



# Family Nursing & Home Care

## **Standard Operating Procedures**

**Education, Training and  
Development Department  
Approved Training Provider**

**British Computer Society (BCS)  
First Aid Industry Body (FAIB)**

March 2023

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## Version Control / Changes Made

Date	Version	Summary of changes made
May 2022	1	New SOPs developed in order to meet the requirements of the British Computer Society (BCS) to gain and maintain approved training provider status
January 2023	1.1	Additional information added to meet the requirements of the First Aid Industry Body (FAIB) to maintain approved training provider status

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## Introduction

These Standard Operating Procedures (SOPs) provide information and guidance to staff and learners accessing education, training and development through the ETDD, in their capacity as an Accredited Training Provider for courses provided by the British Computer Society (\*BCS) and the First Aid Industry Body (\*\*FAIB).

In order to gain and maintain BCS and FAIB accreditation status, the FNHC Education, Training and Development Department (ETDD) is required to have associated provider-level policies and procedures in place, including appeals and complaints, access to assessment, quality assurance and equal opportunities.

\*BCS The Chartered Institute for IT is an Ofqual Approved Awarding Organisation, an approved licensee of the Skills Funding Agency, and an ISTQB Approved Organisation. BCS is the leading global awarding body for IT, tech and digital qualifications and certifications.

\*\*The FAIB was created in 2012 so that employers can be assured of the quality of Training Providers and Trainers/Assessors in relation to provision of First Aid qualifications and training. The FAIB sets required standards for the approval, monitoring and regulation of accredited Training Providers, including Quality Assurance procedures. It is recognised by the UK Health & Safety Executive and the Department for Education/Ofsted.

## SOP 1 Assessment Security & Identification Checks (BCS only)

### **Purpose**

To ensure that training and examination materials are kept safe and secure and that the identity of learners is verified.

### **Scope**

This SOP applies to all staff involved in the management, training, assessment and quality assurance of qualifications, and all learners in receipt of training.

### **Core Requirements**

The Training Provider is committed to keep training and examination materials safe and secure before, during and after training/examinations.

If applicable, the Training Provider is committed to return examination materials to BCS via recorded delivery only.

The Training Provider is committed to ensuring that all learners provide suitable identification during the registration process and immediately prior to training/examinations (if applicable).

Acceptable forms of photographic identification:

- ✓ Passport
- ✓ Driving licence
- ✓ Military identification
- ✓ Staff ID card
- ✓ National identification card
- ✓ EEA member state identification card
- ✓ UK/EU photo card

## SOP 2 Appeals

### **Purpose**

To set out the procedure for learners to follow if they wish to appeal an assessment decision.

### **Scope**

This SOP applies to all staff involved in the management, training, assessment and quality assurance of qualifications, and all learners in receipt of training.

### **Core Requirements**

Learners who are unhappy with any aspect of the assessment and award process should first discuss the problem with the Head of ETDD. The reasons for dissatisfaction must be made clear by Learner at this time.

The Head of ETDD will keep a record of such discussion together with date and outcome.

For BCS-related appeals, if a Learner is not able to resolve an appeal at this stage, then he/she has the right to appeal to BCS. This may be done via the Training Provider Representative or the Centre Manager or direct to the BCS Quality Assurance Team in writing. Learner appeals must be made to BCS as per the BCS Learner Appeals Policy within 20 working days of the assessment.

During any stage of the Appeals Procedure the Learner is entitled to be represented or accompanied, should they wish.

### For Manual Marking

Where necessary the assessment will be re-marked.

If this does not provide satisfaction the Learner may raise a formal appeal in writing to the Centre Manager, outlining clearly the circumstance of the appeal.

If required the assessment will be re-marked again, and any aspects of the Learner's performance during the assessment taken into consideration.

In some circumstances the Learner may be offered a free re-test (e.g. due to hardware or software problems)

### For Automated Assessment

Assessments are undertaken using automated testing software which has been approved by the ICDL\* Foundation. In the event of a Learner raising a complaint the assessment report that will have been produced by the system will be fully discussed with the Learner.

\*ICDL = International Computer Driving Licence

## SOP 3 Complaints

### **Purpose**

To provide a process for learners to follow if they wish to make a complaint, to ensure that all complaints are handled fairly, consistently and wherever possible resolved to the complainant's satisfaction

### **Scope**

This SOP applies to all staff involved in the management, training, assessment and quality assurance of qualifications, and all learners in receipt of training

### **Core Requirements**

The ETDD aims to ensure that:

- ✓ making a complaint is as easy as possible
- ✓ treat complaints as a clear expression of dissatisfaction with the service which calls for an immediate response
- ✓ deal with complaints promptly, politely and, when appropriate, confidentially
- ✓ respond in the right way - for example, with an explanation, or an apology where we have got things wrong, or information on any action taken etc.
- ✓ learn from complaints and use them to improve the service
- ✓ annually review complaints procedures

The ETDD recognises that many concerns will be raised informally, and dealt with quickly and aims to:

- ✓ resolve informal concerns quickly
- ✓ keep matters low-key
- ✓ enable mediation between the complainant and the individual to whom the complaint has been referred

An informal approach is appropriate when it can be achieved and the complaint should be raised initially with the Trainer of the course.



But if concerns cannot be satisfactorily resolved informally, then the formal complaints procedure should be followed, as set out below.

The complainant will put their complaint in writing to the ETDD Centre Manager. This should include out the details of the complaint, the consequences for the complainant as a result, and the remedy they are seeking.

The complaint will be acknowledged within 4 working days of receipt.

A response and an explanation will be sent to the complainant within 15 working days.

If the complainant is not satisfied with the initial response to the complaint then they can write to the ETDD Centre Manager and ask for the complaint and response to be reviewed. The request will be acknowledged within 4 working days of receipt and a response sent within 15 working days.

The ETDD's aim is to resolve all matters as quickly as possible. However, inevitably some issues may be more complex and require longer to be fully investigated. Consequently timescales given for handling and responding to complaints are indicative.

If a matter requires more detailed investigation, the complainant will receive an interim response describing what is being done to deal with the matter, and when a full response can be expected and from whom.

If the complainant is not satisfied with the subsequent response from the ETDD, then they will have the option of contacting the relevant regulator, stating the reason why they are dissatisfied with the outcome.

For BCS-related complaints, further details are available at [BCS Complaints Policy](#).

For FAIB-related complaints, the complainant should send all the relevant paperwork to the Regulator who will then review all aspects of the case include taking the views of the complainant and the views of the Training Provider where the complaint was initially made:

The First Aid Industry Body  
4 Ashdown Avenue  
Woodley  
Stockport  
SK6 1LL

Tel: 0161 494 9045  
Email: [info@faib.co.uk](mailto:info@faib.co.uk)

## SOP 4 Equal Opportunities

### ***Purpose***

To ensure that, throughout their training programme, all learners are treated fairly, they feel safe and they are treated with fairness, equality and integrity.

### ***Scope***

This SOP applies to all staff involved in the management, training, assessment and quality assurance of qualifications, and all learners in receipt of training

### ***Core Requirements***

As an Organisation, Family Nursing & Home Care (FNHC) and its ETDD are committed to seeking equality of opportunity for all, irrespective of race, gender, religion, marital status, sexual orientation, age, class or disability.

The ETDD actively seeks to demonstrate this commitment by adopting policies, codes of practice and action plans to combat discrimination in any form.

Staff and learners are required to reflect their commitment to equality of opportunities and anti-discriminatory practices.

The ETDD will promote equality of opportunity for all learners and staff by:

- ✓ Demonstrating opposition to all forms of discrimination in every aspect of its operations
- ✓ Identifying and removing practices and procedures which unfairly discriminate
- ✓ Increasing awareness and positive attitudes at all levels in the organisation toward people experiencing discrimination
- ✓ Creating a welcoming atmosphere for all learners, staff and visitors
- ✓ Monitoring all operations to ensure no form of discrimination or harassment is taking place
- ✓ Provision will be made for learners who require reasonable adjustments to be made by providing suitable assessment locations and technical aids where appropriate (also see SOP 5)

## SOP 5 Reasonable Adjustments and Special Considerations

### ***Purpose***

To ensure that reasonable adjustments and special considerations are put in place to mitigate the effect of a physical or mental disability or any other difficulty that may put the learner at a disadvantage during the delivery and assessment of a qualification.

### ***Scope***

This SOP applies to all staff involved in the management, assessment and quality assurance of qualifications, and all learners in receipt of training.

### ***Core Requirements***

#### Reasonable Adjustments

A reasonable adjustment is any action that helps to reduce the effect of a disability or difficulty that places the learner at a substantial disadvantage in the assessment situation. It is made to an assessment for a qualification to enable a disadvantaged learner to demonstrate his or her knowledge, skills and understanding of the levels of attainment required by the specification for that qualification.

Reasonable adjustments must not affect the integrity of what needs to be assessed, but may involve:

- ✓ changing usual assessment arrangements, for example allowing a learner extra time to complete the assessment activity
- ✓ adapting assessment materials, such as providing materials in Braille
- ✓ providing assistance during assessment, such as a sign language interpreter or a reader
- ✓ re-organising the assessment room, such as removing visual stimuli for an autistic learner
- ✓ changing the assessment method, for example from a written assessment to a spoken assessment/verbal questioning
- ✓ using assistive technology, such as screen reading or voice activated software
- ✓ providing the mechanism to have different colour backgrounds to screens for onscreen assessments or asking for permission for copying to different coloured paper for paper-based assessments
- ✓ providing and allowing different coloured transparencies with which to view assessment papers

Reasonable adjustments are approved or set in place before the assessment activity takes place; they constitute an arrangement to give the learner access to the programme. The use of a reasonable adjustment will not be taken into consideration during the assessment of a learner's work.

The ETDD is only required by law to do what is 'reasonable' in terms of giving access. What is reasonable will depend on the individual circumstances, cost implications and the practicality and effectiveness of the adjustment. Other factors, such as the need to maintain competence standards and health and safety, will also be taken into consideration.

These principles should be followed when making decisions about a learner's need for adjustments to assessment. Adjustments should:

- ✓ not invalidate the assessment requirements of the qualification
- ✓ not give the learners an unfair advantage
- ✓ reflect the learner's normal way of working
- ✓ be based on the individual need of the learner

### Special Considerations

Special consideration can be applied after an assessment if there was a reason the learner may have been disadvantaged during the assessment.

For example, special consideration could apply to a learner who has temporarily experienced:

- ✓ an illness or injury
- ✓ some other event outside of their control

which has had, or is likely to have had, a material effect on that learner's ability to take an assessment or demonstrate his or her level of attainment in an assessment

Special consideration should not give the learner an unfair advantage, nor should its use cause the user of the certificate to be misled regarding a learner's achievements. The learner's result must reflect their achievement in the assessment and not necessarily their potential ability.

Special consideration, if successful, may result in a small post-assessment adjustment to the mark of the learner. The size of the adjustment will depend on the circumstances and reflect the difficulty faced by the learner.

However it should be noted that:

- ✓ where an assessment requires the learner to demonstrate practical competence or where criteria have to be met fully, or in the case of qualifications that confer a License to Practice, it may not be possible to apply special consideration

- ✓ in some circumstances, for example for on-demand assessments, it may be more appropriate to offer the learner an opportunity to take the assessment at a later date

## SOP 6 Malpractice & Maladministration (BCS only)

### ***Purpose***

To define and provide a process for reporting of malpractice and/or maladministration

### ***Scope***

This SOP applies to all staff involved in the management, training, assessment and quality assurance of qualifications, and all learners in receipt of training

### ***Core Requirements***

#### Malpractice

Malpractice is essentially any activity or practice which deliberately contravenes regulations and compromises the integrity of the internal or external assessment process and/or the validity of certificates. It covers any deliberate actions, neglect, default or other practice that compromises, or could compromise:

- the assessment process
- the integrity of a regulated qualification
- the validity of a result or certificate
- the reputation and credibility of BCS
- the qualification or the wider qualifications community

Malpractice may include a range of issues from the failure to maintain appropriate records or systems to the deliberate falsification of records in order to claim certificates.

For the purpose of this SOP this term also covers misconduct and forms of unnecessary discrimination or bias towards certain or groups of learners.

#### Maladministration

Maladministration is essentially any activity or practice which results in non-compliance with administrative regulations and requirements and includes the application of persistent mistakes or poor administration (e.g. within a training provider, inappropriate learner records).

## Reporting an event of malpractice or maladministration

Anybody who identifies or is made aware of suspected or actual cases of malpractice or maladministration at any time **must immediately notify BCS**.

If ETDD has conducted an initial investigation prior to formally notifying BCS, the ETDD should ensure that staff involved in the initial investigation are competent and have no personal interest in the outcome of the investigation.

However, it is important to note that in all instances the training provider must immediately notify BCS if malpractice is suspected or maladministration has occurred as BCS have a responsibility to the regulatory authorities to ensure that all investigations are carried out rigorously and effectively.

In all cases of suspected malpractice and maladministration reported, BCS will protect the identity of the 'informant' in accordance with our duty of confidentiality and/or any other legal duty.

## SOP 7 Quality Assurance

### **Purpose**

To outline the processes related to quality assurance to ensure that the required standards of qualification delivery and assessment are maintained

### **Scope**

This SOP applies to all staff involved in the management, training, assessment and quality assurance of qualifications, and all learners in receipt of training

### **Core Requirements**

The ETDD is committed to Quality Assurance and believes it is an integral part of their processes.

The focus of the ETDD is on Learners with the provision of relevant and flexible quality training programmes and assessment to suit their needs and lifestyles.

The provision will be regularly monitored and reviewed by ETDD's quality assurance representative through FNHC Governance processes.

All staff involved in the administration and/or assessment of qualifications will have undergone relevant training to their role.

#### BCS requirements:

All new invigilators will be observed during their first test session and annually thereafter to ensure assessment regulations are being followed.

Existing invigilators will be observed conducting an assessment at least once a year.

Relevant information from BCS and FAIB will be disseminated to all members of staff involved in the delivery of qualifications.

The organisation's policy for Equal Opportunities will be followed and monitored.

For manual testing and evidence based assessments:

- ✓ An Internal Verification process will be in place to ensure that consistent testing and assessment standards are maintained by cross-marking.
- ✓ Internal Verification will be carried out on an on-going basis.
- ✓ All cases of borderline achievement will be Internally Verified
- ✓ At least 10% of other assessments will be checked across all markers and modules
- ✓ Where a new marker is assessing, all work will be double marked until the Centre Manager is satisfied with the standard
- ✓ Internal Verification will be recorded on Learner work and records and on central recording systems

FAIB requirements:

- ✓ A Designated Person (who has a current and valid First Aid at Work certificate (unless exempt) with up to First Aid knowledge and an Assessment qualification with current First Aid assessment experience will take overall responsibility for Quality Assurance.
- ✓ Quality Assurance records will be kept as follows:
  - Records of learner assessments completed against course outcomes
  - End of course Student Evaluation
  - Complaints Procedure
  - Training Venue Procedure
  - Training Resources Procedure
  - Annual Trainer/Assessor Monitoring
  - Annual Report on Monitoring of Training Provider Requirements



## SOP 8 Safeguarding

### ***Purpose***

To ensure that learners and staff are, and feel safe, have up to date knowledge of potential sources of harm and how to take steps to keep themselves their families and their communities safe

### ***Scope***

This SOP applies to all staff involved in the management, training, assessment and quality assurance of qualifications, and all learners in receipt of training

### ***Core Requirements***

Both FNHC and the ETDD are committed to protecting any individual whilst they are accessing learning and believe that Safeguarding is Everyone's Responsibility.

FNHC sets expectations that all staff will meet the competencies as outlined in the Royal College of Nursing (RCN) Intercollegiate Guidance documents (RCN 2018 & 2019). There are five levels of competence; all staff across FNHC should be competent in one of the five levels, which meets their role specific needs.

FNHC provides all staff with safeguarding training on induction and ongoing training specific to role.

FNHC has a detailed Safeguarding Adults and Children Policy and Procedures in place, which all staff are able to access. This includes roles and responsibilities and how to deal with concerns and disclosures, including allegations made against staff.

British Computer Society (2022) *Exemplars Policies and Procedures v1.9*. Available at [approved-centre-exemplar-policies.pdf \(bcs.org\)](https://www.bcs.org/learning/teaching/assessment/exemplar-policies-and-procedures). Last accessed 18<sup>th</sup> May 2022

First Aid Industry Body (2023b) *First Aid Training Provider Quality Assurance Standards for Regulating Training Provider and Trainer(s)/Assessor(s)*. Available at [APP-4-TRAINING-PROVIDER-QA-ADMIN-STANDARDS-JANUARY-2023-1.pdf](https://www.faib.co.uk/app-4-training-provider-qa-admin-standards-january-2023-1.pdf) (faib.co.uk). Last accessed 24<sup>th</sup> January 2023.

The Training Company (2016) *Complaints Policy and Procedure*. Available at [Microsoft Word - TTC Complaints Policy.doc \(thetrainingco.co.uk\)](#). Last accessed 20<sup>th</sup> May 2022.

British Computer Society [www.bcs.org](http://www.bcs.org)

First Aid Industry Body [www.faib.co.uk](http://www.faib.co.uk)