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| IALA Guideline |

Guideline 1014

ACCREDITATION OF VTS TRAINING ORGANIZATIONS AND APPROVAL TO   
DELIVER IALA MODEL COURSES

Edition 4.0

Date (of approval by Council)

*Revokes Guideline [number]*

Revisions to this IALA Document are to be noted in the table prior to the issue of a revised document.

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# INTRODUCTION

Recognising that a major factor in the operation of a VTS is the competence of its personnel, IMO Resolution A.857(20) Guidelines for Vessel Traffic Services states, inter-alia, that the Contracting Government or Governments or the competent authority should:

* establish appropriate qualifications and training requirements for VTS operators, taking into consideration the type and level of services to be provided (Annex 1, paragraph 2.2.2.9); and
* ensure that provisions for the training of VTS operators are available (Annex 1, paragraph 2.2.2.10).

Further, the resolution states that the competent authority should *“Subject to their own national and local requirements and constraints, authorities will need to establish training requirements for their VTS operators. Authorities will also need to set specific knowledge, skill and personal suitability standards which operators must meet.”* (Annex 2, paragraph 2.2.1)

Recognising that a major factor in the operation of a VTS is the competence of its personnel, IMO Resolution XXXX(XX) *Guidelines for Vessel Traffic Services* states:

* That the Competent Authority for VTS should *“ensure that VTS training is approved and VTS personnel are certified”*.
* *“VTS personnel should only be considered competent when appropriately trained and qualified for their VTS duties. This includes:*

*.1 satisfactorily completing generic VTS training approved by a competent authority;*

*.2 satisfactorily completing on-the-job training at the VTS where the person is employed;*

*.3 undergoing periodic assessments and revalidation training to ensure competence is maintained; and*

*.4 being in possession of appropriate certification”.*

* *“Contracting Governments are encouraged to take into account IALA standards and associated recommendations, guidelines and model courses”.*

In particular, IALA Standard 1050 Training and Certification specifies the practices associated with:

* Accrediting training organizations as described in *Recommendation O149 - Accreditation of Training Organizations*.
* Approving model courses described in *Recommendation 0103 - Training and Certification of VTS Personnel*.

# PURPOSE OF GUIDELINE

This Guideline provides the framework for competent authorities to:

* Accredit organizations to provide training based on IALA Model Courses; and
* Approve their delivery of IALA model courses, including:
* C0103-1 VTS Operator Training (VTS-103/1);
* C0103-2 VTS Supervisor Training (VTS-103/2);
* C0103-4 VTS On-the-Job Training Instructor (VTS-103/4); and
* C0103-5 Revalidation Process for VTS Qualification and Certification (VTS-103/5).

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| IALA Guideline 1014 on *Accreditation of VTS training organizations and approval of the delivery of IALA model courses* is associated with Recommendation 0149 on *the Accreditation of Training Organizations*, a normative provision of IALA Standard 1050 *Training and Certification*.  To demonstrate compliance with the Recommendation the provisions of this Guideline need to be implemented. |

Note:

1. IALA model courses not listed above do not need to be approved by the competent authority.
2. Model course C0103-5 may be delivered by VTS providers for their own personnel. In such cases the competent authorities are encouraged to establish a review and approval process as outlined in this Guideline.

# ACCREDITATION

Accreditation is the formal endorsement by a competent authority that a training organization operates under quality systems to deliver effective training.

## QUALITY SYSTEMS

In accrediting an organization the competent authority (or its delegated third party of the competent authority) should assess their quality system through an audit process.

Relevant international guidance prepared and published by appropriate international organizations regarding management systems for training organizations should be taken into account, or where there are national requirements for quality systems, these should be used.

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| ISO Standard 21001:2018 on *Educational organizations – management systems for educational organizations – requirements with guidance for use*, is an international standard issued by the International Organization for Standardization (ISO). The term of ‘EOMS’ is commonly used to describe the management systems used by educational organizations.  In summary, the standard specifies the requirements for a management system when an educational organization:   * Needs to demonstrate its ability to support the acquisition and development of competence through teaching, learning or research. * Aims to enhance satisfaction of learners, other beneficiaries and staff through the effective application of EOMS, including processes for improvement of the system and assurance of conformity to the requirements and other beneficiaries. |

*Note:*

1. *While this guidance provides an example to ISO 21001:2018, the training organization may adopt, for example, another quality management system.*
2. *It is recognised that from time to time, the guidance for quality management systems may be amended and the training organization should take these into account.*

Key elements of the management system typically include:

|  |  |
| --- | --- |
| Scope of the management system | Understanding the organization and its context  Understanding the needs and expectations of interested parties  Scope of the management system |
| Leadership | Leadership and commitment  Focus on learners and other beneficiaries  Developing and communicating the educational organization policy  Assigning the organizational roles, responsibilities and authorities |
| Planning | Planning of actions to address risks and opportunities  Establishing the educational organization objectives, and planning to achieve them  Planning and managing changes |
| Support | Determining and providing the necessary resources for the operation of the EOMS (human resources, facilities, organizational knowledge)  Competency and training  Awareness and communication  Creating, updating and controlling the documented information |
| Operation | Planning operations and controls  Determining and communicating requirements for the educational products and services and any changes to them  Establishing controls including design and development controls and procedures  Control of externally provided processes, products and services  Delivering the educational products and services |
| Performance evaluation | Monitoring and measuring the satisfaction of learners, other beneficiaries and staff  Analysis and evaluation of the obtained information  Conducting internal audits and management reviews |
| Improvement | Reacting to non-conformities and taking corrective actions  Continually improving the management system  Determining opportunities for improvement |

## CONSIDERATIONS

### Recognition of quality management systems

Where a competent authority has assessed that a training organization has quality a management system in place to deliver STCW courses or other formally recognized education programmes, the authority may take this into account when assessing compliance with IALA Standard 1050 to accredit a training organization.

### Where a competent authority operates a training organization

Where a competent authority also operates a training organization, measures should be implemented to ensure that the process of accreditation and approval is sufficiently independent and conducted by auditors who do not have a routine connection with the management and operation of the training organization.

The competent authority may consider the use of a third party organization to conduct or assist in the audit process. Alternatively, this may also be achieved by ensuring that the audit team are appointed from different departments within the competent authority.

# APPROVAL OF MODEL COURSES

IALA Model Courses are documents which define the level of training and knowledge needed to reach levels of competence defined by IALA.

Approval is the formal endorsement by the competent authority that a training organization meets the standards specified in an IALA model course for its implementation, delivery and assessment.

Model courses described in section 2 (Purpose of Guideline) above should be approved by the competent authority (or a delegated third party of the competent authority).

Competent authorities should prepare compliance matrices for each IALA model course being approved. The approval process involves the training organization demonstrating compliance with two core areas:

* the operational elements associated with the implementation, delivery and assessment of a model course have been addressed; and
* the model course subject elements have been satisfactorily covered through the development of an appropriate curriculum supported by relevant learning resources and facilities.

At a minimum all subject elements specified in the model course should be covered in order for a course to be approved in accordance with this Guideline. The training organization may give consideration to including additional subject elements, for example, due to national requirements or tailoring the course for the student intake.

The training organization should also provide supporting information on the following which is to be reviewed by the competent authority during the audit process:

## ENTRY STANDARDS

The training organization should take into account the pre-requisites specified for that model course, and give consideration depending on the student intake to identifying any additional relevant entry requirements.

The entry standards set by the training organization should be documented.

## RECOGNITION OF PRIOR LEARNING

The training organization should have a framework in place to recognise relevant prior learning in terms of assessing and recording the outcomes.

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| *IALA Guideline 1017 - Assessment of prior learning exemptions for VTS model courses* provides further guidance on the assessment and recognition of prior learning. |

## COURSE CURRICULUM

Course curriculums and detailed lesson plans should be prepared based on the relevant IALA model course, giving consideration to:

* The methodology of learning and teaching techniques employed to meet the learning outcomes.
* Time spent (e.g. number of hours) and resources allocated to particular subjects or module elements.
* Total course duration (if the proposed teaching hours differ greatly from the nominal hours given in the model course, the methodology to achieve the objectives is to be substantiated).

## CONDUCT OF TRAINING

Consideration should be given to how the course is delivered such as the training methods and materials, and the facilities and equipment used.

### Training methods and materials

The training organization is to determine the number of students enrolled on the course and provide information on the student/staff ratio.

The student training materials (e.g. notes, presentations and reference documents etc) should be consistent with IALA standards and up-to-date taking into account any recent changes and industry developments. These training materials should be available to the student for their reference.

Where e-learning, distance or blended delivery is proposed, training organizations should consider the necessary adjustments that may be required.

### Facilities and equipment

The teaching aids, facilities and equipment students will utilise during the course should be of a sufficient standard to ensure quality course delivery and acceptable levels of health and safety.

The simulation equipment should be fit for purpose to meet the requirements of the training course delivered.

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| *IALA Guideline 1027 – Simulation in VTS training* contains information about the design and implementation of VTS exercises using a simulator. |

## QUALIFICATIONS OF INSTRUCTORS AND ASSESSORS

The training organization should provide information on the qualifications and experience of their instructors and assessors delivering the IALA model courses.

In determining the acceptability of the qualifications for instructors and assessors consideration should be given to:

* Ensuring they are appropriately qualified (eg recognised teaching qualifications) and experienced for the training being provided and assessing competency.
* Where simulator-based training is conducted, they should be qualified at a minimum to provide simulation activities consistent with *IALA Guideline 1027 -* *Simulation in VTS Training*.
* Where e-learning, distance or blended delivery is provided, they should have relevant training and experience in the delivery using such methods.

Further, the competent authority may decide to set minimum qualification standards for instructors and assessors.

## STUDENT ASSESSMENT PROCEDURES

The assessment of students should take into consideration:

* The assessment procedures (for example, examination, practical, continuous assessment etc) carried out to satisfy the model course requirements, as well any other national requirements.
* Maintenance of student records. Training results should be recorded and retained as evidence to indicate the competency levels that have been attained for each subject of the module course.
* Issuing of course certificates consistent with *IALA Guideline* *1156* *Recruitment, Training and Assessment of VTS Personnel.*

## STUDENT RECORDS

The training organization should give consideration to protecting student records and ensuing that records are accessed only by authorised persons. In particular:

* What data is collected, how and where it is stored;
* Who has access to the data;
* Under which conditions student records may be shared with third parties; and
* How long the data is stored for.

## OUTSOURCING OF COURSE DELIVERY

A training organization may utilise the services of third parties to deliver, in full or in part, an IALA model course.

In such circumstances, it is the responsibility of the training organization to ensure that:

* The services provided by the third party are in compliance with the relevant IALA model course and are consistent with the training organizations management system; and
* The third party is trained in and fully aware of the requirements and procedures of the training organizations management system.

If the services of a third party are used, the training organization remains fully responsible for the oversight and implementation of the management system to ensure the relevant standards for the accreditation and approval are maintained.

# PROCEDURES FOR CONDUCTING AUDITS

An audit is an evidence gathering process used to evaluate how well the audit criteria are being met. Audits must be objective, impartial, and independent, and the audit process must be both systematic and documented.

The competent authority (or a delegated third party of the competent authority) is to ensure that the training organization meets the requirements of IALA Recommendation R0103, and the specific requirements of the model courses they seek approval for. The auditor undertaking compliance audits should have the necessary knowledge and skills to apply audit principles, procedures and techniques.

The training organization may apply at the same time to be accredited and approved to deliver individual model courses. Subsequent applications may be made for the approval of additional courses to be added their certificate of accreditation.

Audits should preferably be undertaken when the course is being delivered as a means to review in a live setting the practical application of procedures and training materials. This will also provide an overall evaluation on the interaction between course instructors and students, and the effectiveness of how the model course has been implemented under their quality framework (eg EOMS). Where this is not possible, the competent authority may grant an interim approval for the delivery of a single course in order to facilitate the start-up operation of a new training organization, or the implementation of an additional model course at an existing training organization.

There are three stages to the audit process:

## STAGE 1 – PRE-AUDIT

### Application for accreditation and approval of model courses

The training organization submits an application with supporting documentation to demonstrate that:

* Training is being provided within a functioning quality management system.
* The course material and curricula comply with the IALA model courses
* Instructors and assessors are properly qualified to deliver training and assess competency of students.

The competent authority should develop procedures to provide guidance and assist training organizations in their application for accreditation. Example compliance matrix’s are available in Annex A and B.

### Appointment of the audit team

Following the receipt of an application an audit team is appointed to assess the application and where appropriate, plan and undertake the audit. Note – the audit team may consist of one, or more people.

### Preliminary assessment

The audit team is to assess the compliance matrix and supporting documentation in terms of how the applicant’s response demonstrates they have a functioning quality management system, and has systems and processes in place to satisfy compliance with the audit criteria.

During the preliminary assessment consideration may be given to identifying areas of concern, or where the compliance audit should focus.

Where the audit team determines that the information provided is insufficient for the audit to proceed then communications with the applicant should occur with a view to rectifying the issue/s identified.

Where the information provided demonstrates the applicant could provide objective evidence during the audit to meet the accreditation and approval of the model course requirements, then the team should prepare an audit plan.

### Audit plan

An audit plan should be developed to outline the audit activities that will be carried out in order to achieve the audit objectives. The audit plan should contain:

* Audit date/s.
* Audit location/s.
* Objective and scope and of the audit. The scope of an audit is typically a statement that specifies the focus, extent, and boundary of a particular audit.
* Audit criteria.
* Audit timetable. The audit timetable should include the date and places where on-site activities will be conducted, and the expected time and duration of each activity including the opening meeting, overview of operations and closing meeting.
* Any other areas that may be reviewed.

## STAGE 2 – AUDIT

### Opening meeting

An opening meeting should be held at the beginning of the audit to:

* introduce the audit team;
* explain the purpose of the audit;
* explain the audit objectives, scope and criteria (this will help keep the audit on track);
* provide a short summary of how the audit activities will be undertaken (e.g. sampling of objective evidence which will form the basis of the findings, audit report prepared) and proposed an audit timetable;
* ensure that access to appropriate personnel and resources are available for the audit team; and
* provide opportunity for the auditee to ask questions.

### Collecting audit evidence / audit findings

A sampling approach is often undertaken during an audit to demonstrate by way of objective evidence that the auditee has systems and processes in place to show conformance with the audit criteria. This may include:

* Document verification – The documentation referred to by the applicant in the compliance matrix and supporting documentation should be verified. For example, it should be:
* Complete - all expected content is contained in the document.
* Correct - the content conforms to other reliable sources such as standards and regulations.
* Consistent - the document is consistent in itself and with related documents.
* Current - the content is up to date and version control maintained.
* Records – Records such as minutes of meetings, audit reports, student feedback, monitoring programs, measurement processes and statistical reports should be reviewed as applicable, to demonstrate conformance with relevant audit criteria.
* Interviews – Interviews are an important way to collect information by allowing the interviewee to explain or clarify their operations, however this information needs to be verified with supporting information such as observations and records.
* Observing training delivery – Where possible, the instructor’s delivery, the interaction between instructor and students, and student assessments should be observed. Data Summaries – Analysis of data often provides a useful mechanism to confirm that procedures are being followed and key items being reported to management.

Once evidence has been assessed and compliance with requirements determined, auditors should document their findings which will form the basis to compile the audit report.

### Closing meeting

A closing meeting should be held at the end of the audit to:

* provide a general indication of the preliminary audit findings. It is important that the auditor indicates that findings are preliminary and that the final conclusions could be subject to change once all evidence is fully considered;
* provide a briefing on any items needing immediate attention;
* request any further information or clarification in order to finalise audit findings; and
* inform the applicant that they will be able to comment on the draft audit findings and the Corrective Action Plan.

## STAGE 3 – POST-AUDIT

### Audit report

A report on the audit should be prepared summarising the audit findings and conclusions. There are two possible outcomes from the audit:

1. Audit criteria satisfied

The auditors conclude the objective evidence provided demonstrates that the training organization meets the criteria for accreditation and approval of the model courses they applied to deliver.

Under this scenario, the competent authority can issue the certificate of accreditation, and approval of the model courses they applied to deliver.

1. Audit criteria **not** satisfied

The auditors conclude there was insufficient objective evidence provided to demonstrate the training organization meets the criteria for accreditation and approval of the model courses they applied to deliver.

Under this scenario, the competent authority should notify the training organization and provide reasons to why the certificate of accreditation should not be issued.

In both scenarios, the audit report and corrective action plan should be prepared, and provided to the applicant.

### Corrective action plan

The purpose of a corrective action plan is for the auditors and auditee to agree on a course of action to deal with non-compliances identified during the audit. The corrective action plan can be developed with input from auditee representatives to ensure that the actions required are appropriate, fully understood and achievable.

The corrective action plan should:

* List the audit findings (e.g. minor non-conformances, observations and opportunities for improvement). The findings should not be prescriptive recommendations on how to address the non-compliances, but rather to describe what was not evident, or in place the time the audit was conduct.
* Auditees should provide a response to each finding in terms of proposed corrective actions to be taken to address the audit findings by a proposed close out date.

The competent authority should closely monitor and follow-up progress with the auditee to close out outstanding non-conformities. The auditor should review the proposed corrective actions submitted by the training organization and determine their acceptability.

Depending on the nature of the non-conformities the auditor may require a follow‐up periodic audit to confirm effectiveness of the implemented corrective actions, or in the case of major non‐conformities the auditor may recommend the certificate of accreditation be suspended until corrective action has been successfully completed.

## CONSIDERATIONS

### Use of third party organizations for the audit process

The competent authority may decide to engage a third party organization, with experience and qualifications in the provision of training to conduct audits in full, or in part on its behalf. In that case, the competent authority should ensure that the audit process has been conducted in accordance with this Guideline.

The final decision and responsibility with respect to granting the accreditation and approval rests with the competent authority who will issue the certificate of accreditation.

# CERTIFICATION OF ACCREDIATION

## INTERIM APPROVAL ARRANGEMENTS

In order to facilitate the start-up operation of a new training organization, or the implementation of a new model course at an existing training organization, the competent authority may grant an interim approval for the delivery of a single course within a defined timeframe, for example 12 months.

The interim approval process should consist of a desktop assessment that covers the elements described in Section 3 (Accreditation) and Section 4 (Approval of model courses) with the exception of the physical audit that should be conducted while the course is in progress.

An interim approval should be valid for the initial delivery of a model course. This will enable the training organization to provide the training and allow the full accreditation and approval audit to be conducted while the course is in progress.

## ISSUING CERTIFICATE OF ACCREDITATION

The competent authority should issue the certificate of accreditation where the training organization has demonstrated through the compliance audit they meet the criteria for accreditation, and approval of the model courses they applied to deliver. A sample copy of the certificate is located in Annex C.

The competent authority should determine the period of validity for the certificate of accreditation and it is recommended that the maximum period should not normally exceed five years. Open-ended certificates should not be issued.

Information to be contained on the certificate includes:

* Certificate number - A unique serial number should be inserted.
* Name of training organization - The full name of the training organization, as given in their official documentation.
* Name of competent authority - The full name of the competent authority issuing the certificate.
* Date of certificate - The date on which the certificate is awarded or issued. Note - this may not necessarily be the same as the date on which the audit was completed.
* Expiry date - The expiry date should normally be five years less one day after the date on which the certificate was awarded.
* List of the model courses – List of the courses the organization is approved to deliver.
* Other conditions – It may be relevant to list any other conditions that the training organization needs to comply with.

The competent authority should retain a copy of the certificate for their records, and forward an electronic copy to IALA secretariat ([XXX@iala-aism.org](mailto:XXX@iala-aism.org)).

## MAINTAINING ACCREDITATION

During the period of accreditation, a competent authority may consider the use of periodic audits and associated compliance matrixes to ensure the accredited training organization continues to conform with the practices specified in *Recommendation 0149 on the Accreditation of Training Organizations* and guidance described in this Guideline.

Examples of how this could be adopted include:

* An audit conducted approximately half way through the validity period.
* Where concerns have been raised regarding the delivery of the courses they have been approved to deliver.
* Requiring an annual report summarizing the number of students attending courses, details of current instructors/assessors, copies of student feedback results etc.

Periodic audits may also aim to ensure the model courses for which the training organization is approved to deliver are being implemented in a manner consistent with the respective model course, and that updates to the model course, IALA recommendations and guidelines are incorporated into training materials.

The competent authority should have procedures in place to accommodate amendments to a certificate of accreditation for a training organization where appropriate. An example of when an amendment to a certificate of accreditation may be required is where a training organisation applies to deliver an additional model course.

## RENEWAL ACCREDITATION

If the training organization intends to continue operating after the expiration of the certificate of accreditation, the competent authority should conduct an appropriate audit similar to the initial audit to renew accreditation, and approve the model courses they intend to deliver. Ideally, this audit should be completed within 6 months of the certificate expiry date.

This renewal audit ensures the necessary standards are being maintained, and that a new certification of accreditation can be issued.

## WITHDRAWAL OF ACCREDITATION

The training organization may notify the competent authority that they no longer require their accreditation, or intend to deliver their approved model courses.

Similarly, the competent authority may consider suspending or withdrawing their certificate of accreditation where a training organization is not able to demonstrate compliance with a functioning quality management system, and the requirements for the implementation, delivery and assessment of the respective model course.

Where a certificate of accreditation is withdrawn, IALA should be informed so records can be updated and reflected accordingly on the IALA website.

# Role of IALA AND USE OF IALA LOGO

The competent authority should inform IALA that a request has been made for the accreditation of a new training organization. If necessary, IALA can provide further advice on the accreditation and approval process.

The use of IALA logo indicates that the accreditation and approval process complies with this Guideline.

Once an accreditation and approval process has been completed, the competent authority should provide copies of the certificate of accreditation and the report on the audit process to IALA.

Following receipt of these documents, the details of the training organization will be added to the IALA website and copies of the IALA logo provided to the training organization. The training organization will then have permission to use the IALA logo for the duration of the validity of their certificate of accreditation. The IALA logo may only be used by training organizations located in a country that is a national member of IALA.

# INTERNATIONAL RECOGNITION OF ACCREDITED TRAINING ORGANIZATIONS

Agreements may be identified for one Country to recognise accredited training organization(s) from another Country. Reciprocal arrangements may be implemented to facilitate such recognition where the competent authority is satisfied that the training arrangements comply with IALA standards.

A letter of confirmation, memorandum of understanding, or other appropriate instrument should be used to document the recognition.

# GLOSSARY

To assist in the use of these Guidelines, the following definitions and clarifications have been used:

**Accreditation** is the formal endorsement by a competent authority that a training organization operates under quality system to deliver effective training.

**Approval** is the formal endorsement by the competent authority that a training organization meets the standards specified in an IALA model course for its implementation, delivery and assessment.

**Audit** is a systematic and independent verification process to assess whether the required standards are being met.

**Compliance Matrix** – A document designed to measure the effectiveness of how the requirements are being met. The document aims to assist a training organization in the preparation prior to the audit, and for auditors during the audit.

**Model course** – IALA Model Courses are training documents which define the level of training and knowledge needed to reach levels of competence defined by IALA.

**Training organization** – An entity accredited by the competent authority and approved to deliver one or more IALA model courses.

# ACRONYMS

ISO – International organization for standardization

EOMS – Educational organizations – management systems for educational organizations. Refer to ISO 21001:2018 for more information.

STCW – International Convention on Standards of Training Certification and Watchkeeping for Seafarers

1. EXAMPLE - ACCREDITATION COMPLIANCE MATRIX

The example compliance matrix below:

* Describes some of the key elements referenced in quality management systems, and
* Provides guidance in terms of seeking objective evidence of how procedures and processes met their quality system.

This example matrix aligns to the clauses in the ISO Standard 21001:2018 on *‘Educational organizations – management systems for educational organizations – requirements with guidance for use’ (EOMS)*. Refer to the ISO 21001:2018 standard for more detail on these clauses.

Where a training organization uses another quality management system then they need to demonstrate how their procedures and processes meet the standard.

To assist the auditor during the audit process, any cross references to documents and other general comments should be included by the auditee on their application as required.

**Audit details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organization Name |  | | | |
| Organization Contact |  | | | |
| Phone/Mobile |  | | | |
| Email |  | | | |
| Type of Audit |  Initial |  Interim |  Renewal |  Follow-up |

|  |  |  |  |
| --- | --- | --- | --- |
| **Clause**  **Reference**  **No.** | **Elements** | **Auditee** | |
| **References** | **Comments** |
| **4** | **CONTEXT OF THE ORGANIZATION** |  |  |
| 4.1 | Does the training organization maintain and operate under a quality management system? Is the system:   * Certified by an accredited third party; * Assessed by a third party; or * Self-assessed. |  |  |
| 4.2 | What is the scope of the management system? Does the scope cover the types of products and services to be delivered, and those not applicable to the management system? |  |  |
| **5** | **LEADERSHIP** |  |  |
| **5.1** | **Leadership and commitment** |  |  |
| 5.1.1 | How does top management support the management system? |  |  |
| 5.1.2 | Does management have a focus on learners and other beneficiaries in terms of determining their needs, understanding and meeting their expectations? Can this be demonstrated through monitoring their satisfaction and education progress? |  |  |
| **5.2** | **Policy** |  |  |
| 5.2.1 | Does the organizational policy reflect the training organizations commitment to achieving its goals and objectives, and fulfilling the training needs of students? |  |  |
| 5.2.2 | How is this policy communicated, understood and applied within the organization? |  |  |
| **5.3** | **Organizational roles, responsibilities and authorities** |  |  |
| 5.3.1 | Provide a brief overview and description of the roles responsible in managing the quality system (eg organisational chart/structure). |  |  |
| **6** | **PLANNING** |  |  |
| 6.1 | How does the strategic and business planning activities ensure the training outcomes are met? |  |  |
| **7** | **SUPPORT** |  |  |
| **7.1** | **Resources** |  |  |
| 7.1.1 | Are there procedures/processes to ensure learning resources are reviewed at planned intervals and materials are up to date? |  |  |
| **7.2** | **Competence** |  |  |
| 7.2.1 | How does the training organization determine the competency of its instructors/assessors in terms of education, training experience? Are there procedures/processes available? |  |  |
| 7.2.2 | How is the performance of instructors/assessors evaluated? |  |  |
| **7.3** | **Awareness** |  |  |
| ***Refer to ANNEX B - EXAMPLE - APPROVAL OF MODEL COURSE COMPLIANCE MATRIX, reference 4.8 on Outsourcing of model course delivery.*** | | | |
| **7.5** | **Documented information** |  |  |
| 7.5.1 | Are there procedures/processes to address the control of documents and records, such as:   * distribution, access, retrieval and use; * protection and security, including redundancy; * storage and preservation, including preservation of legibility; * control of changes (e.g. version control); * retention and disposition; * ensuring confidentiality; * prevention of the unintended use of obsolete documented information. |  |  |
| **8** | **OPERATION** |  |  |
| ***Refer to ANNEX B - EXAMPLE - APPROVAL OF MODEL COURSE COMPLIANCE MATRIX for detailed information on the design and development of individual model courses.*** | | | |
| **9** | **PERFORMANCE EVALUATION** |  |  |
| **9.1** | **Monitoring, measurement, analysis and evaluation** |  |  |
| 9.1.1 | How is the satisfaction of learners, other beneficiaries and staff both negative (eg complaints, appeals) and positive (eg compliments) feedback being measured and evaluated? |  |  |
| 9.1.2 | Are there procedures/processes for addressing complaints and appeals? |  |  |
| 9.1.3 | Are there procedures/processes for monitoring and receiving information on performance against set targets? |  |  |
| **9.2** | **Internal audit** |  |  |
| 9.2.1 | Are internal audits being carried out at planned intervals? When was the last internal audit and is a report available? |  |  |
| 9.2.2 | Has an audit programme been established? |  |  |
| **9.3** | **Management review** |  |  |
| 9.3.1 | Are management reviews carried out at planned intervals (eg at least once per year)? When was the last management review meeting? |  |  |
| 9.3.2 | Are the outcomes from management reviews documented? |  |  |
| **10** | **IMPROVEMENT** |  |  |
| **10.1** | **Nonconformity and corrective action** |  |  |
| 10.1.1 | Are there procedures/processes to deal with non-conformities (eg to react, evaluate, implement and review the effectiveness of actions taken) |  |  |
| 10.1.2 | Are nonconformities documented including any subsequent corrective actions taken? |  |  |
| **10.3** | **Opportunities for improvement** |  |  |
| 10.3.1 | Are there procedures/processes to identify and manage opportunities for improvement? |  |  |

1. EXAMPLE - APPROVAL OF MODEL COURSE COMPLIANCE MATRIX

A separate compliance matrix will need to be developed for each IALA model course. The training organization should complete the compliance matrix for each course they intend to deliver.

To assist the auditor during the audit process, any cross references to documents and other general comments should be included by the auditee on their application as required.

**Audit details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organization Name |  | | | |
| Organization Contact |  | | | |
| Phone/Mobile |  | | | |
| Email |  | | | |
| Type of Audit |  Initial |  Interim |  Renewal |  Follow-up |
| Model Course |  V-103/1 |  V-103/2 |  V-103/4 |  Recurrent V-103/5 |

**PART 1 – Operational Elements**

This part relates to section 4 of this Guideline which outlines the operational elements associated with the implementation, delivery and assessment of a model course.

| **Section**  **Reference**  **No.** | **Elements** | **Auditee** | |
| --- | --- | --- | --- |
| **References** | **Comments** |
| **4.1** | **ENTRY STANDARDS** |  |  |
| 4.1.1 | Have the student’s pre-requisite requirements been defined and communicated? |  |  |
| 4.1.2 | Are there procedures / processes to evaluate and ensure that student pre-requisites are met? |  |  |
| **4.2** | **RECOGNITION OF PRIOR LEARNING** |  |  |
| 4.2.1 | Are there documented procedures/processes to assess and recognise the prior learning of students |  |  |
| 4.2.2 | Is the framework consistent with *IALA Guideline 1017 - Assessment of prior learning exemptions for VTS model courses*? |  |  |
| **4.3** | **COURSE CURRICULUM** |  |  |
| 4.3.1 | Are the lesson plans defined and documented. Do the plans include: |  |  |
| 4.3.1.1 | * All subject elements from the relevant IALA model course. |  |  |
| 4.3.1.2 | * The methodology of learning and teaching techniques employed to meet the learning outcomes. |  |  |
| 4.3.1.3 | * Time spent (eg number of hours) and resources allocated to particular subjects or module elements. |  |  |
| 4.3.1.4 | * Total course duration (if the proposed teaching hours differ greatly from the nominal hours given in the model course, the methodology to achieve the objectives is to be substantiated). |  |  |
| **4.4** | **CONDUCT OF TRAINING** |  |  |
| **4.4.1** | **TRAINING METHODS AND MATERIALS** |  |  |
| 4.4.1.1 | What is the student / staff ratio for this course? |  |  |
| 4.4.1.2 | How was student / staff ratio for this course determined? |  |  |
| 4.4.1.3 | Do the course presentations / materials / simulation cover all subject elements from the relevant model course? |  |  |
| 4.4.1.4 | Do the course presentations / materials / simulation training meet the learning outcomes? |  |  |
| 4.4.1.5 | Are the student training materials (e.g. notes, presentations and reference documents etc) consistent with IALA standards? Are copies provided to the student? |  |  |
| 4.4.1.6 | How will the course be delivered? |  |  |
| 4.4.1.7 | Does the training materials vary depending on the delivery material used (eg classroom, remote lectures, e-learning or other blended form)? |  |  |
| 4.4.1.8 | Are there procedures or instructions specific to delivery of the course? |  |  |
| 4.4.1.9 | Are there procedures/processes in place for periodic review of the course curriculum and training materials? |  |  |
| **4.4.2** | **FACILITIES AND EQUIPMENT** |  |  |
| 4.4.2.1 | Are the training facilities and equipment suitable for course delivery? |  |  |
| 4.4.2.2 | What simulation equipment / exercises are planned for course? |  |  |
| 4.4.2.3 | Are there documented health and safety procedures for the facilities / equipment being used during the training? |  |  |
| **4.5** | **QUALIFICATIONS OF INSTRUCTORS AND ASSESSORS** |  |  |
| 4.5.1 | Provide information on the qualifications and experience of instructors and assessors delivering training. |  |  |
| 4.5.2 | Are instructors and assessors qualified to conduct simulation training? |  |  |
| 4.5.3 | Where e-learning, distance or blended delivery is being provided, have the instructors and assessors competed relevant training, and are they experienced in these delivery methods? |  |  |
| **4.6** | **STUDENT ASSESSMENT PROCEDURES** |  |  |
| 4.6.1 | Are there documented procedures / processes to how: |  |  |
| 4.6.1.1 | * student progress will be monitored and assessed during the course? |  |  |
| 4.6.1.2 | * the competency of students will be assessed in a manner consistent with that model course? |  |  |
| 4.6.1.3 | * Student learning deficiencies are identified and managed? |  |  |
| 4.6.2 | Are records of student assessments maintained? |  |  |
| 4.6.3 | Are there procedures/processes to how model course certificates will be issued? |  |  |
| 4.6.4 | Does the course certificate include:   * + the name of the student;   + the country in which it was awarded;   + authorised signature of the accredited training organization;   + the name of the relevant model course;   + unique identification information;   + the date of award; and   + the unique course certificate number. |  |  |
| 4.6.5 | Are the VTS model course certificates in the official language or languages of the awarding country? *Note - If the language is not English, then a translation should be available.* |  |  |
| **4.7** | **STUDENT RECORDS** |  |  |
| 4.7.1 | Are there procedures/process to protect student records and ensure that records are accessed only by authorised persons? |  |  |
| **4.8** | **OUTSOURCING OF MODEL COURSE DELIVERY** |  |  |
| 4.8.1 | Are third parties being used to deliver the model course, in full or in part? |  |  |
| 4.8.2 | If yes, what mechanisms are employed to ensure that the services provided by the third party are: |  |  |
| 4.8.2.1 | * in compliance with the relevant IALA model course |  |  |
| 4.8.2.2 | * consistent with the training organizations management system, that is:   + to ensure persons doing work under the training organization control is aware of the system, and   + how they contribute to the effectiveness of the system. |  |  |
| 4.8.3 | Is the third party trained in, and made aware of the requirements and procedures of the training organizations management system? |  |  |

**PART 2 - Model Course Content**

The competent authority should give consideration to developing a table based on the course modules/ subject elements as a means for the training organization to cross reference how these subject elements are covered, for example, addressed in Lesson Plan X or Simulation Exercise Y.

Copies of lesson plans should be made available to the competent authority for review either prior to, or during the audit.

1. EXAMPLE COPY OF CERTIFICATE OF ACCREDIATION

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Logo of competent authority issuing the certificate of accreditation  Logo of IALA if the accreditation /approval process has been approved by IALA  **CERTIFICATE OF ACCREDIATION**  This is to certify that  **[Enter name of Training organization]**  has been accredited as a  **VTS TRAINING ORGANIZATION**  The approved VTS training course[s] that the VTS Training organization may provide are:   * IALA Model Course XXX on XXX * IALA Model Course XXX on XXX   **Conditions of Authorisation**  [Enter name of Training organization] must operate in accordance with *IALA Guideline 1014 on the Accreditation of VTS training organizations and approval of IALA model courses*, as in force from time to time.  [List any other conditions that may apply (for example, subject to periodic audit(s) etc)]  Issued by [Enter name of competent authority] on [Enter date of certificate] and valid until [Enter expiry date].   |  |  | | --- | --- | |  |  | | Authorised Signature | Stamp of the issuing Authority |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Certificate Number - Version: | **[Unique number]** |  | Certificate Issued: | **[Date of certificate]** | |  |  |  | Expiry Date: | **[Expiry date]** | |