

# Centre & Qualification Approval Criteria and Guidance

## 1. Introduction

To gain centre approval and become approved to offer any Gatehouse Awards (GA) qualification, centres must satisfy the approval criteria set out by GA.

This document sets out the criteria for centre approval. In addition to centre approval, separate qualification approval must be obtained for each qualification the centre intends to offer. The criteria for qualification approval are set out in the relevant Qualification Specification.

Prior to making an application for centre approval, centres should ensure that they have read this document, the *Centre Handbook* and other relevant policies and procedures (published on the GA website) and be assured that they meet the approval criteria fully prior to completing and submitting an *Application for Centre Approval*.

Prior to making an application for qualification approval, centres should ensure that they have read the relevant Qualification Specification and any additional information published by GA relating to the qualification (for example, Indicative Content or Sample Assessments) and be assured that they meet the criteria for qualification approval fully prior to completing and submitting their *Application for Qualification Approval*.

International centres should contact GA prior to commencing the process, to ensure that any additional requirements are outlined and understood.

Additional support and advice can be obtained by contacting GA directly by emailing [info@gatehouseawards.org](mailto:info@gatehouseawards.org)

## 2. General Data Protection & Privacy Statement

GA will collect and hold data on centres, staff and learners in line with the guidance of the Information Commissioner's Office (ICO). The data is used for a variety of purposes, primarily related to awarding achievements and fulfilling GA's regulatory and legal responsibilities as a recognised Awarding Organisation. Data may also be used, where necessary, as part of any monitoring or investigations into the conduct of the centre, its staff and learners. The data collected will not be disclosed to any third parties or organisations, except where there is a statutory requirement.

Centres must ensure that their learners are made aware of how their personal data will be processed. As this includes sensitive personal data, the learner must give their consent to this prior to taking a GA qualification. A full *GDPR and Privacy Policy* is available from GA.

### 3. How to Apply

Once a centre has read and understood the requirements and responsibilities associated with becoming an approved centre and is assured that they fully meet the approval criteria and the qualification specific criteria there is a three-step process to follow:

#### Step 1

Complete and submit:

- an *Application for Centre Approval Form*
- at least one *Application for Qualification Approval Form*
- any additional *Application for a Satellite Centre Forms* or *Examination Venue / Assessment Venue Forms* for any additional proposed delivery sites
- a conflict of interest declaration (if applicable)

Ensure you provide full answers to all questions asked on the forms, submitting any supporting evidence requested. You must also make prompt payment of the approval fee.

Please ensure that all sections of the application forms are completed accurately and fully. Failure to do so may delay or even prevent your application being processed. GA also publishes a Centre and Qualification Approval Policy and Procedure, which applicant centres may find useful. This document is published on the GA website.

#### Step 2

We will review your application, providing feedback where necessary. We will also tell you whether an approval visit prior to granting approval is required or not and inform you of our decision, normally within 20 working days.

#### Step 3

Once your approval is confirmed, you will receive your Centre Approval certificate and you can start delivering the qualifications you have been approved for.

We provide:

- Access to the Ark, our online system, to help you register learners, view results and claim/access certification
- Excellent customer service, with a dedicated GA Centre Administrator so you have a single point of contact to help you with any queries
- A *Centre Handbook* to help you to understand and meet our requirements as an approved GA centre
- Comprehensive *Qualification Specifications* to facilitate delivery, assessment and quality assurance
- Template documentation for delivery staff to use, adapt or complement existing centre processes

- Training sessions for staff members (upon request)
- Continuous help, support and advice.

#### 4. Failure to meet Criteria before Approval

GA will check that the centre meets the approval criteria prior to granting approval. Where a centre does not meet the criteria, feedback is provided and the centre has the opportunity to revise and re-submit their application and/or provide any missing evidence.

Please note that the payment of the application fee does not guarantee a centre will be approved and is not refundable should a centre fail to meet the required criteria for Approval.

#### 5. Review and Monitoring

GA may review the evidence submitted in support of an *Application for Centre Approval / Qualification Approval* remotely or during a visit.

The Approval Criteria cover both initial and on-going approval. The centre is responsible for ensuring continued compliance with the approval criteria and must inform GA immediately of any changes which may impact their ability to maintain adherence to the criteria.

Continuing adherence to the approval criteria will be monitored through GA's external quality assurance activities and wider centre controls, which are detailed in the published GA Quality Assurance Policy and, where relevant, the GA CASS Strategy and General Moderation Policy.

#### 6. Failure to Meet Approval Criteria after Approval

Where it is identified that an approved centre subsequently fails to comply with the approval criteria, GA will usually issue an action plan for the centre to complete. GA will also apply sanctions if the action plan is not completed, or the non-compliance is considered severe enough to threaten the validity, integrity or reputation of a qualification or GA, or if an incident has occurred which has led to adverse effects for learners, or is deemed likely to do so.

Failure to remedy non-compliances may ultimately result in the withdrawal of the centre's approved status.

Please see the *GA Malpractice and Maladministration Policy* and the *GA Sanctions Policy* for full details of how we manage any such incidents. Copies of these policies are available on the GA website.

#### 7. Staff Roles and Responsibilities

GA requires all centres to allocate individual members of staff to the following roles:

- Head of Centre – a senior member of staff with overall responsibility for the centre's operations

- Main Centre Contact/Co-ordinator – with responsibility of day-to-day centre operations, where this is delegated by the Head of Centre to another member of staff
- Examinations Officer – with responsibility for all learner registrations, examinations and certification claims through the Ark (GA's online system)
- Finance Officer – with responsibility for all financial queries and invoicing.

The above individual named members of staff must be listed on the Application for Centre Approval. In addition, the centre is required to inform GA of any other persons connected with the centre who hold a position of control within the organisation, for example Directors not named as the Head of Centre.

In addition, GA requires centres to allocate individual members of staff to specific roles to support the delivery and quality assurance of the particular qualification(s) the centre wishes to deliver. These include:

- Delivery personnel – this might be an Interlocutor, Invigilator, Teacher/Tutor or Assessor, depending on the qualification for which the centre is seeking approval
- Quality Nominee or Internal Quality Assurer (IQA) – with responsibility for all internal quality assurance and/or internal moderation of assessment decisions, depending on the qualification for which the centre is seeking approval

Centres should refer to the relevant *Qualification Specification* for details of the staffing requirements, including any occupational competency requirements and minimum qualifications and levels of experience.

Centres must have an appropriate number of Invigilators (and Interlocutors, if applicable) for all qualifications which are assessed via external examinations.

For all qualifications that are assessed by centre staff, a centre must ensure that they have as a minimum:

- At least ONE member of staff appropriately qualified/experienced to undertake the role of Assessor
- At least ONE member of staff appropriately qualified/experienced to undertake the role of Internal Quality Assurer.

## 8. Applying for Additional Qualification Approval

Approved Centres may apply for approval to deliver additional qualifications at any time by submitting a subsequent *Application for Qualification Approval form*.

There is no fee for existing Approved Centres to apply for additional qualification approval where the additional qualification is in the same or similar sector subject area.

Additional qualification approval for qualifications in a different sector subject area, or qualifications which are considered by GA to be high-risk for any reason, may incur a charge.

## 10. Satellite Centres and Additional Examination or Assessment Venues

Centres must provide details of any Satellite Centres by completing the *Application for Satellite Centre Approval* form.

Where a centre wishes to add an examination venue, a site hired or used by the main centre on a part-time or ad hoc basis for the purpose of external examination delivery or workplace assessment, the centre must complete and submit the *Application for an Examination Venue Approval Form* or an *Application for an Assessment Venue Form*.

## 11. Centre Approval Criteria

The approval criteria are listed below. Criteria are categorised across 5 sections:

1. General Business Requirements
2. Management and Administrative Systems
3. Physical and Staff Resources
4. Delivery and Assessment Practices
5. Internal Quality Assurance Processes

## Centre Approval Criteria Section 1: General Business Requirements

Criteria		Possible Examples of Evidence
1.1	The centre is a clearly identifiable legal entity, organisation (or sole trader 'trading as'), operating within the legal requirements of the country in which it is based	<ul style="list-style-type: none"> <li>• Certificate of incorporation</li> <li>• Registered on Companies House (if UK based)</li> <li>• Registration with HRMC (or equivalent tax authorities if outside the UK)</li> <li>• Evidence of other formal establishment with relevant authorities overseas</li> </ul>
1.2	The centre must be suitable to be recognised as a Centre approved to offer regulated qualifications, must be financially solvent and not in breach of any professional, regulatory or legal obligation to which it is subject (the Head of Centre is required to sign a Declaration to this effect)	<ul style="list-style-type: none"> <li>• Able to provide trade references upon request</li> <li>• Credit checks</li> <li>• Signing of the Centre Declaration and Statement of Commitment</li> </ul>
1.3	The Head of Centre and other senior/key staff must be suitable people to be engaged in their role (the Head of Centre is required to sign a Declaration to this effect)	

## Centre Approval Criteria Section 2: Management and Administrative Systems

Criteria		Possible Examples of Evidence
2.1	There is active senior management support for the qualification approval and the centre's aims, policies and procedures in relation to the qualification(s) are supported by senior management and understood by the assessment team	<ul style="list-style-type: none"> <li>• Organisational chart</li> <li>• Job descriptions or profiles</li> <li>• Documented procedures</li> <li>• Staff induction</li> </ul>
2.2	Staff responsibilities, authorities and accountabilities of the assessment and IQA team across all assessment sites are clearly defined, allocated and understood, with an induction and development process in place	
2.3	There is an effective communication system between all levels of staff and in all directions and	<ul style="list-style-type: none"> <li>• Staff handbooks, team meetings</li> </ul>

	with GA (including satellites, placements and remote-working staff)	<ul style="list-style-type: none"> <li>• Records of communications with other relevant parties</li> <li>• Formal signed agreements in place with e.g. satellite centres</li> </ul>
2.4	Time is allocated for staff involved in the teaching, assessment and IQA of the programme to regularly meet and discuss delivery and quality assurance	<ul style="list-style-type: none"> <li>• Standardisation meeting minutes</li> <li>• Planned IQA activities</li> <li>• Evidence of reviews of delivery and adjustments made accordingly</li> <li>• Assessor to learner ratios / IQA to Assessor ratios</li> </ul>
2.5	The centre provides sufficient time and resources to the delivery of the qualifications, which adequately allows learners to prepare for assessment	<ul style="list-style-type: none"> <li>• Schemes of work, lesson plans and/or curriculum planning documentation</li> <li>• Online teaching, learning and assessment materials</li> <li>• Communications to learners about course length / duration and support arrangements including feedback</li> </ul>
2.6	The centre is able to comply with requests for GA to access premises, records, information, learners and staff for the purpose of EQA and other monitoring activities	<ul style="list-style-type: none"> <li>• Records of EQA reports</li> <li>• Compliance with requests for information or for EQA activities</li> </ul>
2.7	There is a process in place to inform GA of any changes which may impact on its ability to maintain centre and/or qualification approval, e.g. changes to key staff	<ul style="list-style-type: none"> <li>• Centre Update forms</li> <li>• Signing of the Centre Declaration and Statement of Commitment</li> </ul>
2.8	<p>Policies and procedures are documented and available which are made available to staff and learners relating to:</p> <ul style="list-style-type: none"> <li>• Appeals</li> <li>• Assessment and Internal Quality Assurance (to include the use of an internal quality assurance strategy) and Controlled Assessments (where applicable)</li> </ul>	<ul style="list-style-type: none"> <li>• Written policies and procedures</li> <li>• Learner induction materials, course handbooks or similar</li> <li>• Policy review mechanisms such as internal audits and version control processes</li> <li>• Records of appeals / complaints / conflicts of</li> </ul>

	<ul style="list-style-type: none"> <li>• Business Continuity Plan (which outlines contingency plans relating to business interruption or business failure, including how the centre will safeguard the interests of learners)</li> <li>• Candidate Access (including Reasonable Adjustments and Special Considerations)</li> <li>• Complaints</li> <li>• Conflicts of Interest</li> <li>• Data Protection, Privacy and GDPR</li> <li>• Health and Safety (required where a centre employs 5 or more members of staff)</li> <li>• Maladministration and Malpractice (including collusion, plagiarism and mis-use of AI)</li> <li>• Recognition of Prior Learning</li> </ul>	interests / candidate access / RPL requests (and the outcomes of these, as applicable)
2.9	Potential and actual conflicts of interest (e.g. where a member of staff is related to, or a close friend of, a learner) are identified, recorded and steps taken to mitigate the risk of adverse effect	<ul style="list-style-type: none"> <li>• Conflicts of interest reporting procedure</li> <li>• Conflicts of interest log/record</li> </ul>
2.10	The centre maintains a record or log of conflicts of interest and the actions the centre takes	<ul style="list-style-type: none"> <li>• Notifications to GA of actual or potential conflicts of interest</li> </ul>
2.11	Learner personal data is collected and stored in accordance with all current, relevant data protection legislation and regulation including, but not limited to, GDPR, and such data is held with the learner's permission	<ul style="list-style-type: none"> <li>• Learner enrolment forms</li> <li>• Security and access arrangements</li> <li>• Registration with the ICO (or equivalent body if outside the UK)</li> </ul>
2.12	Processes are in place for the accurate and timely: <ul style="list-style-type: none"> <li>• registration of learners</li> <li>• certification of learners</li> <li>• withdrawal of learners</li> </ul>	<ul style="list-style-type: none"> <li>• Procedures for registering learners, for claiming certification and issuing certificates to learners, and for breaks in learning (suspensions) and the withdrawal of learners</li> </ul>
2.13	Learner records and details of achievement are accurate, up to date, securely stored and available for external quality assurance and audit purposes	<ul style="list-style-type: none"> <li>• Records of learner registrations, achievements and tracking</li> <li>• Assessment and IQA records</li> </ul>

		<ul style="list-style-type: none"> <li>• Process for confirming the identity of individual learners</li> <li>• Learner registration and certification records</li> <li>• Security and storage of records and access arrangements</li> </ul>
2.14	There is a record of reasonable adjustments and special considerations requested and/or applied by the centre	<ul style="list-style-type: none"> <li>• Reasonable adjustments records/logs</li> </ul>
2.15	Arrangements are in place to adequately maintain IT systems and cyber security	<ul style="list-style-type: none"> <li>• Arrangements for backing up data and records</li> <li>• Firewalls and anti-virus software</li> <li>• Remote working arrangements</li> <li>• Cyber insurance policies</li> </ul>
2.16	Marketing and promotional materials are clear, unambiguous and not misleading in relation to the qualifications being advertised, including accurate use of logos and any additional guidelines issued by GA and/or the Regulator	<ul style="list-style-type: none"> <li>• Marketing of courses and qualifications, including on websites, social media platforms and any other published advertising, communications or promotional materials used</li> </ul>
2.17	The centre monitors its approach to qualification delivery to inform future activity and support continuous improvement	<ul style="list-style-type: none"> <li>• Records of monitoring and reviews of delivery</li> <li>• Customer service statements</li> <li>• Evaluation and feedback forms and surveys</li> <li>• Feedback to delivery staff showing improvements required and improvements being carried out</li> </ul>

### Section 3: Physical and Staff Resources

Criteria		Possible Examples of Evidence
3.1	The programme is adequately staffed	<ul style="list-style-type: none"> <li>• Assessor to learner ratios</li> <li>• IQAs to Assessor ratios</li> <li>• List of Assessors and IQAs to specific programmes, satellites or additional sites</li> </ul>
3.2	All staff involved in the delivery, assessment and quality assurance activities and/or the conduct of external assessments are suitably competent, qualified and experienced in line with the relevant qualification requirements	<ul style="list-style-type: none"> <li>• CVs and qualification records for staff</li> <li>• Development plans and CPD records</li> <li>• Recruitment procedures</li> </ul>
3.3	There is appropriate staff development provision for staff with records of activity held centrally by the centre	<ul style="list-style-type: none"> <li>• CPD planning and CPD logs</li> <li>• Action plans and records of feedback to Assessors and IQAs</li> <li>• Records of meetings</li> <li>• Staff induction</li> </ul>
3.4	Physical resources, products and equipment are appropriate to the programme and are sufficient and accessible to staff and learners	<ul style="list-style-type: none"> <li>• Records of equipment</li> <li>• Maintenance schedules</li> <li>• Public liability insurance certificates</li> <li>• Health and safety policies</li> </ul>
3.5	Equipment and facilities comply with relevant safeguarding, health and safety and any other requirements	
3.6	Where qualification delivery involves controlled examinations, the venue and resources are suitable	<ul style="list-style-type: none"> <li>• Separate waiting area</li> <li>• Suitable desks/chairs and other equipment, e.g., audio, video recorders, IT equipment (laptops or PCs)</li> </ul>
3.7	The centre has sufficient equipment and resources to set up and deliver online examinations (where applicable)	<p>Confirmation that the centre has:</p> <ul style="list-style-type: none"> <li>• High speed, stable internet</li> <li>• Suitable hardware, modern processor with sufficient RAM, up to date operating system and browser installed</li> <li>• ZOOM Pro software for the purpose of remote invigilation.</li> </ul>

## Section 4: Delivery and Assessment Practices

Criteria		Possible Examples of Evidence
4.1a	Delivery and assessment are planned	<ul style="list-style-type: none"> <li>Centre-devised assessment materials / assignment briefs (where applicable) with mapping and/or IQA sign off</li> </ul>
4.1b	Planned assessment methods meet requirements of the individual qualification specification	<ul style="list-style-type: none"> <li>Assessment plans, individual learning plans</li> <li>Schedules of delivery / timetables</li> <li>Reviews of progress</li> </ul>
4.2	Learners are provided with accurate information, advice and guidance about the course, qualification, assessment and quality assurance practices	<ul style="list-style-type: none"> <li>Learner induction materials / course handbooks / course content / assessment plans</li> <li>Marketing and other promotional materials</li> </ul>
4.3	A range of assessment methods are used as appropriate to the learners and the qualification	<ul style="list-style-type: none"> <li>Centre-devised assessment materials / assignment briefs</li> <li>Process for identifying a need for reasonable adjustments</li> </ul>
4.4	Individual assessment requirements of learners are identified and met where possible, with full records kept	<ul style="list-style-type: none"> <li>Provision for learners with particular assessment requirements</li> <li>Materials, equipment and facilities are available to support learners with learning difficulties or disabilities</li> <li>Records of candidate access arrangements</li> </ul>
4.5	Assessment practices capture evidence efficiently and effectively according to the principles of CRAVES; records show accurate assessment tracking progress, feedback and achievement	<ul style="list-style-type: none"> <li>Centre-devised assessment materials / assignment briefs</li> <li>Dated and signed:               <ul style="list-style-type: none"> <li>assessment plans</li> <li>records of feedback</li> </ul> </li> </ul>

		<ul style="list-style-type: none"> <li>○ mark sheets / progress and tracking documentation</li> <li>○ completion and achievement sign off documents</li> </ul>
4.6	Assessment decisions made by the centre are valid and reliable and in accordance with the qualification standards as outlined in the relevant Qualification Specification	<ul style="list-style-type: none"> <li>● IQA Sample Records and feedback to assessors</li> <li>● Standardisation activities</li> <li>● Minutes of standardisation/team meetings</li> </ul>
<b>Additional Requirements for Delivery of External Assessment (where applicable)</b>		
4.7	There are adequate procedures in place to ensure the secure safe storage and delivery of external assessment materials	<ul style="list-style-type: none"> <li>● Working practices and written procedures</li> <li>● Confidentiality agreements</li> <li>● Secure storage facilities (e.g. cabinet in a locked office, fireproof safe, etc.)</li> </ul>
4.8	Adequate procedures exist to ensure secure and safe storage of current and completed candidate assessment records	
4.9	There are suitable arrangements to administer external assessments in line with GA's regulations and guidance	<ul style="list-style-type: none"> <li>● Invigilation reports</li> <li>● Seating plans</li> <li>● Details of invigilators allocated to examinations</li> <li>● Invigilators understand the arrangements</li> </ul>
4.10	There is a process in place to notify GA where there has been a theft or other loss, or breach of confidentiality in any secure assessment materials	<ul style="list-style-type: none"> <li>● Procedures for notifying GA</li> <li>● Evidence of notifications</li> <li>● Investigation reports into previous incidents</li> <li>● Evidence of completed actions relating to secure materials</li> </ul>

## Section 5: Internal Quality Assurance Processes

Criteria		Possible Examples of Evidence
5.1	The IQA strategy sets out a clear rationale for sampling decisions, assessment and moderation and/or verification practices	<ul style="list-style-type: none"> <li>• IQA sampling strategy</li> <li>• Minutes of meetings</li> <li>• Reviews of internal documentation e.g. sign off of centre-devised assessment materials</li> <li>• Evidence of feedback being given and corrective actions taking place</li> </ul>
5.2	Suitable arrangements are in place to ensure adequate liaison, consistency and standardisation across all Assessors, IQAs and other staff within the centre and across all sites and satellite centres (where applicable)	<ul style="list-style-type: none"> <li>• Minutes of meetings and records of communication</li> <li>• Records of all assessment sites and personnel</li> </ul>
5.3	Assessors are provided with relevant support to achieve consistency in assessments and are given accurate advice and feedback on their performance	<ul style="list-style-type: none"> <li>• Standardisation activities and meeting minutes</li> <li>• IQA sample records with feedback to Assessors</li> <li>• Individual development plans, team CPD planning</li> <li>• CPD records</li> </ul>
5.4	There is adequate time and opportunity for Assessors, IQAs and other team members to meet and discuss assessment and quality assurance issues	<ul style="list-style-type: none"> <li>• Schedule of standardisation meetings</li> <li>• Team meeting minutes</li> <li>• Feedback from IQAs and evidence that development needs identified have been acted upon</li> </ul>
5.5	Internal quality assurance activities ensure evidence assessed is CRAVES; full records are kept and made available to the GA EQA	<ul style="list-style-type: none"> <li>• IQA sample plans or schedules of planned IQA activities</li> <li>• IQA sample records</li> <li>• Feedback to Assessors</li> <li>• Records of meetings to disseminate information</li> <li>• External Quality Assurance reports</li> </ul>

5.6	Where assessment or IQA decisions and feedback are made by an unqualified assessor or IQA, the decisions are validated by a qualified, occupationally competent assessor or IQA (where appropriate)	<ul style="list-style-type: none"> <li>• Details of the counter-signatory arrangements in place</li> <li>• Trainees are working towards the relevant Assessor or IQA qualification</li> </ul>
5.7	Processes are in place to prevent malpractice and maladministration (including collusion and plagiarism), and are shared with staff and learners	<ul style="list-style-type: none"> <li>• Learner induction materials</li> <li>• Course handbooks</li> <li>• Policies and procedures</li> </ul>
5.8	Processes are in place to manage malpractice and maladministration by staff and learners	<ul style="list-style-type: none"> <li>• Staff whistleblowing policies and disciplinary procedures</li> </ul>

If you have any further questions or require clarification on any aspect of the Centre Approval Criteria, please contact us by emailing [info@gatehouseawards.org](mailto:info@gatehouseawards.org)

Document Specification:	
<b>Purpose</b>	To provide both potential and existing centres with details of Gatehouse Awards' criteria to allow them to gain and maintain centre and qualification approval.
<b>Accountability</b>	GA Governance Committee
<b>Responsibility</b>	Director
<b>Version</b>	V6
<b>Effective from</b>	June 2025
<b>Indicative review date</b>	June 2027
<b>Links to Ofqual GCR</b>	Section C, Section H
<b>Other relevant documents</b>	GA Centre Handbook GA Centre Approval Policy and Procedure GA Quality Assurance Policy GA CASS Strategy & General Moderation Policy