



香港學術及職業資歷評審局
Hong Kong Council for Accreditation of
Academic & Vocational Qualifications

Guidance Notes on Accreditation of Assessment Agencies for Professional Qualifications

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Preamble

1. The Hong Kong Council for Accreditation of Academic and Vocational Qualifications (HKCAAVQ) is established under the HKCAAVQ Ordinance (Cap 1150) and may perform functions stipulated under section 4 therein including conducting accreditation tests generally or as authorised under any other local enactment. HKCAAVQ also performs the statutory roles of the Accreditation Authority and the Qualifications Register (QR) Authority under the Accreditation of Academic and Vocational Qualifications Ordinance (AAVQO) (Cap 592).
2. These Guidance Notes are developed for the institutions, organisations or other bodies having been referred by the Qualifications Framework Secretariat (QFS) or Education Bureau (EDB) for accreditation for the purpose of serving as appointed assessment agencies under the Accreditation of Academic and Vocational Qualifications Ordinance (AAVQO) (Cap 592). These Guidance Notes detail the quality assurance standards and process for accrediting Assessment Agencies for Professional Qualifications (AAPQs).

1. Introduction

- 1.1 These Guidance Notes give an overview of the accreditation timeframe and procedures. They also contain the accreditation standards for accreditation of AAPQs and suggest possible types of evidence that can be presented to demonstrate that the AAPQ can meet the standards for the purpose of accreditation. These Guidance Notes also serve as a reference for the Accreditation Panels (the Panels).

Roles of an Appointed AAPQ under the Qualifications Framework (QF)

- 1.2 An accredited AAPQ refers to an institution, organisation or other body who is appointed by the Secretary for Education (SED) to assess the knowledge, skills and experience acquired by individuals in relation to a profession or industry and issues qualifications it has developed and operates in recognition of such assessed knowledge, skills and experience. The qualifications selected for accreditation would be recognised under the Qualifications Framework (QF) and registered in the QR.

Accreditation of AAPQ

- 1.3 Accreditation of AAPQ is a quality assurance process by which the AAPQ is assessed to determine if it is competent to:
- (a) develop and operate qualifications for the profession or industry it serves;
 - (b) assess the knowledge, skills and experience acquired by individuals in relation to the qualifications referred to in (a); and
 - (c) issue the qualifications to the individuals in recognition of such assessed knowledge, skills and experience.
- For development of qualifications, relevant Specifications of Competency Standards (SCSs) developed by the Industry Training Advisory Committee (ITAC) or Cross-Industry Training Advisory Committee (CITAC) shall serve as the reference standards where available and applicable. Where these are not available, the Generic Level Descriptors (GLD) of the QF should be referred to.
- 1.4 Prior to entering a service agreement with HKCAAVQ to undergo an AAPQ accreditation exercise for the profession or industry it serves, the interested AAPQ must be referred by QFS/EDB.
- 1.5 The Accreditation Report will form the basis for SED's consideration of the appointment of the accredited AAPQ.
- 1.6 A thorough understanding of what is required of the AAPQ in the accreditation process is the first step to successful accreditation. The roles and responsibilities of an AAPQ in accreditation are outlined in **Appendix 3**.

Self-evaluation and the Accreditation Document

- 1.7 Accreditation is conducted by HKCAAVQ on the basis that the AAPQ concerned is involved in a continuous process of self-evaluation, as part of its

regular internal quality assurance process. Before seeking accreditation, an AAPQ should undertake the self-evaluation in order to assess its own readiness to meet the intended purpose of the exercise and the accreditation standards. The process of self-evaluation should be a constructive one, and should enable the AAPQ to identify its own strengths and weaknesses. Following the self-evaluation, the AAPQ should implement reforms and changes, if necessary, in order to meet the accreditation standards. Examples of possible changes include:

- (a) structure and processes of institutional management;
- (b) mechanisms for development and operation of qualifications; and
- (c) administration of the associated assessments, quality assurance and / or resource planning.

- 1.8 The Accreditation Document prepared through a self-evaluation process should reflect on the AAPQ's competency to develop and operate qualifications for the profession or industry it serves as well as its competency to assess the knowledge, skills and experience acquired by individuals in relation to the relevant profession or industry so as to issue qualifications it has developed and operates in recognition of the assessment outcomes for the purposes of the QF. The AAPQ undergoing the accreditation exercise is required to present evidence to support its claims.
- 1.9 It is important that the process should involve personnel from both the management and the frontline staff responsible for the processes of development and operation of professional qualifications and administration of the associated assessments. It is advisable that other members of staff who may be affected by any changes brought about by the accreditation are also involved in the process. It is a good practice to also involve in the self-evaluation process advisers and representatives from the profession or industry the AAPQ serves such as employers, employees, field experts and where applicable, representatives of other bodies with which the AAPQ has mutual recognition / reciprocal membership agreements for the purpose of membership admission.
- 1.10 The AAPQ should proceed to prepare the Accreditation Document for submission to HKCAAVQ by the stipulated deadline. The Accreditation Document prepared by the AAPQ should address the accreditation standards specified in Section 3 of these Guidance Notes. The 'Guide to Prepare for Accreditation Documents through a Self-Evaluation Process' is available in **Appendix 2**.

2. Guiding Principles of HKCAAVQ Accreditation

- 2.1 HKCAAVQ follows four guiding principles for accreditation of AAPQs:
- Standard-based
 - Peer review
 - Fitness for purpose
 - Evidence-based
- 2.2 The accreditation is conducted based on the ‘standards’, which means that an AAPQ must demonstrate that it can develop and operate qualifications and administer associated assessments that meet the standards set out in these Guidance Notes as well as the requirements in any other relevant policy intentions / regulations / guidelines promulgated by the Hong Kong SAR Government. Depending on the profession or industry, there may / may not be SCSs formulated by the ITAC or CITAC to serve as reference standards. Should there be relevant SCSs, the assessment mechanism shall make reference to the SCSs of the respective industries to ensure its credibility.
- 2.3 The principle of ‘peer review’ is enacted through the engagement of experts from the profession or industry who have relevant expertise and experience in the profession / industry / quality assurance to form the Panel. The role of the Panel is to assess the competency of the AAPQ, collect and evaluate evidence, and to form a judgment as to whether the AAPQ meets the required standards and stated aims. Details of the roles and responsibilities of Panel Members in the accreditation process are listed in **Appendix 4**.
- 2.4 ‘Fitness for purpose’ means that the accreditation is based on the AAPQ’s stated objectives in relation to its serving as the appointed AAPQ for the profession or industry it serves. As AAPQs may differ in size, complexity of operation and scope of expertise, HKCAAVQ will take these differences into account. While the standards that must be met by all AAPQs remain the same, the types of evidence used to demonstrate how they are met may differ.
- 2.5 The accreditation is evidence-based. ‘Evidence-based’ means the Panel conducts the review and forms a judgment with reference to the evidence provided by the AAPQ to support its claim that it meets the accreditation standards and its own objectives.

3. Accreditation Standards

- 3.1 In view of the expected role of the appointed AAPQ (paragraph 1.2), the AAPQ under accreditation is expected to possess the knowledge, skills and experience relevant to the related profession or industry. The AAPQ should have the knowledge, skills and experience required for developing and operating qualifications to be issued to individuals in recognition of their competencies acquired for the related profession or industry, validated by the assessments administered by the AAPQ. The AAPQ is therefore expected to keep abreast of developments in the related profession or industry branch so as to make necessary changes and enhancements in its policies, systems and operations as and when appropriate.
- 3.2 Accreditation decisions will be made on the basis of evidence provided by the AAPQ in the Accreditation Document and other relevant information gathered throughout the entire accreditation process up to the end of the site visit, according to the guiding principle of ‘fitness for purpose’.
- 3.3 The accreditation of an AAPQ consists of two components:
- **Component 1 ‘Referencing of qualifications to QF levels’** – it is to review the process of determining and confirming the QF levels of the qualifications selected for accreditation.
 - **Component 2 ‘Review of assessment agency’** – it is to review an AAPQ’s competence in assessing the knowledge, skills and experience acquired by individuals for granting the relevant qualifications.

Depending on the number of qualifications to be reviewed, an AAPQ may choose to conduct the two components together or at separate stages, with the QF levels being reviewed and confirmed before the review of assessment agencies.

- 3.4 The standards to be considered in accreditation of AAPQ are as follows:

Component 1: Referencing of Qualifications to QF Levels

Standard 1: Development and Management of Qualifications

The AAPQ has a robust mechanism for developing qualifications to address the needs of the profession or industry it serves.

Component 2: Review of Assessment Agency

Standard 2: Professional Standing, Governance and Organisational Structure

The AAPQ demonstrates a sound professional standing and has effective governance arrangements that ensure sustainable operation of the AAPQ in accomplishing its mission and its accountability for the development and operation of qualifications as well as administration of the associated assessments.

Standard 3: Development and Management of Assessments

The AAPQ has demonstrated that it has the ability to develop assessment strategy and assessments for the qualifications developed. The AAPQ has also developed appropriate quality assurance arrangements to ensure the validity, reliability and fairness of assessments and that continuous improvement is made.

Standard 4: Human Resources

The AAPQ has engaged sufficient qualified and competent persons who possess adequate knowledge of the profession or industry it serves and adequate knowledge of the QF to perform the roles of 'Assessment Manager', 'Assessment Secretary', 'Internal Verifier' and 'Assessor' as well as other supporting functions.

Standard 5: Communication with Stakeholders

The AAPQ has arrangements for effective communication with a wide spectrum of stakeholders including, where applicable, employers, relevant subject experts, practitioners, prospective applicants, former candidates, other bodies with which the AAPQ has mutual recognition / reciprocal membership agreements for the purpose of membership admission, staff, assessors, the relevant industry associations, the Education Bureau, other concerned government departments and agencies, the Accreditation Authority and other stakeholders.

Standard 6: Financial Resources and Financial Arrangements

The AAPQ has financial resources and financial arrangements for on-going operation and for future developments.

Standard 7: Information Management Systems for Records

The AAPQ has a policy and a robust system for management of information and records that facilitate development and operation of qualifications and administration of the associated assessments and that safeguard integrity, security and accuracy of information and documentation.

Criteria to be considered for each standard and the possible sources of evidence relating to those criteria are available in **Appendix 1**.

- 3.5 The criteria listed in the appendix are indicative rather than exhaustive. Other matters may be explored if they appear relevant. The possible sources of evidence are also indicative of what may be required. The AAPQ may offer other evidence that is effective in demonstrating that a standard is met.

- 3.6 Whilst the standards for accreditation of a new AAPQ and re-accreditation of an existing AAPQ are the same, the focus of the accreditation exercises and the required evidence are different.
- 3.7 An AAPQ undergoing the accreditation exercise for the first time may not have all its systems fully operational at the point of accreditation. In such cases, the Panel will look for a demonstration of competency, rather than an established track record
- 3.8 During re-accreditation, the AAPQ is required to provide evidence that shows effective implementation of the policies and processes during the validity period and outcomes of its work. The AAPQ is expected to demonstrate continuous improvement as a result of the operation of its internal QA procedures since the last (re-)accreditation. It is essential that the AAPQ can provide evidence that it can effectively operate the accredited qualification for the profession or industry branch concerned and can assess the knowledge, skills and experience acquired by individuals in relation to the qualification. Moreover, the AAPQ should, as a result of the operation of its internal quality assurance system during the validity period, provide evidence of changes made to the qualification, if any, and the assessment mechanism administered for the qualification.

4. Timeline and Process

- 4.1 It normally takes 28 weeks to complete the accreditation process after the AAPQ has submitted its Accreditation Document. The accreditation schedule will be specified in the Service Agreement signed between HKCAAVQ and the AAPQ.

Initiating the Process

- 4.2 An interested AAPQ should submit a proposal to the QFS/EDB for initial screening. Upon recommendation of QFS/EDB for proceeding with accreditation, the AAPQ should return a duly completed and signed Statement of Intent (Sol) to HKCAAVQ to indicate that it is ready to undergo accreditation. The Sol should include documentation of referral by the QFS/EDB for proceeding with accreditation.
- 4.3 In accordance with the Sol, HKCAAVQ will enter into a Service Agreement with the AAPQ, setting out the time schedule, the terms of reference, the accreditation fee and the payment terms for the accreditation exercise.
- 4.4 HKCAAVQ will engage experts from the relevant profession or industry with expertise and experience in the profession / industry / quality assurance to form the Panel. HKCAAVQ has full authority in the determination of membership of the Panel for a particular accreditation exercise, after seeking views from the AAPQ on potential conflict of interest in respect of the proposed panel members. The Panel will include an HKCAAVQ professional staff member as the Panel Secretary, who has full voting rights in the panel proceedings.

Referencing of Qualifications to QF levels

- 4.5 The AAPQ is to submit relevant details regarding each of the selected qualifications for referencing against a particular QF level. The GLD of the QF and/or relevant SCSs developed by the ITAC or CITAC will be used as a yardstick against which the qualifications provided by the AAPQ would be evaluated for confirming the QF levels of the qualifications. Details of documents to be submitted by the AAPQ for the referencing are provided in **Appendix 1**.
- 4.6 The Panel may visit the AAPQ for reviewing sample examination papers and associated marking schemes for a better understanding on the outcome standards of the qualifications. The Panel may also meet with relevant representatives to understand the development and management of the qualifications.

Review of Assessment Agency

- 4.7 The AAPQ is to submit an Accreditation Document detailing the management and operation of its assessment services. After reviewing the Accreditation

Document, the Panel may seek further clarification and / or ask for other supporting documents as evidence during the stage of Initial Comments. The AAPQ may be requested to provide the Panel with the supporting documents either before the site visit or on the site visit day.

- 4.8 The site visit provides the opportunity for interaction between the Panel and the relevant personnel from the AAPQ as well as other stakeholders such as employees and employers of the profession or industry branch concerned.
- 4.9 The visit programme, including the schedule of persons to be met, will be determined in the light of the Panel’s examination of the Accreditation Document. The visit programme will be designed to enable the Panel to pursue the relevant issues according to the accreditation standards. It is likely that the visit programme will provide for:
- Meetings with the senior management of the AAPQ, personnel responsible for developing and operating qualifications, assessors, external stakeholders such as potential users of the assessment services, employers and advisors from the profession or industry concerned.
 - Review of documentary evidence
 - Review of facilities and equipment
 - Demonstration of assessment procedures
 - The Panel’s private meetings during which representatives of the AAPQ are required to withdraw from the Panel’s meeting room
- 4.10 HKCAAVQ will determine the criteria for selection of participants for the respective meeting sessions as well as the sizes of the meeting groups for efficient interaction with the Panel.
- 4.11 The Panel will meet with the senior management representatives of the AAPQ to provide feedback on its observations at the end of the site visit.
- 4.12 The following table shows an indicative timeline for and the main steps in an AAPQ accreditation exercise:

| Time | Main Steps |
|-------------------|--|
| Preparation Stage | <p>Initial Consultation and Screening</p> <ul style="list-style-type: none"> ● The interested AAPQ submit a proposal to QFS/EDB. ● HKCAAVQ conducts a briefing to the interested AAPQ upon invitation by the QFS/EDB. ● The interested AAPQ submit a signed Statement of Intent (Sol) to HKCAAVQ for accreditation, together with a recommendation letter issued by the QFS/EDB to endorse the AAPQ’s application for accreditation. <p>Service Agreement, Accreditation Document and Panel Formation</p> <ul style="list-style-type: none"> ● HKCAAVQ issues a Service Agreement to the AAPQ. After signing the Service Agreement and making payment of the accreditation fee, the AAPQ is required to submit the Accreditation Document to HKCAAVQ on or before the date specified in the Service Agreement. ● HKCAAVQ forms a Panel, which includes Specialists with related expertise and an HKCAAVQ staff member as the Panel Secretary. ● The AAPQ checks the proposed panel membership list for potential |

conflict of interest and confirms the result of checking with HKCAAVQ in writing.

Component 1: ‘Referencing of qualifications to QF levels’

| Time | Main Steps |
|------------|---|
| Weeks 1-6 | <p>Review of the Accreditation Documents</p> <ul style="list-style-type: none"> • HKCAAVQ examines the Accreditation Document for the referencing and the state of readiness of the AAPQ to ascertain that the referencing can proceed. • The Panel reviews the Accreditation Document and may request additional information / support documents or clarification from the AAPQ as necessary. |
| Week 7 | <p>Visit to AAPQ</p> <ul style="list-style-type: none"> • A visit to the AAPQ may be conducted for examining the sample examination papers and associated marking schemes. • The Panel may meet with representatives responsible for the development and management of the qualifications. |
| Weeks 8-12 | <p>Interim Report on Component 1</p> <ul style="list-style-type: none"> • HKCAAVQ confirms the QF level of each qualification and prepares an Interim Report on Component 1. • The AAPQ checks factual accuracy of the Interim Report. • HKCAAVQ issues an Interim Report on Referencing of qualifications to QF levels. |

Component 2: ‘Review of assessment agency’

| Time | Main Steps |
|-----------|---|
| Weeks 1-4 | <p>Review of the Accreditation Document</p> <ul style="list-style-type: none"> • HKCAAVQ examines the Accreditation Document and the state of readiness of the AAPQ to ascertain that the accreditation exercise can be proceeded. • The Panel reviews the Accreditation Document. |
| Weeks 5-7 | <p>The Panel’s Initial Comments and the AAPQ’s Responses</p> <ul style="list-style-type: none"> • The Panel provides initial comments on the Accreditation Document and requests additional information / support documents or clarification from the AAPQ as necessary. • The AAPQ provides written responses to the Panel’s initial comments along with additional information / supporting documents, if any. • Further information / clarification from the AAPQ may be needed. • The Panel secretary prepares for the site visit to the AAPQ to be conducted by the Panel or a meeting to be held between the Panel and the AAPQ at the HKCAAVQ office. |
| Week 8 | <p>Site Visit or Meeting</p> <ul style="list-style-type: none"> • A site visit to the AAPQ is conducted by the Panel or a meeting between the AAPQ and the Panel is held at the HKCAAVQ office. • The Panel typically meets representatives of the governance body, representatives of the management staff, key staff members, assessors, past candidates, external advisors, and other stakeholders as deemed relevant and appropriate. The Panel also inspects facilities and equipment of the assessment venue(s) and |

| Time | Main Steps |
|---|--|
| | <p>examines records and other supporting documents.</p> <ul style="list-style-type: none"> In the exit meeting, the Panel meets the senior management representatives of the AAPQ to provide them with a general overview of the Panel's key observations. |
| Weeks 9-15 | <p>Accreditation Report</p> <ul style="list-style-type: none"> HKCAAVQ compiles the accreditation report after considering the Panel's recommendations. HKCAAVQ makes the final determination of the accreditation outcome, including the outcome of Component 1. The AAPQ checks factual accuracy of the accreditation report. |
| Week 16 | <p>Notification of the Accreditation Outcome</p> <ul style="list-style-type: none"> HKCAAVQ issues the accreditation report to the AAPQ. |
| Specified deadlines as stated in the accreditation report | <p>Follow-up Actions</p> <ul style="list-style-type: none"> If any condition (i.e. pre-condition and / or requirement) and/or restriction is stipulated by HKCAAVQ in respect of granting the accreditation status, the AAPQ must provide evidence of having fulfilled them by the specified deadlines in the accreditation report. HKCAAVQ may request further information or seek clarifications, if necessary. |
| Normally 3 months from the specified fulfilment dates | <p>Fulfilment of Conditions</p> <ul style="list-style-type: none"> If the AAPQ cannot fulfill / comply with the condition(s) and/or restriction(s) within the specified time period, HKCAAVQ may deem that the AAPQ is no longer competent to assess the skills, knowledge or experience acquired by individuals in relation to the relevant profession or industry and the accreditation report may be varied or withdrawn. |

4.13 Pursuant to the terms of the Service Agreement signed between the AAPQ and HKCAAVQ, HKCAAVQ has discretion to terminate the accreditation exercise under certain circumstances. In particular, HKCAAVQ may decide to terminate the accreditation exercise if HKCAAVQ has come to the conclusion that, upon an initial examination of the Accreditation Document, the information provided is inadequate and / or the state of readiness of the AAPQ is such that it is unlikely that the Panel will be able to conduct a meaningful accreditation exercise. Clause 4 of the Service Agreement includes the specific provisions governing early termination. In the event that the accreditation exercise is terminated pursuant to the Service Agreement, no relevant accreditation test will be conducted and no accreditation report will be produced or issued by HKCAAVQ.

4.14 HKCAAVQ may vary or withdraw the Accreditation Report if it is satisfied that any of the grounds set out in section 5 (2) of the AAVQO (Cap 592) apply. This includes where HKCAAVQ is satisfied that the AAPQ is no longer competent to assess the skills, knowledge or experience acquired by individuals in relation to the relevant industry or branch of industry (whether by reference to the AAPQ's failure to fulfil any condition(s) and/or comply with any restriction(s) stipulated in this Accreditation Report or otherwise) or where at any time during the validity period there has/have been modification(s) to accreditation status introduced by the AAPQ after HKCAAVQ has issued the accreditation report(s) and which has/have not been approved by HKCAAVQ.

Please refer to Section 6 of this Guidance Notes in seeking approval for proposed modifications. The accreditation status of the AAPQ will lapse immediately upon the expiry of the validity period or upon the issuance of a notice by HKCAAVQ on withdrawal of the Accreditation Report.

5. Possible Outcomes

5.1 In the capacity of the Accreditation Authority as provided for under the AAVQO (Cap 592) and HKCAAVQ Ordinance (Cap 1150), HKCAAVQ makes an accreditation determination after considering the Panel's recommendation(s) and taking into account the Terms of Reference of the accreditation exercise as specified in the signed Service Agreement and the available evidence. The possible determinations of the process are:

- Approval
- Approval with condition(s) (i.e. pre-condition(s) and / or requirement(s)) and/or restriction(s)
- Non-approval

Where approval is granted, a validity period will also be specified along with the accreditation decision in the accreditation report. The validity period granted to an AAPQ will be for a period up to 5 years.

5.2 Any pre-condition that forms part of the determination must be fulfilled prior to the commencement of the validity period imposed on an accreditation status. A requirement must be fulfilled by the stipulated deadline within the validity period.

5.3 Restrictions may be specified in the determination. Under such circumstances, the AAPQ is expected to comply with the restriction(s) on an on-going basis unless otherwise advised by HKCAAVQ.

5.4 A recommendation can also form part of the accreditation determination. It has a continuous improvement purpose and is directly related to the accreditation standards. It is non-binding in nature, but the AAPQ should explain if and how the recommendations have been addressed at the time of re-accreditation.

5.5 An Advice is an opinion of the Panel for the improvement of the AAPQ. It provides for the sharing of good practices. It is non-binding and the AAPQ is not required to report follow-up actions taken, if any, to HKCAAVQ.

5.6 Fulfilment of the condition(s) and compliance with the restriction(s) are **mandatory in the course of maintaining a valid accreditation status.**

5.7 AAPQs shall ensure that they obtain all approvals and registrations necessary for the operation and shall maintain and comply with the terms of all such approvals and registrations for the duration of the validity period.

5.8 A Statement of Accreditation Approval confirming the granting of the accreditation status to the AAPQ is issued together with accreditation report when no pre-condition is stipulated, or upon satisfactory fulfilment of all the pre-conditions.

Appeal

- 5.9 If an AAPQ is aggrieved by the determination made in an accreditation report, then pursuant to Part 3 of the AAVQO the AAPQ has a right of appeal to the Appeal Board. Any appeal must be lodged within 30 days of the receipt of the accreditation report.
- 5.10 If an AAPQ is aggrieved by a decision to vary or withdraw an accreditation report, then pursuant to Part 3 of the AAVQO, the AAPQ has a right of appeal to the Appeal Board. Any appeal must be lodged within 30 days of the receipt of such variation or withdrawal. The AAPQ should be aware that such a notice is not of itself an accreditation report and the right to appeal against the substantive determination regarding accreditation only arises from the accreditation report.
- 5.11 A decision to terminate the accreditation exercise pursuant to the Service Agreement is not subject to appeal.
- 5.12 Details of the Appeal Procedure are laid down in section 13 of the AAVQO and can be accessed from the QF website at <http://www.hkqf.gov.hk>.

6. Possible Follow-up Actions

Appointment by Secretary for Education (SED) as an Appointed Assessment Agency

- 6.1 An AAPQ which has successfully obtained the accreditation status without any condition or after fulfilling the stipulated pre-condition(s) may apply to SED via the QFS for appointment as an Appointed Assessment Agency, subject to any other considerations of SED.

Modification to the Accreditation Status

- 6.2 It is the responsibility of the AAPQ to inform HKCAAVQ of any modification(s) to its accreditation status that might impact its competency to continue to meet the relevant accreditation standards before any modification is made. An assessment will be conducted to ensure that the AAPQ can continue to meet the relevant accreditation standards.
- 6.3 The following are examples of modification:
- Changes made to the governance and/or organisation structure
 - Changes in policy and/or mechanism of assessment and/or quality assurance
 - Adding new assessment centre
 - Changes to assessment resulting from revisions made to the qualifications
 - Expanding the scope of accreditation status by including additional qualifications
- 6.4 A focused review will be conducted by assessing the relevant standards. HKCAAVQ will determine the number of accreditation standards to be assessed on a case-by-case basis.
- 6.5 In particular, for subsequent inclusion of additional qualifications to be issued by the AAPQ, Component 1 'Referencing of qualifications to QF levels' will be conducted to confirm the QF levels of all new qualifications to be included. For Component 2 'Review of assessment agency', if the additional qualifications to be included are of the same or below the QF level of existing qualifications issued by the AAPQ, a focused review of the assessment agency will be conducted by assessing the relevant standards. HKCAAVQ will determine the number of accreditation standards to be assessed on a case-by-case basis. If the additional qualifications to be included are above the QF level of the existing qualifications issued by the AAPQ, the AAPQ will need to undertake a new accreditation.
- 6.6 HKCAAVQ will also determine if the modification will be assessed by means of paper-based review, a meeting or site visit. HKCAAVQ may engage specialist(s) who have the expertise and experience in the industry to review the modification.

- 6.7 HKCAAVQ will issue a Service Agreement with the AAPQ, specifying the fee and timeframe for completing the process. The processing time may vary with the scope of the proposed change.
- 6.8 The possible outcomes of an application for modification are approval or non-approval. Where deemed necessary, HKCAAVQ may stipulate condition(s) (i.e. pre-condition(s) or requirement(s)) and/or restrictions to an approval for the modifications.
- 6.8 In case of doubt, the AAPQ should consult HKCAAVQ on the need for approval on the modification(s) as soon as feasible, and prior to implementing any modification. HKCAAVQ may vary or withdraw the accreditation report during the validity period if there are modifications made that have not been approved by HKCAAVQ. The SED will be notified of such unapproved changes for his decision regarding the continuous appointment of the appointed AAPQ.

Expiry of the Validity Period

- 6.9 On the recommendation of QFS/EDB, HKCAAVQ will conduct re-accreditation for the AAPQ upon expiry of the validity period.
- 6.10 The AAPQ should submit a Statement of Intent (Sol) for re-accreditation **at least ten months** before the expiry date of the validity period of its accreditation status. If re-accreditation is not successfully completed by the expiry date of the validity period, the accreditation status will automatically lapse. The SED will be notified of such outcome for his/her decision regarding the continuous appointment of the Assessment Agency.

Entry of Qualifications into the QR

- 6.11 An AAPQ with its selected qualifications accredited by HKCAAVQ and appointed by SED will be able to issue qualifications recognised under the HKQF and register them in the QR.
- 6.12 Information on how to enter the qualification(s) issued by an AAPQ into the QR is available on the QR website at <http://www.hkqr.gov.hk>.

Advertisements Relating to the QF and the QR

- 6.13 The AAPQ is required to comply with section 18 of the AAVQO when publishing advertisements that relate to the QF and the QR. The 'Guidelines for Promoting Accredited Programmes and Programmes undergoing Accreditation' are available on the HKCAAVQ website at <https://www.hkcaavq.edu.hk>.

7. How is Feedback Collected

7.1 HKCAAVQ seeks feedback on its services. Feedback from respective stakeholders is usually collected via the following formal means with a view to continuously enhancing HKCAAVQ's services:

- The Panel's opinion survey after the issuance of the accreditation report or the outcome letter for each accreditation exercise;
- The annual survey of AAPQs using the accreditation services;
- Meeting with the AAPQs on various occasions, e.g. meetings to clarify points made in the accreditation reports; and
- Online collection of comments and suggestions from the public at the HKCAAVQ website: <https://www.hkcaavq.edu.hk/en/contact-us>.

8. Fees

- 8.1 HKCAAVQ is a statutory, not-for-profit self-financed body. The accreditation fee is levied on a full cost recovery principle. The exact accreditation fee for a specific exercise will be specified in the Service Agreement.
- 8.2 The fee schedule is subject to annual review, as approved by the Secretary for Education (SED), the latest fee schedule is available on the HKCAAVQ website at <https://www.hkcaavq.edu.hk/en/services/policies>.

9. Points to Note

- 9.1 These Guidance Notes are by no means exhaustive. They supersede any previous guidance notes, other guidelines or handbooks that HKCAAVQ published or issued previously regarding accreditation of assessment agencies for professional qualifications.
- 9.2 As the QF evolves, these Guidance Notes will be revised from time to time. Whilst HKCAAVQ endeavours to ensure the accuracy and currency of the information contained in these Guidance Notes, HKCAAVQ reserves the right to delete, suspend or edit any information at any time in its absolute discretion without prior notice. To obtain the most up-to-date information, users may refer to the electronic version of these Guidance Notes on the HKCAAVQ website at <https://www.hkcaavq.edu.hk>.
- 9.3 AAPQs are expected to put in place arrangements to respond to relevant new government initiatives in relation to professional qualifications. AAPQs are also required to demonstrate implementation of the new government initiatives and their effectiveness.
- 9.4 For enquiries, please contact HKCAAVQ by email at info@hkcaavq.edu.hk, or by phone at (852) 3658 0000.

Accreditation Standards and Possible Evidence

Preamble

1. The onus for providing sufficient and appropriate documentary evidence in the accreditation process to enable HKCAAVQ to make an accreditation decision lies with the AAPQ. HKCAAVQ does not request a specific format for the submission of the documentary evidence.
2. Seven Accreditation Standards are listed on the following pages. Possible sources of evidence are also listed. The possible evidence is indicative of what will be required. They are not meant to be exhaustive or mandatory. It is up to the AAPQ to submit other evidence that is effective in demonstrating that a standard has been met. The Panel may also ask for other evidence as deemed appropriate in accordance with the criteria set out in these Guidance Notes.

Component 1: Referencing of Qualifications to QF Levels

Standard 1: Development and Management of Qualifications

The AAPQ has a robust mechanism for developing qualifications to address the needs of the profession or industry it serves.

Criteria

- 1.1 The AAPQ should conduct broad-based analyses with input from a wide spectrum of stakeholders to identify the needs for particular sets of competencies required for the profession or industry it serves.
- 1.2 Where needs are established and the AAPQ plans to develop a qualification, it should check its current qualification portfolio to ensure that the established needs are not being or will not be addressed by any current qualification or the revision of any current qualification.
- 1.3 The qualification should be developed based on the professional standards set by the AAPQ in respect of the established needs. Where relevant Specifications of Competency Standards (SCSs) are available, reference will be made to the SCSs for development of the qualification.
- 1.4 The AAPQ should align the set of competencies underpinning the qualification with the Generic Level Descriptors (GLD) of the QF to determine the intended QF level of the qualification.
- 1.5 The AAPQ should identify the mix of knowledge, skills and experience for achieving the competencies recognised by the qualification.
- 1.6 There is a mechanism for reviewing and updating the accredited qualification at reasonable intervals for the purpose of maintaining the currency of the qualification.

Possible evidence to demonstrate meeting the standard

- The documented mechanisms and procedures for developing, operating and maintaining qualifications and documentation of tools available for use
- An audit trail of the development of the qualification with supporting documents as evidence including but not limited to the
 - needs analysis and the associated stakeholder consultation reports/records;
 - comparison of the proposed qualification with the existing ones and with a concrete plan for revision or revamp;
 - list of the competencies required (translated into observable learning outcomes);
 - analysis of the knowledge, skills and experience for achieving the expected competencies;
 - records of modifications made before finalization; and
 - documentation showing that the development and approval of the qualification have undergone the internal QA procedures of the AAQP (e.g. minutes of meetings pertaining to the QA approval procedures), etc.
- Mapping of the competency statements of the qualifications to the GLD

Component 2: Review of Assessment Agency

Standard 2: Professional Standing, Governance and Organisational Structure

The AAPQ demonstrates a sound professional standing and has effective governance arrangements that ensure sustainable operation of the AAPQ in accomplishing its mission and its accountability for the development and operation of qualifications as well as administration of the associated assessments.

Criteria

- 2.1 The AAPQ's mission is expected to encompass its commitment to acting in the interests of the profession or industry it serves, including developing and operating qualifications as well as administering the associated assessments accessible in the public domain for the purpose of recognising the intellectual, professional, technical and ethical competencies of individuals who aspire to enter or progress in the profession, thereby safeguarding public interest by promoting and enhancing professional standards.
- 2.2 Subject to the constitution under which the AAPQ is set up, the AAPQ is expected to have a properly constituted governing body composed of fit and proper persons such that the governing body is regarded by the relevant profession or industry as sufficiently representative of the interests of the profession or industry concerned.
- 2.3 The AAPQ's governing body has the ultimate authority to make decisions for steering the operation and development of the AAPQ and be responsible for such decisions. The decisions should be concerned with but not limited to the AAPQ's objectives, overall directions, overarching policies, appointment of senior management staff members in the management structure, management of senior staff performance and appointment of external members in different capacities to support the operations of the AAPQ, with a view to achieving quality, integrity, financial stability and sustainability in leading the AAPQ to carry out its mission.
- 2.4 Members of the governing body and the management structure are expected to have a good understanding of the mission of the AAPQ, their roles and responsibilities as well as developments and needs of the profession or industry concerned. They are also expected to possess knowledge of the QF and knowledge of validation and recognition of competencies achieved via different types of learning.
- 2.5 The AAPQ is expected to ensure that policies and procedures are in place to avoid conflicts of interest and fraudulent activities.
- 2.6 Where the governing body is composed of boards and committees, the terms of reference, membership composition, criteria for appointment of members and terms of office of members of these boards and committees and their reporting relationships are expected to be appropriately set, clearly defined and well documented. It is expected that checks and balances are duly incorporated in the governance and management structures.
- 2.7 The AAPQ is expected to have an appropriate organisational structure, including a management structure, to effectively and efficiently implement the decisions made by the governing body through policies and procedures.

Possible evidence to demonstrate meeting the standard

- Vision and mission statements of the AAPQ
- Organisation charts showing the AAPQ's organisational and governance structure, key position holders and the reporting relationships among the governing boards and committees and among the key management staff members
- Terms of reference, membership composition, member appointment criteria and terms of office of members of the governing boards and committees and their interrelationships
- Profiles of members of the governing boards and committees
- Appointment requirements, profiles and job descriptions of key staff members
- The documented decision making process and evidence, e.g. minutes of meetings showing how decisions are made in relation to development, management and review of professional qualifications and their associated assessments, etc
- Policy and procedure manuals including those addressing conflicts of interest, prevention of fraudulent activities, etc.

Standard 3: Development and Management of Assessments

The AAPQ has demonstrated that it has the ability to develop assessment strategy and assessments for the qualifications developed. The AAPQ has also developed appropriate quality assurance arrangements to ensure the validity, reliability and fairness of assessments and that continuous improvement is made.

Criteria

- 3.1 Subject to the mix of knowledge, skills and experience identified as required for achieving the competencies underpinning the qualification and the types of learning for acquiring these, the AAPQ is expected to formulate an assessment strategy for the qualification that is: (a) learner-focused; (b) accessible; (c) flexible; (d) valid and reliable; (e) fair, transparent and consistent; (f) quality assured and (g) compliant with relevant legal requirements and relevant requirements of the profession or industry for which the qualification is designed.
- 3.2 The AAPQ is expected to have in place a mechanism for selecting an appropriate assessment method or a set of assessment methods for assessing learning outcomes of candidates against the competency standards set for the qualification. Stakeholders' inputs are expected to have been considered in the course of making the decision.
- 3.3 The AAPQ is expected to have in place a mechanism governing the development of assessment questions and the associated assessment criteria, marking schemes and/or rubrics, which clearly specify personnel responsible for developing, reviewing and endorsing the assessment materials, qualification requirements for those personnel, the development process and relevant quality assurance procedures.
- 3.4 The AAPQ is expected to develop a bank of assessment questions sufficient to address the assessment needs for the qualification concerned and avoid frequent reoccurrence of the same questions in different rounds of assessments.
- 3.5 The AAPQ is expected to develop quality assurance measures in place to govern the execution of the entire assessment process, such as guidelines for logistics arrangement, setting of assessment venues, procedures for conducting assessments, measures governing consistencies in marking standards and accuracy of assessment results, and policies and procedures for handling appeals against assessment results, etc.
- 3.6 The AAPQ is expected to continuously monitor and conduct regular review on its provision of assessments services, including assessment strategies, methods, materials and operations to ensure conformity to quality standards and alignment with the AAPQ's mission. Findings from analyses should be used to inform decisions in the next cycle of planning, implementation, monitoring and review for the purpose of continuous improvement in accomplishing its mission.
- 3.7 All quality assurance policies and procedures relevant to the development and management of assessments are expected to be well documented and communicated to staff and other stakeholders as appropriate.

Possible evidence to demonstrate meeting the standard

- Documentation on the assessment policy for the qualification submitted for accreditation
- A detailed account of the selected assessment method(s) with the assessment criteria and the assessment process(es) clearly described
- Records of development of the assessment method options and the considerations made and addressed
- Records of the process of and rationales for selecting the particular assessment method(s)
- Documentation on the procedure for and progress of developing assessment questions and the associated materials

- Sample assessment papers along with the associated standards for marking and supporting materials to guide the conduct of assessments for each QF level
- Documentation on the requirements for appointment of writers for writing assessment materials
- A plan for developing adequate assessment questions, the associated standards for marking and supporting materials within a reasonable timeframe
- Documentation on the QA policies and procedures relevant to the development and operation of qualifications and administration of the associated assessments
- Roles and responsibilities of different personnel in developing and managing assessments
- A list of staff members responsible for implementation of the QA policies with their roles, responsibilities, appointment requirements, profiles as well as reporting relationships clearly stated
- Documentation on the procedure for internal verification of assessment results
- Documentation on policies, methods and procedures for verifying and endorsing assessment results
- Documentation on the policies and procedures for handling appeals against the assessment results

Standard 4: Human Resources

The AAPQ has engaged sufficient qualified and competent persons who possess adequate knowledge of the profession or industry it serves and adequate knowledge of the QF to perform the roles of 'Assessment Manager', 'Assessment Secretary', 'Internal Verifier' and 'Assessor' as well as other supporting functions.

Criteria

- 4.1 It is expected that the AAPQ has clear specifications of the roles and responsibilities of different job positions involved in development and operation of qualifications, administration of the associated assessments and quality assurance.
- 4.2 The AAPQ is expected to have clearly stated appointment requirements for different job positions.
- 4.3 The AAPQ is expected to have a performance management mechanism in place to monitor, evaluate and improve the performance of personnel involved in the operation and administration of assessments.
- 4.4 The AAPQ is expected to have policies in place for regular review of manpower needs and for ensuring that there are adequate qualified staff members to support effective operations.
- 4.5 The AAPQ is expected to provide support and continuous professional development opportunities and arrangements for staff members so as to ensure that they are equipped with adequate updated and relevant knowledge and skills to discharge their duties effectively and for continuous enhancement of services.

Possible evidence to demonstrate meeting the standard

- An organisational chart and other documentation specifying the roles, responsibilities, appointment requirements and reporting lines of the job positions involved in development and operation of qualifications, administration of the associated assessments (the roles of the 'Assessment Manager', 'Assessment Secretary', 'Internal Verifier' and 'Assessor') and quality assurance, along with a list of the current post holders and a description of their profiles
- A manpower plan to engage adequate qualified staff to fill the crucial job positions within a reasonable timeframe
- Documentation on the policy on and plans for provision of training and development activities to staff in different roles
- A staff handbook containing information on the administrative arrangements and resources that staff may draw upon to support their discharge of responsibilities

Standard 5: Communication with Stakeholders

The AAPQ has arrangements for effective communication with a wide spectrum of stakeholders including, where applicable, employers, relevant subject experts, practitioners, prospective applicants, former candidates, other bodies with which the AAPQ has mutual recognition / reciprocal membership agreements for the purpose of membership admission, staff, assessors, the relevant industry associations, the Education Bureau, other concerned government departments and agencies, the Accreditation Authority and other stakeholders.

Criteria

- 5.1 The AAPQ is expected to have policies and procedures for communication and consultation with various stakeholders in relation to development, operation and review of qualifications and the associated assessments.
- 5.2 The AAPQ is expected to communicate with staff, assessors, writers of assessment questions and internal verifiers to ensure that they understand and are able to meet their job requirements.
- 5.3 The AAPQ is expected to provide clear and easily accessible information for applicants for the assessment services to ensure that they understand the purposes, processes and requirements of the assessments they are to undergo, as well as their rights and responsibilities.
- 5.4 The AAPQ is expected to communicate with the Education Bureau on the latest development of qualifications it operates which are registered under the QF. The AAPQ is also expected to liaise with other government departments and / or agencies as appropriate for such purposes as compliance with professional and legislative requirements.
- 5.5 The AAPQ is expected to communicate with and collect feedback from different stakeholders and to take these into consideration in its quality assurance decisions. There should be a policy and procedures for handling complaints in a timely manner.
- 5.6 All the communication policies and procedures are expected to be well documented and communicated to staff.

Possible evidence to demonstrate meeting the standard

- Documentation on the communication policies and procedures
- A plan to promote the relevant qualification and the associated assessments for the expected validity period
- Documentation on the means and procedures for communicating with different stakeholders, e.g. procedure manuals, staff handbooks, guidance notes and information pack to applicants, minutes of meetings with resolutions regarding the establishment of communication channels, etc.
- Records of communication and consultation with stakeholders and follow-up actions taken and planned
- Questionnaires and other tools to collect feedback from stakeholders, including applicants, assessors, partnership bodies, the relevant profession or industry , etc.
- Documentation on the policies and procedures for handling complaints

Standard 6: Financial Resources and Financial Arrangements

The AAPQ has financial resources and financial arrangements for on-going operation and for future developments.

Criteria

- 6.1 The AAPQ is expected to have sound financial planning to sustain its financial health. Such planning should be characterised by informed understanding of how the AAPQ operates as well as insights and foresight about the AAPQ's future developments and risks. The AAPQ is expected to make reasonable projections of incomes and expenditures and demonstrate that it is financially viable.
- 6.2 The AAPQ is expected to have financial policies and procedures for effective and efficient implementation of the financial decisions made as a result of financial planning.
- 6.3 The AAPQ is expected to have a public liability insurance policy in place to cover the scope of its operations throughout the validity period for its status as the Appointed AAPQ.
- 6.4 All financial policies and procedures are expected to be well documented and communicated to staff and other stakeholders as appropriate.

Possible evidence to demonstrate meeting the standard

- Documentation on financial policies and procedures
- Details of the financial planning for operation of the qualification concerned and administration of the associated assessments, including a budget for the expected validity period, with the rationales for the projections made and the risk factors addressed
- Documentation of a public liability insurance policy covering the expected validity period

Standard 7: Information Management Systems for Records

The AAPQ has a policy and a robust system for management of information and records that facilitate development and operation of qualifications and administration of the associated assessments and that safeguard integrity, security and accuracy of information and documentation.

Criteria

- 7.1 The AAPQ's policy governing the operation of the information management system is in compliance with relevant legislation such as the Personal Data (Privacy) Ordinance.
- 7.2 The AAPQ is expected to have a policy and procedures in place for collecting, maintaining, updating, releasing and using information.
- 7.3 The AAPQ is expected to clearly define the rights to access, retrieve, update and use different types of information and documentation.
- 7.4 The AAPQ is expected to employ appropriate measures to ensure data security.
- 7.5 The AAPQ is expected to keep adequate records of the development and modifications of its qualifications and the associated assessments.

Possible evidence to demonstrate meeting the standard

- Description on the information management systems
- Documentation on the policy on information and records management, including the policy on distribution of information and instructions on compliance with the relevant professional and legal requirements
- Staff manuals and / or guidelines for handling information and documentation, containing information such as: classification and storage systems; version control; access rights of different job positions, procedures for the retrieval, updating and use of different types of information and documentation including research data, applicant data, result notices and certificates; and mechanisms for information dissemination, etc.
- Templates for keeping adequate records of the development and modifications of qualifications and the associated assessments

Guide to Prepare for Accreditation Documents through a Self-Evaluation Process

Self-Evaluation for Assessment Agencies for Professional Qualifications

1. Assessment Agencies for Professional Qualifications (AAPQs) are requested to complete a critical and comprehensive self-evaluation before undertaking accreditation. The purpose of self-evaluation is for the AAPQ to assess its own readiness to meet the accreditation standards, and to explore potential avenues where further improvement / enhancement can be made. Based on the findings of the self-evaluation, the AAPQ should implement necessary improvements and changes to its structure, policies and processes.
2. For new AAPQs where the assessment process is newly developed, it is understood that some of the evidence mentioned in these Guidance Notes may not be available yet (e.g. evaluation of the effectiveness of the assessment process). Under such circumstances, the AAPQ is expected to present the planned mechanisms and procedures and to evaluate them against the assessment criteria as well as the standards required by the profession or industry branch concerned.
3. Self-evaluation lies at the heart of quality assurance, whether at the level of institutional systems or assessment of individuals. The AAPQ's on-going practice of self-evaluation shall form the basis for preparation of the Accreditation Document for the purpose of accreditation / re-accreditation of the AAPQ by HKCAAVQ.

Accreditation Document

4. The Accreditation Document should provide background information about each standard, present the findings of self-evaluation, and incorporate documentary evidence to support the findings. **Appendix 1** gives an overview of the use of documentary evidence and suggests some possible examples of evidence. The AAPQ is advised to structure the Accreditation Document such that it addresses each accreditation standard in the order in which the accreditation standards appear in the relevant HKCAAVQ Guidance Notes. In particular, the document should reflect on the standards specified in the Guidance Notes.
5. Some of the information required is largely factual. What differentiates a good Accreditation Document from one that is not so good is the extent to which there is genuinely evaluative commentary, as opposed to mere description. The following are some of the areas where it is possible to include the type of evaluative commentary that will make the difference between a good document and a not-so-good document.

6. A good Accreditation Document will explain how the AAPQ is effective in developing and operating qualifications as well as delivering good quality assessment services associated with particular qualifications it has developed for the relevant profession or industry branch. A not-so-good document would merely describe the AAPQ's policies and systems, without explaining why they work, or discussing strengths and possible areas for enhancement.

| A Good Accreditation Document | A Not-so-good Accreditation Document |
|---|---|
| <ul style="list-style-type: none"> • Addresses the established needs of the related profession or industry with the mission of the AAPQ. • Explain how assessments are developed based on the standards required for the qualification and are conducted for validating knowledge and skills for meeting such standards. | <ul style="list-style-type: none"> • Does not explain how the AAPQ conducts assessments in the way as claimed / planned. |
| <ul style="list-style-type: none"> • Discusses the decision making process within the AAPQ, explaining how decision making takes account of such factors as internal control and external accountability, including but not limited to the awarding powers of the AAPQ, and its knowledge and application of the reference standards. • Monitors the effectiveness and efficiency of the mechanisms used in developing and operating qualifications and in assessing knowledge, skills and experience of individuals in relation to the developed qualifications. | <ul style="list-style-type: none"> • Merely describes the decision making powers, process and division of responsibilities, without providing any rationale or mechanism for evaluating their effectiveness. |
| <ul style="list-style-type: none"> • Identifies the measures used to assess the success of operation, explaining why each measure is important before presenting relevant figures. | <ul style="list-style-type: none"> • Offers statistics alone, without adequate explanation of the significance of them. |

What is a Quality Accreditation Document?

7. An Accreditation Document should contain adequate information to address each of the accreditation standards applicable to the accreditation exercise. However, a document that is too long will make the reader lose focus. Not all of the factual information may need to go into the Accreditation Document.

The document can refer the reader to other information that is available. As a rule of thumb, the document should be self-contained, include key facts and make cross references to data in supporting documents with clear indication of the reference drawn from relevant parts of the supporting documents. It should be evaluative, rather than merely descriptive. It should give the reader a clear picture of what the AAPQ is like in a succinct, precise and concise manner.

8. Within these broad guidelines, being succinct, concise, self-contained and evaluative is always better than being unnecessarily lengthy and descriptive.

Roles and Responsibilities of Assessment Agencies for Professional Qualifications in Accreditation

1. Accreditation is voluntary and initiated at the request of the AAPQ. The Service Agreement signed between HKCAAVQ and the AAPQ provides the terms and conditions including the roles and responsibilities of the two parties. By signing the Service Agreement, the AAPQ agrees to participate in the accreditation exercise and shall thus cooperate with HKCAAVQ and the Accreditation Panel so as to ensure that the accreditation process is as smooth as possible.
2. Accreditation is evidence-based with the onus of proof lying with the AAPQ. It is the responsibility of the AAPQ to provide evidence to demonstrate that it meets the accreditation standards as well as any applicable statutory requirements in Hong Kong. The AAPQ is responsible for the full and frank disclosure of all relevant information and documents as requested for accreditation by HKCAAVQ throughout the accreditation process. Limited disclosure will therefore be considered by the Panel as lack of evidence. HKCAAVQ understands that some of the information requested may be sensitive and of a confidential nature. All panel members will have signed a confidentiality statement and any confidential documents will be treated in such manner by the Panel.
3. The AAPQ is expected to perform the following responsibilities in the exercise:
 - To submit an Accreditation Document of a self-evaluative nature that addresses the standards promulgated in the accreditation Guidance Notes relevant to the exercise.
 - To include supporting documents in the Accreditation Document as necessary, respond to the Panel's Initial Comments, and provide additional documents at the Panel's request before and / or during the site visit as requested.
 - To prepare for the site visit in line with the stipulated requirements as contained in these Guidance Notes as well as under further advice by the HKCAAVQ. This responsibility includes making the necessary meeting arrangements for the site visit including but not limited to the invitation of and briefing for the proposed representatives whom the Panel will be meeting. The requirements and arrangements will be stipulated by the Panel before and during the site visit as deemed appropriate. As the discussions during the site visit form part of the evidence underpinning the accreditation exercise, the AAPQ is required to ensure that all the requested participants are available in sufficient numbers to meet the Panel in the respective meeting sessions. The AAPQ will be invited to give inputs to the visit programme prior to finalisation of it.
 - To participate in the meeting sessions and engage in the discussions with the Panel during the site visit.

- To provide the basic protocol and logistical support including making suitable meeting arrangements and providing suitable meeting facilities. These include but are not limited to provision of a private meeting room with sufficient space for the Panel to exchange with the participants in the respective meeting sessions, arrangements for access to relevant documents and facilities, provision of reasonable refreshments, car parking facilities, if any, etc. Details will be put forth to the AAPQ by the HKCAAVQ before the site visit.
- To check and provide feedback on the factual accuracy of the draft Accreditation Report.

Roles of Accreditation Panel Members

1. Accreditation is conducted under the 'peer review' principle. By peer review, accreditation decisions are made by HKCAAVQ on the basis of recommendations put forth by peers involved in the exercise as members of the Panel. Panel members are therefore important assets of HKCAAVQ. They play a significant part in the formulation of accreditation decisions.
2. The Panel members are vocational, academic and professional experts with relevant expertise and experience in areas such as qualification development and operation, assessment, professional / industry training and development, SCS requirements for the relevant industry (where applicable), institutional management, quality assurance and QF matters. A professional staff member of the HKCAAVQ will perform the role of the Panel secretary but will also serve as a full member of the Panel. All Panel members are required to observe the Code of Conduct for Panels published by HKCAAVQ, which is downloadable from the HKCAAVQ website at <https://www.hkcaavq.edu.hk/en/services/policies>.
3. The Panel is expected to provide expert advice for HKCAAVQ in an accreditation exercise according to the accreditation Guidance Notes, accreditation standards and procedures as well as the Code of Conduct stipulated by HKCAAVQ and the Terms of Reference of the exercise as specified in the Service Agreement.
4. The role of the Panel is to assess the AAPQ's competency to develop and operate qualifications for the relevant profession or industry and its competency to assess the knowledge, skills and experience acquired by individuals with a view to granting relevant qualifications developed and operated by the AAPQ in recognition of such assessed knowledge, skill and experience.
5. In order to perform their duties effectively and efficiently, Panel members are expected to be able to afford the time to make the necessary preparations for the accreditation exercise, including but not limited to attending relevant training and briefing sessions, familiarising themselves with the HKCAAVQ accreditation requirements and processes, reading thoroughly the Accreditation Document and materials provided by the AAPQ, making initial comments on the Accreditation Document and materials against the accreditation standards and evidence, participating in the whole of the site visit, sharing views with and putting forward recommendations to HKCAAVQ together as a Panel. Panel members are also expected to share their views on the draft Accreditation Report as well as on the fulfilment of the pre-condition(s) / requirement(s) by the AAPQ as and when appropriate.
6. The Panel Chair, as the leader of the Panel, is also expected to provide overall guidance in order to achieve a satisfactory completion of the

exercise. It is the Panel secretary's duty, in consultation with the Panel Chair, to ensure that all pertinent issues relevant to the accreditation are fully addressed during the site visit, and that decisions / recommendations made by the Panel are consistent within HKCAAVQ.

7. Accreditation is also conducted under the principle of 'fitness for purpose'. It is understood that professions / industries / branches of an industry may differ in nature, size, operational complexity and scope. Therefore, there is no one single model that fits all in quality assurance. Accordingly, the Panel members are expected to pay due attention to the needs of the particular profession or industry when making evidence-based judgements and recommendations on the basis of the stipulated accreditation standards and requirements so as to maintain professional standards in accreditation.
8. Accreditation has dual purposes. Firstly, an accreditation exercise should ensure that standards are met. Secondly, the exercise should provide input for continuous improvement of the AAPQ and its processes for developing and operating qualifications as well as administering the associated assessments. An open mind and a supportive attitude are part of the professional behaviour expected of Panel members without compromising quality.

Glossary

| Term | Definition |
|--|--|
| Accreditation Authority | Hong Kong Council for Accreditation of Academic and Vocational Qualifications specified in Part 1 of Schedule 1 of the Accreditation of Academic and Vocational Qualifications Ordinance (Cap 592) to undertake quality assurance for the development of the QF. It is entrusted with the responsibility for assuring the quality of appointed assessment agencies, the qualifications recognised under the QF and their associated learning programmes and the providers. |
| Appointed Assessment Agency for Professional Qualifications | An accredited Assessment Agency for Professional Qualifications (AAPQ) appointed by the Secretary for Education under the Accreditation of Academic and Vocational Qualifications Ordinance to assess the knowledge, skills and experience acquired by individuals and to issue QF qualifications it has developed in recognition of such assessed knowledge, skills and experience. |
| Assessment Agency for Professional Qualifications (AAPQ) | Any institution, organisation or other body being referred by the Qualifications Framework Secretariat (QFS) to be accredited for the purpose of serving as an appointed Assessment Agency under the Accreditation of Academic and Vocational Qualifications Ordinance (AAVQO) (Cap 592). In the context of these Guidance Notes, an appointed Assessment Agency refers to an appointed Assessment Agency for Professional Qualifications. |
| Accreditation Document | A self-evaluative document, with supporting evidence, prepared by an AAPQ to address the accreditation standards. |
| Accreditation Panel | A panel consisting of specialists with the requisite profiles and expertise formed for the purpose of the relevant accreditation exercise in which an HKCAAVQ staff member plays the role of Panel Member cum Secretary. |
| Accreditation Report | The report that HKCAAVQ issues to the AAPQ on completion of the accreditation exercise stating the accreditation outcome and decisions as well as the validity period, the QF Level(s), condition(s) (including, if any, pre-condition(s) and/or requirement(s)) and restriction(s). The report also provides information on the Panel's observations and recommendations and the rationales for arriving at the accreditation decisions. |
| Condition | A condition is part of the accreditation decisions to be fulfilled by the AAPQ prior to the start of the validity period of the accreditation status (pre-condition) or by the specified deadline during the validity period (requirement). |
| Evidence-based | It is one of the guiding principles of accreditation which means that accreditation decisions are to be made on the basis of evidence provided by the AAPQ to support its claim that it meets the accreditation standards stipulated in these Guidance Notes. |
| Fitness for Purpose | It is one of the guiding principles of accreditation which means that the AAPQ is accredited on the basis of its stated objectives, the QF level(s) and, where applicable, the Specification of Competency Standards (SCSs) formulated for the relevant industry or industry branch. |
| Industry Training Advisory Committee (ITAC) / Cross-Industry Training Advisory Committee (CITAC) | An advisory body comprising representatives from employers, employees and professional bodies of the relevant industry(ies) to develop, maintain and update the SCSs, to formulate a Recognition of Prior Learning (RPL) mechanism for the industry(ies), and to promote the QF within the industry(ies). |

| | |
|---------------------------------------|--|
| Peer Review | It is one of the guiding principles of accreditation which is enacted by involving specialists with relevant expertise and experience as panel members in the accreditation exercise. |
| Pre-condition | A pre-condition is part of the accreditation decisions to be fulfilled by the AAPQ prior to the start of the validity period of the accreditation status. |
| QF Level | The outcome level of the qualification for which an assessment process is conducted by the AAPQ. The outcome competency is pitched against the Generic Level Descriptors (GLD) published by the Government at https://www.hkqf.gov.hk/en/KeyFeatures/levels/index.html |
| Qualification | A formal award obtainable from an appointed AAPQ in recognition of the knowledge, skills and experience acquired by an individual. |
| Qualifications Framework (QF) | The Hong Kong Qualifications Framework (HKQF) is a hierarchy of qualifications of academic, vocational and continuing education as well as qualifications attained by employees through the Recognition of Prior Learning (RPL) scheme. It consists of seven levels, which are characterised by the outcome-based Generic Level Descriptors (GLD) published by the Education Bureau (EDB). |
| Qualifications Register (QR) | It is a centralised online database of the QF-recognised qualifications. Qualifications in the QR are ordered by level in accordance with the Generic Level Descriptors. |
| Requirement | A requirement is part of the accreditation decisions to be fulfilled by the AAPQ by the specified deadline during the validity period of the approved accreditation status. |
| Restriction | A restriction is a limit set to the accreditation status within which the status will continue to be effective within the validity period as specified in the accreditation report. |
| Re-accreditation | It is the accreditation process that an appointed AAPQ needs to undertake prior to expiry of its accreditation status in order for HKCAAVQ to determine whether it continues to maintain its competency to execute its role as the appointed AAPQ. |
| Site Visit | A visit to the AAPQ's premise(s) / centre(s) in Hong Kong. The site visit is an integral part of an accreditation exercise conducted primarily to collect evidence for evaluating whether the accreditation standards are met. |
| Specification of Competency Standards | The industry benchmarks for the knowledge, skills and experience required to perform specific tasks in the relevant industry / industry branch at various QF levels. These industry benchmarks are developed by the ITACs / CITAC of the relevant industries. |
| Accreditation Standard | A benchmark for the Panel to assess whether the AAPQ meets the quality requirements. Accreditation Standards are expressed in detail in Appendix 1. |
| Standard-based | It refers to the quality requirements stipulated in these Guidance Notes. |
| Validity Period | The period of time in which an approved accreditation status is effective as stipulated in the accreditation report. |