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| IALA Guideline |

G1014

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

Edition 4.0

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# INTRODUCTION

Recognising that a major factor in the operation of a Vessel Traffic Service (VTS) is the competence of its personnel, IMO Resolution A.XXX(32) *Guidelines for Vessel Traffic Services*[1] 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 [2] specifies the practices associated with:

* Accrediting training organizations as described in Recommendation R0149 - Accreditation of Training Organizations (O-149)[3].
* Approving model courses described in Recommendation R0103 - Training and Certification of VTS Personnel (V-103)[4].

# 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 (V-103/1) [5];
* C0103-2 VTS Supervisor Training (V-103/2) [6];
* C0103-4 VTS On-the-Job Training Instructor (V-103/4) [7]; and
* C0103-5 Revalidation Process for VTS Qualification and Certification (V-103/5) [8].

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| *IALA Guideline 1014 on Accreditation of VTS training organizations and approval of the delivery of IALA VTS model courses* is associated with *Recommendation R0149 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 for VTS.*
2. *Model course C0103-5 may be delivered by VTS providers for their own personnel. In such cases, 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 a quality management system to deliver effective training.

## QUALITY MANAGEMENT SYSTEMS

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

Relevant international guidance prepared and published by appropriate international organizations regarding quality 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* [9], is an international standard issued by the International Organization for Standardization (ISO). The term of ‘EOMS’ is commonly used to describe management systems for educational organizations.  In summary, the standard specifies the requirements for a quality 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 quality management system, 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.*
3. *Training organizations may demonstrate conformance to the quality management system by either:*

* *through a self-assessment process; or*
* *certification using an accredited third-party certification body.*

*Certification should not be the main objective of implementing a quality management system. Depending on the organization, they may decide whether to pursue formal certification.*

Key elements of a quality management system typically include:

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| Scope of the quality management system | Understanding the organization and its context  Understanding the needs and expectations of interested parties  Scope of the quality 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 quality management system (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 quality management system  Determining opportunities for improvement |

## CONSIDERATIONS

### Recognition of quality management systems

Where a competent authority has assessed that a training organization has a quality 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.

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

Where a third party organization, with experience and qualifications in the provision of training has been engaged to conduct audits in full, or in part. The competent authority should ensure that the audit process for accreditation has been conducted in accordance with this guideline.

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

### 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).

Competent authorities should prepare a compliance matrix template 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 for the competent authority to review during the audit process:

* Entry requirements
* Recognition of prior learning
* Course curriculum and syllabus
* Training delivery
* Qualifications of instructors and assessors
* Student assessment procedure
* Student records
* Outsourcing of course delivery

## ENTRY REQUIREMENTS

The training organization should take into account any entry requirements specified for that model course, and give consideration to any additional course entry requirements, for example, due to national requirements or tailoring the course for the student intake.

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

## RECOGNITION OF PRIOR LEARNING

The training organization should have a framework in place for the recognition of prior learning, which may reduce the time requirement to meet the level required for certification.

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| *IALA Guideline G1017 - Assessment for recognition of prior learning in VTS training* [10]provides further guidance assessing and recognizing the prior learning of students. |

## 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).

The course content should be reviewed on a regular basis to ensure it reflects current IALA standards, recommendations, guidelines and takes into account recent changes and industry developments. Further, on conclusion of the course, a review should be undertaken based on course feedback and observations during course delivery to identify ongoing improvements and training materials that may need updating.

## TRAINING DELIVERY

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

### Course intake - limitations

The training organization should determine the number of students enrolled on the course and provide information on the student/staff ratio. The class/group size should allow the instructor(s) to give adequate individual attention to students as required.

### Training methods and materials

IALA model courses may be delivered by a range of methods such as:

* Classroom sessions at the premises of the training organization.
* The students and instructors being located together at a location other than that of the training organization, using mobile or online simulation technology if required by the model course.
* Training conducted fully online where both the instructors and simulation technology, if required by the model course, are situated at a location remote from the students.
* Training conducted in a hybrid/blended manner using a mixture of online learning and face-to-face instruction.

Training organizations should implement processes/procedures to ensure that the standards, quality requirements and instructional practice address the training objectives.

Simulation training should be managed in a manner consistent with IALA Guideline G1027 in order to provide sufficient behavioural realism to allow students to acquire the knowledge and skills appropriate to the training objectives.

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| *IALA Guideline 1027 – Simulation in VTS training* contains information[11] about the design and implementation of VTS exercises using a simulator. |

The student training materials (e.g. notes, presentations and reference documents etc.) should reflect the current IALA standards, recommendations, guidelines and take into account recent changes and industry developments. Students should have access to these training materials for their reference.

### Facilities and equipment

The teaching aids, facilities and equipment students will utilise during the course should be fit for purpose and of a sufficient standard to reflect the training methodologies used in the course delivery.

The training organization should provide for safe learning environment consistent with any national health and safety requirements.

## 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 (e.g. 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 remote learning (e.g. e-learning, online, distance, hybrid delivery, 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

Student progress should be continually assessed and take into consideration:

* The assessment methods to ensure competence levels have been attained for each subject of the module course.
* Maintenance of student records. Assessment results should be recorded and retained as evidence to indicate the competency levels that have been attained for each subject of the model course.
* Issuing of course certificates consistent with *IALA Guideline* G*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 authorized 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 utilize the services of external providers 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 an external provider are in compliance with the relevant IALA model course and are consistent with the training organization’s quality management system; and
* the external provider is trained in, and aware of, the requirements and procedures of the training organizations quality management system.

If the services of an external provider are used, the training organization remains fully responsible for the oversight and implementation of the quality management system to ensure the relevant standards for the accreditation and approval are maintained.

## CONSIDERATIONS

### Use of third party organizations for the approval of the model course

Where a third party organization, with experience and qualifications in the provision of training has been engaged to conduct audits in full, or in part. The competent authority should ensure that the audit process for the approval of the model course has been conducted in accordance with this guideline.

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

# 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 its delegated third party) 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 management system (e.g. Educational organizations management system (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 which are further explained below.

## 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 should be 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 should 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 summarizing the audit findings (e.g. major/minor non-conformances, observations and opportunities for improvement) 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 should issue the certificate of accreditation, and approval of the model courses they applied to deliver on condition that any findings (e.g. minor non-conformances and observations) may be resolved in an agreed corrective action plan.

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 formally notify the training organization that the certificate of accreditation will not be issued until the findings (e.g. major non-conformances) have been satisfactorily resolved.

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 audit findings as 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. major/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 audit findings 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

Where a third party organization has carried out the audit process the competent authority should ensure that it has been conducted in accordance with this guideline.

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

# CERTIFICATION OF ACCREDITATION

## 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 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 R0149 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. For example, an amendment may be required where a training organization 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 recognize 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.

# definitions

The definitions of terms used in this Guideline can be found in the International Dictionary of Marine Aids to Navigation (IALA Dictionary) at http://www.iala-aism.org/wiki/dictionary and were checked as correct at the time of going to print. Where conflict arises, the IALA Dictionary should be considered as the authoritative source of definitions used in IALA documents.

**Accreditation** is the formal endorsement by a competent authority that a training organization operates under a quality management 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.

**Remote learning** is where the student and the instructor are not physically together. This may occur either in a synchronous or asynchronous manner, using online or offline training approaches (e.g. distance learning, e-learning, self-study or a blended delivery).

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

# ABBREVIATIONS

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

ISO International organization for standardization

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

VTS Vessel traffic service or vessel traffic services (dependent on context)

# REFERENCES

1. IMO. (20xx) Resolution A.XXX(XX) Guidelines for Vessel Traffic Service
2. IALA. Standard 1050 Training and Certification
3. IALA. Recommendation R0149 - Accreditation of Training Organizations (O-149).
4. IALA. Recommendation R0103 - Training and Certification of VTS Personnel (V-103).
5. IALA. Model Course C0103-1 VTS Operator Training (V-103/1)
6. IALA. Model Course C0103-2 VTS Supervisor Training (V-103/2)
7. IALA. Model Course C0103-4 VTS On-the-Job Training Instructor (V-103/4)
8. IALA. Model Course C0103-5 Revalidation Process for VTS Qualification and Certification (V-103/5)
9. ISO. (2018) ISO Standard 21001:2018 on Educational organizations – management systems for educational organizations – requirements with guidance for use
10. IALA. Guideline G1017 - Assessment for recognition of prior learning in VTS training
11. IALA. Guideline G1027 – Simulation in VTS training contains information

1. EXAMPLE - ACCREDITATION COMPLIANCE MATRIX

Where a training organization does not possess an existing quality management system accreditation, the competent authority (or its delegated third party) may use this example compliance matrix, or a variant as a means to determine whether a training organization operates under a quality management system to deliver effective training.

When assessing compliance with IALA Standard 1050 to accredit a training organization, the competent authority may also take into account how the organization demonstrates conformance to the quality management system (e.g. through a self-assessment process or certified using an accredited third-party certification body) and/or previous assessments associated with the delivery of STCW courses or other formally recognized education programmes. Other forms of objective evidence such as audit reports or relevant documentation may also be taken into consideration during the audit process.

The example compliance matrix:

* 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 management system.

This 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 will need to demonstrate how their processes and procedures align accordingly.

| Element *(Clause No.)* | Example questions on key clause elements |
| --- | --- |
| **Determining the scope of the quality management system *(Clause 4.3)*** | * In establishing the scope of the quality management system, has the organization considered: * The external and internal issues relevant to its purpose, its social responsibility and strategic direction. * The requirements of relevant interested parties. * Its products and services. |
| **Leadership and commitment  *(Clause 5.1)*** | * How does top management support the quality management system? For example, do they: * Accept accountability for the effectiveness of the quality management system. * Ensure the quality policy and objectives are established. * Ensure the integration of the quality management system requirements into the business processes. * Promote the use of the process approach and risk-based thinking. * Ensure resources needed for the quality management system are available. * Communicate the importance of the quality management system and its requirements. * Ensure the quality management system achieves its intended outcomes. * Engage, direct and support persons to contribute to the effectiveness of the QMS. * Promote continual improvement * Support other relevant management roles. * Support the sustainable implementation of the education vision and educational concepts. * Establish, develop and maintain a strategic plan for the organization. * Ensure the learners educational requirements are identified and addressed. * Consider the principles of social responsibility. |
| * How does top management ensure that the: * Needs and expectations of learners are determined, understood and consistently met. * Risks and opportunities are determined and addressed including the ability to enhance learner satisfaction. |
| **Policy *(Clause 5.2)*** | * Has a quality policy been established? Does this quality policy give consideration to: * Supporting the organizations mission and values. * Ensuring it is appropriate to the purpose and context of the organization. * Provide a framework for setting the organizations objectives. * Include a commitment to continual improvement. * The relevant educational, scientific and technical developments. * Satisfying the organizations social responsibility. * Managing intellectual property. * The needs and expectations of relevant interested parties. |
| * How is the quality policy communicated? Is the policy: * Available and maintained as documented information. * Communicated, understood and applied within the organization. * Available to relevant interested parties, as appropriate. |
| **Actions to address risks and opportunities  *(Clause 6.1)*** | * How does the organization consider the issues, risks and opportunities that need to be addressed to: * Give assurance the quality management system can achieve its intended results. * Enhance desirable effects. * Prevent, mitigate or reduce undesired effects. * Achieve continual improvement. |
| **Educational organization objectives and planning to achieve them  *(Clause 6.2)*** | * Has the organization established educational organizational objectives relevant to its functions, levels and processes? Are these quality objectives: * Consistent with the educational organizational policy. * Measurable. * Taken into account regarding applicable requirements. * Relevant to conformity of products and services, and the enhancement of the learners’ satisfaction. * Continually monitored. * Communicated. * Updated, as appropriate. |
| * Has the organization determined how objectives will be achieved? For example: * What will be done? * What resources will be required? * Who will be responsible? * When it will be completed. * How the results will be evaluated. |
| **Resources *(Clause 7.1)*** | * How does the organization provide and maintain a safe learning environment that: * Is suitable to support and enhance learners’ development. * Is adequate to the requirements of those using them and how they are achieved. |
| * Are monitoring and measuring resources used ensure that the educational products and services are valid and reliable? For example, are they: * Suitable for the type of monitoring and measuring of activities being undertaken. * Maintained to ensure continued fitness for their purpose. |
| **Competence *(Clause 7.2)*** | * How does the organization: * Determine the necessary competence of persons doing work under their control and ensure that these persons are competent on the basis of education, training or experience. * Establish methods to evaluate the performance of staff. * Take actions to acquire the necessary competence. |
| **Awareness *(Clause 7.3)*** | * How does the organization ensure that all persons under the control of the organization are aware of: * The educational organization policy and strategy and relevant objectives. * Their contribution to the effectiveness of the quality management system. * The implications of not conforming to the quality management system requirements. |
| **Communication  *(Clause 7.4)*** | * How does the organization monitor its communication efforts and analyse/improve the communication plan based on the results of the monitoring? |
| **Documented information *(Clause 7.5)*** | * Has the organization addressed how it will control documented information, in terms of: * Distribution, access, retrieval and use. * Storage and preservation. * Control of changes (e.g. version control). * Retention and disposition. |
| **Operational planning and control *(Clause 8.1)*** | * How does the organization plan the design, development and expected outcomes of the educational products and services, such as: * Learning outcomes. * Ensuring appropriate and accessible teaching methods and learning environments. * Defining criteria for learning assessments. * Defining and conducting improvement methods. * Providing support services. |
| **Requirements for the education products and services *(Clause 8.2)*** | * When educational products and services are changed, how does the organization ensure that relevant documented information is amended, and interested parties made aware of the changes? |
| **Design and development of the educational products and services  *(Clause 8.3)*** | * How does the organization identify, review and control changes made during or subsequent to the design and development of educational products and services? |
| * Is documented information retained on: * Design and development changes. * The results of reviews. * The authorisation of the changes. * The actions taken to prevent adverse impacts. |
| **Control of externally provided processes, products and services *(Clause 8.4)*** | * How does the organization ensure externally provided processes, products and services do not adversely affect the organization’s ability to consistently deliver conforming products and services its learners? Such as: * Ensuring externally provided processes remain within their control. * Defining both the controls applied to an external provider and to the resulting output. * Taking into consideration the potential impact of the externally provided processes, products and services to meet requirements (customer, statutory, regulatory) and the effectiveness of the controls applied by the external provider. * Determining the verification necessary to ensure that the externally provided processes, products and services meet requirements. |
| * How does the organization communicate to external providers its requirements for: * The processes, products and services to be provided. * The approval of products and services, methods, processes and equipment, the release of products and services. * Competence and qualifications of persons. * External providers’ interactions with the organization. * Control and monitoring of the external providers’ performance. * Verification and validation activities that it intends to perform at the external providers’ premises. |
| **Delivery of the educational products and services *(Clause 8.5)*** | * How does the organization deal with the protection and transparency of learners data, such as: * What learner data is collected, and how/where it is stored. * Who has access to the data? * Under what conditions the data may be shared with third parties. * How long the data is stored for. |
| **Control of the educational nonconforming outputs *(Clause 8.7)*** | * How does the organization identify and control outputs that do not conform to their requirements and prevent them from unintended use or delivery? For example, describing the nonconformity and the actions taken to address the situation. |
| **Monitoring, measurement, analysis and evaluation  *(Clause 9.1)*** | * Has the organization determined: * What needs to be monitored or measured? * Methods for monitoring, measurement, analysis and evaluation to ensure valid outcomes. * The acceptance criteria used. * When the monitoring and measuring shall be performed? * How the results from the analysis will be used and evaluated (e.g. Conformity of products and services, customer satisfaction, the performance and effectiveness of the quality management system, the effectiveness of actions taken to address risks and opportunities and the performance of external providers). |
| * How does the organization monitor the satisfaction of learners and their perceptions in terms of the degree to which their needs and expectations have been fulfilled? |
| * What processes/procedures are available for handling complaints and appeals, as well as their resolution? |
| * How does the organization obtain feedback from, and make this available (as appropriate) on educational products and services and the effectiveness in achieving the agreed learning outcomes? |
| * Has the organization determined the methods for obtaining, monitoring and reviewing this performance information including how it will be measured? |
| **Internal audit  *(Clause 9.2)*** | * Are internal audits conducted at planned intervals to demonstrate that the quality management system: * conforms to the organization’s own requirements for its quality management system and the requirements of standard; and * is effectively implemented and maintained.   In particular, how does the organization:   * Plan, establish, implement and maintain an audit programme including the frequency, methods, responsibilities, planning requirements and reporting, taking account of the importance of the processes concerned, feedback and the results of previous audits. * Define the audit criteria and scope for each audit. * Select auditors and conduct audits to ensure objectivity and impartiality. * Ensure the results are reported to the relevant management. * Identify opportunities for improvement. * Take appropriate correction and corrective actions without undue delay. * Retain documented information of the audit programme and audit results. |
| **Management Review *(Clause 9.3)*** | * How does top management review the organization’s quality management system at planned intervals (e.g. at least once per year) to ensure it continuing suitability, adequacy, effectiveness and alignment with the strategic direction? |
| * Does the management review consider the following inputs: * The status of actions from previous management reviews. * Changes in external and internal issues relevant to the quality management system. * Information on performance and effectiveness of the quality management system such as trends in:   + learner satisfaction and feedback,   + The extent to which quality objectives have been met   + Process performance and conformity of products and services   + Nonconformities and corrective actions   + Monitoring and measurement results   + Audit results   + Performance of external providers * The adequacy of resources. * Effectiveness of actions taken to address risks and opportunities. * Opportunities for improvement. |
| * Does the outputs from the management review include decisions on: * Opportunities for improvement. * Changes to the quality management system. * Resource needs. |
| **Continual improvement  *(Clause 10.2)*** | * How does the organization continually improve the suitability, adequacy and effectiveness of the quality management system taking into account relevant research and best practices? |
| **Opportunities for improvement  *(Clause 10.3)*** | * How does the organization select opportunities for improvement to: * Improve products and services to meet requirements as well as addressing the future needs and expectations. * Correct, prevent or reduce undesired effects. * Improve the performance and effectiveness of the quality management system. |

1. EXAMPLE - APPROVAL OF MODEL COURSE COMPLIANCE MATRIX

Competent authorities (or its delegated third party) may use this compliance matrix, or a variant of this example as a means to determine that a training organization meets the standards specified in an IALA model course for its implementation, delivery and assessment. A separate compliance matrix should be developed for each IALA model course.

**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.

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| Section Ref No. | Example Questions |
| **4.1** | **ENTRY REQUIREMENTS** |
| 4.1.1 | Have the student’s entry requirements been defined and communicated? |
| 4.1.2 | Are there processes/ procedures to evaluate and ensure that student entry requirements are met? |
| **4.2** | **RECOGNITION OF PRIOR LEARNING** |
| 4.2.1 | Are there documented processes/procedures in place for the recognition of prior learning? |
| 4.2.2 | Is the framework consistent with *IALA Guideline G1017 - Assessment for recognition of prior learning in VTS training*? |
| **4.3** | **COURSE CURRICULUM** |
| 4.3.1 | Are lesson plans defined and documented. Do the plans include:   * 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). |
| 4.3.2 | How does the organization ensure that the course content is reviewed on a regular basis to:   * Reflect the current IALA standards, recommendations, guidelines and takes into account recent changes and industry developments. * Take into account course feedback and observations during course delivery to identify ongoing improvements and training materials that may need updating. |
| **4.4** | **TRAINING DELIVERY** |
| **4.4.1** | **COURSE INTAKE - LIMITATIONS** |
| 4.4.1.1 | What is the maximum number of students that may be enrolled on the course? |
| 4.4.1.2 | What is the student / staff ratio for this course? |
| **4.4.2** | **TRAINING METHODS AND MATERIALS** |
| 4.4.2.1 | Do the course presentations / materials / simulation cover all subject elements from the relevant model course? |
| 4.4.2.2 | Do the course presentations / materials / simulation training meet the learning outcomes? |
| 4.4.2.3 | Does the student training materials (e.g. notes, presentations and reference documents etc.) reflect current IALA standards, recommendations, guidelines? |
| 4.4.2.4 | How does the student access these training materials information? |
| 4.4.2.5 | How will the course be delivered? |
| 4.4.2.6 | If the training is being delivered in a hybrid or blended manner using a mixture of online learning and face-to-face instruction, how is the split between delivery methods determined and managed to integrate the training methods? |
| 4.4.2.7 | If the instructors are not present at the same venue as the students how will:   * Arrangements be put in place to ensure appropriate and uninterrupted interaction between instructor(s) and students? * Course presentations and training materials be provided to the students? * Student progress be monitored and assessed remotely? * Remote assessments be conducted in a manner consistent with that model course? * Student learning deficiencies be identified and managed remotely? |
| 4.4.2.8 | What arrangements are in place to ensure that the simulation training is consistent with *IALA Guideline 1027 on Simulation in VTS training* in order to provide sufficient behavioural realism to allow students to acquire the knowledge and skills appropriate to the training objectives?  In particular, what processes/procedures are in place to:   * Plan, design and validate simulation exercises to ensure the specific learning outcome are being met. * Provide guidance on debriefing and feedback to students including assessments as required. |
| 4.4.2.9 | What arrangements are in place with respect to resilience, redundancy and back-up systems should the training method and/or simulation facilities experience technical or connectivity difficulties? |
| 4.4.2.10 | Are there processes/procedures specific to delivery of the course? |
| **4.4.3** | **FACILITIES AND EQUIPMENT** |
| 4.4.3.1 | Are the proposed teaching aids, training facilities and equipment fit for purpose and of a sufficient standard to support the course delivery? |
| 4.4.3.2 | How does the training organization ensure they provide for safe learning environment consistent with any national health and safety requirements? |
| **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 | Have the instructors and assessors completed appropriate training, and are they experienced in the delivery method offered by the organization? For example:   * Appropriately qualified (e.g. 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 remote learning (e.g. e-learning, online, distance, hybrid delivery, blended delivery) is provided, they should have relevant training and experience in the delivery using such methods. |
| **4.6** | **STUDENT ASSESSMENT PROCEDURES** |
| 4.6.1 | Are there documented processes/procedures to how:   * Student progress will be continually assessed during the course to ensure the competence levels are attained for each subject of the module course? * Assessments will be conducted? * Student learning deficiencies are identified and managed to ensure the student attains the required levels of competence? |
| 4.6.2 | How are records of student assessments maintained? |
| 4.6.3 | Are there processes/procedures 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 processes/procedures 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 external providers 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 external provider are:   * in compliance with the relevant IALA model course * consistent with the training organizations quality 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 external provider trained in, and aware of the requirements and procedures of the training organizations quality 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 ACCREDITATION

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Logo of competent authority issuing the certificate of accreditation  Logo of IALA if the accreditation /approval process has been approved by IALA  **CERTIFICATE OF ACCREDITATION**  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 Authorization**  [Enter name of training organization] must operate in accordance with *IALA Guideline 1014 on the Accreditation of VTS training organizations and approval to deliver IALA VTS 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].   |  |  | | --- | --- | |  |  | | Authorized Signature | Stamp of the issuing Authority |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Certificate Number - Version: | **[Unique number]** |  | Certificate Issued: | **[Date of certificate]** | |  |  |  | Expiry Date: | **[Expiry date]** | |