



Strategy for Centre Assessment Standards Scrutiny (CASS)

Policy authorised by Responsible Officer

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1.0 Overall approach

The key role of OTHM is to secure standards for those qualifications we certificate. As part of our commitment to quality assuring standards, we aim to provide guidance and support to help Centres and their learners to achieve learning and development goals. We also ensure that any regulatory requirements are met, and in turn we support Centres to meet those requirements.

OTHM Assessment Design and Development

The fundamental aim of the OTHM CASS strategy for the design and development of all Assessment materials is to ensure that all assessment is reliable and valid and enables those who rely on OTHM certificates to be confident that a consistent standard and level of quality assurance has been applied.

This strategy has been designed to meet the requirements of Ofqual and specifically addresses Condition H2 - Centre Assessment Standards Scrutiny where an assessment is marked by a Centre.

All the Ofqual regulated qualifications we offer are coursework and assignment based which in turn are internally assessed and externally quality assured prior to and to determine whether there can be recommendation of award.

Direct Claims Status (DCS) certification is **not** available for any of our qualifications.

Internal assessment has been identified as the most appropriate model of assessment for the entire OTHM qualifications portfolio of qualifications for the following reasons:

- The qualifications are set at level 3 - 8, therefore the OTHM assessment approach needs to provide scope for learners to demonstrate depth, breadth, and application of higher-level technical understanding in appropriate contexts; to meet the full breadth of the requirements, evidence will take more than one form reflecting professional contexts and practical applications as well as providing scope for different learning styles. This approach also allows a natural progression pathway through the levels.
- The criteria-based nature of the qualifications, where there is assessment against 100% of the criteria, lends itself to Centre assessment more easily than to an externally controlled assessment (e.g., examination) as an extensive collection of evidence is required and the assessor must be able to ensure that all criteria are met.
- Evidence will be generated over a period of time as learners move from one component of the qualification to the next, allowing learners to build on their learning journey and benefit from their learning journey and therefore Centre assessment is more appropriate than a fixed externally set timescale.
- The qualifications are delivered according to the delivery centre time tabling and at varying times throughout the year with the timing of assessment planned to reflect the way that individual learners learn and complete tasks to develop and provide evidence.
- All OTHM qualifications in scope of this strategy must be delivered by training providers who have lecturers and tutors with appropriate sector knowledge and

experience. Learning programmes must require both attendance at lessons and independent work on the part of the learner.

Our strategy includes both Quality Assurance of Centres and External Quality Assurance (EQA) of internally assessed qualifications.

To ensure Centres have all the appropriate policies and procedures in place and are implementing those effectively we have developed a rigorous Centre Approval Policy and procedure with criteria that cover Centre governance, Resources, Equipment and Accommodation, staff, policies and Internal Quality Assurance.

External Quality Assurance (EQA) is the process we use to check that Centres offering our qualifications maintain standards in assessment and continue to have the resources in place to support qualification delivery. The combination of quality assurance and EQA provides us with the assurances that Centres are complying with all our criteria and meet Ofqual recognition requirements.

2.0 Allowing Centres to mark assessments

Centre approval

All Centres are required to undergo an Approval Process. The Approval Process enables OTHM to check that centres have appropriate policies and procedures in place and also to ensure that Centre assessors engaged in assessing OTHM qualifications have appropriate qualifications and experience to carry out the assessment.

All new Centres must evidence that they have resources, rigorous processes, and expertise as well as a firm understanding of their roles, policies, and procedures at the point of becoming approved.

The Centre Approval process also takes account their delivery history, providing an indication of whether the Centre is likely to be able to deliver OTHM qualifications in line with our requirements.

The Centre application process includes several checks to be carried out prior to the Centre being approved to deliver and assess OTHM regulated qualifications:

- We verify that tutors/assessors have the appropriate level of qualifications and credentials prior to approving the Centre to deliver the qualifications.
- We ensure the Centre has all mandatory policies and procedures in place to protect the interest of learners.
- We require evidence that the Centre has the appropriate Internal Quality Assurance (IQA) and Assessment procedures in place to verify the assessment decisions made by the Centre staff

We conduct a pre-approval visit/meeting with all new Centres to discuss the requirements surrounding becoming an approved Centre and how to maintain compliance with the requirements set by OTHM and the regulators. Part of this visit/meeting allows us to provide additional support and guidance in all these areas, including how to maintain effective

administration records for quality assurance purposes. It also allows us to discuss the qualification requirements and assessment criteria in more detail, ensuring the Centre Co-ordinator is fully aware of the responsibilities and has the appropriate workforce in place. At this point we may set actions for the potential Centre to address to raise the standards. Once a potential Centre has met all our Centre approval criteria, we award time limited approval for a maximum of five years.

Our Centre approval criteria detail the staff, processes and records new Centres will need to meet our requirements. We expect Centres applying to OTHM for Centre approval to meet all Centre approval criteria as stated in our Centre approval application form and additional Centre resource requirements if applying to deliver any of our specialist qualifications.

This approach ensures we are satisfied that Centres have the capability, systems, and resources in place to operate effectively as an OTHM-approved Centre offering assignment based internally assessed qualifications.

Centre Support

To help Centres understand our assessment and internal quality assurance requirements, we provide a range of resources.

These include:

A Guide for Centres

A reference tool for OTHM approved and/or prospective Centres. It sets out what is required of the Centre to deliver our qualifications. It also contains information specific to managing and delivering the qualification(s) including specific quality assurance requirements.

It is intended for tutors, assessors, internal quality assurers and administrative staff within Centres and should be read in conjunction with the Qualification Specifications for the qualifications a Centre is or intends to offer.

Assessment Materials

Guidance on assessment is provided in the relevant Qualification Specification and Assignment Brief. The performance of qualifications and assessment models is kept under review. Centres are advised of any updates when they are made and are invited to comment on them. Where significant changes are being implemented, OTHM consults Centres prior to implementation; guidance on changes and subsequent requirements relating to qualification management/assessment is provided as appropriate.

Training support activities

OTHM recognises that reliability and comparability of standards for the assignment method is a challenge. OTHM therefore provides training for Centres, assessors and External Quality Assurers (EQAs).

OTHM also provide specific guidance on:

- the make-up of the assignment.
- the evidence that needs to be generated by the learner.

- the marking criteria used by the assessor.

OTHM will include a clear outline of the assessment method required for each unit within the qualification specification. Where a particular assessment method can be delivered across a range of units this will be highlighted.

OTHM approach to assessment design is outlined as follows:

1. OTHM will develop at least one assignment brief for each unit (or unit range). This will assist Centres to get started with delivery of its selected qualifications and provide Centres with examples of good practice.
2. It is recommended that the OTHM authorised assignment briefs are used by the Centre.
3. Centres that wish to devise their own assignment briefs need to first provide them to OTHM for approval and they must be quality assured by OTHM prior to implementation.
4. OTHM will limit or remove the use of the Centre-devised option where it deems appropriate for a specific qualification due to issues of comparability, reliability, delivery method, or regulatory compliance.
5. Guidance for marking and assessing assessment outputs will be provided to Centres in the qualification documents, in training and during EQA guidance. Additional guidance documents and/or specialised training may be developed for individual qualifications as deemed appropriate. The Assessment Policy should be referred to for further guidance.

Additional support

An additional level of support will be offered through a series of bite size training videos to explain in detail how assessments must be marked and verified prior to certification. The guidance videos will be available on OTHM's YouTube channel.

OTHM will communicate the CASS requirements with all approved Centres via email, website update to ensure the information has been shared amongst all who are approved to deliver, assess, mark and verify assessments.

The cycle of quality assurance and EQA allows us to systematically gather and evaluate Centre performance data in relation to our quality assurance criteria. The outcomes of these evaluations:

- support general and sector-specific guidance development
- inform qualification and EQA Team activities
- inform training and webinar development

3.0 Monitoring

OTHM recognises that internal assessment may bring a level of risk for the awarding organisation particularly in terms of ensuring that evidence presented is at the correct level and that marking/assessment at a higher level is appropriate. To mitigate these risks and to ensure a balance between flexibility for Centres and robust quality assurance checks prior to the issue of certificates, OTHM does not provide a Direct Claims Status (DCS) arrangement for Centres offering any of our qualifications.

The OTHM approach to Centre Assessment Standards Scrutiny (CASS) includes Centre Standardisation, External Quality Assurance of every qualification and every assessment decision, annual monitoring activities, training for EQAs and Centres as well as risk assessment of Centres and qualifications.

Centre Standardisation

Standardisation is a process to ensure that the assessment criteria for a qualification or unit are applied consistently by assessors and verifiers. It is undertaken through a range of activities whereby the assessed work of learners within a unit or qualification is systematically compared to confirm standards. Effective standardisation processes ensure that standards are comparable within Centres (across all sites), across different types of Centres, across different sector subject areas and over time.

OTHM is committed to ensuring that assessment and internal quality assurance decisions are accurate and consistent. Our Standardisation process has been designed to ensure that learners, Centres, employers, and regulators can be confident about the validity of certificates achieved through OTHM Qualifications.

OTHM ensures standards are consistent across all Centres by:

- ensuring that all approved Centres' internal quality assurance procedures incorporate processes for proposed tasks to be pre-verified prior to delivery. Where a course has been previously delivered, Centres must review issues raised by learners, assessors, internal quality assurers and OTHM and make changes accordingly.
- ensuring that standardisation occurs within Centres as part of a rigorous internal quality assurance process through the Centre recognition process, and ongoing monitoring conducted by OTHM.
- ensuring that Centres monitor and maintain the quality and integrity of assessment practices and decisions within their Centre.
- planning and delivering standardisation events that enable internal quality assurers, and OTHM quality staff to compare outcomes of assessment.
- ensuring that all OTHM quality staff adopt a consistent approach in quality assuring the delivery of qualifications and units at approved Centres.

Standardisation activities allow OTHM to:

- Provide an opportunity to ensure the consistency of award to learners which encompasses different verifiers, assessors, and Centres to agree the standards to be achieved.
- Ensure that the assessment strategy is fit for purpose and allows to produce evidence which is:
 - Sufficient
 - Appropriate
 - Authentic
 - Valid
 - Reliable
- There is enough evidence to demonstrate achievement against assessment criteria for the level, type and complexity of the learning.
- The evidence is attributable to the learner.
- Relevant to the specifications of the qualification for which achievement is being claimed.
- Consistent standards are operated in awarding learner achievement within and between Centres, across different sector subject areas and over time.
- Ensure that the assessment strategy and the assignment task(s) do not prevent any unintended barriers to achievement for a particular learner and pays due respect to any issues of equality and diversity.
- Ensure that assessment decisions made by the assessor and confirmed by the quality assurers are consistently “safe” (i.e. made against specified criteria, valid, sufficient, reliable and fair).
- Ensure consistency in the assessment judgements that are being made based on the available evidence.
- Ensure the standard of the feedback provided to learners is detailed, specific, identifies strengths and highlights areas for improvement.
- Ensure the adequacy of the feedback provided to assessors and the robustness of the internal verification of the assessment judgements is detailed, specific and incorporates SMART targets to address any aspects of assessor practice that needs improvement.
- Review the appropriateness and currency of the units and their fitness for purpose in the current context and make any necessary recommendations/ reviews.
- Identify and share best practice. If significant shortcomings are identified, this will be an area of enquiry for future OTHM quality reviews for the relevant Centre(s)/ qualification(s). The Centre Standardisation Policy should be referred to for further guidance.

External Quality Assurance (EQA) procedure

OTHM will appoint individuals who are occupationally and professionally competent to ensure

accurate and consistent standards of assessment, across OTHM delivery Centres and over time. They are responsible for completing any External Quality Assurance (EQA) activities. The Quality Assurance Policy should be referred to for further guidance.

The purpose of such activities is to ensure Centres:

- Have appropriate levels of resources to support the delivery of the qualification, including both physical resources and staffing.
- Are using appropriate assessment methods and making appropriate assessment decisions according to OTHM requirements.
- Have appropriate internal quality assurance arrangements as outlined within the relevant qualification specification.
- Are using appropriate administrative arrangements to support the function of delivery and assessment.
- Feedback to Centres is given through the EQA report form which includes details on the above criteria and any areas where further development is required.

OTHM monitor and review all quality assurance processes and procedures continually and formally at least annually. We provide mandatory training for EQAs at least annually and more frequently if required in addition to providing feedback and support on performance.

OTHM monitoring activities include:

- monitoring of Centre performance to inform EQA planning and selection
- monitoring of Centre performance during an EQA event
- monitoring of data recording in EQA reports

EQA Training

OTHM holds an annual EQA training event to ensure that each EQA is competent to carry out External Quality Assurance visits. These events can be held online or in person and include a thorough presentation, discussion and sample tasks that the EQA undertakes. The EQA identifies action points where the Centre can improve upon.

Sampling

External Quality Assurance (EQA) may be conducted only at Centres where there is an internal quality assurance system approved by OTHM. The internal quality assurance records must be made available at the time of the EQA.

EQAs will ensure that sampling is undertaken across each qualification submitted for the process.

Centres are required to provide a sample of portfolios produced by learners (as selected by the OTHM from the list of learners who are ready for certification) for quality assurance for every cohort of learners assessed by the Centre. The sampling approach, which directly targets the quality of assessment, is complemented by an External Quality Assurance expert who looks at systems and procedures and liaises directly with staff engaged in the assessment process.

External quality assurance sampling must include a sample of learners' evidence from:

- Assessment decisions made by each assessor
- Each assessment method
- Learner work across all levels and all units including unit claims
- Each assessment site, including employer's workplaces (where applicable)
- Where there is opportunity to observe an observed session, this should be taken. Centres are encouraged to use video evidence where this is appropriate.
- Claims for Recognition of Prior Learning (RPL), including exemptions and equivalencies and any borderline portfolios of concern to the Centre.

If the Centre has identified simulation as the preferred assessment method, this should be validated against the requirements of the unit specification and agreed with the EQA prior to the simulation taking place.

- The EQA sample can be extended up to 100% if any cause for concern is noted from the original sample. The Quality Assurance Model for Regulated Qualifications should be referred to for further guidance.

EQA SAMPLING APPROACH	
EQAs will sample a minimum of 3 learners per qualification.	
Total Entries	Total Sample Per assessment or portfolio
Up to 6 units	All assessments should be sampled
7 – 20	An additional 50%, based on the criteria listed above
Above 20	An additional 25%, based on the criteria listed above
EQA's can sample up to 100% of all submissions based on judgement of findings in relation to risk	

EQA Report

The EQA report is shared with the Centre and includes details on quality assurance criteria and any areas where further development is required.

The report is stored in the EQA Learner Verification folder for the Quality Assurance and Compliance Team to review Centre performance and update the risk ratings and records according to the evidence provided. This data is then used to schedule future monitoring activities according to the level of risk.

Annual Centre Quality Review

Once approved each Centre will be monitored regarding its continued compliance with all OTHM requirements. OTHM is committed to having a transparent, fair, robust and risk-based approach to the quality assurance monitoring of its approved Centres.

To retain their Centre approval, Centres must consistently meet the OTHM Approval Criteria, Centre Agreement and Terms and Conditions. By signing the Centre Agreement and Terms

and Conditions, Centres agree to comply with all OTHM requirements, including the responsibilities required under this policy.

The Approval Criteria covers all aspects of administering and delivering OTHM qualifications and is grouped into the following 'risk areas':

- a) Centre Governance and Systems.
- b) Resources, Equipment and Staff.
- c) Centre policies
- d) Assessment strategy
- e) Internal Quality Assurance.

The ongoing quality monitoring of Centres is managed by the Quality Assurance and Compliance Team, in conjunction with the Centre's assigned EQA. The Quality Assurance and Compliance Team will work closely with EQAs to review the Centre's level of compliance through:

- External quality assurance monitoring activities.
- Responding to information received from the Regulators and/or other external bodies, including regarding malpractice and maladministration.
- Responding to external feedback and/or complaints received from learners, Centre staff, whistle-blowers, other Awarding Organisations, members of the public or the media.
- Investigation into suspected or proven malpractice as defined in the OTHM Malpractice and Maladministration Policy and Procedure.

We perform an Annual Centre Quality Review and additional quality visits/meetings depending on the approved Centre's current risk rating. If we believe there is an increased risk to the assessment process, the frequency of the monitoring activities will be increased. The approach will consider the following areas:

- Centre performance
- Qualification risk
- Number of learners completing their qualifications with the Centre
- Range of assessments
- Number of assessors and assessor experience

The role of our EQA is to monitor the quality and consistency of assessment practices and procedures, provide assurance to OTHM on the performance of Centres and identify action points to effect improvement where necessary.

The annual activities may include methods such as face to face EQA visit to observe Centre activity, remote/desk-based sampling and/or remote EQA meeting. Where necessary unannounced visits may be used to observe a Centre's activities and performance. When moderation activities are completed, feedback is sent directly to the Centre Co-ordinator.

Application of Risk Rating

The EQA will use their findings from each monitoring activity to make judgements about the Centre's level of risk in the Approval Criteria 'risk areas' as outlined above. Based on the available evidence, the EQA will assign the Centre a risk rating of either low, moderate or high in each of the 'risk areas'. The risk rating applied will be based on the EQA's judgement of how successful the Centre is in meeting the Approval Criteria in that area. Centres who

successfully demonstrate their ability to consistently meet the criteria will be assigned a low risk rating. Conversely, where Centres do not meet the Approval Criteria, or where action is required to meet criteria, Centres will be assigned either a moderate or high-risk rating, dependent on how severe the non-compliance is deemed to be by the EQA.

The failure to address previously identified actions by the EQA to meet or strengthen compliance with the Approval Criteria may result in an escalation of the risk level assigned and an increase in the level of future monitoring the Centre will receive.

The highest level of risk assigned across the 'risk areas' will determine the overall risk rating assigned to the Centre. OTHM's approach to the monitoring of a Centre is driven by this overall risk rating. The level of risk that is applied to the Centre following a monitoring activity will determine in what timescale the Centre's next routine monitoring activity will take place. Where immediate risk to the integrity of OTHM qualifications or to the interests of learners is identified, the EQA may recommend a Sanction against a Centre. Any Sanctions recommended will be proportionate to the risk identified and range from levels 1 to 5, increasing in severity. The [Sanction Policy](#) should be referred to for further guidance.

Dependent on their level, the application of a Sanction may affect the Centre's registration and certification rights. The application of a Sanction may also trigger additional monitoring for corrective action by the Centre to be reviewed by the EQA.

The scale of OTHM risk ratings, with their corresponding indicative Sanction level and timeframe of next monitoring activity, is detailed below:

Risk Rating	Risk Descriptor	Indicative Sanction Level	Indicative Timeframe of Next Monitoring Activity
Low	Centre successfully meets Approval Criteria and regulatory requirements, or any remedial actions required to meet requirements are minor. The Centre does not pose a risk to OTHM qualifications or to learners.	None to Level 1	6 months
Moderate	Centre does not meet all Approval Criteria and/or regulatory requirements and there are concerns with regards to the risk to learners and/or the integrity of OTHM qualifications. Significant action is required.	Level 2	3 months
High	Centre does not meet Approval Criteria and/or regulatory requirements and there are major concerns with regards to the risk to	Level 3 and above	Immediate

	learners and/or the integrity of OTHM qualifications. Urgent and significant action is required.		
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4.0 Taking action and making adjustments

OTHM requires all Centres to agree to the terms laid out in the Centre Agreement. Section 6.7 of the Centre Agreement details the requirements in relation to malpractice and maladministration and that it is the Centre's responsibility to report such cases to OTHM immediately. Malpractice reported to OTHM by Centres is dealt with by the OTHM's Compliance Team.

At the approval stage Centres are expected to produce and maintain their own internal policies for the identification of malpractice and maladministration, as well as written procedures for reporting and investigating incidents internally. Centres must also develop, manage and maintain their evidence retention policies/procedures in line with OTHM requirements and make all documents available as part of the Annual Compliance Monitoring by OTHM. OTHM's Malpractice and Maladministration policy covers the definition and examples of learner and Centre malpractice, as well as information and contact details should Centres need to report suspected malpractice to OTHM. The Malpractice and Maladministration Policy should be referred to for further guidance.

Where a case of potential malpractice has been identified during IQA and EQA monitoring activities this information will be escalated to the Compliance Team to review the evidence and investigate accordingly.

Authenticity of Learners' work

OTHM recognise that artificially intelligent chatbots, such as ChatGPT and others are new tools being widely available globally. OTHM sets a great deal of importance to student academic integrity stressing that students must be the authors of their own work. Content produced by AI platforms, such as ChatGPT, does not represent the student's own original work so would be considered a form of academic misconduct which if identified must be dealt with by applying the centre's malpractice policy and OTHM must be informed.

Centres must have robust systems in place to ensure that they do all that is possible to identify and minimise opportunities for learner malpractice. Through rigorous assessment and internal quality assurance processes, Centres must take all reasonable steps to ensure that:

- evidence submitted by each learner for assessment is authentic.
- where an assessment is required to be completed under specified conditions, learners complete the assessment under those conditions (other than where any Reasonable Adjustments or Special Consideration require alternative conditions).
- a declaration of authenticity is signed by learners and assessors for each submitted assessment.

- evidence of authenticity is made available to OTHM as part of the External Quality Assurance process. EQAs require Centres to show through their practices that procedures are being followed to ensure the authenticity of candidates' evidence and safeguard integrity of achievement.

EQAs require evidence to be retained to enable all selected assessment and IQA decisions to be scrutinised. EQAs will flag up to OTHM, through their EQA reports, where they feel there are issues with assessment or IQA procedures.

Where issues are identified via the EQA process, OTHM is able to halt the certification process for the whole cohort until the issue is resolved. Issues raised and subsequent actions taken may include:

- **Queries may be raised with the Centre:** once clarification has been received and OTHM is content with the Centre's feedback, certification will go ahead e.g., where mapping of assessment criteria is not sufficiently clear or where the evidence provided for an individual is unusual and a query as to the rationale behind the evidence is required.
- **An investigation of the specific issues identified may be carried out:** OTHM will ask the EQA to review all of the portfolios submitted by the Centre and to make a judgement as to whether or not any of the certificates may be progressed without further action e.g. where it appears that one or more assessment criteria has/have not been met by all/several candidates in the sample and therefore wider investigation is required as to whether or not other candidates in the cohort have also failed to meet the same criterion/these criteria.
- **The Centre may be required to submit additional evidence before certification can be progressed:** this may require candidates to undertake further work e.g., to ensure that all the assessment criteria have been fully met at the correct level.
- **A wider investigation into Centre procedures and practices may be undertaken:** this action will be taken where wider issues have been identified/suspected e.g., where OTHM identifies potential malpractice in the sample of candidate work reviewed and this has generated concerns that need wider investigation. As a result of the break point between Centre assessment and OTHM certification, OTHM has the opportunity to determine whether or not assessment decisions by the Centre can be accepted. OTHM will therefore be able to challenge and change assessment decisions and results submitted by Centres.

5.0 Ongoing review

OTHM is committed to delivering an efficient, responsive, and supportive service to all our Centres and to maintain compliance with all regulatory requirements.

To achieve this, we adopted an internal quality management system which ensures all processes remain fit for purpose. As part of this process, we review the policies and procedures annually and update them where necessary. Review dates are allocated depending upon the type of process and its purpose.

Policies and procedures will be reviewed, and any necessary changes will be made as follows:

- When new legislation, regulation or best practice indicates changes are necessary.
- There is evidence to suggest that the process is not being effectively implemented or it does not adequately control the risks. This would be determined by IQA / EQA evidence / data or through procedural failure and implementing contingency planning.
- Lessons learnt from a malpractice investigation when the evidence suggests changes are required.
- New technologies, equipment or methods of working necessitate a change in procedure.
- Annual Centre Quality Review. OTHM will monitor all approved Centres' activities and performance by completing annual monitoring activities. This will be done by taking a risk-based approach and randomly sampling the approved Centre's evidence. Where necessary we will share best practice ideas with an approved Centre to improve their standards and performance. Where areas of concern are identified we would incorporate this into OTHM's overall process review as above. OTHM will include regular approved Centre surveys in the annual monitoring activities to ensure the approved Centre requirements remain fit for purpose and are achievable by all approved Centres regardless of their size and location.

6.0 Useful contacts

For more information on our qualifications and services visit: www.othm.org.uk

Alternatively, call at: +44(0)20 7118 4243 or email at: qualityassurance@othm.org.uk