

Assessment Principles for Qualifications that Assess Occupational Competence

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1. Introduction

1.1 Skills for Health is the Sector Skills Council (SSC) for the UK health sector.

1.2 This document sets out principles and approaches to the assessment of regulated qualifications not already described by the qualifications regulators in England, Wales and Northern Ireland. This information is intended to support the quality assurance processes of Awarding Organisations that offer qualifications in the sector, and should be read alongside these. It should also be read alongside individual unit assessment requirements.

1.3 These principles will ensure a consistent approach to those elements of assessment which require further interpretation and definition, and support sector confidence.

1.4 These principles apply to qualifications and the units therein that assess occupational competence.¹

1.5 Throughout this document the term *unit* is used for simplicity but this can mean module or any other similar term.

2. Assessment Principles

2.1 Learners must be registered with the Awarding Organisation before formal assessment commences.

2.2 Assessment decisions for competence based units must be made by an occupationally competent assessor primarily using evidence generated in the workplace during the learners normal work activity. Any knowledge evidence integral to these learning outcomes may be generated outside of the work environment.

2.3 Assessment decisions for competence units must be made by an assessor who meets the requirements set out in the qualification's assessment strategy. Where the Awarding Organisation requires that the assessor holds, or is working toward, a formal assessor qualification, that qualification should be the Level 3 Certificate in Assessing Vocational Achievement. Assessors holding the D32/33 or A1 qualifications are

¹ These are qualifications which confirm competence in an occupational role to the standards required and/or confirm the ability to meet 'licence to practice' or other legal requirements made by the relevant sector, professional or industry body



not required to re-qualify. Where an Awarding Organisation does not expect the assessor to hold or be working toward a formal qualification we would expect that Awarding Organisation to ensure that the assessor meets the same standards of assessment practice as set out in the Learning and Development National Occupational Standard 09 Assess learner achievement.

2.4 Competence based units **must** include direct observation² in the workplace as the primary source of evidence.

In some instances, direct observation may take place with the assessor being remote from the learner. This **must** be defined in the unit assessment strategy and **must** be agreed with Skills for Health.

A risk assessment must be conducted and documented prior to the assessment commencing to ensure that the privacy, dignity or confidentiality of any individual will not be compromised by the use of remote technologies.

2.5 Simulation may only be utilised as an assessment method for learning outcomes that start with 'be able to' where this is specified in the assessment requirements of the unit. The use of simulation should be restricted to obtaining evidence where the evidence cannot be generated through normal work activity. Where this may be the case the use of simulation in the unit assessment strategy will be agreed with Skills for Health.

2.6 Expert witnesses can be used for direct observation where they have occupational expertise for specialist areas or the observation is of a particularly sensitive nature. The use of expert witnesses should be determined and agreed by the assessor.

2.7 Assessment decisions for knowledge only units must be made by an assessor qualified to make the assessment decisions as defined in the unit assessment strategy.

3. Internal Quality Assurance

3.1 Internal quality assurance is key to ensuring that the assessment of evidence for units is of a consistent and appropriate quality. Those carrying out internal quality assurance must be occupationally knowledgeable in the area they are assuring and be qualified to make quality assurance decisions.

3.2 Skills for Health would expect that where the Awarding Organisation requires those responsible for internal quality assurance to hold formal internal quality assurance qualifications that these would be the Level 4 Award in the Internal Quality Assurance of Assessment Processes and Practice or the Level 4 Certificate in Leading the Internal Quality Assurance of Assessment Processes and Practice, as appropriate depending on the role of the individual. Those responsible for internal quality assurance holding the D34 or V1 qualifications are not required to re-qualify. Where an Awarding Organisation does not expect those responsible for internal quality assurance to hold or be working toward a formal internal quality assurance qualification we would expect that Awarding Organisation to ensure that those responsible for internal

² Direct observation will typically involve the assessor being in the workplace with the learner.



quality assurance meet the standard of practice set out in the Learning and Development National Occupational Standard 11 Internally monitor and maintain the quality of assessment.

4. Definitions

4.1 Occupationally competent:

This means that each assessor must be capable of carrying out the full requirements within the competence unit/s they are assessing. Occupational competence must be at unit level which might mean different assessors across a whole qualification. Being occupationally competent means they are also occupationally knowledgeable. This occupational competence should be maintained through clearly demonstrable continuing learning and professional development. This can be demonstrated through current statutory professional registration.

4.2 Occupationally knowledgeable:

This means that each assessor should possess relevant knowledge and understanding, and be able to assess this in units designed to test specific knowledge and understanding, or in units where knowledge and understanding are components of competency. This occupational knowledge should be maintained through clearly demonstrable continuing learning and professional development.

4.3 Qualified to make assessment decisions:

This means that each assessor must hold a relevant qualification or be assessing to the standard specified in the unit/qualification assessment strategy.

4.4 Qualified to make quality assurance decisions:

Awarding Organisations will determine what will qualify those undertaking internal quality assurance to make decisions about that quality assurance.

4.5 Expert witness:

An expert witness must:

- have a working knowledge of the qualification units on which their expertise is based;
- be occupationally competent in their area of expertise;
- have EITHER a qualification in assessment of workplace performance OR a professional work role which involves evaluating the everyday practice of staff.

