

Confirmation of 'Cascade' Standardisation Training 2024 - 2025 (to be completed by the tutor/centre delivering cascade training)

Centre name.....

Has the centre attended one of the CPCAB standardisation training days this year and met CPCAB's minimum standardisation requirements? YES/NO

If you have answered NO to the above, please give your reasons for non-attendance in the box below.

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We recognise that centres have many different internal structures, resources and demands on their time so the approach to cascade training is at centre discretion. **The [Standardisation Terms and Conditions](#) document provides some examples of how this can be done.**

The CPCAB external verifier will check that the process has been carried out when they visit your centre and will request to see this form.

The following notes are intended as a guide:

1. Any cascade training must be done by a standardised CPCAB tutor who has attended that years standardisation event.
2. You will need to invite internal verifiers and moderators to the cascade training.
3. You may need to set aside half a day to complete the process.
4. We suggest you provide copies of the notes and exercises for each person attending.
5. You might like to start by going through the notes with your tutors - adding your own points of clarification and the questions and answers raised during the CPCAB standardisation day you attended.
6. Invite your tutors, IVs and moderators to work through the assessment exercises on an individual basis, discuss the answers as a group and come to a consensus.
7. If the exercises raise any insoluble issues, please contact CPCAB for guidance.
8. Please ask attending tutors to **print their names and sign** the CPCAB 'cascade' form on this sheet to confirm that they have received the training. Then please file and show to your external verifier when they visit.

Name of Tutor	Signature of Tutor	Date

Declaration

☐ I confirm that all the information given above is accurate:

Signed (by tutor delivering cascade training):

Name (please print): Date:

CPCAB External Verifier: Date: