**Money and Pensions Service (MaPS)**

**Independent Quality Assessment Service**

**Pensions Quality Assurance Specialist**

**Application Form**

**Guidance Notes:**

1. Please consider the supporting Pensions Quality Assurance Specialist and supporting Job Advert and Remuneration package when completing your application.
   1. Particular consideration should extend to the Essential Experience and Training requirements
2. Completed applications should be returned directly to [IQAS@recognisingexcellence.co.uk](mailto:IQAS@recognisingexcellence.co.uk)
3. The closing date for completed applications to be received by RE is **31st May 2024**
4. Successful applicants will be invited to attend an interview facilitated by video conferencing (Microsoft Teams).
   1. The interview will comprise a panel of not more than 3 individuals including senior personnel from Recognising Excellence and The Money and Pensions Service.
   2. If shortlisted for interview, you will be requested to undertake a knowledge test as part of the selection process.
5. If you would like to discuss this opportunity in further detail prior to applying, please contact RE directly on 01452 688357

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| 1. **Personal Details** | |
| Name of Applicant: |  |
| Address: | Postcode: |
| Daytime Telephone No: |  |
| Mobile: |  |
| Email Address: |  |

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| 1. **Type of Application**   Please confirm the opportunity you are applying for: | |
| 1. Quality Lead | Yes / No |
| 1. Self Employed Assessor | Yes / No |
| 1. Are you interested in an employed or self- employed role with us? | Employed / Self-Employed |
| 1. If you are interested in an employed role, are you looking for a full or part-time position? | Full Time / Part Time |

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| 1. **Current Employment** | |
| Name of Employer: |  |
| Address: | Postcode: |
| Position Held: |  |
| Dates and Duration of Service: |  |
| Working Pattern: (Full Time / Part Time) |  |
| Summary of Job Role including Key Responsibilities: |  |
| Is your employer currently in receipt of MaPS funding? | Yes / No |

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| 1. **Previous Employment**   Job roles (past and present) – please provide a summary of your previous employment/experience as a Pensions advice and guidance practitioner including length of service . | |
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| Previous Employer: |  |
| Position Held: |  |
| Dates and Duration of Service: |  |
| Working Pattern: (Full Time / Part Time) |  |
| Summary of Job Role including Key Responsibilities: |  |
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| Previous Employer: |  |
| Position Held: |  |
| Dates and Duration of Service: |  |
| Working Pattern: (Full Time / Part Time) |  |
| Summary of Job Role including Key Responsibilities: |  |
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| Previous Employer: |  |
| Position Held: |  |
| Dates and Duration of Service: |  |
| Working Pattern: (Full Time / Part Time) |  |
| Summary of Job Role including Key Responsibilities: |  |
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| Previous Employer: |  |
| Position Held: |  |
| Dates and Duration of Service: |  |
| Working Pattern: (Full Time / Part Time) |  |
| Summary of Job Role including Key Responsibilities: |  |
| **Please add additional rows as necessary** | |

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| 1. **Passion for Quality** |
| Please provide a short summary of why you are interested in this role and what you think you can bring to the team which should include any particular strengths you feel you have. |

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| 1. **Pensions Guidance Experience:** | |
| Please identify below the different types of pensions guidance you have current experience of: | |
| State Pension | Yes/ No |
| Work-place Pension | * Defined Benefit Pension Yes/ No * Occupational Pension Yes/ No * Group personal or Stakeholder Pension Yes/ No   And   * Single Employer Pension Yes/ No * Agent Multi Employer Yes/ No * Cost Sharing Multiplier Yes/ No |
| Personal Pension | * Defined Contribution Yes/ No |
| Self-Invested Personal Pension (SIPPS) | Yes/ No |
| Small Self-Administered Scheme (SSAS) | Yes/ No |
| Other: (Please identify) | Yes/ No |

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| 1. **Sector Challenges:** |
| Please summarise the key challenges you feel the pensions advice and guidance sector is currently facing: |

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| 1. **Quality Assurance Experience:** | |
| Do you have experience of the following quality assurance activities? | |
| 1. **File Reviews** (Defined as a sample check of client case file contents against a prescribed list of criteria. This will typically address both procedural aspects of file management and quality and appropriateness of advice/guidance provided with feedback provided to the practitioner. | Yes / No |
| If yes, please detail as appropriate: |  |
| 1. **Supervision** (Individual or Team) | Yes / No |
| If yes, please detail as appropriate: |  |
| 1. **Assessing quality** (defined as other quality assurance activities outside of File Review and/or Supervision | Yes / No |
| If yes, please detail as appropriate: |  |
| 1. Providing **substantive feedback** to Peers | Yes / No |
| If yes, please detail as appropriate: |  |
| 1. **Analysing** a data set and preparing **formal written** evaluations | Yes / No |
| If yes, please detail as appropriate: |  |
| 1. Undertaking **assessment activities** and preparing a **written summary** of findings | Yes / No |
| If yes, please detail as appropriate: |  |
| 1. Working in **collaboration** with **internal and external** stakeholders | Yes / No |
| If yes, please detail as appropriate: |  |

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| 1. **Safeguarding and Vulnerability** |
| Please provide an outline of your experience of working with and supporting customers in vulnerable situations: |

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| 1. **Multi-Channel Advice** |
| Please provide a summary of your experience working across multiple channels of advice (Face to face, Telephone, Webchat) |

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| 1. **Professional Qualifications and Continuous Professional Development** | |
| 1. Do you hold a relevant **Level 4 FCA recognised qualification** e.g.  * Diploma in Regulated Financial Planning from the Chartered Insurance Institute * Diploma for Financial Advisers from the London Institute of Banking and Finance   If yes, please detail below: | |
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| 1. Are you an Associate/Fellow of Pensions Management Institute? | |
| Yes / No | |
| 1. Please give details of any training and/or CPD activities undertaken in the previous 12 months which are relevant to the technical knowledge of a Pensions advice and guidance practitioner:   **Please include your CPD record for the last 12 months as an attachment along with your completed application form.** | |
| **Training/CPD Activity** | **Details (including duration of course/nature of CPD** |
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| **Please add additional rows as necessary** | |
| 1. Please give details of any professional or other qualifications held: | |
| **Professional/Other Qualification Held** | **Details**  **(Including date qualification gained)** |
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| **Please add additional rows as necessary** | |

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| 1. **Additional Information to support your application** | |
| With reference to the Role Description and Person Specification, please include any additional information which you feel is relevant to support your application: | |
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| 1. **References** | |
| Please provide the names and addresses of two references, with at least one from your current employer. **Note-** References will not be taken until the recruitment and selection process has concluded) | |
| Reference 1 | |
| Name: |  |
| Job Title: |  |
| Organisation: |  |
| Address: |  |
| Contact Telephone No.: |  |
| Email Address: |  |
| Reference 2 | |
| Name: |  |
| Job Title: |  |
| Organisation: |  |
| Address: |  |
| Contact Telephone No.: |  |
| Email Address: |  |

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| 1. **Recruitment Timetable** | |
| The following timeline provides an indicative view of the current recruitment programme: | |
| 31st May 2024 | Application Window to Close |
| W/c 3rd June 2024 | Shortlisting Panel to convene |
| w.c 17th June 2024 | Interviews (facilitated by Microsoft Teams) |
| w.c. 24th July 2024 | Final Selection and Appointment |
| July/August 2024 | If successful, an intensive programme of training will commence during July and August 2024 |

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| 1. **Confirmation** | |
| Please confirm the following: | |
| My application is a true reflection of my experience and expertise relating to pensions guidance | Yes / No |
| I am available for interview should I be successfully shortlisted | Please identify any preference as appropriate |
| I declare that there is no conflict of interest between my professional work and the pensions advice and guidance services offered by MaPS, and/or the potential of a conflict of interest if successfully appointed to assess pensions guidance client files against the MaPS Standards. | **Confirmed, No Conflict:** Yes / No  **Conflict/Potential Conflict Identified:** Yes / No  ***If identified, please detail:*** |
| I agree that Recognising Excellence Ltd can create and maintain computer and paper records of my application and personal data and understand that this will be processed and stored in accordance with GDPR guidelines. Please refer to the embedded document in this section. | Yes / No |

Signed:

Name: Date: