



Institute
and Faculty
of Actuaries

Quality Assurance Scheme

Guidance for organisations seeking
accreditation

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1. Application form

The application form for accreditation under the Quality Assurance Scheme (QAS) is designed to gather the information about your organisation, office or department that we consider necessary to put the steps you take to achieve the outcomes set out in section 2 of APS QA1 into context. The terms defined in APS QA1 are used in this guide.

The purpose of the assessment and monitoring function is to assess the extent to which Applicants are achieving the outcomes referred to at section 2 and the appendix of APS QA1, and to provide feedback to Applicants as to how they might achieve, or continue to achieve, those outcomes.

1.1 Organisation Profile

The Institute and Faculty of Actuaries (IFoA) have engaged an independent entity to conduct the assessment and monitoring activities for the QAS (the Assessment Team). The basic information requested at section 1 of the application form is designed to inform the IFoA about the Applicant and to help the Assessment Team to tailor the assessment visit appropriately.

Applicants must make clear whether accreditation is sought for the organisation in its entirety, or for a clearly defined part of the organisation such as an office or department of the organisation.

You are also asked to nominate an individual as the point of contact in respect of the application. This may be the individual, or one of the group, nominated as Designated Representative(s) (see 1.2 below) or any other employee or principal.

In asking you to confirm the numbers of members and non-members employed, we are looking to better understand the size and composition of the Applicant and how the distinct business area seeking accreditation sits with the size of the organisation as a whole, where that is appropriate.

Applicants are asked to provide the geographic locations of the offices in which Actuarial Work is undertaken in order to inform the selection by the Application Team of a location for the assessment visit, where appropriate.

Applicants will be invited to include details of any other relevant mark or accreditation held at the time of the application. Applicants should include evidence of their accreditation, with complete information regarding the findings or conclusions from the last relevant assessment and/or, where applicable, inspection or assessment visit.

1.2 Designated Representatives

If successful in your application, you will be required to appoint a single Designated Representative or panel of Representatives to draw from. Designated Representative(s) will be responsible for communication with the IFoA and at least one of the individuals nominated must be a Member. The individual or group of individuals proposed will be interviewed in the course of your assessment visit.

Designated Representatives do not have any obligations to the IFoA over and above their professional obligations as a Member, where that is relevant. This role is however considered to be more than simply an appointed contact within the Applicant. Individuals proposed for this position should have a level of seniority or a position which affords them:

- Direct access to the board or decision-making function of the Applicant; and

- The ability to influence the operational management of the Applicant.

Upon granting accreditation, the group delegated authority for making accreditation decisions (the QAS Committee) will consider the individual or group proposed, including any recommendation made in light of the assessment interviews, and approve or refuse the appointment(s).

Where the QAS Committee does not consider that the individual or one of the group being proposed for the role of Designated Representative has an appropriate level of experience or seniority, you will be asked to nominate another individual.

You are asked to complete the information at section 2 of the Application Form for each Representative in order to assist both the Assessment Team to interview those proposed and the QAS Committee to make a decision on the approval of their appointment. In particular, it will be helpful to understand why those nominated by you are considered to have the appropriate seniority and knowledge to undertake the role.

We plan to operate a forum for the purpose of discussing matters of mutual interest with the IFoA and other accredited organisations, which it is envisaged that Designated Representatives will attend. It is anticipated that the role of Designated Representative will develop over time in light of experience operating the forum and feedback from Designated Representatives captured in the course of monitoring visits.

1.3 APS QA1

Section 2 of APS QA1 states that organisations (or relevant offices or departments) must maintain and apply appropriate policies and procedures in relation to each of the following areas, as regards their Actuarial Work:

1. Quality assurance (including Peer Review);
2. Engagement and communication with Users;
3. Conflicts of interest;
4. The development and training of Members;
5. Whistleblowing; and
6. The handling and appropriate resolution of complaints and disputes about Members or Actuarial Work.

Paragraph 2.2 of APS QA1 provides that organisations, *“must take reasonable steps to ensure that the policies and procedures..... are applied, and to monitor the extent to which the outcomes set out in the appendix to this APS are achieved”*.

In section 3 of the application form you are asked to describe the policies, procedures or support in place which help to achieve those outcomes. This should be a short summary of the steps taken by the Applicant and should run to no more than one page for each outcome.

You are invited to produce any appropriate documentary evidence in support of your application which might include copies of written policies and procedures or relevant internet or intranet pages which you consider illustrate how you achieve the outcomes of APS QA1. We do not, however, wish to be prescriptive about the types of evidence you may choose to produce in support of your application.

Rather than produce the evidence outlined above, you may prefer to make any supporting material available to the Assessment Team in the course of the assessment visit.

Applications will not be judged solely on the basis of the information submitted in section 3 of the application form and, indeed, a lack of documented policies or procedures would not necessarily of itself preclude you from gaining accreditation under the Scheme.

Given the differing sizes and structures of organisations which may seek accreditation, we consider that the planned assessment visits will offer the best opportunity to assess the effectiveness of the measures employed by you to achieve the outcomes set out in APS QA1.

1.4 Organisational structure

You are asked to provide an organogram which confirms the structure of the organisation as a whole and, separately, a list of staff in the department or office seeking accreditation, to include all Members who perform Actuarial Work and non-Members who perform supporting roles in relation to the organisation's Actuarial Work.

This information is required to help the Assessment Team select individuals for interview in the course of the assessment visit.

1.5 Application statement

In section 5 you are asked to describe the benefits that you consider accreditation will offer.

This section is designed to provide feedback to us on the perception of the accreditation in the market and to inform our communications on and ongoing development of the QAS.

1.6 Other professional regulators

You are asked to list details of any regulators to which you report or which are otherwise relevant to the Applicant's work.

This question is posed to enable us to better understand how your organisation or the office or department seeking accreditation is regulated.

1.7 Remote working

As accreditation can only be granted in relation to Actuarial Work carried out in or relating to the UK legislative environment. It is important that we understand how work carried out in overseas locations by the Applicant relates to the delivery of Actuarial Work in the UK.

You are asked to confirm this, to the extent applicable, in section 7 of the application form.

1.8 Other

You are invited to detail any other information which you consider to be relevant to your application in section 8 of the form.

1.9 Process

The application will be reviewed, to ensure it is complete, by the Executive team at the IFoA.

The QAS Executive team will be able to discuss any queries you may have in relation to your application.

Provided that all questions in the application form have been answered, and the relevant fee paid, the application will be referred to the Assessment Team.

2. Assessment

2.1 The Assessment Team will review the application and any supporting documentation produced and contact you to:

- Arrange a mutually convenient time for the assessment visit;
- Agree which of your offices (where applicable) will be visited;
- Confirm the names of the individuals to be interviewed (selected at the discretion of the Assessment Team from the list provided by you in your application); and
- Request any further information necessary following the Assessment Team's review of the application.

2.2 The assessment process will be tailored to each organisation by the Assessment Team. In particular, the length of the assessment visit and the specific process followed, including the choice of individuals interviewed and offices visited, will be a matter for the judgement of the Assessment Team, and agreement with the organisation. Normally, however, the assessment visit might be expected to take between one and four days depending upon the size of the organisation (or relevant department) seeking accreditation.

2.3 The focus of the assessment visit will be on interviews conducted with relevant staff, selected by the Assessment Team. These will usually include:

- The nominated Designated Representative(s);
- The person with overall responsibility for the Actuarial Work undertaken by the organisation or relevant part of the organisation;
- Actuaries with direct client responsibility; and
- Actuarial and/or non-actuarial staff supporting the delivery of Actuarial Work.

These interviews will be consultative in tone and aim to help you to demonstrate your achievement of the outcomes set out in APS QA1. The Assessment Team will be open-minded as to the variety of ways in which those outcomes might reasonably be achieved, as befitting the circumstances of the organisation in question. The emphasis will not only be on the existence of appropriate policies and procedures in accordance with paragraph 2.1 of APS QA1, but also on the extent to which those policies and procedures are properly understood and consistently and effectively applied.

2.4 Evidence may be sought and produced as to the application of those policies and procedures, including evidence from client files. The purpose will, however, be to evidence the application of the policies and procedures, not to audit the quality of the work itself. The Assessment Team will not require evidence to be produced from files where the terms of business with the client in question would prohibit you from doing so. The Assessment Team owe a duty of confidentiality to each Applicant and where evidence of the application of policies and procedures is provided from client files, only the fact of the evidence, not the detail of the file or client name, will be included in the report of the visit.

3. Feedback report

3.1 On completion of the assessment visit, the Assessment Team will produce a written report of the visit, and of their findings. The report will include feedback directed at the organisation and a recommendation to the IFoA as to whether the organisation is ready to attain accreditation, with reasons for that recommendation.

- 3.2** This report, setting out findings, feedback and the recommendation will be shared in draft and discussed with you. The applicant will have the opportunity to provide further information or clarification which may be taken into account by the Assessment Team in finalising the report.
- 3.3** In general, organisations will only be considered to be eligible for accreditation where they are substantively fulfilling the requirements and outcomes set out in APS QA1. Where the recommendation is that the organisation is not yet ready for accreditation, the report will seek to specify the steps which it is envisaged will need to be undertaken in order to obtain accreditation.

4. Decision

- 4.1** The finalised report will be submitted to the QAS Committee, which will consider the report and recommendation and determine whether or not to grant accreditation. The QAS Committee may seek further information or clarification from the Assessment Team and/or the applicant organisation.

- 4.2** The QAS Committee may decide (and may do so by a majority):

- To grant accreditation;
- To refuse accreditation; or
- To grant accreditation conditional upon the fulfilment of certain specified steps necessary to achieve the standard required for accreditation, within a defined time period.

Accreditation will be granted, subject to the approval by the QAS Committee of a nominated Designated Representative(s).

To the extent that accreditation is refused, written reasons will be given and you will be entitled to reapply, once in a position to do so.

If you are not satisfied by the decision of the QAS Committee you may choose to appeal the decision. Details of the appeal process will be provided to unsuccessful Applicants.

5. Annual return

- 5.1** Accredited organisations or relevant departments will be required to complete a short annual return each year, the purpose of which will be as follows:

- To confirm whether there have been any significant changes to relevant personnel (i.e. those who provide direct support in relation to the Applicant's Actuarial Work or the Designated Representative(s)) or to the organisation's structure since the last visit (whether initial assessment or periodic monitoring visit), or last annual return, as applicable and, if so, to explain the nature of those changes;
- To provide details of any material changes to the policies or procedures relied upon for the purposes of the accreditation, or to the way in which they are applied or any such anticipated changes;
- To confirm the identity of the organisation's Designated Representative(s) for the following year (and to submit for approval any new nomination(s) for this role); and

- To notify the IFoA of any material issues relating to or arising from the application of the relevant policies and procedures.

5.2 Accreditation will be renewed on an annual basis, subject to:

- Submission of the Annual Return, to the satisfaction of the IFoA;
- Successful completion of the assessment visit or most recent monitoring visit;
- Payment of the relevant annual fee; and
- Approval of the Designated Representative(s) by the QAS Committee.

6. Notification obligation

6.1 Notwithstanding the obligation to report significant or material changes in the Annual Return, accredited organisations will be expected, on an ongoing basis, to notify the IFoA of any material changes to:

- Their relevant personnel (i.e. those involved in the production of Actuarial Work or the Designated Representative(s));
- Their organisational structure; and
- The policies and procedures relied upon for the purposes of their accreditation, or, the way in which those policies and procedures are applied.

We would consider that a change of key actuarial staff, for example, the departure of the Senior Actuary, would be a material change to an organisation's personnel.

Accredited organisations must also notify the IFoA of any other significant change or development which might reasonably be considered relevant to their accreditation.

6.2 Such notification should normally be in the form of an email addressed to gas@actuaries.org.uk. Where you are uncertain whether or not to make a report, you should have an initial telephone conversation with your contact within the Executive team at the IFoA.

6.3 All such notifications will be brought to the attention of the QAS Committee, which may elect to seek further information and, in appropriate cases, to arrange a subsequent monitoring visit.

7. Assessment visits

7.1 All accredited organisations will be subject to ongoing periodic monitoring visits, usually at an interval of between two and four years. The frequency of these visits will be determined by the QAS Committee, having regard to all of the circumstances, including:

- The report on the last assessment or monitoring visit;
- Any formal notifications provided to the IFoA by the accredited organisation;
- Information provided in annual return(s); and
- Any information otherwise received by the IFoA regarding the accredited organisation.

- 7.2** The QAS Committee may, at its discretion, require a monitoring visit to be undertaken at any time on giving reasonable notice to the accredited organisation. In such circumstances, we would normally seek to give you at least four weeks' notice.
- 7.3** The purpose of the monitoring visits will be to assess the extent to which you continue to meet the requirements and outcomes set out in APS QA1. It will follow a process similar to the assessment visit and the Assessment Team will have regard to the report on the assessment visit or previous monitoring visit, which may inform the focus of the visit.
- 7.4** A report will again be compiled by the Assessment Team and shared in draft with you before being finalised and submitted to the QAS Committee for consideration. The QAS Committee will determine, following each such monitoring visit, whether or not the accredited organisation continues to merit accreditation.
- 7.5** Where the QAS Committee decides not to re-accredit, written reasons will be provided and the organisation will be able to appeal that decision.

8. Contact

If you have any queries about the application process, application forms or the QAS more generally, please contact qas@actuaries.org.uk.