Assessment Procedures

Assessment delivery, security, learner evidence, marking, feedback, verification, results approval, appeals and certification across QQI, PHECC, IOSH, IHF and CPL Institute certified courses

Document Control

Document Type	Policy and Procedure	Document Number	PL 02
	1.1		14/08/2026
Operational Owner	Training Manager / Course Administration Team	**Review Date**	14/08/2027
	Quality and Compliance Manager		Associate Director

Record of Reviews / Amendments

Date	Version	Status	Summary of Amendment
10/07/2026	1.0	Issued	First issue of consolidated assessment procedures based on QQI Quality Assuring Assessment guidance, CPL QMS, QQI SOPs, and QMS assessment section and the Blended and Fully Online Learning Guidelines.
14/08/2026	1.1	Draft for Review	Revised to apply across QQI, PHECC, IOSH, IHF and CPL Institute certified assessment activity. Added accreditation-body controls, clarified use of PHECC mandated assessment exams and skills demonstrations, IOSH approved assessment materials, and internally developed CPL certified assessments with Programme Review Board notification rather than formal board approval.

Table of Contents

Document Control 1

Record of Reviews / Amendments 1

1. Purpose 4

2. Scope 4

3. Source Guidance and Related Documents 5

4. Assessment Policy Statement 5

5. Accreditation Body Alignment and Assessment Material Control 6

6. Roles and Responsibilities 6

7. Assessment Process Overview 7

8. Assessment Strategy and Assessment Planning for Delivery 8

8.1 Assessment strategy controls 8

8.2 Delivery-mode considerations 9

8.3 Accreditation-specific assessment planning controls 9

9. Assessment Information to Learners 9

10. Assessment Security 10

10.1 General security controls 10

10.2 Assessment material security matrix 10

11. Blended, Fully Online and E-Assessment Controls 11

11.1 Learner identity verification 11

11.2 Online assessment controls 11

11.3 Technical support and learner support 12

12. Reasonable Accommodation and Inclusive Assessment 12

12.1 Examples of reasonable accommodation 12

12.2 Procedure 12

13. Academic Integrity and Learner Declaration 13

13.1 Learner declaration 13

13.2 Use of AI 13

13.3 Suspected academic misconduct 13

14. Assessment Deadlines, Extensions and Compassionate Consideration 13

15. Assessment Conduct and Evidence Submission 14

16. Assessment Techniques in Use 15

17. Marking, Grading and Feedback 15
17.1 Marking rules 15
17.2 Feedback 16
17.3 Grading and result outcomes 16
18. Verification, Authentication and Quality Checks 16
18.1 QQI internal verification and external authentication 16
18.2 PHECC, IOSH, IHF and CPL certified checks 17
19. Results Approval, Certification and Escalation 17
20. Learner Results, Appeals, Rechecks and Repeats 18
21. Records, Retention and Data Protection 18
22. Monitoring, Analysis and Continuous Improvement 19
23. Non-Conformance, Assessment Incidents and Escalation 19
24. Procedure Review 20
Appendix A - Assessment Readiness Key Steps 20
Appendix B - Assessment Security Key Steps 20
Appendix C - Key Definitions and Abbreviations 21
References 21

1. Purpose

The purpose of this document is to define the CPL Institute procedures for managing assessment after assessment material has been approved for use. It explains how assessment is planned for delivery, communicated to learners, conducted securely, submitted or completed or assessed, checked, approved, appealed and certified across QQI, PHECC, IOSH, IHF and CPL Institute certified courses.

This procedure applies to the operational assessment process. It does not replace the specific assessment rules, examination papers, skills demonstration requirements, marking criteria, certification rules or quality assurance requirements of any accreditation body. Where an accreditation body requirement is stricter or more specific, that requirement must be followed.

For QQI programmes, assessment development, assessment strategy approval and formal changes to approved assessment instruments are controlled through the Assessment Development, Strategy and Approval Policy. For PHECC, IOSH and IHF courses, the mandated or approved assessment materials and procedures of the accreditation body must be used. For CPL Institute certified courses, assessment may be internally developed and approved operationally by the Training Manager, with material updates advised to the Programme Review Board as part of routine course review.

2. Scope

This procedure applies to assessment activity delivered or administered by the CPL Institute across in-person, blended synchronous, blended asynchronous, eLearning-supported and fully online synchronous delivery. It applies to all assessment administration, learner evidence, marking records, feedback records, reasonable accommodation records, academic integrity records, verification, authentication where applicable, results approval, appeals and certification.

- QQI Level 4 to Level 6 programmes and awards delivered by the CPL Institute.
- PHECC and IHF courses, including mandated examinations, skills demonstrations, practical assessment records and certification evidence.
- IOSH approved courses, including assessment activity using IOSH approved course packs, examination papers, assessment materials and certification records.
- CPL Institute certified courses where assessment is developed internally and quality assured through the QMS, course monitoring and programme review processes.
- All assessment techniques in use, including assignments, projects, portfolios, learner records, skills demonstrations, examinations, online assessment, practical checklists and internally developed competence checks.
- All staff, instructors, assessors, administrators, internal verifiers, external authenticators, monitors and governance groups involved in assessment.

3. Source Guidance and Related Documents

Reference	Use in this procedure
QQI Quality Assuring Assessment Interim Guidelines for Providers 2025	Primary reference for QQI assessment principles, learner evidence, assessment security, reasonable accommodation, authentication, results approval, appeals and certification.
QQI Interim Guidelines for External Authenticators 2025	Reference for QQI external authentication, sampling, moderation, reporting and EA conduct.
PHECC Education and Training Standards, assessment material and Quality Review Framework	Reference for PHECC approved course delivery, mandated examinations, skills demonstrations, instructor/faculty requirements, certification records and quality improvement expectations.
IOSH course approval, trainer and assessment requirements	Reference for IOSH approved trainer status, approved course materials, assessment conduct and certification records.
IHF / AHA / PHECC aligned course requirements	Reference for resuscitation training, skills assessment, equipment, instructor status and certification requirements.
The CPL Institute Quality Management System Manual	Internal source for assessment policy, learner information, assessment security, verification, result approval, certification, academic integrity, reasonable accommodation and monitoring.
PL 01 QQI Assessment Development, Strategy and Approval Policy	Controls assessment development and approval for QQI validated assessment material and changes.
PL 03 Assessment Records and Secure Storage Policy	Controls retention, SharePoint, ARLO, Airtable, access control and evidence security.
PL 05 Course Monitoring, Programme Review and Quality Improvement Policy	Controls course monitoring, assessment trend review, QIP actions and Programme Review Board reporting.
Academic Integrity and Assessment Malpractice Policy	Controls authorship, AI use, plagiarism, assessment security breaches and misconduct investigations.

4. Assessment Policy Statement

The CPL Institute is responsible for ensuring that assessment is fair, transparent, secure, valid, reliable and consistent across all accredited and internally certified provision. Assessment decisions must be made only against the relevant approved or mandated assessment criteria for the course and must not be influenced by commercial, operational or client pressure.

- Validity: assessment must measure the intended learning outcomes, course outcomes, practical competence or certification requirements for the course.
- Reliability: assessment conditions, evidence handling and marking must support consistent decisions across assessors, cohorts, delivery modes and time.
- Fairness: learners must have equitable opportunity to demonstrate achievement and must be treated consistently.
- Inclusivity: reasonable accommodation must be considered where required without lowering the standard being assessed.
- Transparency: learners must receive clear information on assessment requirements, deadlines, grading or pass criteria, feedback, results and appeals.

- Security: assessment materials, examination papers, learner evidence, skills records, online links, marking records and results must be protected from unauthorised access or alteration.
- Accreditation body compliance: assessment must follow the relevant requirements of QQI, PHECC, IOSH, IHF or CPL Institute certification.
- Continuous improvement: assessment data, incidents, feedback and monitoring outcomes must inform course review and QIP actions.

5. Accreditation Body Alignment and Assessment Material Control

This procedure is a common organisational assessment procedure. It must be applied with reference to the relevant accreditation body for each course. The source and control of assessment materials differ by accreditation body.

Provision	Assessment material and approval route	Key CPL Institute control
QQI	Assessment strategies, briefs, marking schemes and assessment instruments must align with validated programme requirements and approved assessment development/change controls.	Use only current approved assessment versions; retain learner declarations; complete marking, IV, EA, RAP, appeals and QBS certification processes.
PHECC	PHECC mandated or approved assessment process, examinations, skills demonstrations, checklists and certification rules must be used. CPL Institute must not amend PHECC assessment materials unless permitted by PHECC.	Use approved PHECC exams and skills demonstration processes; ensure correct instructor/faculty status, ratios, equipment, supervised assessment and secure records.
IOSH	IOSH assessments and course materials are supplied, mandated or approved by IOSH for the approved course. Trainers must use the approved IOSH materials and assessment instructions.	Ensure approved IOSH trainer status, current IOSH course materials, controlled assessment conduct and accurate certification records.
IHF	IHF / AHA / PHECC-aligned materials and practical skills assessment requirements must be followed for approved resuscitation training.	Use approved materials, qualified instructors, required equipment, skills assessment records and certification controls.
CPL Institute certified courses	Assessment and competence checks are developed internally by the CPL Institute. There is no requirement for formal approval through a board before use unless the course has a separate client or regulatory requirement.	Training Manager approves operational use; materials are version controlled; updates are advised to the Programme Review Board for information and quality monitoring.

6. Roles and Responsibilities

Role	Responsibility
Associate Director	Overall accountability for governance, resources and separation of quality decisions from commercial considerations. Ensures adequate resources for secure and reliable assessment across all accreditation bodies and delivery modes.
Quality and Compliance Manager	Owns this procedure, monitors compliance, reviews trends, records corrective actions, supports assessment security and ensures alignment with QQI, PHECC, IOSH, IHF, CPL certification and QMS requirements.

Training Manager	Ensures assessment delivery is planned, resourced and implemented. Oversees assessment issues, appeals, academic integrity concerns, learner support decisions, instructor/assessor competence and accreditation-body assessment compliance.
Training Administrator	Creates and maintains ARLO course records, SharePoint course folders, Airtable assessment records, learner submission logs, evidence links, certification records and access controls.
Instructor / Assessor / Trainer	Issues assessment instructions, supports learners, conducts formative assessment, supervises assessment where required, marks or assesses evidence using approved criteria and reports concerns.
Internal Verifier	For QQI, checks evidence availability, procedure application, calculations, transcription, grade bands, reasonable accommodations, academic integrity records and readiness for EA/RAP.
External Authenticator	For QQI, selects sample, moderates learner evidence, reviews standards, confirms fairness and consistency and records recommended grade changes or actions.
Monitor / Course Reviewer	Checks implementation of training, assessment, equipment, records and course delivery controls during course monitoring across QQI, PHECC, IOSH, IHF and CPL courses.
Results Approval Panel / Examination Board	For QQI, reviews IV and EA findings, approves or withholds results, records actions and confirms results for certification. For other provision, significant assessment issues may be referred for review or information.
Programme Review Board	Reviews assessment trends, course monitoring outcomes, learner and instructor feedback, incidents, complaints, appeals and updates to CPL certified assessment materials.
Learner	Completes assessment honestly, follows submission and assessment requirements, confirms authorship where required, requests support or reasonable accommodation where required, and uses the appeals process appropriately.

7. Assessment Process Overview

The CPL Institute operates a controlled assessment process, adapted to the accreditation body requirements of each course. QQI assessment follows the formal stages of assessment, authentication, results approval, appeals and certification. PHECC, IOSH and IHF assessment follows the relevant awarding or accreditation body requirements. CPL Institute certified course assessment follows internally controlled assessment, course monitoring and certification processes.

Stage	CPL Institute activity	Record / output
1. Assessment planning for delivery	Confirm assessment schedule, approved or mandated assessment material, delivery mode, learner support arrangements, submission route and security controls.	Course file, assessment schedule, learner instructions, SharePoint/Airtable setup.
2. Learner information	Inform learners of assessment requirements, deadlines, criteria, academic integrity, reasonable accommodation, submission route, feedback, results and appeals.	Learner handbook, course induction, assessment brief, email/Airtable/SharePoint records.

3. Assessment conduct and submission	Learners complete assessment. Evidence is submitted, logged, stored and protected. Practical or online assessments are controlled in line with course requirements.	Learner evidence, declaration where required, submission log, exam/proctoring record, skills checklist.
4. Marking / assessment and feedback	Assessor or trainer marks, evaluates or confirms competence using approved criteria, checklists or assessment rules.	Marking sheet, assessment checklist, feedback record, provisional result or competence record.
5. Verification / quality check	QQI IV checks procedure application and result accuracy. PHECC, IOSH, IHF and CPL certified courses are checked through course records, monitoring and certification controls.	IV report, course monitoring record, corrections/action log.
6. External authentication where required	QQI EA selects samples and moderates learner evidence. Other accreditation body external checks occur only where required by that body.	EA sampling log, EA report, external review record.
7. Results approval / certification sign-off	QQI results are approved by RAP/Examination Board. Other course results are signed off in line with accreditation-body or CPL certification process.	RAP minutes, approved results, certification record, action log.
8. Results, appeals and certification	Results issued, appeal window applied where relevant and certification processed through the required system.	Result communication, appeal records, QBS/PHECC/IOSH/IHF/CPL certification record, ARLO update.
9. Review and improvement	Assessment trends, feedback, monitoring outcomes, incidents and accreditation-body findings are reviewed for improvement.	QIP, internal audit, programme review, corrective action record.

8. Assessment Strategy and Assessment Planning for Delivery

Each course must operate in line with the approved, validated, mandated or internally controlled assessment requirements for that course. The purpose of assessment planning for delivery is to ensure that assessment is implemented correctly for the specific course instance and delivery mode.

8.1 Assessment strategy controls

- QQI assessment must align with the validated programme, MIPLOs/MIMLOs, assessment technique, weighting, grading and approved assessment strategy.
- PHECC assessment must follow the PHECC mandated examination and skills demonstration process for the course being delivered.
- IOSH assessment must use the current IOSH approved course materials and assessment process.
- IHF assessment must follow IHF/AHA/PHECC-aligned course and skills assessment requirements.
- CPL Institute certified assessments must be developed and controlled internally, with updates version controlled and advised to the Programme Review Board.
- Assessment timing must be realistic for the course duration and mode of delivery.

- Any deviation from approved or mandated assessment requirements must be referred to the Training Manager and Quality and Compliance Manager before implementation.

8.2 Delivery-mode considerations

Mode	Assessment planning control
In-person	Confirm venue, equipment, assessment papers, learner identification controls, supervision, practical assessment arrangements, submission method and secure return of evidence.
Blended synchronous	Confirm online attendance, Zoom/Teams access, participation records, support channels, identity checks and how assessment evidence will be submitted.
Blended asynchronous	Confirm eLearning platform access, learner progress tracking, completion requirements, learner support, deadline controls and integration with any in-person or synchronous assessment.
Fully online synchronous	Confirm learner identity verification, secure online assessment link, camera/proctoring requirements where applicable, technical support, contingency plan and submission to Airtable/approved system.

8.3 Accreditation-specific assessment planning controls

Accreditation body / provision	Planning control
QQI	Check validated assessment strategy, assessment brief, marking scheme, learner declaration, submission deadline, reasonable accommodation arrangements, IV, EA and RAP timetable.
PHECC	Check approved PHECC course materials, examinations, skills demonstration requirements, instructor/faculty approval, ratios, equipment, manikins/AEDs where relevant, CPGs and assessment record forms.
IOSH	Check approved IOSH course pack, trainer status, assessment instructions, pass requirements and certification process.
IHF	Check approved IHF/AHA/PHECC materials, instructor status, equipment, skills practice and skills assessment record requirements.
CPL Institute certified	Check internally approved lesson plan, assessment or competence check, version control, learner instructions, marking or pass criteria and certification record.

9. Assessment Information to Learners

Learners must receive clear assessment information before assessment activity takes place. The instructor and administrator are responsible for ensuring information is clear, accessible and available in advance.

- Award or certification title, accreditation body, course code or reference where applicable.
- Assessment task, evidence requirements, practical skills requirements and submission format.
- Assessment conditions, supervision requirements, learner identity requirements and use of approved materials.
- Deadline, late submission, extension and compassionate consideration process where applicable.
- Marking criteria, pass requirements, grading or competence decision rules.
- Reasonable accommodation process and how to request support.
- Academic integrity, learner declaration and rules on AI use where relevant.

- Assessment security requirements, including examination conditions, secure links, camera-on requirement or secure return of papers where applicable.
- Feedback, results, appeal process and expected certification timeline.
- Technical requirements and support contact for blended or online assessment.

Where assessment takes place online, learners must also be informed of the digital tools used, login requirements, internet/camera/audio requirements, support route, expected assessment conditions, data protection information and what to do if a technical issue occurs.

10. Assessment Security

Assessment security protects the validity and reliability of assessment. Security controls apply to assessment materials, mandated examinations, learner evidence, identity verification, access permissions, online links, marking records, skills records, results records and all assessment-related data.

10.1 General security controls

- Assessment master copies and mandated materials are stored in restricted SharePoint locations with role-based access.
- Only current approved, mandated or internally controlled versions of briefs, exam papers, marking schemes, rubrics and practical checklists may be used.
- PHECC and IOSH assessment materials must not be amended unless the accreditation body permits the change.
- Obsolete assessment versions must be removed from active course folders or clearly marked as obsolete.
- Hard-copy assessment material must be stored securely with designated access only.
- Learner evidence must be logged on receipt and stored in the ARLO course-code folder or approved Airtable/SharePoint record.
- Learner evidence must not be sent to unauthorised personal accounts or stored on unapproved personal devices.
- Access to learner evidence for IV, EA, monitoring or review must be granted for a defined purpose and removed when the activity is complete.
- Assessment results must not be released until the relevant approval or certification sign-off has been completed.
- Any suspected breach of assessment security must be reported immediately to the Training Manager and Quality and Compliance Manager.

10.2 Assessment material security matrix

Assessment asset	Security control	Owner
QQI assessment briefs, rubrics and marking schemes	Controlled SharePoint version. Current version linked to the course folder. Obsolete versions removed from active use.	Training Manager / Administrator
PHECC assessment papers and skills documents	Use mandated/approved PHECC materials. Store securely before and after use. Complete required practical skills records and return/store as required.	Training Manager / Instructor / Administrator

IOSH assessment materials	Use approved IOSH course pack and assessment materials only. Control access and store assessment records securely.	Training Manager / IOSH Trainer / Administrator
CPL certified assessment materials	Internally controlled version held on SharePoint. Updates approved operationally by Training Manager and advised to Programme Review Board.	Training Manager
Online examination links	Secure Airtable or approved platform link issued at the required assessment time. Link limited to learner or cohort and submissions returned to approved database.	Administrator / Instructor
Learner assignments and portfolios	Logged on receipt. Stored in restricted SharePoint course folder by ARLO course code. Learner declarations retained where required.	Administrator
Skills assessment videos or checklists	Stored in restricted SharePoint folder. Learner identity, file naming, practical assessment checklist and access control applied.	Administrator / Instructor
Marking sheets and feedback	Completed using approved templates or mandated records. Stored with learner evidence or Airtable record.	Assessor / Administrator
Provisional results and certification records	Stored securely. Restricted to authorised staff before approval or certification sign-off.	Administrator / Training Manager
IV, EA, monitoring and review reports	Stored in SharePoint / Airtable quality records. Access restricted to quality and certification process.	Quality Manager / Administrator

11. Blended, Fully Online and E-Assessment Controls

Blended and online assessment must be operated so that assessment remains valid, reliable, fair and secure. The use of online tools does not reduce the requirement to evidence learner identity, control assessment conditions and protect learner evidence.

11.1 Learner identity verification

- Learners must access online systems using individual login credentials where available.
- For live online assessment, the instructor may verify learner identity at the start of the assessment session using the approved method for the course.
- Where required, learners must keep cameras on during live proctored online assessment.
- Secure assessment links must be issued to the individual or cohort at the assessment time and must not be made available earlier than required.
- Where assessment is submitted through Airtable or another approved database, the submission record must evidence date, time, learner identity reference and assessment record.

11.2 Online assessment controls

Risk	Control
Impersonation	Individual login, identity check, camera-on requirement where applicable and learner declaration.
Unauthorised assistance	Live proctoring where required, clear assessment rules, camera monitoring and academic integrity declaration.
Premature access to assessment	Secure link released only at assessment time. Restricted permissions and no public links.

Technical disruption	Learner support route, contingency instructions, record of incident and decision by Training Manager where assessment is affected.
Data loss or incorrect submission	Submission to approved database, confirmation of receipt and restricted access backup/storage.
Unequal access	Pre-course information on technical requirements, support route and reasonable accommodation process.
Unreliable evidence	Authorship declaration, plagiarism/AI checks where appropriate, comparison with learner performance and escalation of concerns.

11.3 Technical support and learner support

For blended and fully online assessment, the administrator and instructor must ensure learners know how to access the platform, submit evidence and request support. Technical issues that may affect assessment validity must be recorded and reviewed by the Training Manager before results are finalised.

12. Reasonable Accommodation and Inclusive Assessment

The CPL Institute will make reasonable accommodations where required so that learners have fair opportunity to demonstrate the required learning outcomes, practical skills or competence requirements. Reasonable accommodation changes the assessment method, format or condition but must not lower the standard being assessed or conflict with accreditation body rules.

12.1 Examples of reasonable accommodation

- Additional time where appropriate.
- Modified assessment format, such as enlarged text or accessible electronic document.
- Use of assistive technology.
- Reader, scribe or practical assistant where appropriate and approved.
- Rest breaks or adjusted scheduling.
- Alternative but equivalent method of presenting evidence where the same outcome is assessed.
- Additional technical support or platform orientation for online assessment where required.

12.2 Procedure

Step	Action
1	Learner identifies a support need during booking, induction or before assessment. Staff may also identify a potential need and refer the learner to the Training Manager.
2	Training Manager reviews the request with the Quality Manager where required. Evidence may be requested where appropriate and proportionate.
3	Accreditation body constraints are checked, especially where a mandated practical assessment, examination or skills demonstration is involved.
4	Accommodation is agreed, recorded and communicated only to staff who need the information to deliver or assess fairly.
5	The accommodation must not alter the learning outcomes, assessment criteria, skills standard or grading/pass standard.
6	Assessment is conducted and the accommodation record is retained for IV, EA, monitoring or certification review where relevant.

13. Academic Integrity and Learner Declaration

Academic integrity is required from learners, assessors, administrators and all staff involved in assessment. Academic misconduct may include plagiarism, copying, collusion, contract cheating, impersonation, fabrication of evidence, unauthorised assistance, unauthorised AI use, practical skills misrepresentation or any attempt to gain unfair advantage.

13.1 Learner declaration

QQI learner assessment submissions completed outside supervised assessment conditions must include a learner declaration or authorship statement. This may be a wet signature, electronic signature or mandatory tick-box confirmation in Airtable or another approved submission system. For other courses, a learner declaration is used where required by the course design, assessment type, accreditation body or internal risk assessment.

I confirm this submission is my own work. I have not copied, used unauthorised help, submitted another person's work, or used AI unless allowed and acknowledged. I understand misconduct may be investigated.

13.2 Use of AI

- AI use is not permitted unless the assessment brief expressly allows it.
- Where AI use is allowed, the learner must acknowledge how it was used and must still demonstrate their own learning achievement.
- Unauthorised AI use or unattributed AI-generated content may be treated as academic misconduct.
- Assessment briefs must state the permitted or prohibited use of AI clearly where written learner evidence is submitted.

13.3 Suspected academic misconduct

Step	Action
1	Assessor, trainer, administrator, IV, EA or monitor records the concern and secures relevant evidence.
2	Training Manager and Quality Manager are notified.
3	Affected result may be withheld from approval or certification while the matter is reviewed.
4	Learner is informed of the concern and given an opportunity to respond, where appropriate.
5	Outcome is recorded and considered by RAP/Examination Board where it affects QQI results or by the Training Manager where it affects other certification.
6	Where the issue affects a cohort, sample, assessment instrument or delivery mode, additional review or sample extension may be required.

14. Assessment Deadlines, Extensions and Compassionate Consideration

Assessment deadlines must be applied fairly and consistently. Learners are expected to submit evidence by the stated deadline. Extensions, deferrals or compassionate consideration may be approved where there are valid circumstances and where this is permitted by the relevant accreditation body or course rules.

- Deadline and submission requirements must be issued to learners in advance.
- Extension requests must be submitted before the deadline where possible and must be recorded.

- The course administrator decides whether to approve an extension, deferral or compassionate consideration or escalate to the Training Manager.
- All actions are recorded in Airtable or the relevant course record.
- Approved extension records must be available for IV, EA, monitoring and RAP where relevant.
- Accepted evidence is marked against the standard. Extension approval does not reduce the assessment standard.
- Where an accreditation body does not permit an extension, deferral or repeat in the requested way, the accreditation body rule applies.
- Repeated or inconsistent extension patterns must be monitored as a quality risk.

15. Assessment Conduct and Evidence Submission

Learner evidence must be submitted, received, tracked and stored in a way that protects confidentiality, integrity and traceability. Each assessment record must be traceable to the learner, course, assessor or trainer, ARLO course code, accreditation body, award/module/course reference, submission or assessment date and certification period where applicable.

Evidence type	Submission / storage control
Assignments, projects and learner records	Submitted through approved route, either email, Airtable link or approved platform. Stored in the ARLO course-code SharePoint folder or approved Airtable record. Learner declaration required where applicable.
Portfolios / collection of work	Stored as one learner evidence set, with clear learner ID/initials, assessment technique and assessment date.
QQI examinations	Controlled through secure approved paper/link, supervised or proctored conditions, recorded result and secure return/storage.
PHECC examinations	PHECC mandated examination process and materials used. Papers, answer sheets and records are secured, completed and retained or returned as required.
PHECC / IHF skills demonstrations	Observed and assessed using approved practical skills criteria, checklist or mandated process. Equipment and safety requirements must be met.
IOSH assessments	Conducted by approved trainer using current IOSH approved materials and assessment instructions. Records retained for certification and audit.
CPL certified assessments	Internally developed assessment, checklist or competence record used. Evidence is stored with the course record and updates are version controlled.
Online assessments	Secure link issued, learner identity verified, camera/proctoring applied where required and submission recorded automatically to approved database.
Feedback and marking records	Stored with learner evidence or in approved Airtable records. Must be available for IV, EA, monitoring or audit where relevant.
Reasonable accommodation, extension and compassionate consideration records	Stored securely with restricted access and referenced in IV/EA/monitoring where relevant.

16. Assessment Techniques in Use

Assessment techniques must be those approved, mandated or internally controlled for the course. Assessors and trainers must not change the assessment technique, weighting, practical requirement, pass requirement or criteria independently.

Technique	Operational requirements
Assignment	Brief, criteria, deadline, submission route, learner declaration and marking scheme must be available.
Project	Individual contribution and evidence requirements must be clear, especially where collaboration or workplace evidence is involved.
Portfolio / collection of work	The expected range and format of evidence must be clear. Evidence should be organised and mapped to the required outcomes.
Skills demonstration	Assessment conditions, equipment, observation criteria, safety requirements and recording requirements must be stated. PHECC/IHF requirements must be followed where applicable.
Examination	Papers/links must be secure. Conditions must be controlled. Marking scheme, pass requirement and version must be recorded.
Learner record	Learners must be told what activities, reflections, logs or evidence are required and how they will be assessed.
Online/e-assessment	Identity, access, supervision/proctoring, timing, submission and contingency arrangements must be recorded.
CPL competence check	Checklist, pass criteria or practical observation requirements must be documented and version controlled.

17. Marking, Grading and Feedback

Assessors, instructors and trainers must assess learner evidence using the approved or mandated criteria, rubric, marking scheme, practical skills checklist or pass requirement. Assessment decisions must be evidence-based and criterion-referenced. Feedback should support learning and explain performance against criteria where feedback is part of the course process.

17.1 Marking rules

- Use only approved, mandated or internally controlled marking schemes, rubrics, criteria, skills checklists or pass requirements.
- Record marks, competence decisions or pass/fail outcomes clearly and accurately.
- For QQI, check that percentage marks and grade bands match QQI grading requirements.
- For PHECC, IOSH and IHF, apply the pass, assessment and certification rules of the relevant accreditation body.
- For CPL certified courses, apply the internally documented pass criteria or competence standard.
- Record feedback that is constructive and linked to learning outcomes, criteria or competence requirements where applicable.
- Report suspected academic misconduct, unreliable evidence, assessment security concerns or practical safety issues immediately.
- Return all marked evidence and records securely to the administrator.

17.2 Feedback

Feedback may be given in class, by email, through Airtable or through another approved method. For QQI awards, feedback is normally issued at the provisional result stage. For PHECC, IOSH, IHF and CPL certified courses, feedback is provided in line with the course process and any accreditation body rules. An informal feedback discussion is distinct from a formal appeal or recheck.

17.3 Grading and result outcomes

Provision	Outcome / grading control
QQI Levels 4-6	Pass 50% to 64%; Merit 65% to 79%; Distinction 80% to 100%; Unsuccessful less than 50% or failure to demonstrate required learning outcomes.
PHECC	Outcome and pass requirements are determined by the PHECC assessment process, examination and skills demonstration rules for the course.
IOSH	Outcome and pass requirements are determined by IOSH assessment rules for the approved course.
IHF	Outcome and skills requirements are determined by IHF/AHA/PHECC-aligned course rules.
CPL Institute certified	Outcome is recorded as pass/complete/competent or other documented course result as defined in the course material.

18. Verification, Authentication and Quality Checks

The type of post-assessment quality check depends on the accreditation body. QQI requires internal verification, external authentication and formal results approval before certification. PHECC, IOSH, IHF and CPL certified courses are checked through accreditation body requirements, course records, certification controls, course monitoring and QMS review.

18.1 QQI internal verification and external authentication

- QQI submission dates are set six times per year, normally on the 12th of every second month starting in February.
- Internal verification should be completed two weeks in advance of the QQI submission date.
- All learners' QQI assessments are internally verified as part of CPL practice.
- The IV report is completed on Airtable and discrepancies are notified to the Training Manager.
- The External Authenticator selects the sample, applying the CPL Institute sampling strategy.
- EA findings, recommended grade changes, good practice and actions are recorded in the EA report and reviewed by RAP.
- Where an EA recommends a grade change, the Training Manager and Quality and Compliance Manager must review the rationale, learner evidence, marking scheme, original assessor notes and potential cohort impact before RAP approval. A second marking by another competent assessor is required where the issue relates to disputed professional judgement, inconsistent marking, unclear evidence, potential cohort-wide impact or assessor misunderstanding of criteria.

18.2 PHECC, IOSH, IHF and CPL certified checks

Provision	Quality check
PHECC	Course records, attendance, examination records, practical skills records, instructor/faculty status, equipment and certification records are checked. Monitoring includes practical assessment and equipment readiness where applicable.
IOSH	Trainer status, course materials, assessment records, pass requirements and certification records are checked against IOSH course requirements.
IHF	Instructor status, equipment, practical skills assessment records and certification records are checked against IHF/AHA/PHECC-aligned requirements.
CPL Institute certified	Assessment records, competence checks, learner feedback, instructor feedback and certification records are checked through course monitoring and operational review. Updates are reported to Programme Review Board for information and trend review.

19. Results Approval, Certification and Escalation

Results must be approved or signed off through the route required for the course before release to learners or certification. QQI results must be quality assured and approved before release to learners or submission to QQI for certification. PHECC, IOSH, IHF and CPL Institute certified results are processed through the relevant certification route after required course and assessment checks are complete.

Provision	Approval / certification route
QQI	Results Approval Panel / Examination Board reviews provisional results, IV report, EA report, grade changes, appeals, issues and corrective actions before QBS submission.
PHECC	Certification proceeds when attendance, mandated assessment records, examinations, skills demonstrations, instructor/faculty requirements and records are complete and compliant. Significant issues are escalated to Training Manager and Quality Manager.
IOSH	Certification proceeds when approved trainer confirms assessment completion and records meet IOSH course requirements. Significant issues are escalated before certification.
IHF	Certification proceeds when instructor status, attendance, skills assessment and course records are complete.
CPL Institute certified	Certification proceeds when attendance, assessment or competence record and course records are complete. Formal board approval is not required, but changes and trends are advised to Programme Review Board.

- The panel or authorised manager may approve results, approve subject to actions, withhold results, request further review or refer issues for corrective action.
- Assessment results must be withheld where assessment validity, learner identity, academic integrity, practical competence or assessment security cannot be assured.
- Approved results and certification actions are recorded on ARLO, Airtable, SharePoint, QBS or the relevant accreditation body system as appropriate.

20. Learner Results, Appeals, Rechecks and Repeats

Approved results are issued to learners with appeal information where an appeal route applies. Appeal, recheck and repeat arrangements must follow the relevant accreditation body or course requirements.

Process	Procedure
Result issue	Results are issued following the relevant approval or certification sign-off and include appeals information where applicable.
QQI appeal window	QQI learners have at least 14 calendar days to lodge an appeal of the assessment process or result. New assessment evidence may not be added for the purpose of appeal.
PHECC / IOSH / IHF appeals	Appeals or queries are managed in line with course, accreditation body and CPL complaints/appeals procedures. Certification may be withheld while an issue is reviewed.
CPL certified appeals	Appeals or queries are reviewed by the Training Manager or an appropriate person not directly involved in the original decision where practicable.
Evidence	Only evidence already presented for assessment may be considered unless the appeal concerns process error, technical incident, reasonable accommodation or similar procedural issue.
Outcome	Learner is informed of outcome within the agreed timeframe. Final outcome is recorded.
Repeat assessment	Where a learner fails or misses an assessment opportunity, repeat assessment may be allowed where permitted by the course or accreditation body rules and must be agreed in advance.
Grade improvement	Learners cannot repeat an assessment solely to improve a grade unless the accreditation body or course rules expressly permit this.

21. Records, Retention and Data Protection

Assessment records are personal data and must be managed securely, accurately and only for legitimate assessment, certification and quality assurance purposes. Records must be traceable to the ARLO course code, learner, assessor/trainer, award/module/course, course instance and certification period where applicable.

- SharePoint is the primary storage location for course folders and learner evidence.
- Airtable is used for QA checks, feedback, IV records, examination/assessment results and reporting where applicable.
- ARLO course code is the key reference for course folders, records and retrieval.
- Access to learner evidence for IV, EA, monitoring or review is granted only for the period required and removed when the task is complete.
- Retention periods must follow the CPL assessment records and secure storage procedure and any relevant QQI, PHECC, IOSH, IHF, legal, client or funding requirement.
- Assessment records must be available for internal audit, external authentication where applicable, accreditation body monitoring, appeals, course monitoring and programme review.

22. Monitoring, Analysis and Continuous Improvement

Assessment quality is monitored through learner feedback, instructor feedback, IV reports, EA reports, monitoring records, certification checks, complaints, appeals, non-conformance records, internal audit, programme review and online learning data. Repeated issues must be escalated for corrective action and improvement.

Monitoring input	What is reviewed	Frequency / owner
Learner feedback	Assessment clarity, support, workload, fairness, online access and feedback.	Each course / Administrator and Training Manager
Instructor feedback	Assessment suitability, technical issues, learner support issues and assessment workload.	Each course / Administrator and Training Manager
Internal verification	Missing evidence, calculation errors, transcription errors, grade-band errors and process adherence for QQI.	Each QQI assessment period / Internal Verifier
External authentication	Consistency with standards, grade boundaries, marking reliability and evidence quality for QQI.	Each QQI certification period / EA and RAP
PHECC / IOSH / IHF certification checks	Assessment records, practical skills records, trainer/instructor status, equipment and certification readiness.	Each course / Training Manager and Administrator
Results data	Unsuccessful rate, pass/merit/distinction profile, completion rate and patterns by assessor/delivery mode where applicable.	Bi-monthly and annually / Quality Manager
Online learning data	Engagement, completion, learner progress, technical issues and assessment submissions.	Course review / Training Manager
Appeals and complaints	Fairness, deadline issues, communication, support, marking and assessment security concerns.	As received and annual trend review / Quality Manager
Corrective actions and QIP	Action closure, recurrence, root cause and effectiveness.	Governance meetings / Quality Manager

23. Non-Conformance, Assessment Incidents and Escalation

Any failure to follow this procedure, or any issue affecting validity, reliability, fairness, security or integrity of assessment, must be treated as a quality issue and recorded in the appropriate corrective action, non-conformance or QIP record.

Issue type	Examples	Escalation
Assessment security breach	Unauthorised access to exam paper, incorrect link, public link, missing evidence, lost evidence, premature access to mandated material.	Immediate escalation to Training Manager and Quality Manager. Consider withholding affected results.
Academic integrity concern	Plagiarism, unauthorised AI use, copying, contract cheating, impersonation or practical skills misrepresentation.	Training Manager and Quality Manager. Record, investigate and withhold result if required.

Marking or result error	Incorrect marks, grade band error, transcription error, inconsistent assessor marking.	Internal Verifier/Training Manager/RAP for QQI. Correct before certification where possible.
PHECC assessment issue	Wrong paper, missing skills record, equipment issue, incorrect instructor ratio or use of non-mandated material.	Training Manager and Quality Manager. Certification withheld until resolved.
IOSH assessment issue	Incorrect IOSH material, trainer status issue, missing assessment record or pass requirement not followed.	Training Manager and Quality Manager. Certification withheld until resolved.
Reasonable accommodation issue	Failure to provide approved accommodation or accommodation not recorded.	Training Manager and Quality Manager. Review fairness and impact on result.
Online assessment incident	Technical failure, identity concern, learner disconnected, proctoring issue.	Record incident, review evidence and decide whether assessment remains valid.
Repeated process failure	Repeated missing evidence, late submissions, incomplete IV/EA packs or incomplete course returns.	QIP/corrective action and governance review.

24. Procedure Review

This procedure will be reviewed annually or earlier where there are changes to QQI, PHECC, IOSH, IHF or CPL Institute certified course requirements, assessment delivery methods, assessment systems, academic integrity risks, audit findings, external authentication findings, monitoring outcomes, results approval outcomes or corrective actions.

Appendix A - Assessment Readiness Key Steps

- ARLO course code created and course folder available
- Current approved, mandated or internally controlled assessment material available
- Assessment schedule and deadlines confirmed
- Learner assessment instructions issued
- Submission route confirmed and tested
- Technical requirements and online support route issued where applicable
- Reasonable accommodation requests checked and recorded
- Learner declaration enabled or included where required
- Assessment evidence receipt log available
- Secure SharePoint/Airtable access in place
- Accreditation-body assessment and certification requirements checked

Appendix B - Assessment Security Key Steps

- Current approved or mandated assessment version used
- Assessment master copy restricted
- Exam paper/link released only at the agreed time
- PHECC, IOSH and IHF materials used only as permitted by the accreditation body
- Learner identity verification applied where required

- Online assessment proctoring/camera requirement applied where required
- Learner evidence stored in correct ARLO course-code folder
- Airtable/SharePoint permissions restricted to authorised users
- Learner declaration collected or tick-box record available where required
- No unnecessary personal data included in EA/IV/monitoring records
- Access removed after IV/EA/RAP/monitoring activity complete

Appendix C - Key Definitions and Abbreviations

Term	Definition
Assessment	The process of judging learner evidence against intended learning outcomes, practical competence, course standards or certification requirements.
Assessment strategy	The planned approach to assessment for a programme, module or course, including techniques, weighting, timing, criteria and quality assurance.
Assessment instrument	The specific task, brief, examination paper, skills task, checklist or activity used to assess the learner.
Accreditation body	An external organisation that approves, validates, certifies or regulates course delivery or assessment, such as QQI, PHECC, IOSH or IHF.
AI	Artificial Intelligence, including tools that generate, rewrite, summarise, translate, paraphrase or produce answers or evidence.
ARLO	Learning management and course administration system used by the CPL Institute.
EA	External Authenticator for QQI assessment.
IHF	Irish Heart Foundation.
IOSH	Institution of Occupational Safety and Health.
IV	Internal Verification for QQI assessment.
MIPLO / MIMLO	Minimum intended programme learning outcome / minimum intended module learning outcome.
PHECC	Pre-Hospital Emergency Care Council.
QBS	QQI Business System used for QQI certification submission.
QIP	Quality Improvement Plan.
QQI	Quality and Qualifications Ireland.
RAP	Results Approval Panel.
RPL	Recognition of Prior Learning.

References

- QQI, Quality Assuring Assessment Interim Guidelines for Providers 2025.
- QQI, Interim Guidelines for External Authenticators 2025.
- PHECC, Quality Review Framework and relevant Education and Training Standards.
- IOSH approved course and assessment requirements.
- IHF/AHA/PHECC-aligned course and assessment requirements.
- The CPL Institute Quality Management System Manual.
- QQI PL 01 Assessment Development, Strategy and Approval Policy.
- QQI PL 03 Assessment Records and Secure Storage Policy.
- QQI PL 05 Course Monitoring, Programme Review and Quality Improvement Policy.
- Academic Integrity and Assessment Malpractice Policy.