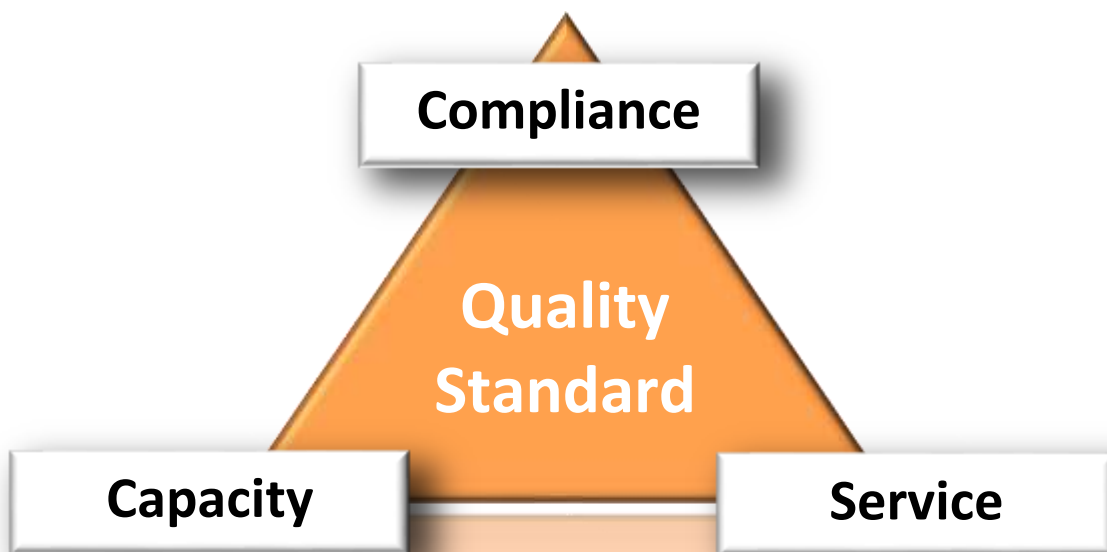
Both the Federation and the CBs have a duty to support claimants to ensure the certification process via ACE is clearly understood, and where there is a problem, support and guidance is provided. The CBs provide this support on a day to day basis via their communications with ACE users, and by the issue of general information pertinent to their suite of frameworks. They analyse management data from ACE to ensure that trends are identified and that appropriate action is taken to ensure quality of service.

## Quality Standard

To maintain the integrity of the certification service, the Federation works with the Certification Bodies to ensure the process is led by the following guiding principles:

- **Quality** – protect and enhance the quality of Apprenticeships to preserve the distinctive outcomes valued by employers and apprentices.
- **Simplification** – simplifying processes and minimising administrative and data burdens on service users.

This quality standard has three key areas:



1. **Capacity** – Resource and management
2. **Compliance** – Accuracy in processing certification claims
3. **Service** – Level of customer service and support provided

<b>1. Capacity &amp; Capability</b>	<ul style="list-style-type: none"> <li>→ Management structure</li> <li>→ Staff training</li> <li>→ Safety</li> <li>→ Insurance</li> <li>→ Blank certificate security</li> <li>→ Data security</li> <li>→ Maladministration and malpractice</li> <li>→ Conflict of interest</li> </ul>
<b>2. Compliance</b>	<ul style="list-style-type: none"> <li>→ Sample check of certifications</li> </ul>
<b>3. Service</b>	<ul style="list-style-type: none"> <li>→ Customer Service Survey</li> <li>→ Certification waiting times</li> <li>→ Complaints</li> <li>→ Rejection rates</li> </ul>

## 1. Capacity & Capability

Criteria	Grade 1	Grade 2	Grade 3
Management structure clearly defines responsibilities and reporting lines for all staff involved in certification. The people involved understand their responsibilities and there is clear evidence that this understanding translates into practice.	Management structure is clearly defined, understood and complied with.	Management structure is defined, fairly well understood and complied with in most instances.	Management structure is not clearly defined and the people involved have a poor understanding of their responsibilities.
Certification staff are well trained to carry out their certification function.	Certification staff have a very clear understanding of the frameworks they certify and evidence that constitutes a compliant certification.	Certification staff have a reasonable understanding of the frameworks they certify and evidence that constitutes a compliant certification.	Certification staff have a poor understanding of the frameworks they certify and evidence that constitutes a compliant certification.
Sufficient capacity is in place to process certificates within the 10 day rule.	Sufficient in all cases	Sufficient in most cases (minor disruption may occur during peak times)	Insufficient capacity to process certificates during normal volumes
Sufficient cover for certification staff absence to ensure compliance with the 10 day rule.	Appropriate cover in place at all times.	Adequate cover in place during normal volumes.	Insufficient cover in place which is likely to lead to certifications beyond the 10 day rule.
Health and Safety Policy and related arrangements are in place which includes certification activities.	In place, it is available to staff and staff have access to it. Staff understand their responsibilities under the policy.	In place, it is available to staff and staff have access to it. Staff have some understanding of their responsibilities under the policy.	It is not in place or staff don't have access to it or understand their duties with respect to the policy.
The certification workplace is safe, potential hazards are well managed and staff comply with safety related rules.	The certification workplace is very clean and tidy, with well-designed workstations. Potential hazards are well managed. Staff understand and comply with safety related rules.	The certification workplace is clean and tidy, with adequate workstations. Some residual hazards remain. Staff do not fully understand or comply with safety related rules.	The certification workplace is poorly maintained with hazards that are not well managed.
Insurance cover is in place which includes: - Public Liability - Employers liability - Professional Indemnity (£1,000,000 cover)	Required insurance is in place.	N/A	Required insurance is not in place.
Blank certificates are secured (locked away) when not supervised by authorised ACE users.	Blank certificates have a secure (lockable) place which is used when ACE operators are not in attendance.	Blank certificates have a secure (lockable) place but this is not always used.	There is no secure (lockable) place and certificates are routinely left unattended in a non-secure place.
Passwords for certification staff and users of ACE are kept secure at all times. Only authorised users of ACE have access to the system, any data that is kept outside of ACE complies with the data protection policy, and is only made available to authorised users.	Passwords and data are kept secure at all times.	Passwords and data are generally kept secure, but there are deficiencies in practice that could compromise security.	Passwords and data are generally insecure. It is foreseeable that there could be security breaches as a result.
The potential for corruption and bribery is well understood by staff involved in certification, and they are aware of the consequences should they gain any advantage or financial reward in exchange for issuing non-compliant certificates.	Well understood	N/A	Not well understood.
Certification staff are aware of their duty to report potentially fraudulent certification claims to the Federation.	Well understood	N/A	Not well understood.
Certification staff and management are aware of their duty to report maladministration and malpractice to the Federation.	Well understood	N/A	Not well understood.
Management are aware of their duty to declare potential conflicts of interest to the Federation.	Completed COI form received and identified risks are judge to be adequately controlled.	Completed COI form received. Further action is required within specified timeframe.	Completed COI form not received or the identified risks and management measures are deemed to be unacceptable and pose an unacceptable risk.

Overall grade for capacity and capability is based on the following:

Capacity and Capability checklist	Capacity and Capability Grade
<b>All items on the checklist at grade 1</b> (one item can be at grade 2)	<b>1</b>
<b>All items on the checklist at grade 2 or above</b> (one item can be at grade 3)	<b>2</b>
<b>Two or more items at grade 3</b>	<b>3</b>

## 2. Compliance

Compliance is determined by reference to the requirements of the individual apprenticeship framework, the ASCL Act and relevant guidance published by Federation.

The evidence presented must robustly confirm achievement of the apprenticeship framework document.

Where evidence is missing, not framework approved or the evidence is not robust then the certification shall be deemed to be non-compliant.

As each certification is made up from a number of pieces of individual evidence, for the purpose of benchmarking non-compliance evidence rates will be determined.

For the purposes of audit, the Federation takes a sample of completed certifications and over checks the decision of the CBs. One spread sheet is produced per CB detailing our findings. This is a basis for further discussion during the physical audit and once finalised is used to determine compliance grades.

Round 2 sample plan.

Number of certifications in the audit period	Size of sample
Under 200	All
200-250	220
251-300	250
301-400	325
401-500	375
501-700	475
701-1000	600
1001-2000	850
2001+	1000

Compliance grade boundaries:

**Grade 1** < 2% non-compliant evidence in the sample

**Grade 2** between 2% and 4% non-compliant evidence in the sample

**Grade 3** > 4% non-complaint evidence in the sample

### 3. Customer Service

Performance in customer service is based on the outcome of a customer service survey. The design and deployment of the survey is carried out in consultation with the Strategic Quality Group and the wider Federation team. The survey has been completed for the first time in November 2013, for full details of the survey design, deployment and findings see the separate service report. Individual service reports are sent to each Certification Body and the findings are discussed in detail at audit.

The results of the survey are benchmarked against the responses received for each of the sector areas covered by the survey. A comparison is made using an average score developed from the responses to the following questions/criteria used in the survey:

1. Speed of response
2. Quality / clarity of support and advice provided
3. Friendly / helpful attitude of staff
4. Clarity / consistency of rejection reasons
5. Justification provided on the rejection reasons
6. Rejection reasons captured first time around
7. Speed of dispatching certificates
8. Overall quality of communication
9. Performance rating

The survey results for each of these criteria are translated into a single score by applying an individual score to each survey result as follows:

Survey result	Score
Excellent	5
Good	4
Mixed feelings / average	3
Poor	2
Very poor	1

A single overall score is calculated by giving a weighting of 10% to each question/criteria (1 – 8 above) with the final 20% of the overall score being assigned to the question on the overall performance rating provided by training providers (question 9 above).

The following grading system is used which is based on the overall average scores achieved by each of the 25 sector areas covered by the survey:

Service Grade	Benchmark criteria	Audit Grade	Audit Grade Description
<b>A</b>	10% or more above the average score	<b>1</b>	<b>Systems are working well.</b> Where corrective action is required this is minor in nature and relatively easy to implement.
<b>B</b>	5% above the average score, but less than 10%		
<b>C</b>	Less than 5% above or below the average score	<b>2</b>	<b>Performance is satisfactory;</b> however, corrective action is required within agreed timescales.
<b>D</b>	-5% below the average score, but less than -10%		
<b>E</b>	-10% or more below the average score		
<b>F</b>	-15% or more below the average score	<b>3</b>	<b>Imminent risk to the integrity of the certification process</b> Immediate action is required; certification may be suspended until corrective action is completed.

## Audit Process

The audit process is designed around the “three key areas”:

1. **Capacity**
2. **Compliance**
3. **Service**

Each area is objectively assessed as set out below, and an overall grade is determined based upon performance in each of the three areas:

<b>Grade 1:</b>	<b><i>Systems are working well.</i></b> Where corrective action is required this is minor in nature and relatively easy to implement.
<b>Grade 2:</b>	<b><i>Performance is satisfactory;</i></b> however, corrective action is required within agreed timescales.
<b>Grade 3:</b>	<b><i>Imminent risk to the integrity of the certification process</i></b> Immediate action is required; certification may be suspended until corrective action is completed.

Each audit will have three grades, one for each of the key areas (capacity, compliance and service), and an overall grade will be determined as set out below:

Result	Overall Grade
Two or more grade 1	<b>1</b>
Two or more grade 2	<b>2</b>
Any grade 3	<b>3</b>

It is a guiding principal of our working relationship with our CBs that they have an opportunity to test and discuss Federation interim audit findings before they are finalised. Aspects of the CBs performance is benchmarked against their peers, however, individual CB performance is confidential between the Federation and the body concerned. The audits are conducted in an open and non-judgemental way with a view to identifying the root cause of any problems and where required the agreement of corrective action.

An underperforming CB would be given an opportunity to correct the problem and where appropriate support would be provided by the Federation to enable them to improve their performance.

The Federation reserves the right to suspend or remove CB status; however, this action would only be taken on the discovery of gross negligence or malpractice or where there has been consistently low performance and agreed corrective actions remain outstanding.

The Federation Quality Team carries out regular audits to ensure that Apprenticeship certifications are compliant. The audits are carried out in phases and all CBs are audited within a specific timeframe. This is to ensure that the sample used is within the same period to allow comparison and benchmarking of performance.

**Round 1 audit** – The sample period was from the commencement of ACE (January 2012 onwards) to the end of August 2012. The physical audits with the CBs took place between September 2012 and March 2013. A final overarching report with benchmarking was produced in April 2013.

**Round 2 audit** – Auditing has commenced, the sample period is May to August 2013, with physical audits scheduled between October 2013 and March 2014.

The audit process is set out below:

Activity	Action by whom	Timeline
Certification body is notified of the intended audit. Date is mutually agreed.	FEDERATION Quality Team	Two months before physical audits commence.
FEDERATION distributes a 'customer service' questionnaire and analyses results.	FEDERATION Quality Team	Completed in October 2013
FEDERATION checks compliance of a random sample of certifications processed by each CB. A spread sheet is completed which records the provisional findings.	FEDERATION Quality Team	On-going - scheduled to suit the physical audit date of each CB
FEDERATION issues the self-assessment questionnaire to the certification body.	FEDERATION Quality Team	4 weeks before audit.
Certification body completes and returns the self-assessment questionnaire.	Certification Body	2 weeks before audit.
Provisional findings from the compliance check are sent to the CB.	FEDERATION Quality Team	2 weeks before audit.
Initial findings from the customer service survey are sent to the CB.	FEDERATION Quality Team	2 weeks before audit.
The Federation Quality Team prepares the audit plan (taking into account findings from the sample, self-assessment and service survey.	FEDERATION Quality Team	1 week before audit.
CB reviews compliance and customer service findings in preparation for the audit.	Certification Body	Before audit date
<p><b>PHYSICAL AUDIT</b></p> <ul style="list-style-type: none"> <li>Capacity and Capability checklist</li> <li>Compliance sample – FEDERATION and CB reviews and discuss issues.</li> <li>Customer Service - FEDERATION and CB reviews and discuss issues.</li> </ul> <p>Audit findings are discussed and an outline corrective action plan is agreed where required.</p>	FEDERATION Quality Team and the Certification Body	Typically 1 day duration
Internal sign-off of DRAFT audit report	FEDERATION Quality Team	7 days following the audit.
DRAFT report circulated to the CB (audit contact) for information and comment	FEDERATION Quality Team and Certification Body	10 days following the audit.
CB comments on the DRAFT report	Certification Body	16 days following the audit
Report is finalised with corrective action plan and circulated to CB	FEDERATION Quality Team	20 days following the audit.
Corrective action is completed as determined by the action plan.	Certification Body	Timing as per the action plan.
Progress against the agreed corrective action plan is monitored.	FEDERATION Quality Team	Timing as per the action plan.
Overarching audit report with benchmarking is completed and distributed to the CBs	FEDERATION Quality Team	4 – 6 weeks after the last physical audit (May 2014)