1. Table of Contents

1. Introduction ........................................................................................................................................... 3
2. PURPOSE OF THE QUALITY STANDARDS FRAMEWORK .................................................................... 3
3. SCOPE OF THE QUALITY STANDARDS FRAMEWORK AUDIT SCHEME ............................................. 4
4. IMPARTIALITY AND CONFIDENTIALITY .............................................................................................. 6
5. ELIGIBILITY AND CERTIFICATION AGREEMENT ............................................................................. 8
6. THE AUDIT PROCESS AND ADMINISTRATION .................................................................................... 9
7. FEES AND CHARGES ........................................................................................................................... 13
8. CERTIFICATES, LOGOS AND PRESS RELEASES ................................................................................... 14
9. TRANSFER OF CERTIFICATION ........................................................................................................ 14
10. REVOCATION OF CERTIFICATION .................................................................................................... 15
11. APPEALS PROCESS ............................................................................................................................ 16
12. COMPLAINTS MANAGEMENT AND RESOLUTION ........................................................................... 17
13. GLOSSARY OF TERMS ....................................................................................................................... 21
Appendix 1 - Application Form .................................................................................................................. 22
1. Introduction

This Handbook has been produced to provide information to Technology Enabled Care (TEC) Service Providers and Suppliers, wishing to seek certification to the TSA Quality Standards Framework (QSF) and for those Organisations who have already achieved certified status.

The TSA is the industry body for technology enabled care (TEC) services, representing over 370 organisations including telecare and telehealth service providers and suppliers, commissioners, digital health businesses, housing associations, emergency services, academia, charities and government bodies. TSA is a membership based, not-for-profit community interest company (CIC). TSA developed and owns the Intellectual property of the QSF.

TEC Quality is a fully independent subsidiary of TSA and is licenced to manage and develop the QSF on the behalf of TSA to ensure impartiality.

Both organisations have a joint mission, vision and objective to promote, grow and seek endorsement of the QSF scheme.

The QSF has been developed as an independent audit and certification programme for the Technology Enabled Care industry. The QSF is available to all organisations in the sector - service providers, suppliers, associations, emergency response services and third sector organisations.

Continuous improvement is encouraged as QSF helps organisations constantly improve their service quality.

Further information about TEC Quality and the Quality Standards Framework can be found on the TEC Quality website http://www.tecquality.org.uk.

2. PURPOSE OF THE QUALITY STANDARDS FRAMEWORK

2.1. The TSA Quality Standards Framework provides the strategic structure within which TEC Service Providers and Suppliers shall operate.

2.2. Its flexible structure embraces Technology Enabled Care in its entirety: wearables, activity trackers, tele-coaching, apps, video monitoring, equipment manufacture and supply and much more, but not forgetting traditional telecare services.

2.3. The Framework provides a clear and consistent description of the standards to be achieved, ensuring continuous quality improvement whilst encouraging innovation. It does not offer prescriptive instruction on the way in which services shall be delivered and allows organisations to be unique in their approach.

2.4. Organisations must ensure that the outcomes and minimum requirements of the Quality Standards Framework are fully integrated into working practices and form part of the everyday service processes.

2.5. The Quality Standards Framework is designed to be agile and will be reviewed annually, or where there has been a change in legislation or national guidance, to ensure it meets the needs of the evolving Technology Enabled Care sector. The TEC Quality website will be the reference point for all current documentation and auditees shall check the website to ensure compliance against the latest versions of modules and for additional guidance information.
3. SCOPE OF THE QUALITY STANDARDS FRAMEWORK AUDIT SCHEME

3.1. Users and their representatives are ‘front and centre’ of the Quality Standards Framework. The scheme therefore, sets out to identify the essential elements required to ensure safe delivery of TEC services which meet individual needs.

3.2. In doing so, it establishes critical strategic and operational service standards ranging from:

- 3.2.1. Performance and effectiveness monitoring
- 3.2.2. Operation of clear procedures that are embedded within the workforce
- 3.2.3. Core competency of staff to carry out these roles and procedures
- 3.2.4. Security and integrity of operations and a clear agreement with customers, or service users
- 3.2.5. Ethical business activities

3.3. Publication of the Quality Standards Framework is a key step to developing management regimes within the TEC Industry, to enable the delivery of high quality, end-user focussed services which offer choices to meet the changing needs of citizens. To be effective, there must be a mechanism for users and commissioners to identify those service providers and suppliers which operate to the highest standards established within the TEC sector.

3.4. The certification scheme has been established to provide independent external audit of an organisation against the outcomes and requirements of the Quality Standards Framework. TEC Quality confine its evaluation, d, decision and surveillance to those matters specifically related to the scope of certification, unless an extension of scope has been agreed with the organisation concerned.

3.5. At the annual audit, organisations will be notified that this is due and the current scope of the audit areas. At this point, the organisation will be asked that the scope of the audit remains the same and if they need to extend or reduce the scope of the audit.

3.6. It is mandatory as part of the scheme, that if an Organisation provides one of the services listed in the Service Delivery modules, they must be audited against it.

3.7. Where an organisation no longer provides a particular service, for example if this has been outsourced, it is permissible to reduce the scope of the audit to exclude that element.

3.8. TEC Quality has a Strategic Board, which is completely independent of TSA, whose aims are as follows:

- 3.8.1. To ensure that the scheme remains independent from TSA membership and is fully transparent
- 3.8.2. To ensure that the scheme operates ethically, with integrity and that there are no conflicts of interest
- 3.8.3. To champion the cause for quality standards in TEC
- 3.8.4. To shape, direct and manage the Quality Standards Framework
- 3.8.5. To provide a robust scheme to meet the needs of a broad range of stakeholders and that their views are represented to ensure the effective deployment of TEC.
- 3.8.6. To ensure impartiality, through identification, management and prevention of risks and where these have been identified, how to resolve them

3.9. The full TEC Quality Board terms of reference can be obtained upon request from the TEC Quality admin team.
3.10. The TEC Quality Board receive statistical information relating to certifications to the Quality Standards Framework i.e.:
   3.10.1. New certifications
   3.10.2. Lapsed certifications
   3.10.3. Improvement needs trends
   3.10.4. Revoked certifications
   3.10.5. Complaints/appeals and their outcomes
3.11. The TEC Quality Board provides regular reports to the TSA Board of Directors on the performance of the scheme, for information only.
3.12. In addition, a Standards Executive Team has been created, to oversee the day to day management and development of the scheme.
3.13. TEC Quality maintains a register of certified organisations, lapsed certified organisations and those organisations whose certification have been revoked.
3.14. Organisations that are certified to the TSA Quality Standards Framework deliver high quality services that are independently audited on an annual basis. TSA can give no assurances of service quality for organisations not certified to the Quality Standards Framework.
3.15. Whilst TEC Quality takes all reasonable steps to ensure that audits are robust and very detailed, TEC Quality cannot be held responsible, shall it be found that certifications were achieved through fraudulent means, or by production of false evidence. Nor can TEC Quality be held responsible for mistakes made by human error, or by misconduct of individual members of staff, or managers of certified organisations.
3.16. The Quality Standards Framework is comprised of a number of common standards, supplemented by specific industry related service delivery modules.
3.17. The current modules are:

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<th>Standards Modules</th>
<th>Service Delivery Modules</th>
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<td>User &amp; Carer Experience</td>
<td>Telecare Monitoring</td>
</tr>
<tr>
<td>User Safety</td>
<td>Assessment of and Installation of TEC</td>
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<tr>
<td>Effectiveness of Care</td>
<td>Response Services</td>
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<td>Information Governance</td>
<td>Telehealth Monitoring</td>
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<td>Partnership Working &amp; Integrated Care</td>
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<td>Continuous Improvement &amp; Innovation</td>
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3.18. It is anticipated that as the industry develops, the list of service delivery modules will grow.
3.19. The standards have been developed from a wide range of sources and represent best practise, safe and quality service delivery within the TEC industry – putting the service user and their carer at the centre of the framework.
3.20. Development of the standard has not been from a single perspective of the TEC world, but has been achieved through consultation with many sectors of the industry, along with wider stakeholders, some of which include:
   3.20.1. The service user and their carer,
3.20.2. Service and product providers,  
3.20.3. Experience within the industry,  
3.20.4. United Kingdom government bodies,  
3.20.5. Regulatory bodies, such as the Care Quality Commission and Care inspectorate,  
3.20.6. Emergency Services,  

3.21. As a result, a robust, comprehensive and outcomes focussed framework has been developed, building on many years of experience from the evolution of the former TSA Code of Practice. The QSF provides flexibility and allows organisations to deliver services in their own unique way, whilst still demonstrating safety and security.  

3.22. To ensure the Quality Standards Framework remains current and reflects the rapidly changing TEC environment, it will be subject to an annual review. The review will consider changes to legislation and also general requirements within the industry.  

3.23. Changes to the standard will be made shall there be a legal requirement to do so.  

3.24. Stakeholders of the Quality Standards Framework will be invited to review all standards documents and can suggest changes to them as seen necessary for the benefit of the service users and the scheme.  

3.25. In addition, TSA and TEC Quality have set-up two joint working groups – one for technical matters and one for service related issues. These two groups meet on a quarterly basis to consider any technical, or service related issues and may then make recommendations for change to the TEC Quality Board. The TEC Quality Board will then decide if the changes are necessary and whether they shall be implemented.  

3.26. If change requests are sanctioned by the TEC Quality Board, they will be introduced in-line with the TEC Quality document control policy and communicated as detailed within that policy.  

3.27. Where change requests are rejected by the TEC Quality Board, these will be communicated along with the reasons for doing so, to the relevant party or group requesting the change by the Scheme Manager.  

4. IMPARTIALITY AND CONFIDENTIALITY  

4.1. Impartiality is vital to the credibility of any audit scheme. Both TSA and TEC Quality have established separate organisational entities and structures to ensure that impartiality cannot be compromised and that operations are completely transparent.  

4.2. TEC Quality has an Impartiality Policy, which sets out how it intends to embed impartiality in the certification process.  

4.3. TEC Quality manages the Quality Standards Framework scheme within its internal team, but audits are conducted by experienced, self-employed, independent Associates. These Associates have no affiliation with any other sector of the TEC community and are subject to confidentiality clauses within their contract. They are not permitted to conduct audits for any organisation that they may have worked with in a private capacity within the last two years of engagement with TEC Quality.  

4.4. All TEC Quality staff are required to declare any existing, or potential relationships, or interests with any organisation they may be required to audit, or have interaction with.
4.5. TEC Quality does not provide any TEC services and will not provide consultancy services to any organisation, or individual. TEC Quality will not promote consultancy services from any other organisation but may direct organisations to TSA as the industry body for advice and support.

4.6. TEC Quality acquires its funding through the charges made to organisations for the auditing process.

4.7. Whilst TEC Quality Ltd. is a subsidiary company of TEC Services Association C.I.C., there is no influence from TSA over the production, development, or management of the Quality Standards Framework from a membership perspective. All recommendations for modification are treated equally and assessed in the normal manner, regardless of their source.

4.8. As part of the process of ensuring impartiality is integral to all activities, a majority of the TEC Quality Board members are independent of both the parent company and TEC service providers. The Chief Executive Officer and the Finance Director of the TSA both have a seat on the TEC Quality Board by virtue of their positions, but neither will participate in decisions relating to certification or related complaints or appeals.

4.9. TEC Quality operates to a strict set of procedures, to ensure impartiality is maintained, which are reviewed annually. There are also processes in place to identify, mitigate and prevent any impartiality risk. There is a risk register, which is monitored by the TEC Quality Board at each Board meeting.

4.10. The organisational structure of TEC Quality is arranged as follows:

4.10.1. Chairperson
4.10.2. Non-Executive Directors
4.10.3. Standards Advisory Groups (Technical and Service Delivery)
4.10.4. Audit Scheme Manager
4.10.5. Audit Scheme Administrator
4.10.6. Associate Auditors

4.11. Full details on roles and responsibilities of TEC Quality can be obtained from the TEC Quality Admin team.

4.12. TEC Quality will abide by the requirements of the European General Data Protection Regulation (GDPR)

4.13. Where organisations provide evidence of compliance with the QSF, this shall not include personal data. Where any such data is provided for a specific purpose, it must be anonymised.

4.14. TEC Quality will keep all proprietary information in confidence and will not disclose any information to any other party, except where this information has been made publicly available. Any information provided by an organisation undergoing audit, may be used during any complaint investigation.

4.15. Where TEC Quality is required to release information due to any legal obligation, the organisation concerned will be informed.

4.16. Any information received from a third party with regard to a client organisation, will be treated as confidential.

4.17. Any information supplied to TEC Quality as part of the audit process will be retained for the full audit cycle of three years after which time it will be deleted from any systems.

4.18. Where required, TEC Quality is prepared to enter into a Non-Disclosure Agreement with organisations undertaking the QSF audit process.
5. ELIGIBILITY AND CERTIFICATION AGREEMENT

5.1. To enter the certification process, organisations must complete and return the QSF application form, which can be requested from TEC Quality Ltd, or found on the TEC Quality website.

5.2. By signing and returning the Quality Standards Framework application form, the organisation seeking certification confirms they will adhere to the terms contained within the application form and to the requirements of this handbook. These two documents form part of the contract between TEC Quality Ltd and the applicant.

5.3. The TSA Quality Standards Framework is open to all organisations of any size, who operate within the TEC industry, whether equipment manufacturers, suppliers, or service providers. Organisation’s do not need to be members of TSA, but they must have no outstanding debts with TSA, or TEC Quality.

5.4. TEC Quality can decline to accept an application or maintain a contract for certification from a client when fundamental or demonstrated reasons exist, such as the organisation participating in illegal activities, having a history of repeated non-compliances with certification/product requirements, or similar client-related issues.

5.5. The Organisation seeking certification, must always fulfil the requirements of the framework, including implementing necessary changes to standards when they are communicated by TEC Quality as detailed in the previous section.

5.6. Whilst it is the responsibility of TEC Quality to obtain sufficient objective evidence upon which to base the certification decision, it is the responsibility of the organisation seeking certification alone, to fulfil the requirements of certification.

5.7. If the certification applies to ongoing production of goods or services, they must continue to meet the requirements of the framework throughout the life of the certification.

5.8. The applicant organisations shall comply with the following:

5.8.1. Always fulfil the certification requirements, including implementing necessary changes when they are communicated by TEC Quality

5.8.2. If the certification applies to ongoing production, the certified product continues to fulfil the product requirements

5.9. The applicant shall make all necessary arrangements for:

5.9.1. the conduct of the evaluation and surveillance, including provision for examining documentation and records and access to the relevant equipment, location(s), area(s), personnel, and client’s subcontractors

5.9.2. investigation of complaints

5.9.3. the participation of observers, if applicable

5.9.4. the client makes claims regarding certification consistent with the scope of certification

5.9.5. the client does not use its certification in such a manner as to bring the certification body into disrepute and does not make any statement regarding its certification that the certification body may consider misleading or unauthorised

5.9.6. upon suspension, withdrawal, or termination of certification, the organisation discontinues its use of all advertising matter that contains any reference thereto and takes action as required by TEC Quality (e.g. the return of certification documents) and takes any other required measure
5.9.7. If the organisation provides copies of the certification documents to others, the documents shall be reproduced in their entirety or as specified by TEC Quality. TEC Quality brand guidelines must be followed at all times.

5.9.8. In making reference to its certification in communication media such as documents, brochures or advertising, the client complies with the requirements of TEC Quality, or as specified by the certification scheme.

5.9.9. The organisation complies with any requirements that may be prescribed in the certification scheme relating to the use of marks of conformity, and on information related to the product.

5.9.10. The organisation keeps a record of all complaints made known to it relating to compliance with certification requirements and makes these records available to TEC Quality when requested, and

5.9.11. Takes necessary action with respect to such complaints and any deficiencies found in products, or services that affect compliance with the requirements for certification.

5.9.12. Documents the actions taken.

5.9.13. The organisation informs TEC Quality, without delay, of changes that may affect its ability to conform with the certification requirements.

5.10. Examples of changes can include the following:

5.10.1. The legal, commercial, organisational status or ownership,

5.10.2. Organisation and management (e.g. key managerial, decision-making or technical staff),

5.10.3. Modifications to the product, the production method, or service

5.10.4. Contact address and site locations,

5.10.5. Major changes to the quality management system.

5.10.6. Serious incidents which have led to injury or loss of life, or which may be deemed to require investigation by TEC Quality.

6. THE AUDIT PROCESS AND ADMINISTRATION

6.1. Initial applications for certification to the Quality Standards Framework must be received in writing by TEC Quality on the correct form provided for this purpose. This can be downloaded from the TEC Quality website, or requested via email to admin@tecquality.org.uk.

6.2. Incomplete forms or applications made which are not on the correct documentation, will not be accepted.

6.3. It must be noted that the terms and conditions contained in the application form are legally binding as are the conditions of this handbook in its relation to the audit process and scheme. In the case of all audit types, it is the responsibility of the auditee to fulfil and demonstrate compliance with the standards of the QSF.

6.4. TEC Quality will take all reasonable measures to ensure it obtains sufficient objective evidence on which to make a certification decision. Where sufficient evidence has been provided, a decision to certify will be made. Where there is insufficient evidence, TEC Quality will defer a decision until adequate evidence and/or corrective action has been put in place.
6.5. Subsequent renewal information will be sent by email, along with a price quotation for the cost of the audit. The email will detail the scheduled expiration date of the certification and the modules to which an organisation is currently certified.

6.6. The date of the initial recommendation for certification will be set as the anniversary date for all ongoing audits. This will apply in the event of any deferral, for whatever reason. Organisations due for audit must ensure that they allow adequate time for preparation prior to the renewal audit. They must also ensure that there are several staff members who are familiar with the audit process and who can host an audit in case of sickness absence or holidays.

6.7. Under normal circumstances deferrals will not be allowed. However, TEC Quality does allow a maximum deferral period of three months for organisations upon request, but only in exceptional circumstances. An example of this may be:

6.7.1. Relocation of premises, the timings of which coincide with the scheduled audit (N.B. A full audit will be required after any relocation, irrespective of where the organisation is in the audit cycle)

6.8. Applications for deferral due to illness, or holidays will not be accepted. Failure to comply with this section may lead to a lapse of certification.

6.9. On-Line Assessment of Documentation – This process applies to all audits.

6.10. In preparation for the auditors visit, the Organisation being audited will upload documents to the TEC Quality NetSuite Customer Relationship Management System (CRM) for the auditor to conduct an on-line assessment. This upload will include procedure documents and key performance information and will give the auditor an understanding of an organisation prior to attendance. It is advised that this is done at least 4 weeks prior to the audit. As a minimum, the upload process must be completed 7 days prior to the audit. This is a critical part of the audit process and if not completed, the audit will be cancelled and will need to be re-booked, incurring additional costs.

6.11. If for any reason it is not possible to submit evidence for on-line assessment, TEC Quality must be informed as soon as possible. It is possible to examine the evidence as part of an on-site review, but this must be agreed in advance and arrangements put in place. However, it shall be noted that additional costs will be incurred if there are additional auditor expenses as a result of an on-site evidence review.

6.12. Organisations are required to complete a document index, which will identify the key documents submitted as evidence. A summary of documents reviewed by the Auditor will be included in the final audit report.

6.13. TEC Quality has introduced the concept of possible ‘passporting’ for some areas of the QSF, where other certifications are held. The Organisation seeking certification shall:

6.13.1. Submit their evidence for passporting as part of the on-line assessment

6.13.2. This shall include the area of the QSF which they feel shall be passported

6.13.3. Details of the section of the comparable standard that demonstrates compliance

6.14. In relation to the audit process the TEC Quality Board has deemed that the Scheme Manager is will be the final decision maker.

6.15. The signatory for the audit process and who is authorised to sign certificates will be the Chair of TEC Quality Limited.

6.16. On-Site Assessments – Having assessed the documentation in advance of the visit, the auditor will attend the designated site(s) to conduct the audit itself and verify that policies and procedures are embedded within the workforce. Ideally, the visit will include
interviews with senior members of staff and operational staff as necessary to complete the audit. See below for the duration of on-site audits.

6.17. **Application Audit** – To conform with best practice, the Quality Standards Framework scheme requires organisations who apply for certification to undergo an Application Audit, to ascertain that they meet all requirements of the Quality Standards Framework applicable to their business model. This will be a full audit of all elements of service. The applicant will have undergone a full preparation exercise to ensure that they are ready. There will be support from TEC Quality staff to advise on interpretation of the Quality Standards Framework. Once the application is received and payment made, arrangements will be made for an auditor to visit the site and conduct the audit. This will be a two-stage process, comprising of an initial pre-audit, which will help organisations prepare for the second stage, which is a more formal process and must be completed within a 4-month timescale from Stage 1. The organisation must be able to demonstrate 2 months compliant Key Performance Indicators at this stage.

6.18. Within 5 days of the Stage 1 Audit, a follow up email will be sent by the Auditor, to the organisation, summarising the key points discussed and any specific suggestions for improvement made by the Auditor during the Stage 1 Audit.

6.19. Periodically, TEC Quality will hold support workshops, or surgeries for both prospective and potential auditees to attend, which will inform organisations on best practice approach and guidance. The frequency and location of the workshops is based on demand and are free to attend.

6.20. **Annual Maintenance Audit** – Following an Application Audit, or a 3-year Full Audit (see the next section), maintenance audits will be undertaken in each of the following two years, to ensure that the key elements determining compliance with the current Quality Standards Framework are being achieved. Annual audits may be conducted remotely, with no on-site visit, unless significant improvement needs were identified at the last full audit. A full audit is required every third year to confirm that all the requirements of the Quality Standards Framework continue to be met.

6.21. TEC Quality will remind the certified Organisation three months prior to the anniversary date that an annual audit is due. This will be done via email with a quotation attached. Shall no instructions to the contrary be received and after 28 days, an organisation will be sent an invoice for the audit cost, which must be paid within the following 30 days of issue and prior to the audit taking place.

6.22. In general, annual maintenance audits will be actioned through remote working. They will include an on-line review of all amended documentation and KPI’s as above, along with any non-conformities highlighted in the previous audit. This will be followed by an interview with the person responsible for the audit process from an organisation. Following the review and if an organisation has had a good record with their audits, with no outstanding corrective actions from the last visit, the auditor can recommend an organisation for continued certification. However, if there were significant deficiencies highlighted on the last audit, a pre-arranged visit to an organisation’s operational premises will be required, to determine continued compliance with the Quality Standards Framework.

6.23. If an on-site audit is required, organisations must arrange an audit date no later than four weeks after the date on the certificate.

6.24. A full audit may be required in a shorter period of time if a revised Quality Standards Framework is published during the 3-year cycle of audits.
6.25. **Three Yearly Audit** – TEC Quality will remind organisations three months prior to the anniversary date that a full audit visit is due. This will be done via email with a quotation attached. Shall no instructions to the contrary be received and after 28 days, the Organisation will be sent an invoice for the audit cost, which must be paid within 30 days of issue and prior to the audit taking place.

6.26. **Audit Duration** – TEC Quality is mindful of the requirements of the International Audit Forum, Mandatory Document 5, which outlines the requirements for the duration of audits when conducted on-site. However, the QSF is unique and is considered to fall outside the scope of this mandatory document.

6.27. **On-Site Audits** – Under normal circumstances, it is estimated that the duration of on-site audits will be as follows:

6.27.1. The QSF Ten Common standards – 1 full day
6.27.2. The QSF Service Delivery Modules – one half a day per module
6.27.3. Multi-site audits will be priced depending on the number of sites to be audited and the number of auditors required to complete the audit. This shall be discussed with TEC Quality in advance of booking an audit, where a full evaluation of requirements and cost will be made.
6.27.4. Stage 1 audit will equate to 1 full day

6.28. **Remote Audits** – It is estimated that remote, or surveillance audits will take 1 full day in total. This includes time off-line for the document review, an on-line discussion with the auditor and auditee and time to complete a summary report.

6.29. **Remedial Audits** – In the case of significant failings and as recommended by the auditor, an organisation may be required to undertake a special ‘remedial’ audit by the auditor to ensure that any improvement needs have been met. This remedial audit will be undertaken in addition to the normal audits due. The cost of any such remedial audit will be borne by an organisation.

6.30. **Outcome of the Audit** – TEC Quality will be guided by the auditor’s recommendation when determining whether an organisation complies with the requirements of the Quality Standards Framework. The auditor will inform TEC Quality on the following outcomes:

6.31. A recommendation that TEC Quality shall recognise the audited organisation as being ‘Certified’

6.32. Or, shall continue to recognise the audited organisation as being ‘Certified’.

6.33. Or that the organisation cannot be recommended for certification.

6.34. The auditors’ recommendation will be moderated, and the decision will then be ratified and confirmed by TEC Quality. The full process for this is contained within the TEC Quality Auditing Procedure.

6.35. Organisations will be given feedback throughout the visit and at the closing meeting. The auditor will note any areas for improvement against the requirements of the Quality Standards and a full report will be sent to an organisation within 28 working days of the audit.

6.36. **‘BRAG’ Audit Rating** – TEC Quality uses a Black, Red, Amber and Green (BRAG) rating system to score the audits. These ratings are as follows:

6.36.1. **BLACK** - Does not conform to the standard. Rectification is required before certification can be granted.

6.36.2. **RED** - Does not meet standard. An immediate action plan required before certification can be granted.
6.36.3. **AMBER** - Mostly meets standard requirements - evidence of some gaps. Certification can be granted.

6.36.4. **GREEN** - Fully meets the standard

6.37. **Section Ratings** – The auditor will rate each of the outcomes and minimum criteria in all of the sections and apply the following method:

6.38. If there are all **‘GREEN’** ratings for each of the minimum criteria and outcomes within the standard, the whole standard will be rated as **‘GREEN’**.

6.39. If there are any ‘**AMBER**’ ratings for any of the outcomes, or criteria in the section, but Less than 70% of the total standard will be rated as ‘**AMBER**’ for that section overall.

6.40. If the number of ‘**AMBER**’ ratings in the section is 70% or above, then the overall rating for the section will equate to a ‘**RED**’ rating for the section, due to a cumulative effect.

6.41. If there are any ‘**RED**’ criteria, but less than 70% as a whole of the section, this will equate to a ‘**RED**’ rating for the section.

6.42. If there are 70% or more ‘**RED**’ ratings in the section, this will equate to a **‘BLACK’** rating for that section overall, again due to the cumulative effect.

6.43. Any outcomes or criteria are marked as **‘BLACK’** rating, will mean an automatic **‘BLACK’** rating for the section as a whole – This is due to a possible safety related issue and would mean certification withheld until corrected

6.44. **Annual Review Ratings** – Where improvements have been highlighted at previous audits, but there has been no change, or evidence of working on the improvements, the organisation will automatically be graded at the next worst level. For example, if they were rated ‘**AMBER**’ at last audit, but no changes are evident this then the rating will become a ‘**RED**’ etc.

6.45. Where **‘BLACK’** ratings have been noted, the next audit will automatically be created as an ‘on-site’ visit for the annual review. Where **‘RED’** ratings have been noted, this can be remote for the first annual audit, but if still evident at this point, the second annual audit would be required to be ‘on-site visit’.

6.46. Where an organisation is placed under review by TEC Quality, or has failed to action all improvement needs they shall be removed from the list of certified organisations and placed on an ‘Certification Pending’ listing on the TEC Quality website.

6.47. **Abortive Visits** – If, when the auditor attends the site to conduct the audit, they discover that an organisation is not fully prepared for the audit and that there are significant deficiencies, the auditor may make a decision to abort the visit to give the Organisation an opportunity to further prepare. If this is the case, an organisation will need to rearrange a remedial visit, which will be at additional cost.

6.48. **Corrective Action Monitoring** – Where corrective action plans have not been received within the required timescales, TEC Quality will ‘Suspend’ certification, which will then be listed on the TEC Quality website register of certified organisations. This will follow a warning of ‘Notice of Certification Suspension’ email, which will be sent 1 week prior to the end of corrective action period.

7. **FEES AND CHARGES**

7.1. Fees and charges shall be payable in advance of an audit to TEC Quality and, where necessary, subject to Value Added Tax at the current rate. Details of cost for the certification scheme are available upon request from the TEC Quality Admin team.

7.2. Where a purchase order system is in operation by the applicant Organisation, this shall be provided to TEC Quality as soon as possible, to comply with the renewal process and
so as not to cause any delay. Once received, TEC Quality will raise an invoice for the audit fee. This invoice must be paid in full before any audit can be scheduled. In the event that payment is not received within 90 days of the invoice being issued, the application will lapse. Upon receipt of the payment, TEC Quality will arrange for the Auditor to contact the applicant Organisation to arrange a date for the audit.

7.3. Payment for an application audit shall be for both Stages One and Two.

7.4. Fees will not be refundable in the event of the applicant failing to achieve certification, or not proceeding with an audit. Any additional, or remedial audits required by TEC Quality will be chargeable.

7.5. Certified organisations failing to pay fees and charges by the due date will, after notification, be removed from the Register of Certified Organisations.

7.6. As costs are likely to be incurred, TEC Quality will levy a cancellation fee for audit visits cancelled within 10 working days of the audit date. The cancellation fees shall be as follows:

7.6.1. Within 10 to 5 working days of the scheduled audit date – one half of the auditor fee, plus any expenses already incurred and £100 administration fee.

7.6.2. Within 5 working days of the scheduled audit date – the full auditor fee, plus any expenses already incurred and a £100 administration fee.

7.7. The cost of multi-site audits will be priced individually and will be based on the number of modules, number of sites to be audited and the number of auditors required to complete the audit.

8. CERTIFICATES, LOGOS AND PRESS RELEASES

8.1. Upon completion of a successful audit, a Certificate of Compliance and associated logos will be issued to an organisation with the effective date of certification noted on the certificate. Certificates shall not be replicated nor copied.

8.2. All logos must be used in accordance with TEC Quality brand guidelines, which can be found on the TEC Quality website.

8.3. The certificate and logo will remain the property of TEC Quality and must be surrendered in the event of resignation from the scheme, or if certification is revoked or lapses for any reason.

8.4. An organisation that has been removed from TEC Quality’s Register of Certified Organisations for whatever reason, shall not use or display the certificate or logo, or any replica, nor shall they use, print or display TEC Quality’s logo on any material or documentation.

8.5. TEC Quality want successful certifications and are happy to allow press releases and articles, but these must be submitted to TEC Quality prior to being published for approval.

9. TRANSFER OF CERTIFICATION

9.1. Certified organisations shall notify TEC Quality, in writing, of any change of legal constitution, trading or other title, addresses or other significant particulars upon which certification was granted.
9.2. Where the body or business remains substantially the same, TEC Quality may at its discretion grant a transfer of certification.

9.3. Where, in the opinion of TEC Quality the changes are such that the conditions under which certification was approved are significantly affected, a new application will be required. This decision will be at the sole discretion of TEC Quality.

10. REVOCATION OF CERTIFICATION

10.1. An organisation seeking certification to the TSA Quality Standards Framework, must not act in such a manner as to bring the certification body into disrepute and must not make any statement regarding its certification that TEC Quality may consider misleading or unauthorised.

10.2. TEC Quality may revoke certified status from an organisation in the following circumstances:

   10.2.1. Failure to honour any debts for products or services received from TEC Quality, or
   10.2.2. It has made wilful misrepresentation in its application for certification, or in any application for renewal, or
   10.2.3. It has made wilful misrepresentation of information during the audit process, or
   10.2.4. Failure to achieve the requirements of the Quality Standards Framework for which certification is sought, or
   10.2.5. It has culpably, or negligently created or caused to be created a risk of serious harm to a service user through operation of its Telecare/Telehealth service, or
   10.2.6. It has performed an act which, in the opinion of TEC Quality, is contrary or prejudicial to the objects or reputation of TEC Quality, or
   10.2.7. It has made use of the Certificate, or TEC Quality’s approved logo in a manner which, in the opinion of TEC Quality is likely to bring TEC Quality into disrepute, or
   10.2.8. It shall cease to trade, or in the opinion of TEC Quality, the nature of its work has changed, or where there is a change of ownership of its business, which affects the conditions under which certification was granted.

10.3. The decision to revoke certified status from an organisation shall be notified to said organisation in writing by Recorded Delivery Post. The removal shall be effective 14 days after dispatch of the recorded delivery letter.

10.4. In all of the above, there shall be the right to appeal against the revocation of certification

10.5. Any organisation shall be entitled to make a new application.

10.6. TEC Quality shall publish names of organisations that have their certification revoked on its website and retain for a 12-month period.

10.7. Where applicable TEC Quality will notify an organisation’s commissioners that certification has been revoked.
11. **APPEALS PROCESS**

11.1. Organisations may appeal against the decision of TEC Quality in the following circumstances:

   11.1.1. against the findings of an audit
   11.1.2. against certification being revoked
   11.1.3. against certification being immediately revoked in serious circumstances

11.2. An organisation must submit a notice of the appeal in writing, which must clearly set out the grounds for such an appeal. The notice of appeal must be served within 28 days after the notification of TEC Quality’s decisions, or notification of the certification being revoked.

11.3. If an appeal is received, certified organisations will not have their certification revoked, nor will they be removed from the register of Certified Organisations until the outcome of the appeal has been determined.

11.4. If an appeal is made, this will be investigated in the first instance by the TEC Quality Lead Auditor, or Scheme Manager. This will be done through review of the audit documentation obtained prior to the audit, the notes taken at the time of the audit and review of the audit report.

11.5. If the appeal cannot be resolved at this stage, it may require an additional on-site audit, with an independent auditor, who was not involved in the initial audit, or Lead Auditor.

11.6. Where an additional on-site audit is deemed necessary, TEC Quality shall give an organisation a minimum of 14 days’ notice in writing of the date, place and time of the appeal hearing. The appellant will be required to lodge any written submissions with TEC Quality, no later than 3 days prior to the hearing date.

11.7. A monetary deposit equal to the cost of a ‘Full’ audit as required to the organisation, must be made prior to the investigation audit taking place. Where an appeal against TEC Quality’s decision is successful, the sum deposited will be returned.

11.8. Following this investigation audit, a decision will be made by the Scheme Manager, which will be notified to the organisation concerned.

11.9. If the appellant organisation is still unhappy with this decision, a second stage appeal may be made to the TEC Quality Board.

11.10. The appeal will be heard and decided by a panel specifically convened for the purpose. The panel will consist of no less than two and no more than four persons who are members of the TEC Quality Board. Such persons will be selected by the Chair. The panel shall normally arrive at a decision based upon written submissions. However, the appellant, TEC Quality representative and/or Auditor may appear before the appeals panel and may be represented.

11.11. The panel will seek to arrive at a unanimous decision. In the event that this cannot be achieved a decision will be made by majority vote. The panel shall deliver its decision to the Chief Executive of TEC Quality within 7 days of the hearing. The TEC Quality Chief Executive will notify the appellant of the panel decision within 14 days of the hearing.

11.12. The decision of the TEC Quality Board shall be final.
12. COMPLAINTS MANAGEMENT AND RESOLUTION

12.1. TEC Quality takes complaints very seriously and is committed to supporting the delivery of excellent Technology Enabled Care Services to end users and working in an open and accountable way that builds trust and respect with stakeholders, service users and their families.

12.2. TEC Quality has a complaints procedure which applies to all organisations within the scheme. This complaints procedure is based upon the Local Authority Social Services and National Health Service complaints (England) Regulations 2009. TEC Quality will also use this complaints procedure for complaints against members based in Scotland, Wales & Northern Ireland. This complaints procedure will also be used as the basis for any future complaints procedures that relates to overseas members.

12.3. The focus of the procedure is on resolving complaints and to conduct a root cause investigation. This includes:

12.3.1. Being customer focused
12.3.2. Ensuring that there is equality of access and standards of service for all complainants, with particular consideration for those people who may find it more difficult to use the process e.g. younger carers, people with disabilities, those whose first language is not English.
12.3.3. Making the complaint process as easy as possible
12.3.4. Acting fairly and proportionally
12.3.5. Treating a complaint as a clear expression of dissatisfaction with an organisation’s service
12.3.6. Dealing with the complaint promptly and politely
12.3.7. Responding in the right way – for example – contacting the complainant and providing information on the action taken.
12.3.8. Recognising that many concerns will be raised informally and dealt with quickly.
12.3.9. Resolving information concerns quickly
12.3.10. Enabling mediation between the complainant and TEC Quality
12.3.11. Seeking continuous improvement

12.4. A complaint can be made by:

12.4.1. An individual service user.
12.4.2. The representative of a service user (this can be anyone acting on their behalf with their consent).
12.4.3. The representative of a service user who has not got capacity, as long as they are seen to be acting in the interests of that service user.
12.4.4. A relative of a deceased service user.
12.4.5. Someone who has been turned down for a service to which they think they are eligible

12.5. Certain issues raised that shall be dealt with by other procedures such as the TEC Quality Human Resource procedures as described in the Peninsular Handbook, will not be investigated as a complaint under these procedures e.g.

12.5.1. TEC Quality staff disciplinary or grievance proceedings.
12.5.2. Criminal investigations.
12.5.3. Where a statutory appeals process is in place.
12.5.4. The complainant intends to take legal proceedings in relation to the substance of the complaint.
12.5.5. Corporate complaints, i.e. a complaint from an Independent Organisation regarding communication with the member
12.5.6. Complaints arising out of an alleged failure to comply with a data subject request under the Data Protection Act 1998.
12.5.7. Allegations relating to safeguarding.
12.5.8. Where the substantive matter under complaint has been resolved or investigated,
12.5.9. If the complaint is being investigated by the Ombudsman or Health Service Commissioner.
12.6. N.B. This is not an exhaustive list
12.7. TEC Quality’s responsibility will be to:
12.7.1. Acknowledge the formal complaint in writing within 2 working days of receipt and to contact the complainant to listen and fully understand the concerns and problems expressed
12.7.2. Contact an organisation within 2 working days of receipt of the complaint to share the complaint with them and request that they investigate the complaint requesting that they respond to the complainant and TEC Quality within 14 days
12.7.3. Deal reasonably and sensitively with the complaint
12.7.4. A complainant’s responsibility is to:
12.7.5. Bring their complaint to TEC Quality’s attention normally within 8 weeks of the issue arising
12.7.6. Explain the problem as clearly and as fully as possible, including any action taken to date.
12.7.7. Allow TEC Quality a reasonable time to deal with the matter.
12.8. Apart from exceptional circumstances every attempt will be made to ensure that both the complainant and TEC Quality maintain confidentiality. However, the circumstances giving rise to the complaint may be such that it may not be possible to maintain confidentiality (with each complaint judged on its own merit). Shall this be the case, the situation will be explained to the complainant.
12.9. The complaint may originate from someone who works for an organisation complaining to TEC Quality about certain types of wrongdoing. This will usually be something they have seen at work and the complaint must be seen to be in the public interest. This means it must affect others, e.g. the client of said organisation.
12.10. These concerns can be about an incident that happened in the past, is happening now, or that they believe will happen in the near future.
12.11. The complainant who is protected by law can be an employee, such as a police officer, NHS employee, office worker.
12.12. Complaints that count as Whistleblowing.
12.13. The complainant is protected by law if they report any of the following:
12.13.1. a criminal offence, e.g. fraud
12.13.2. someone’s health and safety is in danger
12.13.3. risk or actual damage to the environment
12.13.4. a miscarriage of justice
12.13.5. the company is breaking the law, e.g. doesn’t have the right insurance
12.13.6. you believe someone is covering up wrongdoing
12.14. Complaints that do not count as Whistleblowing
12.15. Personal grievances (e.g. bullying, harassment, discrimination) aren’t covered by whistleblowing law, unless their particular case is in the public interest.

12.16. If the complaint received by TEC Quality is of this nature the complainant must be advised to either

   12.16.1. Report these under their employer’s grievance policy.
   12.16.2. Contact the Advisory, Conciliation and Arbitration Service (ACAS) for help and advice on resolving a workplace dispute.

12.17. The TEC Quality procedure for all complaints is as follows:

   12.17.1. The TEC Quality staff member who first receives the complaint will request that the complainant put their complaint in writing giving as much detail as they can. If the complainant is not able or is unwilling to put the complaint in writing, then they shall ensure that they carefully record the details of the complaint. Before finishing the call, the TEC Quality staff member shall verbally summarise what they have recorded to ensure that they have all the relevant information.

   12.17.2. If on subsequent checking it is determined that an organisation about whom the complaint is being made is not a member of TEC Quality, then the complainant must be contacted and provided with advice as to what other options they might have.

   12.17.3. The TEC Quality staff member must enter details of the complaint onto the TEC Quality Customer Relationship Management (CRM) system.

   12.17.4. In the first instance, if the TEC Quality staff member is unable to resolve the issue informally with the Member, they shall write setting out the details of the complaint, the consequences for the complainant and the remedy that they are seeking. This shall be sent to an organisation within 2 days of receiving the complaint.

   12.17.5. An organisation will acknowledge receipt of the complaint to TEC Quality and the complainant and provide either a full response or interim response as outlined in said organisation’s complaints policy, indicating what is to be done to resolve the complaint, specifying the timescale for resolution and providing TEC Quality with a copy of the response to the complainant.

   12.17.6. Organisations will provide further interim updates until the investigation is complete.

   12.17.7. On receipt of the response TEC Quality will contact the complainant to ascertain if they are content with the response provided. If the complainant is not satisfied with the initial response to the complaint, then they can write to TEC Quality’s Chief Executive Officer and ask for their complaint and the response to be reviewed.

   12.17.8. The Chief Executive Officer shall acknowledge the request within 3 working days of receipt and a response within 10 working days. TEC Quality’s aim is to resolve all matters as quickly as possible, however, if the matter requires more detailed investigation, an interim response describing what is being done to deal with the matter will be sent to the complainant, and when a full reply can be expected and from whom.

   12.17.9. If the complainant is not satisfied with the subsequent reply from TEC Quality’s Chief Executive Officer, then they have the option of an appeal to the TEC Quality Appeals Panel.

12.18. Refer to the ‘TEC Quality Appeals Panel’ below.

Quality Standards Framework Handbook Version 1.7 8th May 2019
12.19. If the TEC Quality staff member considers the complaint to be of a serious nature, i.e. one that places the service user in jeopardy, or is thought to be a major breach of the Quality Standards Framework, they must first discuss the issue with the TEC Quality Chief Executive, in their absence a member of the TEC Quality Board.

12.20. If the staff member or the Chief Executive, or in their absence a member of Standards Strategy Board, thinks that the complaint falls within the remit of the Adult Safeguarding procedures then the complainant must be referred to the necessary authorities.

12.21. If the TEC Quality Chief Executive or other designated person agrees that the complaint is of a serious nature the complainant and organisation will be informed that an independent audit must take place into the allegations received and a complete written report provided to TEC Quality.

12.21.1. The investigation to be undertaken could be via an announced visit or an unannounced visit depending on the severity of the complaint.

12.21.2. For an announced audit visit, the audit will take place within 14 working days of receipt of the complaint.

12.21.3. For an unannounced audit visit, the date for the audit will be agreed by TEC Quality with the auditor and not communicated to an organisation.

12.21.4. The investigation may include the need to access database records, voice recordings, safeguarding policies/procedures and may need to include a visit to service users’ homes.

12.22. Organisations will be expected to assist in all aspects of the audit, wherever this takes place and will also be liable for all costs incurred by TEC Quality in respect of any investigation.

12.23. A full report on the findings of the visit will be submitted to TEC Quality from the auditor no later than 3 working days after the visit has taken place and shall include remedial action and the timescales for completion.

12.24. Where TEC Quality determines that the level of failure is such, that it warrants the revocation of an organisation’s certification to the Quality Standards Framework, this shall be communicated, along with the explicit reasons for failure, within 3 working days of receipt of the independent report.

12.25. TEC Quality, once its determination has been concluded, will inform the complainant of the outcome of the investigation and ascertain if they are content with the response provided by an organisation. If the complainant is not satisfied with the initial response to the complaint, then they can write to TEC Quality’s Chief Executive and ask that the complaint and the response to be reviewed.

12.26. The TEC Quality Chief Executive Officer must acknowledge the request within 3 working days of receipt and provide a response within 10 working days. TEC Quality’s aim is to resolve all matters as quickly as possible, however, if a matter requires more detailed investigation, the complainant will be sent an interim response describing what is being done to deal with the matter, and when a full reply can be expected and from whom.

12.27. If the complainant is still not satisfied with the subsequent reply from TEC Quality’s Chief Executive Officer, they have the option of an appeal to TEC Quality’s Appeals Panel.

12.28. The TEC Quality Appeals Panel

12.29. The Panel will consist of three members of the Standards Strategy Board, who will choose their own chairperson. The complainant shall do this within 10 days of receiving the written response from the TEC Quality Chief Executive. Prior to the Appeals Panel Hearing the complainant will be contacted to ascertain why they feel aggrieved about the situation. The Panel will hear presentations from the staff of TEC Quality,
organisation representative and from the complainant or their representative(s). When
confirming in writing to the complainant the arrangements for the Hearing, TEC Quality
will explain the procedure to be followed and the complainant will be entitled to be
accompanied, or represented if they so wish. Full resolution will be as soon as possible
after the Hearing and a written response provided within five working days. Any
reasonable costs incurred by the complainant and their representative in attending the
hearing will be met by the organisation subject to the complaint made

12.30. The decision of the Appeals Panel Hearing is final.

13. GLOSSARY OF TERMS

13.1. Certification - The formal agreement that an organisation fully complies with the
‘outcomes’ and ‘minimum requirements’ of the TSA Quality Standards Framework.
13.2. Associate Auditor – the external, Independent assessor appointed to assess against the
Quality Standards Framework on behalf of TEC Quality
13.3. Quality Standards Framework – A set of documents owned and published by TSA which
sets the required standards for Organisational practices in Technology Enabled Care.
13.4. Eligibility Criteria for Certification – The criteria with which Certified Organisations must
comply.
13.5. Operational Premises – the premises from which a Service Provider or Supplier provides
services or goods.
13.6. Organisation – An individual group, company or public authority offering to supply
Technology Enabled Care services, or products.
13.7. Register – a list of Organisations certified by the Association as meeting the requirements
of the Telecare Quality Standards Framework.
13.8. TSA – TEC Services Association C.I.C.
**Quality Standards Framework Application Form for Certification**

**Appendix 1 - Application Form**

<table>
<thead>
<tr>
<th>Legal name of applicant organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered or head office address</td>
</tr>
<tr>
<td>County</td>
</tr>
<tr>
<td>Postcode</td>
</tr>
</tbody>
</table>

2. **Details of the Service seeking recognition**

<table>
<thead>
<tr>
<th>Trading name of the Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address of operational premises</td>
</tr>
<tr>
<td>Postal Town</td>
</tr>
<tr>
<td>County</td>
</tr>
<tr>
<td>Postcode</td>
</tr>
</tbody>
</table>

3. **Contact details for the Manager responsible for the Application**

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Line Telephone number</td>
</tr>
<tr>
<td>Mobile Number</td>
</tr>
<tr>
<td>Email Address</td>
</tr>
</tbody>
</table>

4. **Certification sought**

<table>
<thead>
<tr>
<th>Common Standards Modules</th>
<th>Mandatory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telecare Monitoring</td>
<td>YES / NO</td>
</tr>
<tr>
<td>TEC Installation</td>
<td>YES / NO</td>
</tr>
<tr>
<td>Response Services</td>
<td>YES / NO</td>
</tr>
<tr>
<td>Telehealth Monitoring</td>
<td>YES / NO</td>
</tr>
<tr>
<td>Supply Sector Organisation</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Equipment Services (NAEP)</td>
<td>Yes / No</td>
</tr>
</tbody>
</table>

5. **Please indicate below, why the Quality Standards Framework is important to you:**

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Quality Standards Framework Handbook Version 1.7 8th May 2019

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6. Declaration

a) I agree to abide by the requirements set out in the TSA Quality Standards Framework Handbook.

b) I agree that our organisation will settle any outstanding debts.

c) I understand that the TEC Quality may from time-to-time publish revisions to the Quality Standards Framework, its Audit Scheme and Audit Scheme Handbook and that continued certification will be based on the published requirements current at the time of inspection.

d) I understand that in making this application for Certification, I am binding the Organisation to the requirements of the above Modules of the TSA Quality Standards Framework.

e) I understand that unless notice is given to the contrary, annual renewal will be automatic and we will undertake our inspection within the approved timescales.

f) I am authorised to accept and bind the organisation named above to these conditions.

g) I consent to the TEC Quality processing any personal data arising as a result of this application for the purpose of administration of its audit scheme.

h) I consent to the TEC Quality supplying information to its Quality Standards Framework auditors and vice-versa for the purpose of undertaking audits to the Quality Standards Framework.

On behalf of the above-named organisation, I wish to apply for the above audits.

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Position</td>
</tr>
</tbody>
</table>

I have attached a purchase order in respect of the application fee

I enclose a cheque in payment of the application fee

(please tick as required)

Completed application forms shall be returned to: TEC Quality Scheme Co-ordinator, Suite 8, Wilmslow House, Grove Way, Wilmslow, SK9 5AG or email to: admin@tecquality.org.uk