



# A user guide to T Level provider approval



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## Introduction

To gain and maintain approval to offer our T Level Technical Qualifications you must meet NCFE's approval criteria. We will review the evidence available in support of the approval criteria on the initial approval review and throughout our annual monitoring and external quality assurance reviews.

We want to ensure that our providers feel supported and confident when delivering our qualifications and this guide offers an explanation for each section of the T Level Provider Approval Report.

There are other supporting documents available on [ncfe.org.uk](https://ncfe.org.uk) in the approval section and on our how to prepare for a moderation review page.

If you need further support please contact us via email [tlevelsupport@ncfe.org.uk](mailto:tlevelsupport@ncfe.org.uk) or call 0191 239 8000.

## The approval process

Following application to become a T Level Provider with us, we will review your application and then assign you an External Quality Assurer (EQA).

Our EQA will then be in touch with the Provider Contact to arrange a mutually convenient time to conduct an approval review. This can be face-to-face or remote. The Provider should be able to agree a date for review within 10 working days of being allocated an EQA. The review should take place within 20 days of initial application.

The Provider Approval Report will be completed by an EQA, and you'll be graded as either yes or no for meeting each criterion.

Each criterion has been profiled as being high (red)/ medium (amber)/ low (green) risk, as identified in this guidance document. Each criterion will be marked as a 'yes' or 'no' within the report based on evidence being presented and whether it satisfies the requirements outlined.

If a 'no' is selected against any high or medium risk criteria this will result in approval being deferred and actions set. Providers will be asked to agree a suitable date for a second approval review to take place once actions have been completed.

If a 'no' is selected against a low-risk criterion, action(s) will be set to be reviewed during the first Annual Monitoring Review (AMR).

Once you have gained approval and registered students, you will be allocated a Quality Reviewer to carry out an Annual Monitoring Review (AMR). This will take place once per session between September – February after gaining approval.

## The approval report

The T Level Approval Report is divided into sections as follows:

- Section 1: Provider Details and Contacts
- Section 2: Management Systems and Administrative Arrangements
- Section 3: Resources
- Section 4: Delivery and Assessment
- Section 5: Action Plan for Provider
- Section 6: Action for Quality Assurer or Head Office
- Section 7: Additional Information Sheet

Within sections 2, 3 and 4, the main subject areas are divided into elements such as 2.1, 2.2 etc. Your EQA will assess each point and grade it as either meeting or not meeting requirements. Actions required to move from a no to a yes on each point will be outlined in section 5 – Action Plan for Provider.

*Please note throughout this document we refer to evidence, (possible and suggested sources). Not all are mandatory, and they aren't definitive lists, the evidence will be reviewed against the criteria and Qualification Specification. We are aware different providers have different terminology/names for documentation.*

## The report sections in detail

Over the following pages we will take a look at each section of the report and explain what it is for and what you need to do.

### Section 1: Provider Details and Contacts

Section 1 of the report holds the Provider details and contacts.

### Section 2: Management Systems and Administrative Arrangements

Criteria	Possible sources of evidence
<b>2.1</b> The Provider's aims, policies and procedures in relation to T Level are supported by senior management and understood by the delivery and assessment teams, all accountabilities are clearly defined	Curriculum development plans Documented quality procedures. Organisational chart
<b>2.2</b> There are procedures in place to ensure effective communication systems between all levels of staff and in all directions (including placements and staff who work remotely) and appropriate time is allocated for team meetings and standardisation activities for all staff involved in the T Level	Staff handbooks Agendas and minutes of team meetings Records of emails
<b>2.3</b> Senior management will allocate appropriate time and resource to support T Level delivery/review	Records/minutes of meetings, briefings and/or updates Schedule of activity for staff involved in the delivery of the T Level

2.4	Systems are in place to monitor and evaluate the effectiveness of all T Level delivery and assessment staff and to make changes when required	Internal audit/self-assessment arrangements (SAR) Evidence of corrective actions taken Evaluation forms/surveys Users charter/customer service statements
2.5	There are documented policies or procedures for the following: <ul style="list-style-type: none"> <li>• Appeals</li> <li>• Provider Contingency and Adverse Effects (to include withdrawal of Provider approval status and protection of the learner interest in the case of such a withdrawal)</li> <li>• Complaints</li> <li>• Conflicts of interest</li> <li>• Equal Opportunities</li> <li>• Data Protection</li> <li>• Risk Assessment and Health and Safety (incl. Public Liability)</li> <li>• Student recruitment, registration and certification</li> <li>• Student support</li> <li>• Malpractice and plagiarism</li> <li>• Safeguarding</li> <li>• Special considerations and reasonable adjustments</li> </ul>	Copies of listed policies and procedures
2.6	The Provider is aware of entry restrictions and will ensure students are recruited and registered appropriately in accordance with TQ specifications	All advertising, promotional activity and materials reflects the T Level being offered. Initial assessments
2.7	All work placement policies and procedures are in place which includes the quality assurance of placements, initial safety check and monitoring of the student's workplace and additional placement procedures	The placement procedure must contain details of study, assessment and support required. Checking and recording of workplace liability and indemnity insurance Safety checks and workplace monitoring Risk assessments Work-place induction Agreements between employers and providers Employer support letters
2.8	There is a process in place to notify us of any changes in relation to the delivery or assessment of the TQ which may affect the Provider's ability to meet our approval criteria eg changes to delivery staff	Documented processes Record of communication with us
2.9	The Provider will securely store accurate, up-to-date student details and assessment records in compliance with data protection rules	Student registration details Student assessment records Evidence files or portfolios Security and access arrangements Assessment outcomes
2.10	The Provider will securely retain assessment records for each student for a minimum period of three years following certification	Documented processes

### Additional criteria applicable to providers seeking approval for the Dental Nursing occupational specialism, which sits within the T Level Technical Qualification in Health

2.11	There is a fitness to practise policy and procedure	
2.12	The industry placement has a work-based supervising registrant in place for each student	
2.13	The provider has a work-based industry placement procedure	
2.14	The provider has a procedure for checking and documenting student vaccinations	

### Section 3: Resources

This section is about resources relating to the delivery of the TQ eg staff and physical. The Provider will need to demonstrate their ability to meet the occupational competence and knowledge criteria and resource requirements relating to the qualification.

Criteria		Possible sources of evidence
3.1	The Provider has full access to the required resources as identified within the specification for delivery of TQ (eg IT equipment/materials/library), and is fully committed to review regularly, maintain agreements/contracts and to replace them as required, and to ensure that students have full access	Observation on QA monitoring/approval review Photographic evidence Overview of provider facilities including resources required for the qualification
3.2	There are sufficient competent and knowledgeable staff involved in the delivery of the TQ to meet the demand	Staff organogram Staff CVs and CPD records together with copies of relevant certificates A record of Assessor/student ratios and time allocation List of qualified staff Outline of roles and responsibilities
3.3	Systems are in place to ensure there is ongoing and appropriate continued professional development (CPD) provision for staff involved in the delivery of the TQ	Copy of staff development plans Records of training undertaken such as CPD records Records of meetings, briefings and/or updates
3.4	Resources for assessment in the workplace in a realistic working environment as specified by the standards setting body/specification are robust and made available	Evidence of placements

## Section 4: Delivery and Assessment

This section is all about assessment. The Provider will need to demonstrate their ability to meet the assessment requirements of the qualification.

Criteria		Possible sources of evidence
4.1	There is a planned programme of delivery available for the T Level which meets our guidelines	Schedule for T Level delivery, teaching plan Scheme of work Assessment plans and student assessment records Records of delivery team meetings
4.2	Students' development needs will be matched against the requirements of the T Level and an agreed individual assessment plan established	Provision for students with particular assessment requirements Initial assessments Individual learning plans (ILPs) Access and fair assessment policy Reasonable Adjustment arrangements Special Consideration policy
4.3	Students are advised of any technical needs for the mode of study and the support they can expect to receive from the Provider	Student enrolment documentation Learning handbook Student review process/guidance Provider strategy
<b>Secure live assessment and administration</b>		
4.4	The Provider will comply fully with our requirements for external assessment as set out for each T Level	Provider declaration
4.5	There is a clearly identified and specific examinations and invigilation policy that meets NCFE and JCQ requirements	Invigilation policy
4.6	Rooms used for external assessments are appropriate and meet NCFE and JCQ requirements	Review rooms Discussions with staff
4.7	Procedures and facilities that meet NCFE and JCQ requirements are in place to ensure the safe storage and distribution/collection of assessment/test papers before and after assessment has taken place	Provider policy/process Copy of JCQ inspection
4.8	There are systems and procedures in place to confirm student identification and to record student attendance during tests	Records of attendance Provider process
4.9	Systems are in place to ensure only authorised members of staff have access to the secure online assessment platform and on-screen test environment	Provider system/process

## Section 5: Action Plan for Provider

This section will address any action points or recommendations that the Quality Assurer has identified from each section of the report. Your Quality Assurer should explain what will appear in this section during feedback session. Please ask about any areas you are unsure of during the visit and when you receive your report. Remember that the Quality Assurer is there to offer help and guidance throughout the whole process, which includes support between visits.

## **Section 6: Action for External Quality Assurer or Head Office**

This area of the report is designed to pass information on to our Head Office such as support required by another team eg Business Development or Customer Support. It also records whether the Provider can be approved to offer T Levels.

## **Section 7: Additional Information Sheet**

This section will be used by your Quality Assurer to record any other information, which does not fall under the previous sections of the report.



## Document information

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NCFE is authorised by the Institute for Apprenticeships and Technical Education to develop and deliver this Technical Qualification.

Document owner: Head of Provider Quality Assurance and Development

## Change History Record

Version	Description of change	Approval	Date of Issue
<b>v7.0</b>	Branding updated. Document information and Change History Record added.		January 2021
<b>v7.1</b>	Rebranding Updated		August 2021
<b>v8.0</b>	Amends to wording and criteria		June 2023
<b>v9.0</b>	Update TQ to T Level Clarify timescale for AMRs		December 2024