

Contract Review Form

Provider			
Project			
Review Period		Review Date	
Attendees			

Notices and Actions

Notices to Improve				
Date Notice Set	Due Date	Action	Comments/Further Action Required	Closed (Y/N)

Outstanding Actions				
Date Action Set	Due Date	Action	Comments/Further Action Required	Closed (Y/N)

Your Current Risk Rating	56 = Good
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Performance and Data

Provision	Profile to Date	Actual to Date	Profile by Next Review
Overall			

Explanation on Current Performance

Data Discrepancies Identified

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Review of Project Delivery (including progress against profile, reasons for arrears, action planning to bring back on profile, successes, risk management, case studies and publicity)

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Contractual Documentation

Document	Last Received	Next Due	Comments
Self Assessment Report			
Quality Improvement Plan			
Year End Accounts			
Staff Qualifications/CV's			
Insurances			
Policies			
Accreditation			

Finance and Claims

Output	Grade	Date Graded	Comments
Financial Audit			
Claims Accuracy			

Comments

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Health & Safety and Safeguarding

Output	Grade	Date Graded	Comments
Health and Safety & SG			

	Yes	No
Have there been any Health and Safety or Safeguarding issues since the last review?		
Have you organised any training or taken action to improve H&S or SG since last review?		

Comments

Equality & Diversity

Output	Grade	Date Graded	Comments
Equality and Diversity			

	Yes	No
Have there been any Equality and Diversity issues since the last review?		
Have you organised any training or taken action to improve E&D since last review?		

Comments

Observation of Teaching and Learning

Output	Grade	Date Graded	Next Due	Comments
Initial Assessment				
Induction				
Teaching & Learning				
Progress Review				
Exit Review				

	Yes	No
Have you received feedback from the latest observations described above?		
Have the results of feedback been filtered to the staff member(s) being observed?		
Have any action points from the feedback given been addressed?		

Describe Action Taken/Required

Understanding Your Contract

	Yes	No
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Are you aware of any notices to improve on your contract? If so, have you made any progress against the notices?		
Does your organisation fully utilise funding available within your contract?		
Do you feel that funding gives you opportunity for new and further business expansion?		
Is there anything BCTG could do to further support your business growth and development?		

Describe Below

Feedback from Employers/Learner Surveys

Partnership Working

Quality File Audit

At each contract review, the Contract Manager should undertake a spot check of 5 learner files held on site. The contractor should make these available prior to the meeting, findings outlined below and any actions taken forward in the action planning

Other Activities

	Yes	No
Have you any forthcoming events/inspections/external verifications/ audit activities that BCTG should be aware of or have involvement in?		
Have there been any changes to staffing on the contract since the last review?		
Do you require any further support to staff working on the contract?		
Have there been any changes to processes and systems as described in your Process Controls Assessment documents?		

If yes, describe below

Date and Time of Next Review

Action Planning

No	Action	Person Responsible	Due Date	Priority	Type
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality

				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance
				High	Finance
				Med-High	Quality
				Med-Low	Compliance
				Low	Performance

Signatures

The details of this contract review meeting are a fair and accurate reflection of the meeting that has taken place.

On behalf of the subcontractor:

Signed: _____ Print Name: _____

Date: _____

On behalf of BCTG:

Signed: _____ Print Name: _____

Date: _____