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| **Quality Assurance Scheme**  Application Form  (including Explanatory Drafting Notes) |
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| Version 4.0 February 2018 |



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Please note that the terms defined in APS QA1 are used in this application form.

Data Protection Act 1998: The Institute and Faculty of Actuaries is registered as a Data Controller in terms of the Data Protection Act 1998. By providing the information requested on this form you acknowledge that we will use, process and share the information for any purposes associated with the Quality Assurance Scheme. The information you provide will be held and used in accordance with the Data Protection Act 1998, will be treated in accordance with our data protection policy and only shared with third parties where necessary for the Quality Assurance Scheme.

The application form for accreditation under the Quality Assurance Scheme (QAS) is designed to gather relevant information about the organisation, office or department to be taken into account during the accreditation process.

Applicants may, if they prefer, submit their application in a separate paper rather than completing the Application Form itself, as long as all of the questions are answered.

Information should be correct as at the date of application.

**1. Organisation Profile**

Please complete the following information in respect of the Organisation or department, office or business area seeking accreditation (referred to as ‘the Applicant’).

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| Organisation name (legal entity/entities as well as, where appropriate, the trading name) and principal place of business: |  |

*(NOTE 1): Applications can be made in respect of a whole organisation or in respect of a defined part of an Organisation (such as a department, office or business area) as long as (i) it is clearly identifiable as a distinct part of the Organisation; and (ii) the Organisation has its principal place of business, or that defined part of the Organisation is based or located principally, in the United Kingdom). It should be made clear on the application form the extent of the application. When completing these sections, Applicants are asked to clarify the legal entity (or entities) constituting the ‘Organisation’.*

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| If applicable, please describe the part of the Organisation seeking accreditation and provide the address of its principal location (if different from the above) |  |
| *(NOTE 2): This section should explain how the part of the Organisation being accredited is clearly identifiable as a separate part of the Organisation. It should also set out the relevant legal entity (or entities) making up that part.* | |

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| Contact name |  |
| *(NOTE 3): Applicants are also asked to nominate an individual to be the main point of contact in respect of the application. This person will receive correspondence in relation to the Organisation’s accreditation. It may be the individual, or one of the group, nominated as Senior Quality Assurance Representative or it may be a different person.* | |
| Contact Address: |  |
| Telephone number: |  |
| Email address: |  |

Please provide a brief summary of the nature of the business or activities carried out by the Organisation including, where appropriate, the business/activities carried out by the part of the Organisation being accredited.

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**Office Locations**

Please state the location(s) of the Applicant’s office(s) and provide the number of employees for each office along with an indication of how many of those are Members and how many are non-Members. Please include all offices if more than one

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| **Location** | **Number of Members** | | | | | | | **Number of**  **Non-Members** |
| **IFoA Practising Certificate Holders** | **Other Fellows** | **Associates** | **Students** | **Certified Actuarial Analysts** | **Student Actuarial Analysts** | **Total** |  |
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| **Total per category** |  |  |  |  |  |  |  |  |

*(NOTE 4). Applicants are asked to provide the geographic locations of the offices in which Actuarial Work is undertaken in order both to provide an understanding of the size and geographic scope of the Organisation and its Actuarial Work, and to inform the selection of a location for the assessment visit, where appropriate. Only the city or town plus the country in which the offices are located are required (for example: ‘York, England’, ‘Cardiff, Wales’). It is not necessary to provide full addresses.*

**Key areas of work/business**

Please set out the different actuarial business areas/departments of the Applicant and indicate (i) the office locations where that business area is conducted and (ii) whether this is a significant area of business or actuarial services function for the Applicant.

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| **Actuarial business areas or departments** | **Principal office locations for this business area** | **Please explain whether this is a significant part of the Applicant’s business or actuarial function/services.** |
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*(NOTE 5). This section is designed to understand the key business areas or departments for the Applicant’s actuarial work and whether particular key areas are based at certain locations. In explaining whether a business area or department is a significant, the sort of factors to be taken into account will depend on the nature of the Organisation but might include:*

* 1. *the approximate percentage of income the Applicant derives from that business area (where an Applicant derives income directly from actuarial services);*
  2. *the percentage of actuarial staff working in those areas (as a guide, over 25% of total actuarial staff working in a department would be likely to be deemed significant).*

**Other relevant accreditations**

Please provide a note of any other relevant accreditations (eg ISO 9001) currently held by the Applicant.

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**2. Senior Quality Assurance Representatives**

Please confirm the following information in respect of the individual, or group of individuals, being proposed as Senior Quality Assurance Representatives (SQAR) for the Applicant:

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| Name: |  |
| Position held: |  |
| Length of Service: |  |
| Number of years since qualification (if applicable): |  |
| Location |  |

**Lead SQAR:**

Please explain the qualifications or experience which qualifies the individual to hold post of SQAR.

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Organisations are encouraged to have more than one SQAR to encourage attendance at all SQAR Forums and to promote the QAS within their organisations.

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| --- | --- |
| Name: |  |
| Position held: |  |
| Length of Service: |  |
| Number of years since qualification (if applicable): |  |
| Location |  |

**Additional SQAR:**

Please explain the qualifications or experience which qualifies the individual to hold post of SQAR.

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Please complete a separate sheet for additional SQARs proposed.

*(NOTE 6). Details of the sort of qualifications and experience likely to make an individual (or group of individuals) qualified to hold the post of Senior Quality Assurance Representative are set out in Section 15, page 22 of the* [*QAS Handbook*](https://www.actuaries.org.uk/documents/quality-assurance-scheme-handbook)*. Where a group of individuals is proposed then an explanation should also be provided as to how it is intended that the group will work together to fulfil that role. There should be express reference to whether the individual (or individuals) are Members of the IFoA (along with the category of membership held). 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.*

1. **APS QA1**

Please provide a short description of the policies, procedures or support in place to assist Members in meeting their professional obligations and in producing high quality work, in relation to each of the following areas:

* quality assurance (including Work Review).
* conflicts of interest.
* the development and training of Members.
* members speaking up where they identify issues of concern.
* relationships with Users including.
  + engagement and communication with Users, and
  + the handling and appropriate resolution of issues raised that relate to Members or Actuarial Work.

Please note that this description may be supplemented by copies of internal policies, procedures, relevant internet or intranet pages which operate to achieve the outcomes of APS QA1. If possible, in order to assist the Assessment Team with planning their visit, copies of policies and procedures should be provided in advance with this application, Alternatively, Applicants may wish to allow the Assessment Team access to those resources in the course of the assessment visit.

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*(NOTE 7). Applicants 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.*

1. **Organisational structure**

If relevant, please provide an organogram which confirms the Applicant’s organisational structure.

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*(NOTE 8). Provision of an organogram is likely to be relevant where:*

* *The Applicant is a part of an Organisation rather than all of it (in order to show how it fits into the whole Organisation and to demonstrate how it is identifiable);*
* *The Applicant proposes a group of individuals to be Senior Quality Assurance Representatives and an organogram would be useful to demonstrate how those individuals meet the required criteria for that role (e.g. in terms of the ability to influence operational management or the requirement to have direct access to the Applicant’s Board or decision-making function); and/or*
* *It would assist with understanding a particularly complex organisational structure.*

*However, this is not an exhaustive list and there may be other circumstances in which it is felt that it would be appropriate to provide an organogram. Applicants should also feel able to provide one if they feel that it would be helpful or easier to do so.*

1. **Other regulators**

Please list details of any other regulators the Applicant reports to in relation to, or which are otherwise relevant to, the Applicant’s Actuarial Work

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*(NOTE 9). Applicants should include any statutory regulators, professional membership bodies and/or other regulators that have some authority in relation to the Organisation (including voluntary arrangements where that regulatory authority is conferred by the Organisation’s agreement). This question is posed to enable us to better understand how the organisation (and, where appropriate, the office or department seeking accreditation) is regulated.*

1. **Work conducted outside the UK**

To the extent that any of the Applicant’s work is conducted remotely (ie outside of the UK), please explain how that work relates to the delivery of Actuarial Work in the UK. Please include details of whether any staff work outside of the UK and explain in which of the locations listed in section 1 they work.

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*(NOTE 10). As accreditation will only be granted in relation to Actuarial Work carried out in or relating to the UK, it is important to understand how work carried out in overseas locations by the Applicant relates to the delivery of Actuarial Work in the UK.*

1. **Other**

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Please provide any other information which is considered to be relevant to this application for QAS accreditation.

1. **Fee category**

Please indicate in the relevant box which of the QAS fee categories applies to the Applicant

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| --- | --- |
| Band 1 |  |
| Band 2 |  |
| Band 3 |  |

*(Note 11) Please see the* [*Quality Assurance Scheme Fees*](https://www.actuaries.org.uk/upholding-standards/quality-assurance-scheme/quality-assurance-scheme-fees) *webpage for more information.*

*If you are unclear as to the Band that your Organisation would be then please raise this with your QAS contact or submit a query to* [*QAS@actuaries.org.uk*](mailto:QAS@actuaries.org.uk)*.*

1. **Declaration**

I confirm that the information supplied in this application is correct to the best of my knowledge and belief.

Signed: …………………………………………………..

For and on behalf of …………………………. ……………………… (the Applicant)

Name: …………………………………………………..

Role: ……………………………………………………….

Date: …………………………………………………..

1. **Return details**

Please return the completed application and supporting documentation to [QAS@actuaries.org.uk](mailto:QAS@actuaries.org.uk).

*(NOTE 12) Applicants are 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.*