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Technical and Vocational Education and Training (TVET) Quality Council

Bhutan Qualifications and Professionals Certification Authority (BQPCA)

**Quality and Compliance Auditing**

**for**

**Training Providers**

**QUALITY ASSURANCE FOR TVET PROVIDERS**

Quality Assurance Services

TVET Quality Council

December 2023

# Quality and Compliance Audit Checklist

**Training Provider Details**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Name of Training Provider  |  | | --- | |  |  1. Location  |  |  | | --- | --- | | Dzongkhag/Dungkhag: | Place: |  1. Type of Ownership (Tick√)  |  |  |  |  | | --- | --- | --- | --- | | Private: | Public: | NGO: | Corporate: |  1. Name and Designation of Person Interviewed during the Audit on-site visit  |  | | --- | | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Contact No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   **Instructions:**   1. Contact the Institute, give timely notification/information and arrange a pre-audit meeting; 2. Ensure all audit forms are ready and other administrative approval obtained prior to conducting the Audit; 3. Agree the non-conformances recorded on each criterion with the auditee; 4. Record all non-conformance in the Non-Conformance Report form (NCR); 5. Agree corrective action and responsible staff for corrective action; 6. Indicate on the NCR form if a follow-up audit is required; 7. Complete the NCR within 2 working days of the completion of the audit and submit the final audit report to Head, QAS for review and further action; 8. In-case of follow up audit, arrange with the institute a mutually convenient date for the follow up audit; 9. On completion of the follow-up audit. Report to indicate that all corrective action has been carried out. 10. Return the completed NCR form to QAS, who will file the completed NCR in the register file. The audit of this item is then deemed to be closed. 11. Ensure that timely notification of completed corrective action is received from the Institute; 12. Record the written notification of completion of corrective action. The audit of this item is then deemed to be closed; 13. If the institute/auditee cannot agree with the non-conformance documented in NCR form, report the nature of disagreement to QAS to resolve the issue; 14. QAS reviews the findings of all NCR form and prepare an Executive Audit Report to take necessary action on major issues from the quality audits. |

**Criterion 1 - Governance and Management**

The institution’s system of governance and management is sufficient to manage existing operations, and to respond to development and change.

**Indicator 1: Institute Operational Plans, Management and Implementation**

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| --- | --- | --- |
| Criteria | (Yes/No/NA) | Observations/Evidence |
| 1. Institute Vision and Mission is well defined and displayed in the Institute\* |  |  |
| 1. Prepared yearly plan of operation (YPO) / Annual Plan (AP) for the Institute (Operational/Academic Plans) \* |  |  |
| 1. Implemented programs are based on YPO/AP\* |  |  |
| 1. Conducted Institute Management Meetings weekly/monthly/yearly |  |  |
| 1. Implemented Quality Management System and QMS status (certified/ not certified) |  |  |
| 1. Feedback and suggestion mechanism in place\* |  |  |
| 1. Formed Academic Committee with clear TOR |  |  |
| 1. Established Institute-Industry partnership/collaboration with relevant industries |  |  |
| 1. Records keeping and documentation using hardcopy and digitized version (filing, database, archiving) \* |  |  |
| 1. Internal monitoring and evaluation system established and implemented |  |  |
| 1. Maintained signboard with proper name of Institute, location and other details\* |  |  |
| 1. Valid Institute Registration Certificate issued by TVET QC at the time of Audit\* |  |  |
| Recommendations/Corrective actions | | |

**Criterion 2 - Teaching and Learning**

The institution has a clearly defined mission, and training programs with set objectives and learning outcomes at appropriate levels; and has effective mechanism of delivery and testing/assessing to ensure success in meeting these objectives and enable students to achieve the intended outcomes

**Indicator 1: Curriculum and Instructional Materials**

|  |  |  |
| --- | --- | --- |
| Criteria | Yes/No/NA | Observations/Evidence |
| 1. Prepared curriculum for each TVET program/course \* |  |  |
| 1. Validated and endorsed curriculum for the TVET program/course including short courses\* |  |  |
| 1. Developed instructional materials/aids for trainees such as handouts/wallcharts/PPT/instructional books, workbooks, e-books, videos etc. |  |  |
| 1. Industry experts are involved in curriculum revision/development. |  |  |
| General observations and comments (if any) | | |

**Indicator 2: Instructional Guides and Training Delivery**

|  |  |  |
| --- | --- | --- |
| Criteria | Yes/No/NA | Observations/Evidence |
| 1. Training Plan developed for course(s) and approved by the Principal/CEO/Training Director \* |  |  |
| 1. Monthly/weekly plan developed for the course(s) as per the course curriculum and accessible to trainees\* |  |  |
| 1. Trainers have prepared Lesson Plan and Task Sheet based on the weekly/monthly \* |  |  |
| 1. Industry experts are invited/involved in training delivery (theory/practical) |  |  |
| 1. Implemented M&E of all programs and trainers based on training plans |  |  |
| 1. Well documented (soft/hard copy) of all training plans, monthly/weekly plans, lesson plans, task sheet \* |  |  |
| Recommendations/Corrective actions | | |

**Indicator 3- Assessment**

|  |  |  |
| --- | --- | --- |
| Criteria | Yes/No/NA | Observations/Evidence |
| 1. Conducted continuous assessment of trainees and results published and documented (soft/hard copy) \* |  |  |
| 1. Created continuous assessment records keeping system \* |  |  |
| 1. Assessment items are validated before assessment and developed using standard format |  |  |
| 1. Developed question/item bank by the respective trainers for each course(s) |  |  |
| 1. Conducted module and final assessment and certificate awarded based on the assessment results |  |  |
| 1. Assessment results are maintained with proper system\* |  |  |
| 1. Assessment of OJT conducted (OJT reports, presentations, logbook) |  |  |
| General observations and comments (if any) | | |

**Criterion 3 - Human Resources**

The standard of the institute is greatly measured by the competencies of trainers. The institute maintains highly competent trainers in terms of their academic qualifications, experience and professional competence. It maintains an effective system of recruiting, maintaining and developing an adequate number of highly qualified and appropriate teaching and non-teaching staff.

**Indicator 3.1- Trainers (Teaching Staff)**

|  |  |  |
| --- | --- | --- |
| Criteria | Yes/No/NA | Observations/Evidence |
| 1. Trainers are competent with required qualification one level higher than the level of the course(s) being offered\* |  |  |
| 1. Trainers have TOT certificate and registered with TVET QC. \* |  |  |
| 1. Trainers have relevant Industry work experience of minimum of 3 years\* |  |  |
| 1. Have full time trainers for all approved courses both BQF and Institute certificate course(s) |  |  |
| 1. Maintained Trainer profile/portfolio and records updated regularly |  |  |
| 1. Maintained desired Trainers and Trainee Ratio of 1:15 for practical and 1: 30 in each course(s) |  |  |
| 1. Maintained daily attendance record of trainees by the trainer \* |  |  |
| 1. Trainers have sufficient time for preparation of session plans (lesson plan/task sheet) and teaching learning materials/aids/ppt/visuals etc. |  |  |
| 1. Trainers have proper workstation/office with required facilities to planning and preparation of plans, teaching learning materials etc. |  |  |
| 1. Trainers have undergone continuous professional development program in-country/overseas/online undertaken research works etc.\* |  |  |
| Recommendations/Corrective actions | | |

**Indicator 3.2- Support Staff (Non-Teaching Staff)**

|  |  |  |
| --- | --- | --- |
| Criteria | Yes/No/NA | Observations/Evidence |
| 1. Sufficient support staff with proper educational qualification to provide support services to clients |  |  |
| 1. Maintained proper office with required facilities and resources including reception areas/ guest lounge computer, office furniture etc. for the clients \* |  |  |
| 1. Maintained proper file and records of both trainers, trainees, plans, minutes of meeting, inventory etc. \* |  |  |
| 1. Prepared job responsibilities of all staff and approved by the Principal/CEO/Director |  |  |
| Recommendations/Corrective actions | | |

**Criterion 4- Physical Facilities and Resources**

The institute provides an environment which is conducive to effective teaching and learning that supports the educational programs offered by the institute. The adequacy of physical facilities and resources, tools and equipment, information and communications technology as well as facilities’ repair and management are paramount.

**Indicator 4.1- Classroom/workshop/labs/outdoor training facilities**

|  |  |  |
| --- | --- | --- |
| **Criteria** | **Yes/No** | **Observations/Evidence** |
| 1. Maintained proper classroom with required facilities, (furniture, whiteboard, projector, screen) and conducive for learning. \* |  |  |
| 1. Maintained classroom with proper lights, ventilation, heating and cooling system, waste bin and setup. \* |  |  |
| 1. Classroom setup and space is adequate for group work/discussion/ roleplay/demonstrations. \* |  |  |
| 1. Maintained workshop/training labs with required facilities, tools and equipment, power supply, safety signs, \* |  |  |
| 1. Maintained proper outdoor training facilities (training ground/work shed/footpath/track, toilet facilities/signage, as per standard requirements |  |  |
| 1. Workshop/Lab/Training ground/track/and other facilities are safe for teaching and learning \* |  |  |
| 1. Maintained well equipped First Aid facility in workshop/laboratory etc. |  |  |
| 1. Toilet facilities are cleaned and well maintained plumbing and water supply system \* |  |  |
| Recommendations/Corrective actions | | |

**Indicator 4.2- Tools, Equipment and Accessories**

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| --- | --- | --- |
| Criteria | Yes/No/NA | Observations/Evidence |
| 1. Tools and equipment are sufficient for each TVET program \* |  |  |
| 1. Tools and equipment are safe and functional with required safety accessories for teaching and learning. \* |  |  |
| 1. Tools and equipment are installed safely with proper power connections, cable line, grounded and layout \* |  |  |
| 1. Tools and accessories are stored in proper place and inventory maintained. |  |  |
| 1. Tools and equipment are as per industry standards and specifications. |  |  |
| 1. Developed maintenance plan for machines and other stationed equipment |  |  |
| 1. Tools and equipment are cleaned and maintained as per the maintenance plan |  |  |
| 1. Un-usable/non-functional tools and equipment are disposed and record maintained |  |  |
| Recommendations/Corrective actions | | |

**Indicator 4.3- Student Support Amenities**

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| --- | --- | --- |
| Criteria | Yes/No/NA | Observations/Evidence |
| 1. Conducted career guidance counselling/education and orientation \* |  |  |
| 1. Invited relevant industry guest speakers to institute to share information/experiences to trainees and staff |  |  |
| 1. Provided job placement/reference services and shared job vacancies through print and online services |  |  |
| 1. Conducted soft skills/employability skills development program such as CV writing. Interview skills, leadership program, entrepreneurship program, and other 21st century skills. \* |  |  |
| 1. Provided library/online learning/e-learning-services to trainees \* |  |  |
| 1. Organized co-curricular/extra-curricular/ social activities in the Institute |  |  |
| Recommendations/Corrective actions | | |

**Course Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sl.no** | **Course Title** | **Duration (Hours)** | **Curriculum valid and endorsed?** | **Entry qualification** | **Remarks** |
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| General observations and comments | | | | | |

**Trainer Details**

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| **Details of Trainers** | | | | | |
| **Sl. no** | **Name** | **Qualification** | **ToT certified**  **(Yes/No)** | **Registered with TVET QC**  **(Yes/No)** | **Industry Experience** |
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| General observations and comments (if any) | | | | | |

**9: Declaration and Signature**

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| **I hereby confirm and declare that:**   1. the information provided in this checklist is true, complete and accurate to the best of my knowledge at the time of audit visit to the institute 2. any false, fictitious, or fraudulent information may be subjected to administrative action 3. I understand that the information provided in this form will only be used for the purpose of quality audit by the TVET Quality Council, BQPCA.   ------------------------------------------------------------------------------------  Name/ Signature of Team Leader  Name and Signature of Audit Team Members   1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Date of visit ----------------------- |
| **Sources of Evidence:**   1. Onsite verification of Institute facilities and resources 2. CV of trainers/TVET-MIS registration 3. File, records maintained by the Institute 4. Training plans, curriculum, minutes of meeting, student file, |

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# Non-conformance Report (NCR) and Corrective Action

*Note: The TVET Quality Council is mandated to ensure the Quality of Training Providers through regular quality audits conducted by the Quality Assurance Services.*

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| **#** | **Non-conformance/Corrective Action** | | **Responsible Person** |
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| **Declaration:** | | | |
| We, hereby certify that we have conducted quality audit of all aspect of TVET quality assurance set by the TVET QA. The non-conformity report consists of corrective action to be taken by the training institute and submit to TVET QC.  Name/signature of Quality Auditor  Name/signature of Quality Auditor | | I, hereby agree to take correction/corrective actions for each of the above non conformity in time before the next audit visit.  Name/signature of CEO/Principal/Director (Training Provider)  Agreed Target Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Follow-up Audit Required (Yes/No) \_\_\_\_\_\_\_\_\_\_\_ | |
| **Copy to: Concerned Training Institute** | | | |

**Quality Audit and Compliance Report of Training Provider**

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| --- | --- | --- | --- | --- |
| **Criterion 1. Governance and Management-** | | | | |
| **Indicator 1:** Institute Operational Plans, Management and Implementation | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| **Criterion 2: Teaching and Learning -** | | | | |
| **Indicator 2.1:** **Curriculum and Instructional Materials** | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| **Indicator 2.2: Instructional Guides and Training Delivery** | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| **Indicator 2.3: Assessment** | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| **Criterion 3: Human Resources -** | | | | |
| Indicator 3.1: Trainer (Teaching Staff) | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| **Total** |  |  |  |  |
| Indicator 3.2: Support Staff (Non-Teaching Staff) | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| **Criterion 4: Physical Facilities and Resources -** | | | | |
| Indicator 4.1: Classroom/workshop/lab/outdoor training facilities | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| **Total** |  |  |  |  |
| Indicator 4.2: Tools, Equipment and Accessories | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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| Indicator 4.3: Student support amenities | | | | |
| **Criteria** | **Yes** | **No** | **Not Applicable (NA)** | **Compliance** |
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**Overall Quality and Compliance of the Institute: (Please tick√)**

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| Please rate the overall Quality and Compliance Rating of the Institute | | | | | | | | | |
| Excellent |  | Good |  | Satisfactory |  | Poor |  | Need improvement |  |
| Name and Signature of Quality Auditors   1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |

# General hints and tips for conducting the Audit

| **Area** | **Actions** |
| --- | --- |
| First impressions | * Be polite and courteous * Aim to appear professional and have a good knowledge of the matter under review/audit * Project that you are approachable, interested, and professional |
| Treat the interviewee as an individual | * Identify how they would like to be addressed * Treat people as you would like to be treated * If you don’t respect them, it will often be reciprocated * Actively listen to the person |
| Understanding the interviewee | * Who are they? Background. * Identify:   + The nature of the audit   + The role of the person to be interviewed   + How they might be feeling, and seek to reduce any anxiety, tension, or queries * Remain impartial and objective when dealing with any person |
| Explain the reason for the Quality Audit | * Inform the person why they are being audited * Ensure any rights of the person are explained (if required) * Identify:   + What you may do with the audit information/report   + What may happen to their responses * Ask if they have any questions. |
| Explain the procedures to be followed | * Inform the person what will occur * Explain the formality of the process * Ask if they have any questions |
| Difficult and vulnerable interviewees | * Be patient and remain calm * Ensure that they understand the process. If they don’t, stop and repeat it * Ask if they require a support person to be present |
| Rules of questioning | * Adapt you questions and words to the person being interviewed * Pace of questions * Relevance of questions based on audit criteria |
| Use | E- Explain to me  D- Describe to me  S- Show me |
| Avoid | * Double questions * Provocative questions * Bias * Poor body language |

**THANK YOU**