**Example of how to complete this form. This is a working document and it may not be necessary to compete all the boxes. The first row is for the Training Provider (TP) and the conclusion box is where the evidence is summarised and the condition/recommendation is made. This conclusion is then copied and pasted into the final report to go to the TP.**

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**NTEC Accreditation Document**

**Essential Requirement 1: Overarching Policy Statement**

**T**he institution shall have an overall policy and mission statement.

**Criterion 1.1** *Relationship:* This overall policy statement should indicate the institution’s overall intentions/mission/aims. It should contain the number and name of all educational courses it offers in the field of health care, including those related to nutritional therapy. It should link with the institution’s education policy statement and its strategic plan, and should be formulated and subscribed to, as appropriate, by its governing body, staff and students. Within the institution the relevant faculty, school or department should provide a policy context for the nutritional therapy courses being offered.

*Guideline: The statement of policy should provide direction for the institution. The statement should incorporate the purpose for which the institution was founded and the point of view/philosophies it represents. It should relate to the institution's resources — human, physical and financial.*

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**Criterion 1.2** *Other policies:* The institution must provide clear statements of its management policies in respect of those matters that support the fair and efficient delivery of the course(s). There should be a clear policy statement with the main organizational divisions of the institution.

*Guideline: Brief written statements should be included about structural matters that impact upon a course and its students: equal opportunities policies; recruitment and selection policies, including ways of assessing and giving academic credit to mature students for their life experience and their prior learning (APL) and an anti-discrimination policy in relation to candidates and students, together with an indication of how this will be implemented and monitored; policy to encourage the continuing professional development of staff (CPD).*

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**Criterion 1.3** *Review:* Statements of institutional policy must be reviewed periodically and revised when necessary. NTEC's Annual Critical Course Review (ACCR) process will expect evidence of this.

*Guideline: The re-examination of policy should determine whether all policy statements are still relevant, whether they are being fulfilled, and whether the statements are understood adequately by all those involved. This review process should include comments from representatives of the student body, teaching staff, clinical tutors, and the external examiner(s)*

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***Essential Requirement 2: Legal Organisation***

The institution shall be legally constituted and shall be in compliance with all statutory regulations applicable to it.

**Criterion 2.1** *Constitution:* The institution must provide evidence of its legal constitution and ownership and reflect this in its structure, function and policies. Accreditation by NTEC does not remove the obligation of an institution to comply with relevant statutory and legal requirements.

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***Essential Requirement 3: Institutional Management***

The institution shall have a governing body and/or advisory board.

**Criterion 3.1** *General Principles:* In order to conform with ER 3 all teaching institutions and programme leaders are expected to look carefully at, and to refer in their documentation when appropriate, to the Principles of Good Governance found as Appendix C in the Accreditation Handbook.

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**Criterion 3.2** *Composition and representation:* The governing body (or advisory board), whose duties and responsibilities must be clearly defined, must exercise ultimate and general control over the institution’s affairs, and, in so doing, must provide adequate representation of the public interest.

*Guideline: Governing body members should represent the founders, benefactors and the general public served by the institution. In an institution, which is a sole-proprietorship, partnership, Registered Charity or Limited Company, a governing body or advisory board shall be created and utilized to satisfy this Criterion. In the case of a limited company, the role could be undertaken by the Board of Directors, or, by an Advisory Board reporting to the Board of Directors. The Governing body members should be responsible for directing the accomplishment of the purposes for which the institution was founded, and may therefore be expected to include professionals and educationalists among their ranks. They should be responsible for establishing broad policy and long-range planning, appointing the They should be responsible for establishing broad policy and long-range planning, appointing the Principal and/or Dean, developing financial resources, and playing a major role in the development of external relations.*

*Guideline: Governing body decisions should be made following representation by all interested parties*.

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**Criterion 3.3** *Meeting*s*:* Governing body or advisory board meetings must be held at regularly stated times. An Agenda for the meeting must be prepared and accurate minutes of the meeting kept and filed.

Guideline: Meetings of the governing body or advisory board should be sufficiently often and of sufficient length to enable it to fulfil competently its responsibilities to the institution.

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**Criterion 3.4** *Responsibilities*: The management of the institution’s financial matters should be the responsibility of a body or committee separate from the academic committee or board

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***Essential Requirement 4: Administration***

The institution shall have a Director, Principal or Dean (or equivalent) whose full-time or major responsibility is to the institution and an administrative staff of a size and organisational structure appropriate to the size and purpose of the institution.

**Criterion 4.1** *Institutional Administration:* The Director, Principal or Dean shall be responsible to the governing body for the entire operation of an institution, and shall be directly responsible for the administration of the policies and procedures as set forth by the governing body.

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**Criterion 4.2** *Academic Administration:* Institutions must have defined clearly the academic responsibility for facilitating curriculum development and evaluation of courses, and vested this in a committee or board (e.g. an Academic Board), chaired by the Director, Principal or Dean, or other senior management figure.

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**Criterion 4.3** *Continuance of Programme.* The institution must demonstrate that if it were to cease functioning as an educational establishment or if the course were to be discontinued, it could make arrangements to complete the students’ programme in a manner acceptable to the NTEC and without any extra financial burden on the students.

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**Criterion 4.4** *Contract of service (or service agreement clearly defining the role):* The Director, Dean or Principal and other senior management figures should be in possession of a clearly set out contract, agreed by those in overall control of the institution, which provides him or her with a clear and workable framework within which to take full responsibility for the day-to-day direction of the institution.

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***Essential Requirement 5: Records***

The institution shall have appropriate record-keeping systems.

**Criterion 5.1** *Permanent Academic Records:* While observing the requirements of the Data Protection Act and other relevant legislation, the institution shall maintain and safeguard accurate academic records.

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**Criterion 5.2** *Data:* The institution must maintain data which will facilitate the compilation of the following records and statistics: student profiles, showing the number of students enrolled, progressing into each year, graduated, deferred and readmitted; admissions data showing the number of applications received and accepted, by gender and country location; the ages, and the educational and ethnic backgrounds of the student body.

*Guideline: These data should be in a form and in such detail that enables analysis for the institution's own critical course reviews.*

*Guideline: Institutions are advised that previous students may request transcripts of their personal academic and learning record.*

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**Criterion 5.3** *Clinical Records:* The institution must maintain accurate, secure, confidential and complete clinical records of patients currently being treated by students and staff in its own teaching clinic. It must also ensure that students and staff file copies with the institution of complete clinical records of all the patients they treat in other clinical placements. Records should be kept for 7 years, or until the age of 21 in the case of minors, whichever is the later.

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**Criterion 5.4** Institutions must complete an annual clinical audit using a template provided by the NTEC.

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***Essential Requirement 6: Equal Opportunities Policy***

The institution shall have adopted and implemented a comprehensive policy demonstrating its commitment to equal opportunities.

**Criterion 6.1** *Scope:* The policy should underpin all the institution’s activities.

*Guideline: The policy should explicitly demonstrate its application to students, to full-time, part-time and visiting lecturers and to patients.*

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**Criterion 6.2** *Implementation:* All institutional procedures, documents and publications must, where appropriate, indicate an awareness of, and a commitment to, equal opportunities.

*Guideline: The institution’s prospectus, or other official publication, as well as published staff recruitment material, should state explicitly an institutional commitment to equal opportunities and to the institution's desire to reflect diversity in its population.*

*Guideline: In the course of teaching and learning the institution's staff and students should be encouraged to embrace diversity, and must avoid the use of either written or spoken language which may be deemed to be discriminatory or offensive to particular groups.*

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**Criterion 6.3** *Review:* In common with other institutional policies, the Policy for Equal Opportunities must be monitored for effectiveness, reviewed periodically and revised when necessary.

Guideline: A specific staff member or team should have overall responsibility for monitoring and developing the Equal Opportunities Policy.

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**Criterion 6.4** *Complaints:* The policy must encompass, or make further reference to, fair, efficient and published procedures for receiving and responding to complaints and these procedures should embrace all employees, patients, students and other stake-holders in the institution.

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**6.5** *Grievances:* The institution must have fair, efficient and published procedures for receiving, reviewing and responding to grievances expressed by any member of its staff. (See also Criterion 6.4 for general complaints and Criterion 8.3 for student grievances. *NB this may be a single comprehensive policy*.)

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***Essential Requirement 7: Staff***

The institution shall have staff adequate for the educational courses offered and support those staff in their work and development.

**Criterion 7.1** *Number and Qualifications:* The institution shall maintain teaching and supervising staff that are appropriately qualified to a standard appropriate to the level at which they are teaching.

All staff supervising in clinic:

a) Must, wherever possible, be members of a professional body relevant to their role, said body having a Code of Ethics/Professional Conduct?

b) Must have full professional indemnity insurance

c) Must be registered as nutritional therapists with the CNHC or another regulatory body recognised by the NTEC

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**Criterion 7.2** *Background, Experience and Performance:* The general education, the professional education, the teaching experience and the practical professional experience of all teaching staff shall be appropriate to the subject taught. Every staff member shall provide evidence of appropriate experience, and of continuing professional development, in his or her field and also in the field of education. The institution should ensure appropriate performance review processes exist for staff.

*Guideline: Institutions must have a recruitment policy of employing teaching staff with a first degree or its equivalent (or appropriate professional experience at a graduate or higher level) and a staff development policy of encouraging teaching staff to develop the reflective and critical approach to practice.*

*Guideline: A professional development plan shall be in place for each member of the teaching and clinical supervising staff. This should cover developing competence and a facilitation of student learning.*

*Guideline: Staff supervising the clinical experience of students must be developing their awareness of effective approaches to clinical supervision, their compliance with core NTEC standards (Values & Aims of NT Education; Statement of Professional Principles & Values; the CNHC Code of Conduct) and their commitment to their own continuing professional development as supervisors and practitioners.*

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**Criterion 7.3** *Convictions:* All persons employed, or seeking employment, in whatever capacity, shall be required to disclose any convictions, including ‘spent’ convictions, under the Rehabilitation of Offenders Act. Such persons shall not withhold consent from the institution to make proper enquiries as to their background and suitability, and the institution shall undertake such enquiries.

Guideline: Disclosure should be requested on application forms and the responsibility for notifying the college of any change should be incorporated into staff contracts.

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**Criterion 7.4** *Policy and Procedures:* A staffing strategy shall be in place outlining the recruitment, appointment, induction, promotion, retention and development of appropriately qualified staff members. The strategy should include measures to develop all teaching (including clinical teaching) staff's understanding and practice of education, as well as, where relevant, their professional development in their subject.

*Guideline: All teaching staff shall be made aware of the institution's commitment to the critical review process required by the NTEC, and be encouraged to develop their own form of self-critical reflective practice as a teacher and, where appropriate, as a practitioner.*

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**Criterion 7.5** *Professional Development:* Conditions of service shall be adequate and equitable, and administered ethically, to provide teaching and clinical staff members with academic freedom, adequate preparation time and opportunities for professional growth and development. A named member of staff shall have responsibility for teaching and clinical staff development policy.

*Guideline: Staff contracts shall specify responsibilities clearly and staff appraisal should be carried out regularly.*

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**Criterion 7.6**: There shall be a process to ensure that all teaching and clinical supervisory staff have an agreed professional development plan and the institution's provisions for professional development should be reviewed periodically. Visiting lecturers’ knowledge and skill should be relevant and up to date for the subjects they are invited to present and teach.

*Guideline: Staff shall be encouraged to develop a research-minded approach appropriate to professional courses in higher and further education. Note here that the guideline is to encourage only, it is not a requirement but an area some training providers may wish to encourage.*

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**Criterion 7.7** *Communication:* Provision shall be made for regular and open communication among members of staff, and between the academic and clinical staff and administrative officers of the institution.

*Guideline: The staff shall adopt, subject to the approval of the institution’s academic body, a set of guidelines which delineate staff administration and responsibilities within the institution. Minutes of any meetings that consider educational policies and issues should be taken by a member of the staff elected to do so and shall be kept in a permanent file within the institution.*

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**Criterion 7.8** *Grievances:* The institution must have fair, efficient and published procedures for receiving, reviewing and responding to grievances expressed by any member of its staff. (See also Criterion 6.4 for general complaints and Criterion 8.3 for student grievances. *NB this may be a single comprehensive policy*.)

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***Essential Requirement 8: Students’ rights and responsibilities***

The institution shall develop a statement of the rights, privileges and responsibilities of students and of disciplinary proceedings for failing to meet those responsibilities. This statement shall include a limitation of the institution’s liability regarding future acceptance by the CNHC onto its register. The statement shall be made available to students through the prospectus, student handbook, and/or other appropriate means. All students’ services and activities provided by the institution should reflect the institution’s objectives.

**Criterion 8.1** *Association:* Policies shall foster professional associations among students, staff, and the administration, and provide opportunities for the development of individual potential.

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**Criterion 8.2** *Opportunity to be heard:* Provision shall be made for obtaining students’ views and for their participation in institutional and course decision-making.

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**Criterion 8.3** *Grievances:* The institution must have fair, efficient and published procedures for receiving, reviewing and responding to grievances expressed by students. The institution shall include the NTEC’s address in its published policy on student complaints so that if a student registers a legitimate complaint, believing that the institution has breached an Essential Requirement or Criterion under this set of accreditation requirements, the student may contact the NTEC. (See also Criterion 6.4 for general complaints and Criterion 7.7 for staff grievances.)

*Guideline: The institution shall include, in students’ handbooks, specific guidance about precisely when a complaint to the NTEC might be appropriate. Extracts from the NTEC’s Accreditation Requirements may be included if thought helpful.*

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**Criterion 8.4** *Policy:* The institution shall have a clear educational and clinical disciplinary policy outlining all the processes involved, and the rights of students who are alleged to have breached the institution's expectations of student responsibilities. A student ‘fitness to practice’ policy should be in place.

*Guideline: Such policy will normally be clear about the nature of student misconduct and about different stages of the disciplinary procedure, including the number and type of relevant warnings, the support systems available to students 'in trouble' and how to access the appeals procedure.*

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**Criterion 8.5** *CNHC Register – admission:* the institution shall make clear in all relevant student publications that eligibility for entry to the CNHC Register upon graduation is dependent on more than just satisfactory completion of the course. The decision to admit an individual to the register is that of the CHNC not of a training institution, or the NTEC, or any professional body

*Guideline: The institution should have a clear policy requiring students to have made a criminal record declaration on admission and to disclose to the institution if their health status deteriorates or they acquire a criminal record during their course.*

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***Essential requirement 9: Learning Resources***

The institution must provide learning resources and equipment adequate for the nutritional therapy courses offered.

**Criterion 9.1** *Resources and Access:* The institution should offer access to library materials and learning resources and appropriate information technology for students, or it must demonstrate how students can access other specific library and learning resources.

*Guideline: Students must have access to library materials, services and related learning resources, including IT equipment to facilitate and improve learning, foster inquiry and intellectual development, and support the educational programme(s).*

*Guideline: There should be a designated member of staff to oversee the running of the library if provided and/or access to other learning resources.*

*Guideline: All students should have access to a computer, for the preparation of assignments and for internet access.*

*Guideline: Opportunities must be available to ensure students have or can develop IT skills. There should also be an opportunity to access research on the Internet and in peer-reviewed publications.*

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***Essential Requirement 10: Institutional Resources***

The institution must provide facilities that are safe, accessible, functional, appropriately maintained and sufficient to house the course and to provide for its effective functioning. It shall provide a clinic and appropriate media and learning equipment adequate for the educational courses offered and, if necessary, shall have made specific arrangements for clinical learning in other healthcare settings.

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**Criterion 10.1** *Classroom and clinic size and equipment:* The institution shall provide clinic and classroom space, properly equipped and appropriate to its curriculum and size.

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**Criterion 10.2** *Health and Safety:* Facilities shall meet all applicable legislation including fire, health and safety standards. In addition, the clinic's premises and facilities must enable staff and students to comply with the CNHC Code of Conduct.

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**Criterion 10.3** *Behaviour in Clinic:* The institution shall have a clear policy about all aspects of behaviour in the clinic and in clinical practice. Institutions shall have a policy that teaching staff (including clinical supervisors), who are involved with student assessment, are not permitted to treat students in their role as nutritional therapy practitioners (and also as a practitioners of other complementary therapies). There shall be a named member of staff with overall responsibility for all aspects of the clinic.

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**Criterion 10.4** *Staff Facilities:* Adequate facilities, space for meetings and appropriate media and learning equipment shall be available for the support of administrative, teaching and other staff, as well as for students.

*Guideline: Facilities and equipment shall be adequate for staff to maintain and process student records, and conduct their duties effectively.*

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**Criterion 10.5** *Off-Campus Control:* The institution must be directly responsible for all of its off-campus educational activities, and have systems for approving and monitoring off-campus clinical training.

*Guideline: If components of the course are conducted at sites geographically separated from the main campus, the Principal, Dean, or other senior staff member must ensure that all educational components and services are of equivalent quality to that which is offered at the main site.*

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***Essential Requirement 11: Finance***

The institution shall have an adequate financial base for existing course commitments, must demonstrate adequate financial planning and must have an appropriate financial management system. In the case of an institution that is a sole-proprietorship; separate books and bank accounts for the course are required.

**Criterion 11.1** *Resources:* The institution shall be financially stable, working to a business plan, and with resources sufficient to carry out its objectives and to support adequately its courses and activities, now and in the foreseeable future.

*Guideline: The institution must have the financial capacity to respond to financial emergencies and unforeseen occurrences.*

*Guideline: If an accumulated deficit has been recorded, a realistic plan to eliminate such deficit must be presented clearly, understood and approved by the governing body or board of directors.*

*Guideline: The institution must demonstrate that if it were to cease functioning as an educational establishment or if the course were to be discontinued, it could make arrangements to complete the students' programme in a manner acceptable to the NTEC and without any extra financial burden on the students.*

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**Criterion 11.2** *Control:* The institution shall have control of its financial resources and budgetary process and be free from undue influence or pressure from external funding sources or agencies.

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**Criterion 11**.**3** *Expenditur*e: The income of the institution shall be expended to provide adequately for: instruction; administration; learning resources; student services and activities; teaching and clinical staff development; course promotion and advertisement; course development; maintenance; equipment; supplies; and all other specific functions that are consistent with the goals of the course and (or) the institution.

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**Criterion 11.4** *Budgetary Process:* The process by which the institution’s budget is established, and resources allocated, must be defined clearly and implemented consistently.

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**Criterion 11.5***In*s*urances:* Adequate and proper insurances shall be in place, including cover for employer’s liability, third-party liability, buildings and contents, loss of business income, and professional indemnity insurance relating to the carrying out of nutrition treatment by students. Contents cover should be on a ‘new-for-old’ basis.

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**Criterion 11.6***Audit:*

If, under current regulations, a training provider is required to carry out an audit, then the most recent set of audited accounts, certified by an independent registered auditor, must be made available to provide a detailed and accurate picture of the financial status of the institution. Management accounts may also be reviewed to ascertain the latest financial status of the institution. Should an audit not be required, then a report and un-audited accounts, prepared by an independent qualified accountant, should be presented for the previous financial year. The accounts should comply with relevant company law if the training provider is a limited company. If the training provider is not a limited company and is another organization - for example a partnership or sole trader - then the accounts must as a minimum include a balance sheet and profit and loss account and must be prepared by an independent qualified accountant. Again management accounts may also be reviewed to ascertain the latest financial status of the institution.

The appropriate individuals, or responsible groups, within the institution, should review and sign all year-end financial reports.

The Visiting Panel reserves the right to request to see earlier years’ financial reports (either audited or un-audited).

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**Criterion 11.7** *Indebtedness:* Adequate resources shall be available to meet repayments of short-term and long-term indebtedness without adversely affecting the quality of the course.

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**Criterion 11.8** *Payment and Refund Policy:* The institution must state clearly the options available to students in the payment of fees and this statement must be related to a fair, consistent and transparent fee structure and fee policy. Whatever fee options are offered to students; no payment should be accepted for more than one year of a course in advance unless there are clear reasons for doing so. All course fees held for subsequent years should be ring-fenced. A refund policy must be in place and uniformly and fairly followed and a clear statement should cover how the course will be delivered in the event of the training provider ceasing to offer the course in the future.

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***Essential Requirement 12: Official Publications***

The institution must publish, and make available to students and to the general public, official publications and statements that honestly and accurately set forth:

1. Current purposes and educational intentions;

2. Entrance requirements and procedures;

3. Rules and regulations for conduct and attendance;

4. Opportunities and requirements for financial aid (if applicable);

5. Procedures for discipline and/or dismissal (for academic and other reasons);

6. Grievance procedures for students;

7. Fees and equitable refund policies;

8. Course completion requirements;

9. Members of the administration;

10. Professional education and qualifications of full-time and part-time staff;

11. Members of the governing body and/or advisory board;

12. The outline syllabus, academic calendar and course schedule;

13. The institution’s admissions and credit-transfer policies;

14. An accurate description of each component of the course of study;

15. A description of learning and other physical resources;

16. The details of the qualification to be awarded upon successful completion of the course(s);

17. Any legal requirements for practice which may be applicable; and

18. Reference to the institution’s policy on equal opportunities

19. The Fitness to Practice Policy.

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**Criterion 12.1** *Honesty and Accuracy*: Publicity, advertising and other literature shall represent the institution’s educational opportunities to students and the public, in language which is accurate, honest, clear and unambiguous.

*Guideline: Wherever possible, institutions should use the same wording in descriptions of practices and approaches as the CNHC uses in its Code of Conduct, and which reflects the principles and values outlined of this document.*

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**Criterion 12.2** *Disclosure*: Courses, services and personnel not available during a given academic year must be identified at the earliest opportunity, with a statement to show how the material will be covered and by whom.

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**Criterion 12.3** *Representation of opportunities*: Publicity and advertising shall not misrepresent employment, career, development, or registration prospects for successful students. First destination statistics shall be available to potential course recruits.

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**Criterion 12.4** *Status with the NTEC*: The institution, and its staff, shall at all times convey accurately its status and relationship with the NTEC in all relevant publications and communications aimed at the public or students, and also in the course of any discussions with third parties.

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**Criterion 12.5** *Other Institutions:* No institution shall make comparative reference in its publications to other institutions or accredited courses which are in a formal relationship with the NTEC.

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***Essential Requirement 13: Educational Policy***

The institution shall have a formally adopted educational policy which includes the preparation of nutritional therapy professionals as independent and accountable healthcare practitioners. This shall be in proper relationship to the institutional intentions/objectives/mission as stated in the Institutional Document under Essential Requirement 1.

**Criterion 13.1** *Content*: The statement of policy must include a brief description of the institution’s objectives and the effects the educational course is designed to have on students.

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**Criterion 13.2** *Relationship:* The institution must be able to link its statement of policy with its educational intentions, its resources, its current or projected courses, services and activities, and with the qualifications it awards.

*Guideline: The statement of policy shall guide the adoption of priorities in allocating resources, and should ensure consistency in the conduct of the institution’s activities.*

*Guideline: Planned curriculum changes in course content, approaches to learning, mode of study, and overall number of students or frequency of student intake must be reflected explicitly in changes to resource allocation.*

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**Criterion 13.3** *Staff ownership:* Teaching and clinical staff who have worked as teachers \*\* on the nutritional therapy course within the institution during any one academic year, must have had opportunities to contribute to and agree the educational policies of the institution or faculty, and to take part in the Annual Critical Course Review. They should be able to demonstrate knowledge of those institutional policies which are relevant to the nutritional therapy course as a whole.

*Guideline: Evidence shall indicate the processes set up to involve staff in shaping and reviewing educational policy, and also the means by which they acquire knowledge about all institutional policies which are relevant to the nutritional therapy course as a whole.*

*Guideline: Named staff shall have responsibility for specific elements of the course, (which may be expressed as subjects, modules, units, etc.), and for their ongoing monitoring, evaluation and curriculum development.*

*\*\* As regards visiting lecturers (or those delivering an ad-hoc lecture), criterion 13.3 is not mandatory but it would be good practice if such lecturers contribute in the same manner as non-visiting teaching staff.*

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**Criterion 13.4** *Review:* Statements of educational policy must be reviewed periodically and revised when necessary.

*Guideline: The re-examination of policy shall determine whether courses are relevant to stated objectives, whether the objectives are being met, and whether the statements of those objectives are understood adequately by all those involved. This review process shall include comments from representatives of the student body, teaching staff, administration, practicing nutritional therapists and the governing body or advisory board.*

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***Essential Requirement 14: Educational Programme***

The institution shall have adopted a statement explaining the prerequisites for entry and the methods for assessing prior learning, including the evaluation of credit transfer, other sponsored learning, and experiential learning.

**Criterion 14.1** *Prerequisites for entry*: Mature students without academic qualifications may be considered on merit, with work/life experience taken into account. Where academic requirements for entry are in place, there should be a clear minimum prerequisite for entry into the professional programme. MSc entry courses shall have a clear and specific admissions policy.

Guideline: For a degree level course at least 5 GCSEs at Grades A-C, or the equivalent Intermediate GNVQ and 2 ‘A’ levels (or 4 A/S levels) or the equivalent Higher GNVQ may be required. However, the NTEC recognizes that entry onto the course is not just about qualifications. Any entry should also be based upon interpersonal skills that include suitability for fitness to practice, which should initially be considered at course interview, hence Criterion 14.2

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**Criterion 14.2** Ideally an interview should be required to evaluate inter-personal skills prior to joining the course. (Any fitness to practice policy is likely to include an initial interview as one of the first requirements). Should a training provider choose to defer the interview until the start of clinical training, then the implications of allowing a student to join a course without confirmation they can undertake clinical training should have been considered. A clearly documented exit route must be in place should the prospective student be unsuitable at interview and/or not meet the training providers' fitness to practice policy. The possibility of not being permitted to continue onto the clinical training should be clearly explained to the student prior to commencing the course.

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**Criterion 14.3** *Admissions Policy - Publication*: The institution’s admissions policy must be clearly stated in the institution’s publications.

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**Criterion 14.4** *Admissions Policy - Planning*: The admissions policy must involve careful planning and regular monitoring to determine whether it is serving the needs and interests of students, and the expressed objectives of the institution.

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**Criterion 14.5** *Admissions Criteria*: The admissions policy should make clear its criteria for accepting, or not accepting, various entry qualifications, and the criteria for assessing applicants without the standard entry prerequisites should be explicit and transparent.

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**Criterion 14.6** *Other Prerequisites*: If the institution is offering courses as a substitute for the minimum entry requirements above, for example Return to Study or 'Access' courses for mature learners, these must be clearly identified as courses distinct from the professional nutritional therapy course when accreditation is being sought. The institution must demonstrate that appropriate resources are available to sustain these courses without adversely affecting the nutritional therapy course. The NTEC does not accredit any such science access course.

Guideline: Colleges might like to consider independent validation of science access courses.

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***Essential Requirement 15: Programme of Study***

This is a change from the NTEC Core Curriculum for Training In Nutritional Therapy dated November 2004 and this change was approved by NTEC 17 March 2007.

The course shall satisfy minimum requirements in respect of course content, course length, professional clinical competence, and the core curriculum as set out by the NTEC in its Core Curriculum and must be designed to provide students with the information, knowledge and skills necessary to practise as independent nutritional therapy practitioners.

The NTEC recognise that Masters Courses may be of a different length to the study time determined by the NTEC (as below and as in the Core Curriculum) and may not be teaching the entire NTEC Core Curriculum. These Masters Courses will need to show how they assess APL for their students to ensure the NTEC Core Curriculum and the NOS have been fully covered and by Masters level students. This will be looked during the accreditation process and considered by the panel.

**Criterion 15.1** *Course Length and composition*

**Study Time**

*The minimum length of study time has been determined by the NTEC as a total of 1500 study hours including appropriate clinical studies. (This length of time was identified as being that required to meet the knowledge base not the practical aspects of training).*

*Guideline:*

*A Masters level course may not require the same length of study time as that set out by the NTEC, if the Masters course requires students joining to have previously met the NOS and Core Curriculum requirements. Evidence of how such an MSc course requires its entrants to show that they meet the NOS and CC will be looked at by the accrediting panel.*

**Clinical Practice**

The overall aim of clinical practice must be to prepare a lawful, safe and effective Nutritional Therapy practitioner who is able to practise with autonomy. This requires competence at the stated levels and range of clinical practice defined in the core curriculum and identified in the NOS, paying particular attention to the NOS scope. Clinical practice assessment must be conducted in a realistic working environment (situational assessment) and be fully supervised (observed). This will require a significant amount of commitment on behalf of both the Training Provide (TP) and student. TPs will need to demonstrate that their graduates are confident to practise safely and effectively. The Accreditation Committee, as part of the accreditation process, will scrutinise how Training Providers and their students demonstrate that they meet the NOS and Core Curriculum and determine that clinical competencies have been fully met.

*Guideline: In determining how the programme of study is organized amongst its different components and how it is timed, a clear and appropriate decision-making process should be followed and available for scrutiny.*

*Guideline: An exit route should provide an alternative qualification for those students not achieving competence in clinic. Such an award should clearly indicate it is not a qualification for practice or a route for registration with accrediting or professional bodies.*

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**Criterion 15.2** *Completion Certificate*: To each person successfully completing the professional course, the institution shall award a certificate, diploma, degree or postgraduate degree, following both general practice in higher or further education and relevant legislation.

*Guideline: Independent training providers shall provide a certificate of successful course completion indicating that such completion leads to an award that entitles the graduate to practise nutritional therapy. If affiliated to a university, appropriate wording on the certificate must be agreed. Degrees may only be awarded by approved universities or higher education institutions. No training provider can provide a license to practice; this is awarded by the regulatory body, the NTEC. However, a Nutritional Therapy qualification should only be awarded where clinical competence has been fully tested, and the criteria for safe practice fully demonstrated. An alternative academic qualification, that is not a nutritional therapy qualification (and so does not offer an automatic right of access to the CNHC register) may be awarded where clinical competence has not been fully demonstrated.*

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**Criterion 15.3** *Quality of learning:* The course must be appropriate to an institution of higher/further education offering a validated course in nutritional therapy, and students should receive equivalent levels of personal support and, as far as possible, a collegiate experience of styles of teaching and learning.

Guideline: The curriculum should contribute to the personal growth of students by helping them to understand fundamental theory, to develop responsible, independent judgment, to think critically and, ideally, to become 'research-minded', to appreciate the complexities of professional practice and to weigh up competing values and become reflective practitioners.

Guideline: The course must be sufficiently rigorous in breadth and depth to enhance the education of independent nutritional therapy practitioners by developing their critical appreciation of the diversity of nutritional therapy traditions and approaches.

Guideline: The course should aim to establish in students the habit of lifelong learning in preparation for continuing professional development.

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**Criterion 15.4** *Quality of Teaching:* The teaching of students shall be a high priority for the institution; the curriculum shall be both stimulating and of a high academic standard, enabling students to prepare for safe, independent, professional practice in nutritional therapy, by gaining the knowledge and skills and developing the capacities outlined in the core curriculum published by the NTEC. Teaching and learning approaches should enable students to meet agreed outcomes for the programme; be consistent with the institution’s statements and written materials and ultimately promote personal and professional development of students.

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**Criterion 15.5** *CNHC Code of Conduct:* Before undertaking clinical practice on the course, students should be both conversant with, and deemed competent to comply with, the standards of the CNHC Code of Conduct. Before completing their course, students should have undertaken a clinical self-audit of their use of, and compliance with, the CNHC Code of Conduct.

*Guideline: Institutions should assess their students' understanding of the Codes through the use of personal portfolios which contain reflective accounts of their practice experiences and which demonstrate an understanding of the limits of their current competence*.

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**Criterion 15.6** *Clinical Teaching:* The institution shall provide a clinical programme of sufficient size, variety and quality to fulfil its educational purposes. Clinical teaching and practice shall consist of formal tuition and practical clinical training, and shall include supervised care of patients which allows the student to take increasing levels of responsibility for patient care, as indicated in the NTEC Core Curriculum and the NOS.

Guideline: The majority of the clinical training undertaken by each student shall take place in the institution's own clinic under the institution's own specialist supervisors. Guideline: Students shall be encouraged to complete a portfolio matching their clinical training to the NOS.

Guideline: When a proportion of the students’ clinical experience (i.e. clinical practice, not observation) is gained at off-campus premises, there shall be written agreements covering the use of those premises, specifying how the institution’s objectives, course requirements, and standards of clinical training are to be carried out. The quality of external clinic supervisors should match the standards required by internal clinical supervisors and thought should be given to the training and support of any external clinic supervisors.

Guideline: The institution shall ensure that each student has the opportunity to observe, participate in, and, under supervision, take responsi*bility for the care of a varied caseload of patients receiving nutritional therapy. Supervision must be sufficient to ensure the safe and competent care of patients. Students should be enabled to reflect on their practice, to analyse it critically and relate it to theoretical perspectives.*

*Guideline: Appropriate emphasis should be placed on the political, social and economic aspects of the provision of nutritional therapy. Students should be aware of the expertise of other healthcare professional practitioners and of the circumstances when patients might benefit from referral to them.*

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**Criterion 15.7** *Professional Competencies*: The syllabus shall lead to those minimum professional competencies - to be attained through clinical experience - which are included in the NOS and NTEC Core Curriculum. Knowledge and practical skills training should be benchmarked to the NTEC Core Curriculum and NOS.

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**Criterion 15.8** *Pastoral Care:* There should be a clear policy on pastoral and tutorial support for students and evidence of its effectiveness in supporting students.

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***Essential requirement 16: Student Assessment***

The assessment of students’ achievement shall be applied systematically throughout the course. A variety of measures shall be employed to ensure acquisition of knowledge, core skills, competence, behaviour and attitudes commensurate with each stage of the course leading, ultimately, to the performance expected of a fully trained, safe and independent practitioner.

**Criterion 16.1** *Assessment calendar:* The institution shall have developed an appropriate set of assessment stages through the course, which should be presented in diagrammatic terms and which should be related to all elements (subjects, modules, units, etc.) of the curriculum. Detail should be offered to provide evidence of an assessment system that can keep each student, and the institution, informed about that student’s educational progress. This detail should include indicators or measures of nutritional therapy competence, such that a clear-cut decision can be reached at the end of the course, in respect of each student, about the conferral of an award. Criteria on which students are assessed should be clear and explicit and available to students and staff. Guidance given to students and staff should be clear.

*Guideline: Examinations, written assignments and clinical evaluation shall be used to document the acquisition of knowledge, skills, values and attitudes.*

*Guideline: Each level of clinical teaching shall have clear intentions linked to a clear means of assessing whether appropriate achievement has been attained.*

*Guideline: The institution and teaching faculty shall have an effective and efficient system to monitor students as they progress through clinical teaching. There should be a clear fitness to practice policy in place. Students who have difficulties should be identified early, and such weaknesses should be documented and communicated to the student and other relevant persons (Clinical Director, Dean, etc.). Suspension, dismissal, or the assignment of remedial work, if necessary, should be determined in a just and timely manner.*

*Guideline: One person shall be responsible for collating the variety of assessment information obtained during the clinical teaching, and for following students’ progress.*

*Guideline: There must be ways of ensuring that policy and procedures regarding academic progress and grading are fair, consistent, published and made available to students.*

*Guideline: Feedback on marked work must be designed to progress students. Markers should receive training and support in marking and evidence of the effectiveness of training and of marking in progressing students shall be provided.*

*Guideline: Marking shall either be anonymous or there must be a system in place to eliminate bias. Second marking should take place if an assessment is over 50% of a module units mark and marking should be moderated where there are 2 or more markers for the same work.*

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**Criterion 16.2** *External Examiners:* The institution shall have appointed, at least one external examiner whose primary role is to assess the standards being achieved by students in relation to standards expected and demonstrated on similar courses nationally. As Nutritional Therapy has a diversity of subjects to be examined, a training provider might like to consider the use of more than one external examiner, with examiners skilled in the areas to be examined. In particular external examiners will ensure:

– that students’ overall standards of achievement in both the academic and practical components of the course are commensurate with, and judged in line with, standards normally applying in further education;

– That assessment intentions and methods support the learning of the profession’s core;

– That all assessments are conducted fairly and without prejudice.

External Examiners should be appropriately trained for their role.

*Guideline: The external examiner(s) could be from an NTEC Schools Forum member, and currently teaching in an Institution offering a nutritional therapy course, demonstrating knowledge of the standards and requirements of the profession, and experienced in assessing students in higher education contexts.*

*Guideline: The procedures for appointing such external examiners should be clearly set down.*

*Guideline: The roles and responsibilities of such external examiners shall be clearly set down in an examinations policy. Examiners should play a role in monitoring:*

*a) the wording, and*

*b) the marking, of the key assessments of the course, and should always be present at final examination board meetings, or, in exceptional circumstances, should agree in writing with the examination board’s decisions before any results are published.*

*(The NTEC recognises that Universities may not involve the external examiner in key assessments as this area may be internally quality controlled).*

*Guideline: External examiners must write annual reports which identify the institution’s strengths and weaknesses in respect of assessment. These shall be included as part of course documentation and quality assurance procedures that are presented to the NTEC.*

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***Essential Requirement 17: Evaluation***

A summary of course evaluation systems and quality assurance procedures should be available and provided. The institution shall evaluate the effectiveness of its education, and the accomplishment of its stated intentions, by measuring and documenting the achievement of a sufficient number of students and graduates in verifiable and internally consistent ways.

**Criterion 17.1** *Annual Evaluation:* The institution must have procedures in place for carrying out annual evaluations of its structures and curriculum in relation to its educational mission and philosophy.

*Guideline: Students’ evaluation of courses and the teaching faculty should be one of the key perspectives considered in determining whether the institution is meeting its objectives, alongside evaluative inputs from course managers, teachers in classroom and clinic, external examiners, administrators, Board officers and other stakeholders as appropriate.*

*Guideline: Retention rates, drop-out rates, completion rates, and the average length of time students take to complete the course should be calculated, maintained, and used in helping to measure the outcomes of the course. These data should also be analysed for indicators or trends in relation to success and failure, and to the sorts of difficulty experienced by students on the course.*

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**Criterion 17.2** *Action Planning:* Such regular evaluation policies and procedures should lead to planned development articulated in detailed action plans which include time scales and named persons responsible for their implementation, and which therefore have a demonstrable impact upon the development of the course.

*Guideline: The documented evaluations and planned development should form the basis for the Annual Critical Course Reviews which are required by the NTEC.*

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