

Non-Medical Helper Providers

Quality Assurance Framework



November 2018

Version 3.0

Version Control

Document	Created Date	Revision Date	Author	Version Number
NMH Provider Quality Assurance Framework	November 2018		DSA-QAG	V3.0

Details of Section	Details of Change
Introduction	Page 5 Graphic updated, Page 6 text updated Page 8 text updated
1 – NMH Provider Quality Business Processes	Standard 1.1, link and text updated Standard 1.2, text updated Standard 1.3, Additional text added Standard 1.5, link updated Standard 1.7, link updated Standard 1.9, text updated Standard 1.10, text updated Standard 1.11, text updated Standard 1.13, text updated Standard 1.15, text updated Standard 1.17, text updated Standard 1.18, text updated
2 – NMH Provider Quality Service Provision	Standard 2.1, text updated Standard 2.3, text updated Standard 2.4, text updated Standard 2.7, text updated Standard 2.8, text updated
3 – Support Worker Quality Business Processes	Standard 3.2, text updated Standard 3.4, text updated
4 – Support Worker Quality Service Provision	Standard 4.1, text updated Standard 4.3, text updated Standard 4.4, text updated
Templates	Template 2, text updated Template 4, text updated Template 5, text updated
Appendices	Appendix 5, new appendix added
Terms & Definitions	Text updated

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Introduction

This document represents the Quality Assurance Framework for non-medical help (NMH) providers and support workers delivering Disabled Students' Allowances (DSAs), provided through the English student support package (including DSAs administered by Student Finance England), and funded by the Department for Education (DfE).

This document does not cover those students funded by Research Council.

Non-medical help includes all types of NMH support paid through the DSAs NMH allowance or postgraduate DSA. The Student Finance England (SFE) 2018/19 DSAs guidance for new students' sets out the types of support most commonly funded through the NMH allowance.

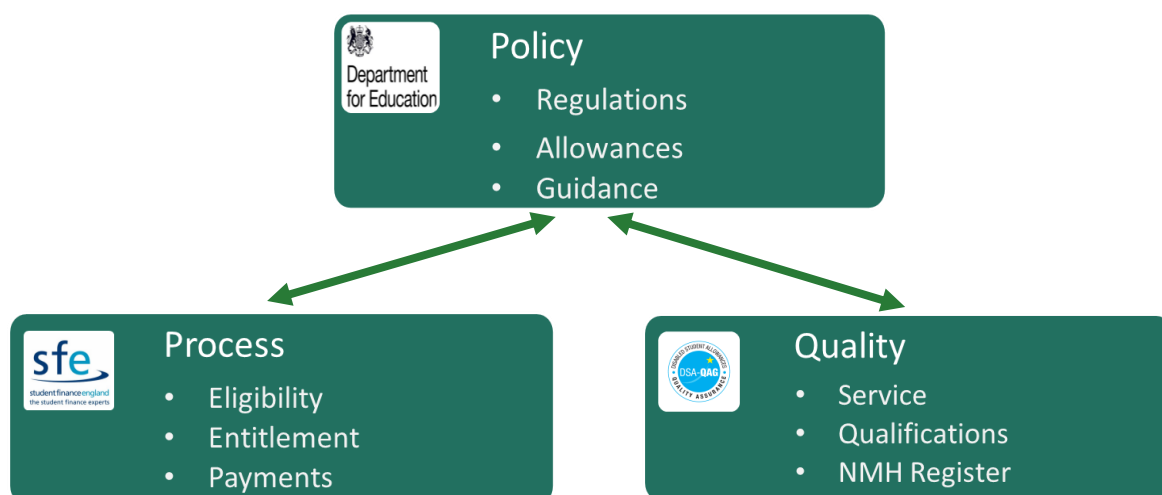
The Quality Assurance Framework covers a range of delivery models. All NMH Providers delivering DSAs-funded NMH are expected to comply with the relevant standards set out below. Throughout the document we refer to "NMH providers"; this could be an organisation, including Higher Education Providers (HEPs), or an individual support worker who is self-employed (sole traders).

A DSAs non-medical help provider is one that:

- Is registered as an "NMH Provider" with DSA Quality Assurance Group (DSA-QAG) under the Disabled Students' Allowances Quality Assurance Framework, and
- Has agreed to comply with and be audited against this Quality Assurance Framework (QAF)

A DSA non-medical help support worker is any individual engaged as an employee or a freelance practitioner in delivering services to DSA funded students. The support workers MUST be included on any support worker list submitted to DSA-QAG, these individuals are all subject to the terms of the QAF, e.g. COI and CPD.

The diagram below indicates the organisational responsibilities for ensuring the provision of NMH is delivered in an efficient and effective manner.



Graphic provided by SFE

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Application of the Quality Assurance Framework

To be accredited as an NMH provider, providers are required to complete the DSA-QAG registration process and comply with the standards listed below.

NMH providers will need to provide evidence that they are adhering to the quality criteria below during the audit.

Transitional arrangements

Students who already have NMH support in place, those who have undergone a study needs assessment prior to 28 April 2016, will be able to continue with their current provider at this stage, even if their provider is not registered with DSA-QAG.

Any student who has undergone a study needs assessment since 28 April 2016 and requires NMH support, the provider must be selected from the DSA-QAG NMH register. All NMH providers on the register will need to conform to this quality assurance framework.

The principal objective

The principal objective of the NMH quality assurance framework is to provide Government with quality and financial assurance of non-medical help support services funded through DSAs by providing:

- a clear set of principles which underpin the provision of DSAs-funded services to disabled students
- a clear set of standards for the delivery of non-medical help services
- a clear set of measures against which non-medical help providers are audited

The document sets out the standards expected of registered NMH providers in relation to their registration, interactions with students, quality of their support, interactions with other stakeholders, managing complaints and HR policies.

The NMH provider will be audited on a regular 12 monthly interval depending on the size and range of services offered by the NMH provider. **NMH support cannot be contracted out to a third party.** If the NMH provider does not have the capacity to deliver the required support, when required by the student, they must notify SFE so that another provider can be selected.

Underpinning principles

- A disabled student should expect to receive good quality support to enable them to demonstrate their academic ability.
- A disabled student should expect to receive good quality support that is designed to enable the independence of the student.
- Support should be delivered in an agreed manner that suits the learning needs of the student and is compatible with the pedagogy of the student's course and programme of study.
- A clear structure is in place to ensure services can be measured against each other on a like for like basis.

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Structure of the document

This document consists of two sections:

- 1) Standards which the **NMH provider** must meet
 - a. Quality business processes
 - b. Quality service provision

- 2) Standards which the **NMH support worker** must meet
 - a. Quality business processes
 - b. Quality service provision

Audit fees and process

The audit fees will be based on the amount of time it takes to audit the organisation. This will take into account a number of factors including: the size of the organisation; the number of students supported by the NMH provider; the level of quality assurance that is already achieved through professional body membership; and other audit processes that the organisation adheres to.

General Data Protection Regulations (GDPR)

DSA-QAG will, during the audit process, request information on support workers and students which contains personal identifiable information. The collection of this information is vital to allow the verification and validation of the support workers meeting the mandatory criteria, as issued by the Department for Education and students support being delivered in line with the award made by SFE. It is vital that where consent is required from the student, that this is requested on first contact. Evidence will be required, at audit, to confirm consent has been requested.

All information provided by NMH providers is stored in DSA-QAG's portal system which is fully compliant with current GDPR. Access to this information is limited to the nominated individual within each NMH provider's organisation and DSA-QAG staff responsible for carrying out the verification processes. At no point is any information shared with any 3rd party.

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STANDARDS WHICH THE NMH PROVIDER MUST MEET

QUALITY BUSINESS PROCESSES

1.1	The NMH provider will maintain registration details as required by DfE and SFE.
1.2	The NMH provider only supplies DSAs-funded support that has been authorised by the funding body and monitors against overall entitlement.
1.3	The NMH provider will ensure that all sessions are booked and confirmed with the student, in line with DSAs guidance.
1.4	The NMH provider will inform the student of the session cancellation procedure.
1.5	The NMH provider will notify SFE of missed or terminated sessions.
1.6	The NMH provider will respond to SFE, DSA-QAG or DfE queries within 7 working days.
1.7	The NMH provider will provide a clear and transparent charging structure to DSA-QAG, with on costs clearly set out where applicable, and will charge in line with the rates they have submitted to DSA-QAG.
1.8	The NMH provider will notify DSA-QAG of changes in NMH rates before updating them.
1.9	The NMH provider will confirm with the assessor that they are able to deliver the support within 1 working day
1.10	The NMH provider will keep clear evidence documenting work carried out.
1.11	The NMH provider will have a suitable complaints procedure in place.
1.12	The NMH provider has a lone working policy.
1.13	The NMH provider ensures that risks are appropriately assessed before providing support.
1.14	The NMH provider will have relevant insurance.
1.15	The NMH provider will be registered under and adhere to the Data Protection Act.
1.16	The NMH provider is responsible for ensuring all support workers have undertaken training - confidentiality, data protection, health and safety, lone worker, safeguarding and disability awareness.
1.17	The NMH provider will market their services appropriately and responsibly.
1.18	Register of Interest (Employees)
1.19	Register of Interest (Organisational)
1.20	Annual Statistical Return

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1.1 Maintaining registration details	
Standard	Measure
<p>The NMH Provider will update support worker lists with DSA-QAG within 10 working days of a new support worker being employed using the support worker list for updates template that can be found via: https://dsa-qag.org.uk/practitioner/nmh-providers/nmh-framework-document. The support worker list template should be submitted to NMHupdates@dsa-qag.org.uk</p> <p>The NMH provider must ensure that their support workers meet the DfE mandatory criteria <u>before</u> submitting the support worker(s) details for registration.</p> <p>The NMH provider must ensure that all support workers have agreed to share their details with DSA-QAG; Template 5 is an example of consent to share declaration. It should be noted that if a support worker does not consent to provide access to their information, they will be requested to withdraw from providing DSA funded support as their compliance with the mandatory criteria cannot be verified.</p>	<ul style="list-style-type: none"> • Sample check at audit of support workers start dates. • Sample check at audit of completed consent to share declarations.

1.2 Supply DSAs-funded support authorised by the funding body against entitlement	
Standard	Measure
<p>The NMH provider only supplies DSAs-funded support that has been authorised by the funding body, and monitors against overall entitlement.</p> <p>The NMH provider must maintain up-to-date records (by student) of quantity and type of support that has been approved and delivered.</p> <p>The NMH provider must ensure that all students have been requested to consent to share their details with DSA-QAG; Template 4 is an example of consent to share declaration. NMH providers must be able to demonstrate that they have sought consent from all students.</p>	<ul style="list-style-type: none"> • Sample check at audit of DSA2 letters and timesheets/session checklists • Sample check at audit of completed consent to share declarations.

1.3 Booking sessions	
Standard	Measure
<p>The NMH provider must make sure that all sessions are booked and confirmed with the student before attending.</p> <p>Students should be contacted using their preferred method of communication to acknowledge the student’s award for support within 1 working day of student contact, following receipt of their DSA2 letter (e.g. email, face to face, telephone etc.). *</p> <p>‘Booked’ means that the student and the NMH provider have agreed the date, time, location and support role in advance of the session (see DSAs guidance for details).</p> <p>Where an NMH provider is unable to meet the requirements of the student, they must direct the student back to their needs assessor and contact should be made with the funding body to confirm the student’s requirements cannot be met. Student support must not be unnecessarily delayed by the NMH provider.</p> <p>Legitimate reasons for non-compliance will be considered at audit.</p> <p>*Note: For clarification, NMH providers must be able to demonstrate that they have responded to a student within 1 working day of the student’s first contact. This may not relate to the booking of the first session, as this may be subject to the student’s request or timetable (student led). Where contact is via telephone or face to face, a follow up email should be sent to the student. This communication should be retained as evidence for audit.</p>	<ul style="list-style-type: none"> • QA sample check of acknowledgement (1 day) • QA sample check of booking confirmation with student (e.g. email, letter etc)

1.4 Student session cancellation procedure	
Standard	Measure
<p>The NMH Provider must inform students of how to cancel a session, the cancellation notification period and the impact of non-cancellation.</p> <p>Note: The student should be provided with a copy of the cancellation procedure.</p>	<ul style="list-style-type: none"> • QA audit – review documentation/process of informing the student of the cancellation policy

1.5 Recording missed or terminated sessions	
Standard	Measure
<p>The NMH Provider must record details of missed sessions, in line with the DSAs guidance (https://www.practitioners.slc.co.uk/policy/) and provide this information to SFE when invoicing.</p> <p>The NMH provider must notify the funding body within 10 working days if the student wishes to terminate their support.</p>	<ul style="list-style-type: none"> QA audit - review documentation/ correspondence with the funding body (10 working days)

1.6 Responding to SFE, DSA-QAG and DfE queries	
Standard	Measure
<p>On receipt of a query from SFE, DSA-QAG or DfE, the NMH provider must respond within 7 working days.</p> <p>The NMH Provider must have a nominated point of contact who will deal with queries, including annual leave cover and sickness.</p> <p>Legitimate reasons for non-compliance will be considered at audit.</p>	<ul style="list-style-type: none"> QA audit – sample check of SFE, DSA-QAG or DfE queries/responses (7 working days) Feedback from funding bodies, DSA-QAG, DfE

1.7 Charging structure	
Standard	Measure
<p>The NMH Provider must provide a clear and transparent charging structure to DSA-QAG.</p> <p>Where a provider has their own website, they MUST publish their rates, without exception using the standardised NMH rates template which can be found at, https://dsa-qag.org.uk/nmh-rate-changes, and these prices must be adhered to when invoicing the funding body. They may only be altered during the academic year in line with the DfE policy on altering rates.</p> <p>Published charges should state if they are inclusive or exclusive of VAT. VAT should only be charged where an NMH provider is registered for VAT with HM Revenue and Customs.</p>	<ul style="list-style-type: none"> QA audit: validate prices are charged in line with NMH rates submitted to DSA-QAG and rates table accessibility check conducted.

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<p>Rates tables submitted to DSA-QAG and published on NMH provider's websites must be fully accessible documents, for example, screen reader compatible.</p> <p>DfE has introduced a cost structure for DSA-funded NMH. Fees that exceed the cost structure will only be met through DSAs in exceptional circumstances. To find the latest NMH fee structure click on the following link, https://www.practitioners.slc.co.uk/policy/.</p>	
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1.8 Change of NMH rates

Standard	Measure
<p>The NMH Provider may wish to revise their published rates during the academic year; however, this must be in line with DfE policy on altering rates.</p> <p>It is a requirement for the NMH provider to inform DSA-QAG of any rate revisions prior to publishing rates changes.</p> <p>DSA-QAG to be informed of the NMH providers rate change(s) by submitting their revisions via an online facility to record rate changes http://www.dsa-qag.org.uk/nmh-rate-changes</p> <p>The NMH Rates Revision facility will be open to all NMH providers, quarterly, on the dates listed on the DSA-QAG website, http://www.dsa-qag.org.uk/nmh-rate-changes.</p> <p>For NMH providers with a website, they may only publish revised rate(s) on the 1st working day of the month following confirmation of the submission made during the rates review. This must include the effective date of the rates revision.</p> <p>For NMH providers who do not have a website, DSA-QAG will publish the revised rates following confirmation of the submission made during the rates review. This will indicate the effective date of the rates revision.</p> <p>Note: Where it is identified that an NMH provider has revised their rates without informing DSA-QAG, they will be temporarily suspended from the NMH register until the rates have been restored to their previous state.</p>	<ul style="list-style-type: none"> • QA audit: validate prices are charged in line with NMH rates submitted to DSA-QAG. • Monthly check of NMH provider's websites

1.9 Confirmation of capacity and ability to deliver support within 3 working days –unusual support

Standard	Measure
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<p>Where the support being recommended by an assessor is 'unusual' or if there is uncertainty over whether the NMH provider chosen could meet the recommendation e.g. they are a sole trader whose capacity may have been reached, the NMH Provider will confirm their capacity and ability to deliver the service requested, within 3 working days of a request by an assessor.</p> <p>They should consider the location, their expected capacity and whether the support will, or is likely to be, required during the daytime, evenings, or weekends.</p> <p>Note: The price applied by an NMH Provider must be consistent with that supplied at the annual published costs implementation date, unless otherwise provided to DSA-QAG in line with the DfE policy on altering charges.</p>	<ul style="list-style-type: none"> • External – tracking process • Assessor’s feedback • QA audit – sample check and emails • Sample check of quotes and invoices
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<p>1.10 Provide evidence of work undertaken for payment of support</p>	
<p>Standard</p>	<p>Measure</p>
<p>As required by the Funding Body, the NMH Provider must provide the organisations NMH session timesheet (QAF Template 1), dated and duly confirmed by the student. The timesheet is an SFE mandatory document and must not be altered from the aforementioned template. The timesheet will also provide details of the service provided to the student, including the start and end time of the session. The support worker must sign the timesheet.</p> <p>Note: Signed student session timesheets must be retained for audit purposes.</p>	<ul style="list-style-type: none"> • QA audit - sample check invoices against student records and session timesheet.
<p>1.11 Documented complaints procedure</p>	
<p>Standard</p>	<p>Measure</p>
<p>The NMH Provider will have a formal, documented and suitable complaints procedure. The procedure will reflect the elements listed in Appendix 1. This will be provided to the student at point of first session at the latest and published on their website (if they have one) and will be available in other accessible formats on request.</p> <p>Note: Complaints policies should meet the requirements outlined in Appendix 1, however, for existing public bodies it is recognised that the regulatory authorities (e.g. Office of the Independent Adjudicator) mandate the contents of their complaints policy.</p>	<ul style="list-style-type: none"> • QA audit - review policy documents

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1.12 Lone working policy

Standard	Measure
<p>The NMH provider has a lone working policy, where applicable, which should include but may not be limited to:</p> <ul style="list-style-type: none"> - Ensuring risks are assessed, reviewed and mitigated - A robust system to ensure a lone worker has returned to their base or home once their task is completed - Consideration of what instruction, training and supervision and monitoring may be necessary <p>The NMH provider should also prepare a statement on how the policy is being met, which will be reviewed at audit.</p> <p>Note: Where an NMH Provider does not operate lone working, they should clearly state this and indicate how they maintain the safety of their support workers and students.</p>	<ul style="list-style-type: none"> • QA audit – review lone worker policy document and how this informs practice.

1.13 Risk assessment

Standard	Measure
<p>The NMH provider should carry out a risk assessment, where applicable, before undertaking work which presents a risk of injury or ill health.</p> <p>For all NMH providers who supply support to students on a recognised distance learner course or where a needs assessor has recommended the need for support to be provided in the student’s residence, the NMH provider <u>must</u> undertake a risk assessment due to the higher level of potential risk in those situations (example risk assessment template can be found at https://dsa-qag.org.uk/practitioner/nmh-providers/nmh-framework-document) which covers as a minimum;</p> <ul style="list-style-type: none"> • Work environment • Work equipment • Mental wellbeing • Travelling • Working Alone • Fire <p>The risk assessment completed must be available for audit purposes and be retained for the period of support to the individual student.</p> <p>The NMH provider must maintain a register (log) (example of log at Template 6) of the risk assessments undertaken, detailing as a minimum;</p> <ul style="list-style-type: none"> • Date of risk assessment • Student name • Location of risk assessment • Conducted by and Position • Last review date <p>Further guidance on risk assessments can be found at http://www.hse.gov.uk/risk/index.htm</p> <p>Further guidance on managing lone working can be found at www.iosh.co.uk/teleworking</p>	<ul style="list-style-type: none"> • QA audit – sample check of risk management template • QA audit –check of risk management register (log)

1.14 Insurance	
Standard	Measure
<p>All NMH Providers must have relevant insurance, for example Employer's, Public Liability and Professional Indemnity.</p> <p>Note: For a support worker providing a service(s) for Distance Learners, the NMH Provider is responsible for ensuring relevant insurance covers the support worker.</p>	<ul style="list-style-type: none"> • QA audit – valid insurance details provided at registration and reviewed by DSA-QAG

1.15 Data Protection	
Standard	Measure
<p>The NMH Provider will maintain records in compliance with the General Data Protection Regulations. Registration with the Information Commissioner's Office (ICO) is a mandatory requirement.</p> <p>The NMH Provider will maintain records containing only sufficient relevant information to enable them to meet their liabilities relating to support for the student. Records must be retained for a minimum of 6 years from the date of the student's last session. Students' data must be managed in line with the principles of the General Data Protection Regulations.</p>	<ul style="list-style-type: none"> • QA audit -evidence of compliance with the Data Protection Act • ICO registration number

1.16 Support worker training	
Standard	Measure
<p>The NMH provider must ensure that all support workers have undertaken training on the undernoted areas, delivered by a suitably qualified person(s):</p> <ul style="list-style-type: none"> • confidentiality; • data protection; • health and safety; • lone worker (if applicable); • safeguarding; • professional boundaries; • disability awareness (for relevant support role) <p>Note: For guidance, as provided by DfE, on suitably qualified person(s) please refer to Appendix 3.</p> <p>*Note: If a support worker has membership to a recognised professional body as per DfE mandatory criteria, this would meet the requirement for disability awareness training.</p>	<ul style="list-style-type: none"> • QA audit – records of support worker attending training • QA audit – credentials of the trainer (person(s) / organisation (s))

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1.17 Marketing services	
Standard	Measure
<p>The NMH Provider must not market their services to students.</p> <p>A student who wishes to change provider should contact SFE in the first instance for authorisation.</p>	<ul style="list-style-type: none"> • Student feedback • SFE feedback on requests to change provider named on DSA2 awards letters.
1.18 Register of Interest (Support Workers)	
Standard	Measure
<p>The NMH Provider will request an updated Register of Interest (ROI) for each support worker annually and will maintain a log for their support workers.</p> <p>Support workers must complete their declaration within 10 working days of either starting with the NMH provider, or of any change to their circumstances which could give rise to an actual or perceived conflict of interest.</p> <p>The purpose of the register is for NMH Providers staff or support workers to record if they are aware of any potential conflict of interests that may affect the organisation's independence from any parties involved in Disabled Students' Allowances.</p> <p>An example of an appropriate register of interest declaration is included in Template 2. Register of interest declarations must include the conflict identified by the member of staff or support worker and the mitigating factors taken to manage the conflict. Any actual or perceived conflicts should be reflected in the Register of Interests (Organisation) submitted to DSA QAG (see standard 1.19).</p> <p>Policy on managing conflicts of interest can be found at: https://dsa-qag.org.uk/surveys/conflict-interest-statement</p> <p>Note: If DfE considers anyone involved in DSAs or providing DSA services has failed to meet the required standards set out, DfE will take appropriate remedial action. Where DfE considers it appropriate this action may include any or all of the following:</p> <ul style="list-style-type: none"> • a requirement to take mitigating actions, • suspension of accreditation to provide DSAs related services, or • withdrawal of accreditation to provide DSAs related services 	<ul style="list-style-type: none"> • QA audit - review of a sample of Register of Interest declaration for support workers (Template 2) • Register of interest log for support workers (Template 3)

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Each issue will be dealt with on a case by case basis and referred to the funding body and DfE.	
Note: This point is not applicable to sole traders as they adhere to 1.19	

1.19 Register of Interest (Organisational)	
Standard	Measure
<p>The NMH Provider will maintain a Register of Interest (ROI) for the organisation and submit to DSA QAG annually. This is to ensure that student interests are safeguarded, that public funds are not misused, and that there is no self-promotion of services for personal or organisational gain. The link to completing the online declaration can be found at: https://dsa-qag.org.uk/surveys/conflict-interest-statement</p> <p>The DfE policy on conflicts of interests in DSAs is at https://dsa-qag.org.uk/surveys/conflict-interest-statement</p> <p>The purpose of the register is for the NMH Provider to register anything that could give rise to an actual or perceived conflict of interest. To ensure that these are appropriately recorded, this should include details of all the services they provide to DSAs; and any relationships that could constitute a conflict of interest.</p> <p>An example of areas which could give rise to an actual or perceived conflict of interest is shown on the chart at Appendix 2, Register of Interest Chart.</p> <p>DfE therefore requires that all NMH providers will have submitted a Register of Interest Statement to DSA QAG with regard to their DSAs work, and thereafter on an annual basis. Organisations are required to show the steps or measures they take to ensure that the risk of conflict of interest is appropriately managed (including conflicts which their employees may have) and the process followed to avoid the conflicts set out in the principle statement.</p> <p>It is the responsibility of the NMH Provider to notify DSA-QAG of any changes to their services, support workers (for example new support worker or a change in support workers circumstances) or way in which a conflict is managed which impacts on the Register of Interest(s).</p> <p>The NMH Provider is required to contact DSA-QAG within 10 working days of the change occurring and submit an updated ROI (Organisational) which will be held by DSA-QAG.</p> <p>The ROI must be reviewed on an annual basis by the organisation.</p>	<ul style="list-style-type: none"> • QA audit - review the Register of Interest declaration for the organisation.

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Note: If DfE considers anyone involved in providing NMH support services has failed to meet the required standards set out, DfE will take appropriate remedial action.

Where DfE considers it appropriate this action may include any or all of the following:

- a requirement to take mitigating actions,
- suspension of accreditation to provide DSAs related services, or
- withdrawal of accreditation to provide DSAs related services

Where it is identified that there is a conflict which has not been disclosed, in the first instance DSA-QAG will issue a warning with a period of 14 days given to rectify the issue.

Each issue will be dealt with on a case by case basis and referred to the funding body and DfE.

1.20 Statistical returns to DSA-QAG

Standard	Measure
The NMH provider will complete and submit an annual statistical return (refer to Appendix 4) via an online data collection tool, which will be notified by DSA-QAG.	<ul style="list-style-type: none"> • Completed Annual Statistical Return (Appendix 4)

QUALITY SERVICE PROVISION

2.1	The NMH provider must only supply DSAs-funded support services which they are registered to supply.
2.2	The NMH provider must only use support workers qualified and trained to undertake the NMH role being provided to the student.
2.3	The NMH provider must ensure that support is provided in a suitable environment.
2.4	The NMH provider is responsible for ensuring that all support workers providing DSAs-funded NMH support maintain CPD and training records.
2.5	The NMH provider provides students with a formal feedback facility and addresses issues raised through feedback.
2.6	The NMH provider must familiarise themselves with information provided by the HE provider relating to working on-site.
2.7	The NMH provider must request and respond to HE provider feedback.
2.8	The NMH provider must report on student support to the HE provider, if the student agrees.

2.1 Provision of support workers	
Standard	Measure
The NMH provider may only supply support workers for the role(s) for which they are registered with DSA-QAG.	<ul style="list-style-type: none"> QA audit sample check: review of invoice records and support worker credentials

2.2 Support workers qualified and trained to undertake the NMH role	
Standard	Measure
<p>The NMH provider must only use support workers qualified and trained to undertake the NMH role being provided to the student.</p> <p>The NMH provider must ensure that their support workers have the mandatory qualifications / professional body membership for the support role(s) which they are undertaking.</p>	<ul style="list-style-type: none"> QA audit sample check: review of invoice records and support worker credentials

2.3 Support is provided in a suitable environment	
Standard	Measure
<p>The location/environment for specialist one-to-one support which takes place outside the lecture/tutorial must be comfortable, confidential, appropriate and suitable for the requirements of the student's support. It should also take account of the student's disability needs.</p> <p>Method of delivery, if outside of the normal face to face session within a lecture/tutorial must be student choice and requested by them.</p> <p>For clarification methods of delivering support are:</p> <p>In-Person (standard) – this method of delivery is where support is provided in person and in a suitable, comfortable and confidential location agreed with the student. This also covers the delivery of in-person support in lectures and/or exams.</p> <p>Distance Learning – this method of support is primarily aimed at students who are undertaking a distance learning course and require support in their residence. This can also include students not on a distance learning course but require NMH in their own residence. NMH Providers should refer to section 1.13 Risk Assessments if intending to provide support in the student's residence.</p>	<ul style="list-style-type: none"> QA audit - sample check of students' session records/timesheet

<p>Remote Delivery – this method of support is delivered via a real time remote session, e.g Skype, Facetime etc. Delivery of this method must be at the student’s request. This must be clearly documented on the student’s record. Please note, support via email is not appropriate.</p> <p>Note: A public place such as a café or coffee shop are not deemed suitable locations as these do not meet the standard in respect of comfortable and confidential locations. The venue for support should be a room with a door that closes and the room should be available for the whole of the support session for the student receiving the support, as well as the NMH support worker and any additional person the student may wish to accompany them. For clarification, this should not be a room that is shared with anyone else during the support period.</p>	
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2.4 Maintaining CPD and training records	
Standard	Measure
<p>The NMH provider must ensure that all support workers undertake structured CPD and relevant training annually, covering as a minimum:</p> <ul style="list-style-type: none"> - Relevant professional development in their specialist role(s) - updating skills in new practices <p>CPD and personal training records must be maintained and made available for audit. Further guidance on structured and unstructured CPD is provided at Appendix 5.</p> <p>Note: For roles where support workers are required to be registered with a professional body, evidence of CPD is not required.</p>	<ul style="list-style-type: none"> • QA audit - review of sample training records for the last 12 months • Review of sample structured CPD records for last 12 months

2.5 Formal feedback facility and addressing issues raised	
Standard	Measure
<p>The NMH provider must ensure there is a mechanism to request student feedback, which gives the option of anonymity. This should be offered at least once per academic year.</p> <p>Students should be made aware of informal channels to provide feedback on an ad hoc basis and this process should be straightforward, transparent, accessible and encouraged.</p>	<ul style="list-style-type: none"> • QA audit – review feedback mechanism, for example, an online feedback facility and review records of how NMH provider has acted on student feedback

<p>There should be mechanisms to review and understand student feedback and for this to be used to inform service improvements.</p> <p>NMH Providers should keep a record and be able to demonstrate how they have acted on student feedback for audit purpose.</p>	
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2.6 HE provider information provided - working on-site	
Standard	Measure
<p>The NMH provider must familiarise themselves with the information provided by the HE provider regarding delivering NMH services on-site, and cascade this to support workers.</p>	<ul style="list-style-type: none"> QA audit – evidence that the NMH Provider has familiarised themselves with relevant information from the HEP, and demonstrated the information has been cascaded to support workers.

2.7 Request and respond to HE provider feedback	
Standard	Measure
<p>The NMH provider must have a process or procedure to request HEP feedback. This should be gathered at least once per academic year.</p> <p>The NMH provider should provide HEPs with information on how to provide feedback on an ad hoc basis and this should be straightforward, transparent and encouraged.</p> <p>There should be mechanisms to review and understand HEP feedback and for this to be used to inform service improvements.</p> <p>For audit, NMH providers must keep a record and demonstrate how they have acted on HEP feedback.</p> <p>Note: HEP reporting, including where the HEP is the provider, must be formalised to ensure the support being delivered is meeting the needs of the student. This can take the form of multidisciplinary team meetings, reviewing workplans and support worker appraisals.</p> <p>Note: For the following support roles, it is not a requirement to have a formal feedback process with the HEP:</p> <ul style="list-style-type: none"> AT training Communication Support Worker 	<ul style="list-style-type: none"> QA audit – review process/procedure for gathering and addressing HEP feedback, for example, online feedback facility QA audit – review record of requesting HEP feedback, for example, email. QA audit – review records of how NMH provider has acted on HEP feedback for example, implemented a change to a process QA audit – review records of reporting on student support to the HEP for example, sample report to HEP

<ul style="list-style-type: none"> • Lip speaker • BSL interpreter 	
<p>2.8 Report on student support to the HE provider</p>	
<p>Standard</p>	<p>Measure</p>
<p>The NMH provider adheres to method and frequency of reporting on student support to the HEP, which has been agreed by the student and the HEP.</p> <p>The agreed methods and frequency must be documented for each HEP and made available for audit.</p> <p>Note: For HEPs, this can take the form of multidisciplinary team meetings, reviewing workplans or student progress reports.</p> <p>Note: For the following support roles, it is not a requirement to have a formal feedback process with the HEP:</p> <ul style="list-style-type: none"> • AT training • Communication Support Worker • Lip speaker • BSL interpreter 	<ul style="list-style-type: none"> • QA audit – review records of reporting on student support to the HEP for example, sample report to HEP

STANDARDS WHICH THE NMH SUPPORT WORKER MUST MEET

QUALITY BUSINESS PROCESSES

3.1	The support worker will only attend sessions that are booked and confirmed with the student.
3.2	The support worker will ensure the student understands the cancellation procedure.
3.3	The support worker will keep clear documents evidencing work carried out.
3.4	The support worker will advise students of the process when additional NMH support is required.
3.5	The support worker is responsible for undertaking training - confidentiality, data protection, health & safety, lone working, safeguarding, professional boundaries and disability awareness.

3.1 Attend sessions that are booked and confirmed with the student	
Standard	Measure
<p>Support worker must make sure that all sessions are booked and confirmed with the student.</p> <p>‘Booked’ means that the student and NMH provider have agreed the date, time, location and support role in advance of each session.</p> <p>The support worker must confirm the session with the student using the students preferred method of communication between 24 hours and 7 days in advance, where appropriate.</p>	<ul style="list-style-type: none"> • QA sample check of booking response time, for example, email communication, student record database • QA sample check of records of confirmation with student, for example, email communication

3.2 Cancellation procedure	
Standard	Measure
<p>Support workers must ensure students are aware of the cancellation policy and confirm that they understand how to cancel a session, the cancellation notification period and the impact of non-cancellation.</p> <p>Note: The student should be provided with a copy of the cancellation procedure which clearly notes the cancellation period applicable for the NMH provider.</p>	<ul style="list-style-type: none"> • QA sample check that NMH provider has a record to demonstrate the student has been provided with the cancellation policy

3.3 Clear documentation evidencing work carried out	
Standard	Measure
<p>The support worker must keep clear evidence of the work undertaken with the student via mandatory timesheet (Template 1) and the work plan / ILP, where applicable which includes:</p> <ul style="list-style-type: none"> - location - start and end time - details of the support provided during the session - student confirmation of support received <p>Support workers must not attend a session that has been cancelled within the appropriate notice by the HEP/NMHP/student</p> <p>Note 1: Where an NMH session terminates earlier than the time scheduled, the student is required to confirm that they agreed</p>	<ul style="list-style-type: none"> • QA sample check at audit: review timesheet documentation of sessions against invoices.

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for the session to terminate early and the reason why, and this should be recorded in the support worker's timesheet.

Note 2: Students must not be asked to pre-sign timesheets.

3.4 Advise students of the process when additional NMH support is required

Standard

If the student requests additional hours of NMH support, the support worker must inform the student to contact their assessor, who will consider the request and liaise with the funding body to gain authorisation for any additional NMH support.

The **registered** NMH Provider must also notify the Assessment Centre in writing (e.g. email) of the student's additional support request.

Measure

- QA sample check at audit: review timesheet documentation of sessions against invoices.

3.5 Training

Standard

The support worker must attend training on the undernoted areas before delivering DSAs funded NMH services:

- confidentiality;
- data protection;
- health and safety;
- lone worker (if applicable);
- safeguarding;
- professional boundaries;
- disability awareness*

***Note:** If a support worker has membership to a professional body recognised via the DfE mandatory criteria, this would meet the requirement for disability awareness training.

Measure

- QA check of record of support worker training undertaken and certificates/evidence of attendance or completion whether in person and /or online.

QUALITY SERVICE PROVISION

4.1	The support worker is suitably qualified to provide the support.
4.2	The support worker will have an agreed work plan with the student.
4.3	The support worker will only provide support in a suitable environment.
4.4	The support worker maintains CPD and training records.

4.1 Qualified to provide the support	
Standard	Measure
<p>The support worker must only undertake roles for which they hold the mandatory qualifications / professional body membership.</p> <p>Note: The support worker may inform DSA-QAG via the whistleblower policy if they are requested to provide support that they are not qualified to deliver or they consider a request from the provider they are employed by could impact on the student's learning. The whistleblower policy can be found at: https://dsa-qag.org.uk/whistleblower-policy</p>	<ul style="list-style-type: none"> • QA audit sample check: review of invoice records and support worker credentials

4.2 Agreed work plan with the student	
Standard	Measure
<p>The support worker and the student should agree the work to be undertaken and expected outcomes. This must be documented, reviewed and updated at least every 3 months.</p> <p>This should include a student/ NMH agreement to articulate expectations on both sides.</p> <p>Note: Work plans for the academic year must be available for audit purposes, clearly documenting the review periods.</p>	<ul style="list-style-type: none"> • QA audit – sample check of work plans for students (3 monthly revisions) being invoiced against the student/NMH agreement

4.3 Provide support in a suitable environment	
Standard	Measure
<p>The location/environment for specialist one-to-one support which takes place outside the lecture/tutorial must be comfortable, confidential, appropriate and suitable for the requirements of the student's support. It should also take account of the student's disability needs.</p> <p>Method of delivery, if outside of the normal face to face session within a lecture/tutorial must be student choice and requested by them.</p> <p>For clarification methods of delivering support are:</p>	<ul style="list-style-type: none"> • QA audit - sample of students' session records checked

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In-Person (standard) – this method of delivery is where support is provided in person and in a suitable, comfortable and confidential location agreed with the student. This also covers the delivery of in-person support in lectures and/or exams.

Distance Learning – this method of support is primarily aimed at students who are undertaking a distance learning course and require support in their residence. This can also include students not on a distance learning course but require NMH in their own residence. NMH Providers should refer to section 1.13 Risk Assessments if intending to provide support in the student’s residence.

Remote Delivery – this method of support is delivered via a real time remote session, e.g Skype, Facetime etc. Delivery of this method must be at the student’s request. This must be clearly documented on the student’s record.
Please note, support via email is not appropriate.

Note: A public place such as a café or coffee shop are not deemed suitable locations as they do not meet the standard in respect of comfortable and confidential locations. The venue for support should be a room with a door that closes and the room should be available for the whole of the support session for the student receiving the support, as well as the NMH support worker and any additional person the student may wish to accompany them. For clarification, this should not be a room that is shared with anyone else during the support period.

4.4 Maintain CPD and training records

Standard

The support worker must ensure they undertake structured CPD and relevant training annually, covering as a minimum:

- relevant professional development in their specialist role(s)
- updating skills in new practices

CPD and personal training records must be maintained and made available for audit. Further guidance on structured and unstructured CPD is provided at Appendix 5.

Note: For roles where support workers are required to be registered with a professional body, evidence of CPD is not required.

Measure

- Review of sample training records for the last 12 months
- Review of sample structured CPD records for last 12 months

Templates

Template 1: Timesheet

Template 2: Register of Interest (Support Worker)

Template 3: Register of Interest (Support Worker) - Log

Template 4: Consent to share information – Student

Template 5: Consent to share information – Support Worker

Template 6: Risk Assessment Log

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Template 1 – Standard Timesheet

LOGO

Student Name	
Student CRN	
Student D.O.B	
Support Type	

INVOICE NUMBER	
Company Name	
Funding Body	

Attended Sessions

Location	Mode of Delivery	Date	Start Time (HH:MM)	Finish Time (HH:MM)	Total Breaks* (HH:MM)	Total Hours	Student Signature	Support Worker (PRINT NAME)	Support Worker Signature

*Breaks – Support provided more than 8 consecutive hours are expected to include a break. Breaks must be recorded within 15min blocks. ‘Comfort’ breaks taken during shorter sessions do not need to be declared

Missed or Cancelled Sessions

Only chargeable missed/cancelled sessions should be included in this section. To ensure that we can process the invoice in a timely manner, please state the date and time when you were informed by the student that the session was cancelled along with the reason for cancellation. For non attendance please enter “NA” into the *Date and Time Informed* box below.

Reason	Date	Start Time (HH:MM)	Finish Time (HH:MM)	Total Hours	Date & Time Informed

TOTAL TIMESHEET HOURS	
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Template 2 – Register of Interest (Support Worker)

Please note the Register of Interest (Support Worker) is a Department for Education document.

This document allows all support workers to officially declare any potential conflict of interest with other relevant bodies. This will be reviewed by the Disabled Students' Allowance auditors as part of the QA audit.

A conflict of interest is any situation in which an individual's personal interests or interests which they owe to another person, body or organisation arise simultaneously or appear to clash.

Conflicts of interest may come in a number of different forms, for example:

- payment to an employee for services provided through and by another organisation
- business / work being awarded where an employee could be seen to have or has a financial or a close personal interest / relationship to that other organisation or individual (relative, family member)

This declaration should be completed by all support workers engaged in DSA funded business by the NMH provider.

By signing this document you declare you currently have no conflict of interests that would affect your duties for the NMH provider, or that you have provided information in relation to any conflict of interest which may arise.

Support worker is required to declare any conflict of interest or potential conflict of interest as soon as practicable to their manager and complete this form, which should be held on file.

Name			
Signature			
Date			
Conflict of Interest Declaration	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If you have answered YES to the conflict of interest declaration, please provide details below with the names and details of any individual with a connection to you, stating the nature of the connection:			
Describe what steps/processes/measures are in place to ensure that undue advantage is not given to the organisation(s)/individual(s):			
Name of Support Worker:			
Manager:			

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Template 4 - Consent for Sensitive Personal Data Processing - Student

Dear [Student]

In addition to the normal data processing carried out by [Name of NMH Provider] ("the provider") the transfer of a copy of your DSA 2 letter, study workplan, or other relevant information contained within your student record, to the Disabled Students Allowance Quality Assurance Group ("the Auditor") may be required so that the Auditor can audit the provider's internal processes for dealing with the delivery of non-medical help support. These audits play an important part of ensuring that the provider is complying with all relevant legislation, internal and external guidance. Such compliance is vital to the provider, so it can properly assess the delivery of this support.

The information that the provider is proposing to transfer to the Auditor is a copy of your DSA2 letter, study workplan, or other relevant information contained within your student record. As you will be aware, this includes the following Personal Data about you:

- ◆ identity and age;
- ◆ Type of support awarded
- ◆ Timesheets confirming delivery of support
- ◆ Communications between you and the provider
- ◆ higher education institution and course information.

The Centre is also proposing to transfer information which could be classified as sensitive personal data under the General Data Protection Regulations, including:

- ◆ the fact that you receive a disability allowance;
- ◆ letter of award of support;
- ◆ Timesheets which indicate the type of support being delivered

As the proposed transfer includes sensitive personal data (in this instance, health information about you), we require your consent before we are legally permitted to provide the Auditor with your sensitive personal data (but not other types of personal data), if selected as a student sample.

The personal data provided to the Auditor would only be processed for the specific purpose of carrying out the audit of the provider. The data would not be retained by the Auditor once the audit of the provider had been completed and accredited by DSA-QAG. This consent will be held by the provider for the duration of the audit process, alongside any other forms of consent you have provided to the provider in relation to other current data processing activities carried out by the provider in relation to your personal and sensitive personal data.

You are free to refuse to give your consent or to later withdraw your consent. Any refusal or withdrawal of consent will not affect any element of any service provided to you by the provider.

By signing this form and ticking each of the separate boxes below, you are giving your consent to the transfer of your sensitive personal data set out below from the provider to the Auditor and to the processing of this data by the Auditor for the purpose described above.

I consent to the transfer of the following types of personal data about me:

- ◆ the fact that you receive a disability allowance;
- ◆ letter of award of support;
- ◆ Timesheets which indicate the type of support being delivered

Student's Name

Student's Signature

Date

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Template 5 - Consent for Sensitive Personal Data Processing – Support Worker

Dear [Name]

In addition to the normal data processing carried out by the [Name of NMH provider] ("the provider") transfer/sharing of information or documentation relating to you providing NMH support, to the Disabled Students Allowance Quality Assurance Group ("the auditor") may be required so that the auditor can audit the providers internal processes for dealing with the delivery of NMH support services. These audits play an important part of ensuring that the organisation is complying with all relevant legislation, internal and external guidance. Such compliance is vital to the provider so it can properly provide NMH support services.

The information that the organisation is proposing to share with the auditor is a copy of documentation such as your professional body membership, support worker records, training records and copies of qualification information/certificates. As you will be aware, this includes the following information about you:

- identity;
- support worker role;

This information includes personal data and sensitive personal data as defined under the General Data Protection Regulations. As the proposed sharing/transfer includes person identifiable information, we require your consent before we are legally permitted to provide the auditor with your information, if selected during the support worker sample.

The personal data provided to the auditor would only be processed for the specific purpose of carrying out the audit of the provider. The data or NMH support information would not be retained by the auditor once the audit of the provider had been completed and accredited by DSA-QAG. This consent will be held by the provider for the duration of the audit process, alongside any other forms of consent you have provided to the organisation in relation to other current data processing activities carried out by the organisation in relation to your personal and sensitive personal data.

By signing this form you are giving your consent to the transfer of your personal and sensitive personal data set out above from the provider to the auditor and to the processing of this data by the auditor, for the purpose described above.

**Support Worker
Name**

**Support Worker
Signature**

Date

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Appendices

Appendix 1: Complaints Procedure

Appendix 2: Register of Interest Chart

Appendix 3: Suitably Qualified Person

Appendix 4: Annual Statistical Return

Appendix 5: Continuous Professional Development

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Appendix 1 – Complaints procedure

NMH Providers will have a documented complaints procedure which will be published on their website and available in other accessible formats. As a minimum the document should:

1. State the NMH Provider’s complaints policy.
2. Explain that complaints will be handled in a professional and non-confrontational manner.
3. Explain how students/customers can complain and identify the stages in the complaints process.
4. Explain who will listen to the complaint.
5. Explain the method by which the organisation will respond.
6. Provide the timeframe within which the organisation will respond to the complaint.
7. Explain the options for the student/customer if they remain dissatisfied after the NMH Provider’s initial response and wish to escalate their complaint.
8. Identify a third party to whom the customer may complain.
9. Identify the ultimate point of appeal if the student/customer remains dissatisfied.

NMH Providers will also maintain a complaint log which will include:

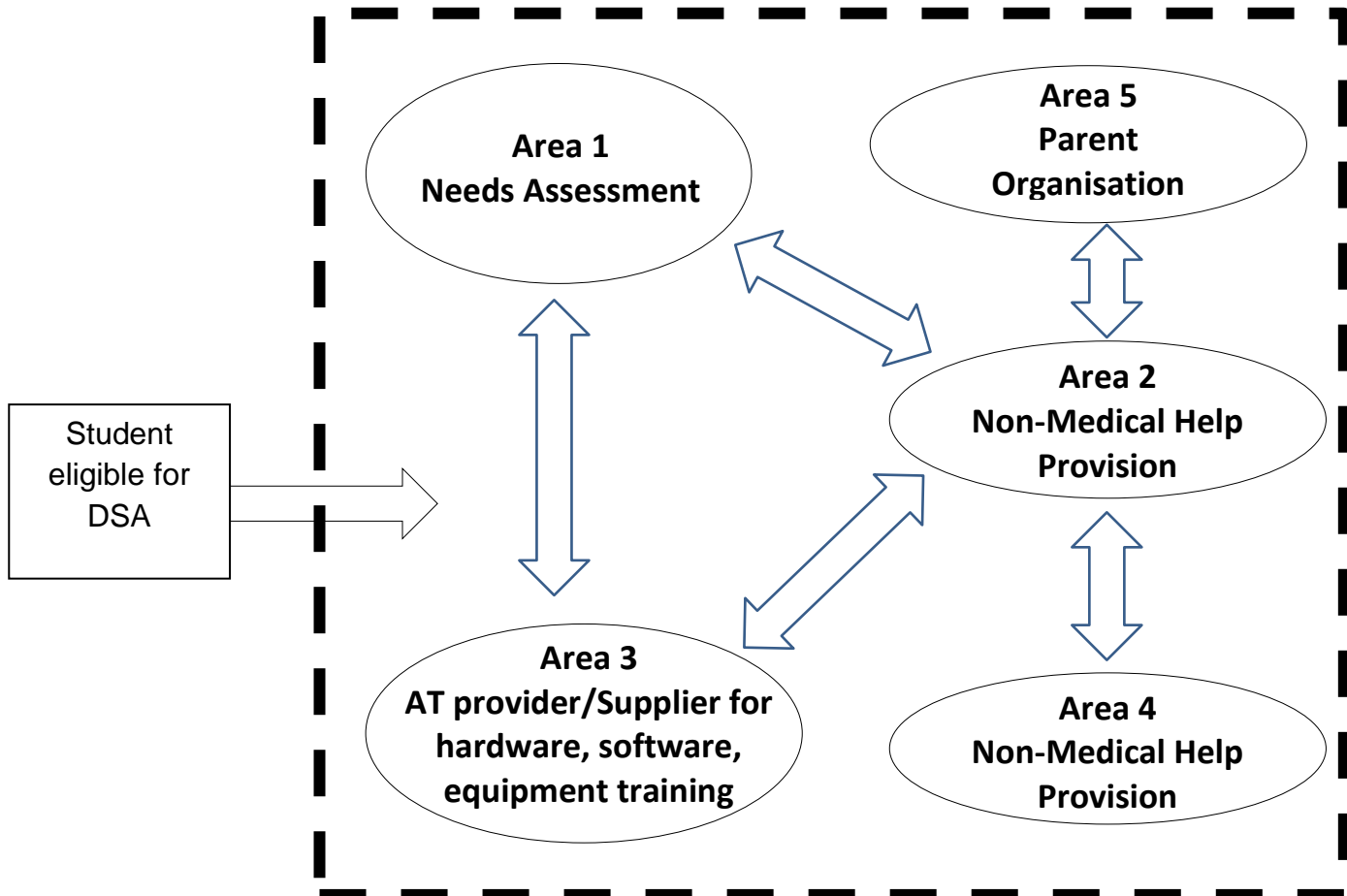
1. The student’s/customer’s name and account reference.
2. Date of the complaint.
3. A flag to indicate if the complaint is “open” or resolved.
4. Nature of the complaint.
5. Record (including dates) of the NMH Providers response and any actions taken.
6. Record of subsequent correspondence or discussions with the student/customer.

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Appendix 2 – Register of Interest Chart

Please note the Register of Interest Chart is a Department for Education document.

DSA areas



The above chart outlines areas where relationships between providers of DSA funded services could lead to a conflict of interest. For example, where an organisation provides study needs assessment services and non medical help provision.

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Appendix 3 – Suitably Qualified Person

NMH providers are required to ensure that their support workers receive appropriate training in a range of areas in order to comply with the new NMH Quality Assurance Framework. It is important that training is delivered by a suitably qualified person(s), i.e. an individual who has been certified at level 3 and above, as determined by DfE.

Training should be formally accredited in order to have the assurance that the training is of the right quality or is delivered by an awarding body that is quality assured e.g. by QAA. Formal accreditation provides assurance that an organisation or person is competent to perform specific processes, activities, or tasks in a reliable, credible and accurate manner.

This could be demonstrated in the following ways for the purposes of compliance with the QAF:

- 1) The organisation providing the training is externally accredited to provide training in the relevant subject area e.g. accredited by CPDUK <https://cpduk.co.uk/>, CPD Standards Office <https://www.cpdstandards.com/> or similar, or is an HE institution with degree awarding powers.
- 2) The training course is externally accredited by an accreditation /awarding body or is provided by a HE institution with degree awarding powers.
- 3) The training is provided by one of the professional bodies listed on the NMH mandatory criteria grid.

This list is not exhaustive and other training will be considered.

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Appendix 4 – Annual Statistical Return

NMH providers will access the annual statistical return via the DSA-QAG portal on receipt of the portal request for the annual submission for the period 1 September – 31 August each year. The statistics supplied should only reflect support provided to students who are funded by Student Finance England. This information may be analysed by the Department for Education (DfE) for future DSA policy.

ANNUAL STATISTICAL RETURN – SECTION A

Please provide accurate information.

Role support is being provided for	Number of students supported from 1 September to 31 August
Communication Support Worker	
Lip speaker	
Specialist Note Taker (for Deaf/Hard of Hearing students) Includes Electronic Note Taking and Speech To Text Reporter	
Specialist Notetaker for VI students, including Braille	
Specialist Transcription Service	
Mobility Trainer	
Specialist mentor (mental health condition)	
Specialist mentor (AS)	
Specialist one-to-one study skills support (SpLD)	
Specialist one-to-one study skills support (AS)	
BSL interpreter - includes Interpreter for the deaf or Deaf blind People	
AT trainers	
Specialist Support Professional for Students with Sensory Impairment – Deaf students	
Specialist Support Professional for Students with Sensory Impairment – Vision impairment	
Specialist Support Professional for Students with Sensory Impairment Multi-sensory Impairment (MSI)	
Total	

ANNUAL STATISTICAL RETURN – SECTION B

Please provide accurate information.

Study Mode – SFE Students Only	Number of students supported from 1 September to 31 August
Undergraduate - Full Time	
Undergraduate - Part Time	
Postgraduate – Full Time	
Postgraduate – Part Time	
Total	

Total numbers recorded in sections “A” should equal sections “B”.

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Appendix 5 – Continuous Professional Development (CPD)

The requirement is to have carried out at least 1 piece of structured* CPD, relative to the support role being provided, within the last 12 months.

- Equality and diversity
- Mindfulness
- Communication
- Sighted Guide
- Mental health awareness / first aid
- Autism awareness
- SpLD awareness
- Dyslexia awareness
- Safe guarding
- Minute taking
- Prevent
- Manual handling
- Safety at work
- Assistive technology awareness
- Disability awareness

*Structured CPD

Structured CPD includes all CPD which has learning as the primary objective and which is measurable and verifiable.

There are two forms of Structured CPD - directed study and self-directed study.

1 Directed study:

This includes formal programmes designed with learning as the primary objective and requires at least one of the following;

- physical attendance at group learning activities, for example lectures, presentations, or
- participation in technology assisted learning activities (including online, CD, audio or video training courses), or
- independent assessment of learning, for example the submission of assignments, research papers or examination.

Directed Study can be measured in terms of the hours spent on the learning activity and can be verified through attendance records, examination results etc.

2 Self-directed Study

This includes independent study with learning as the primary objective, including various forms of self-directed learning such as research (with published outputs), writing of articles, lecturing and, in

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specific circumstances, significant on-the-job training. In all cases, this form of study must have measurable outputs which can be verified by an independent and competent source.

Self-directed study can be measured in terms of the hours spent arriving at an outcome that can be assessed and verified by an independent and competent source.

Unstructured CPD

Unstructured CPD can be defined as any form of informal learning or development of day to day working skills achieved through self-study and/or informal training.

Unstructured CPD can be measurable but is not verifiable.

The following is categorised as Unstructured CPD:

On-the-job training which consists of informal briefings carried out by other staff members.

- Technical reading.
- Attendance at Network Groups.

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Terms & Definitions

Term	Definition
CPD	Continuous Professional Development
DfE	Department for Education
HEP	Higher Education Provider
NMH Provider	Any sole trader, higher education provider (HEP) or business registered to DSA-QAG
OIA	Office of the Independent Adjudicator
SFE	Student Finance England
Support Worker	Any staff, employee or personnel that are providing NMH support to SFE DSA funded students.