

Centre Approval and Monitoring Policy

Document reference	UKSEQ-POL-001
Policy area	Centre Management
Version	0.1 — Draft
Status	In development — not approved for operational use
Policy owner	UKSEQ Quality & Compliance Lead (proposed)
Approval authority	UKSEQ Board (proposed)
Effective date	To be confirmed upon approval
Review frequency	Annually and following material change
Next review	12 months after approval

1. Purpose and scope

This policy establishes the proposed UKSEQ approach to centre approval and monitoring. It applies to UKSEQ directors, employees, contractors, centres and learners as relevant to their roles. It will take effect only when formally approved and implemented. UKSEQ is not currently recognised by Ofqual or Qualifications Wales and does not currently award regulated qualifications.

2. Responsibilities

The Board is accountable for approving the policy and ensuring sufficient resources and independent oversight. The designated Quality & Compliance Lead is responsible for implementation, monitoring and escalation. Centres and authorised personnel must comply with applicable requirements, cooperate with reviews and maintain accurate records. Specific appointments and delegated authorities must be confirmed before the policy takes effect.

3. Approval principles

UKSEQ will approve centres only following a documented, evidence-based decision that the applicant has the resources, governance, competence and controls to deliver the specified qualifications. A portal account or expression of interest is not centre approval.

4. Application and due diligence

The Centre Approval Lead will obtain legal identity, ownership, financial viability information, relevant policies, insurance where appropriate, premises and equipment details, staffing credentials, safeguarding arrangements, assessment and IQA capacity, subcontracting arrangements and declarations of conflicts of interest. Risk indicators and missing evidence will be logged.

5. Review and decision

An appropriately competent reviewer will examine documentary evidence and, where risk warrants, conduct interviews or a site or remote visit. An authorised decision-maker independent of the applicant will approve, approve subject to conditions, defer or reject; reasons, scope, dates and conditions will be recorded.

6. Centre agreement and induction

Before delivery, each centre must sign an agreement defining permitted qualifications and sites, assessment and IQA obligations, records, learner protection, UKSEQ access, fees, complaints, data protection, notification of changes and sanctions. Staff will be inducted into the current qualification specification.

7. Monitoring and risk

Each centre will receive a documented risk rating based on assessment performance, staffing, learner complaints, prior findings, malpractice indicators and changes in operations. EQA sampling and visits will be proportionate to risk; actions have owners and deadlines.

8. Changes, sanctions and withdrawal

Centres must notify material changes promptly. UKSEQ may require improvement plans, restrict registrations or certification, suspend approval or withdraw approval following proportionate review and documented decisions. Learner interests and continuity arrangements must be considered.

9. Appeal and records

Centres may appeal an approval or sanction decision under the appeals procedure. Approval records, monitoring reports, corrective actions and correspondence will be retained under the approved retention schedule.

10. Monitoring, records and review

Compliance will be monitored through management review, sampling, incident analysis and internal audit as appropriate. Records of decisions, exceptions, approvals and corrective actions must be maintained in approved secure systems. This policy will be reviewed annually, and sooner following relevant legal or regulatory change, material incident or identified weakness.

11. Related documents

This policy should be read alongside the UKSEQ policy suite, applicable qualification specifications, approved centre agreements and relevant statutory or regulatory requirements. In any conflict, applicable law and binding regulatory conditions take precedence.

Document control and approval

Prepared for consultation and Board review. Before issue, UKSEQ must confirm named accountable officers, contact routes, delegated decision rights, service standards, implementation evidence and any necessary regulatory cross-references.

Approved by	Pending
Approval date	Pending
Next scheduled review	12 months after approval