



Internet Test Centre (ITC) Quarterly Audit Checklist

General Information

- **Audit Date:** _____
- **Auditor(s):** _____
- **Location:** _____

1. Documentation & Policies

Requirement	Yes/No/NA	Evidence/Comments	Corrective Actions
1.1. QMS is documented with annual reviews and improvement plans.	<input type="checkbox"/>	<i>Attach QMS file</i>	
1.2. All policies (Health & Safety, GDPR, Malpractice, etc.) are updated and reviewed annually.	<input type="checkbox"/>	<i>List policy dates</i>	
1.3. Valid insurance certificates (Public Liability, Employers' Liability, Professional Indemnity).	<input type="checkbox"/>	<i>Attach certificates</i>	

2. Staff & Training

Requirement	Yes/No/ NA	Evidence/Comments	Corrective Actions
2.1. All invigilators hold valid Pearson VUE ITC Administrator Certificates.	<input type="checkbox"/>	<i>Certificates</i>	
2.2. Conflict of Interest Log updated and signed quarterly.	<input type="checkbox"/>	<i>Log entries</i>	
2.3. Quarterly staff training/briefing on CITB rules, malpractice prevention,	<input type="checkbox"/>	<i>Training records</i>	

Requirement	Yes/No/ NA	Evidence/Comments	Corrective Actions
and "Safer Green" initiatives.			

3. Test Room Setup

Requirement	Yes/No/NA	Evidence/Comments	Corrective Actions
3.1. Workstation dividers (60cm height) prevent screen visibility.	<input type="checkbox"/>	<i>Photos</i>	
3.2. 1.25m spacing between candidates.	<input type="checkbox"/>	<i>Layout diagram</i>	
3.3. No personal belongings allowed in test rooms.	<input type="checkbox"/>	<i>Signage photos</i>	
3.4. Emergency evacuation plan displayed and tested quarterly.	<input type="checkbox"/>	<i>Drill log</i>	

4. Candidate Management/Sampling

Complete one row per candidate (1–6).

Candidate Name/CITB Number	Requirement	Yes / No/ NA	Evidence/ Comment s	Corrective Actions
Candidate 1	4.1. Valid ID checked (passport, driving licence).	<input type="checkbox"/>	<i>ID copy</i>	
	4.2. Personal details correctly recorded (address, CITB number).	<input type="checkbox"/>	<i>Booking form</i>	
	4.3. Special adjustments logged (if applicable).	<input type="checkbox"/>	<i>Adjustment record</i>	
	4.4. Test log includes start/end times and invigilator signature.	<input type="checkbox"/>	<i>Log entry</i>	
Candidate 2	4.1. Valid ID checked (passport, driving licence).	<input type="checkbox"/>	<i>ID copy</i>	
	4.2. Personal details collected (address, CITB number).	<input type="checkbox"/>	<i>Booking form</i>	
	4.3. Special adjustments logged (if applicable).	<input type="checkbox"/>	<i>Adjustment record</i>	

Candidate Name/CITB Number	Requirement	Yes / No/ NA	Evidence/ Comments	Corrective Actions
	4.4. Test log includes start/end times and invigilator signature.	<input type="checkbox"/>	<i>Log entry</i>	
Candidate 3	4.1. Valid ID checked (passport, driving licence).	<input type="checkbox"/>	<i>ID copy</i>	
	4.2. Personal details collected (address, CITB number).	<input type="checkbox"/>	<i>Booking form</i>	
	4.3. Special adjustments logged (if applicable).	<input type="checkbox"/>	<i>Adjustment record</i>	
	4.4. Test log includes start/end times and invigilator signature.	<input type="checkbox"/>	<i>Log entry</i>	
Candidate 4	4.1. Valid ID checked (passport, driving licence).	<input type="checkbox"/>	<i>ID copy</i>	
	4.2. Personal details collected (address, CITB number).	<input type="checkbox"/>	<i>Booking form</i>	
	4.3. Special adjustments logged (if	<input type="checkbox"/>	<i>Adjustme</i>	

Candidate Name/CITB Number	Requirement	Yes / No/ NA	Evidence/ Comment s	Corrective Actions
	applicable).		<i>nt record</i>	
	4.4. Test log includes start/end times and invigilator signature.	<input type="checkbox"/>	<i>Log entry</i>	
Candidate 5	4.1. Valid ID checked (passport, driving licence).	<input type="checkbox"/>	<i>ID copy</i>	
	4.2. Personal details collected (address, CITB number).	<input type="checkbox"/>	<i>Booking form</i>	
	4.3. Special adjustments logged (if applicable).	<input type="checkbox"/>	<i>Adjustment record</i>	
	4.4. Test log includes start/end times and invigilator signature.	<input type="checkbox"/>	<i>Log entry</i>	
Candidate 6	4.1. Valid ID checked (passport, driving licence).	<input type="checkbox"/>	<i>ID copy</i>	
	4.2. Personal details collected (address, CITB number).	<input type="checkbox"/>	<i>Booking form</i>	

Candidate Name/CITB Number	Requirement	Yes / No/ NA	Evidence/ Comments	Corrective Actions
	4.3. Special adjustments logged (if applicable).	<input type="checkbox"/>	<i>Adjustment record</i>	
	4.4. Test log includes start/end times and invigilator signature.	<input type="checkbox"/>	<i>Log entry</i>	

5. CCTV & Record Retention

Requirement	Yes/No/NA	Evidence/ Comments	Corrective Actions
5.1. CCTV covers all workstations, invigilator, and includes audio.	<input type="checkbox"/>	<i>Camera layout</i>	
5.2. CCTV footage stored for 30 days and retrievable within 2 days.	<input type="checkbox"/>	<i>Storage system</i>	
5.3. All records retained for 2 years (digital/physical).	<input type="checkbox"/>	<i>Archive location</i>	

6. Internal Audits

Requirement	Yes/No/NA	Evidence/Comments	Corrective Actions
6.1. Quarterly self-audits completed using Appendix 6.	<input type="checkbox"/>	<i>Self-assessment forms</i>	
6.2. 5% of CCTV footage reviewed for compliance.	<input type="checkbox"/>	<i>Review log</i>	

7. Health & Safety Compliance

Ensure compliance with CITB health, safety, and welfare requirements (refer to Sections 11–15 of the CITB document).

Requirement	Yes/No/NA	Evidence/Comments	Corrective Actions
7.1. Risk Assessments	<input type="checkbox"/>	Annual risk assessments conducted for test rooms, equipment, and emergencies. <i>Attach latest assessment.</i>	

Requirement	Yes/No/NA	Evidence/Comments	Corrective Actions
7.2. Emergency Procedures	<input type="checkbox"/>	Emergency evacuation plan displayed, tested quarterly, and aligned with local regulations. <i>Attach drill log.</i>	
7.3. First Aid	<input type="checkbox"/>	Fully stocked first aid kit accessible; staff trained in first aid. <i>List trained staff/certificates.</i>	
7.4. Fire Safety	<input type="checkbox"/>	Fire extinguishers (tested annually), smoke detectors, and clear exit routes. <i>Attach fire safety certificates.</i>	
7.5. Workstation Safety	<input type="checkbox"/>	Desks, chairs, and equipment ergonomic and free from hazards (e.g., loose cables). <i>Photo evidence.</i>	
7.6. Ventilation & Lighting	<input type="checkbox"/>	Test rooms well-ventilated and adequately lit (min. 300 lux). <i>Measurement records.</i>	
7.7. Hazard Reporting	<input type="checkbox"/>	Logbook for reporting hazards/incidents; corrective actions tracked. <i>Attach log.</i>	
7.8. Staff Training	<input type="checkbox"/>	Staff trained on health and safety protocols (e.g., fire drills, first aid). <i>Training records.</i>	
7.9. Accessibility	<input type="checkbox"/>	Test rooms accessible to candidates with disabilities (ramps, wide doorways). <i>Photo evidence.</i>	

Requirement	Yes/No/NA	Evidence/Comments	Corrective Actions
7.10. PPE (if applicable)	<input type="checkbox"/>	Personal protective equipment provided and used where required (e.g., sanitization). <i>PPE inventory</i> .	

8. Post-Audit Actions

Requirement	Yes/No/ NA	Evidence/Comments	Corrective Actions
8.1. Previous corrective actions resolved.	<input type="checkbox"/>	<i>Action plan closure</i>	
8.2. Complaints procedure publicly available and logged.	<input type="checkbox"/>	<i>Complaints register</i>	

Compliance Summary

| Overall Compliance | Compliant | non-compliant |

| Immediate Actions | _____ |

| Follow-Up Date | _____ |

Auditor Sign-Off

Auditor Name	Signature	Date

Instructions

- 1. For Each Section:**
 - Answer **Yes/No/NA** and attach evidence (e.g., photos, logs).
 - Use **NA** only if a requirement is irrelevant (e.g., no special adjustments for candidates).
- 2. Candidate Management:** Verify all 6 candidates individually.
- 3. Safer Green:** Align with CITB's sustainability goals (e.g., reduce carbon footprint by 10% annually).
- 4. Submit:** Email completed checklist to CITB within **5 working days**.