



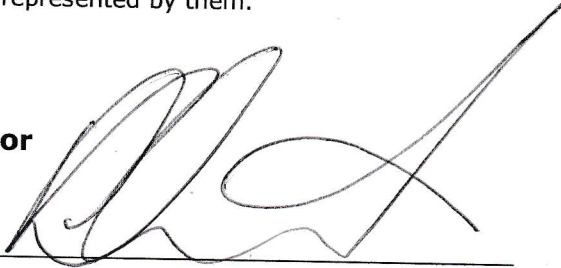
**ADVENTURE
INDUSTRY
ASSOCIATION**

LOTC Service Provider Verification: Policy

Approval page

The signatories hereof, being duly authorised thereto, by their signatures hereto authorise the execution of the work detailed herein, or confirm their acceptance of the contents hereof and authorise the implementation/adoption thereof, as the case may be, for and on behalf of the parties represented by them.

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1 Purpose

This policy defines SA AIA's LOTC Service Provider Verification system, including its purpose, scope, governance controls, verification levels, decision-making, validity, and communication rules.

The purpose of verification is to:

- a. Confirm minimum standards for programme provision at an organisational / service level
- b. Protect learners / participants and support safe, responsible delivery
- c. Ensure transparent and consistent decision-making and governance
- d. Support sector upliftment through guidance and resources, without lowering the minimum standard.

2 Definitions

For the purpose of this policy:

- a. **LOT/ABL Provider / Service Provider:** Any organisation or venue delivering programmes in LOTC, ABL/AEL, outdoor education, or related activity-based programme provision (schools, corporates, public groups, etc.).
- b. **Verification:** A structured process to confirm a provider meets defined minimum standards for programme provision.
- c. **Verified Provider:** Baseline verification level, demonstrating minimum standards.
- d. **Quality Assured Provider:** Deeper audit level demonstrating stronger QA systems and continuous improvement commitments.
- e. **Desktop Verification:** Evidence review conducted off-site (documents, interviews, records).
- f. **On-site Verification:** In-person observation and/or site review (may form part of Quality Assured).
- g. **Conditions:** Required actions a provider must complete within a specified timeframe to maintain/obtain verification status.

3 Policy principles

Verification will be guided by:

- a. Learner / participant protection and industry integrity
- b. Minimum standards first (practical, evidence-based baseline)
- c. Transparency (clear processes, criteria, and communication)
- d. Fairness and consistency (decisions based on evidence, not opinion)

- e. Good governance (conflicts managed, decisions logged, version control)
- f. Support for upliftment through resources and guidance (without substituting for evidence)

4 Scope and exclusions

4.1 What verification covers

Verification focuses on programme provision at a service / provider level, which may include minimum expectations for:

- a. Programme planning and provision approach (appropriate structure and intent)
- b. Safeguarding protocols where applicable
- c. Risk management practices appropriate to context and participant profile
- d. Basic operational readiness and governance (e.g., incident readiness, staff role clarity, document control)

4.2 What verification does not cover

Verification does not:

- a. Certify individual technical competencies
- b. Certify training providers, training programmes, or qualifications
- c. Replace SA AIA's Technical Competency Framework processes
- d. Replace any legal obligations or permits that may apply to specific activities or locations
- e. Serve as a guarantee beyond the evidence reviewed at time of verification.

5 Relationship to Training and Competency :

SA AIA operates two distinct workstreams:

- a. Technical Competency Framework (Training and Competency): individual competence (curriculum, assessment, scopes / levels, recognition / RPL rules).
- b. **Service Provider Verification:** organisational / service provision minimum standards.

These processes must remain separate. A provider may be verified while still needing to meet separate training / competency requirements for staff via the Technical Competency Framework where relevant.

6 Verification Levels

6.1 Level 1: Verified Provider

A Verified Provider demonstrates evidence of minimum standards for programme provision, safeguarding where applicable, and risk management appropriate to their context.

Assessment approach: desktop evidence review and structured interview (minimum), with on-site optional where required.

6.2 Level 2: Quality Assured Provider

A Quality Assured Provider demonstrates stronger quality assurance practices and a commitment to continuous improvement, including deeper audit and (where appropriate) on-site review / observation.

Assessment approach: full audit; may include on-site verification.

Note: "Quality Assured" is a SA AIA quality marker and not a legal accreditation term.

7 Eligibility and entry

- a. Providers operating in the LOTC / ABL scope may apply for verification.
- b. Providers must submit required evidence and engage in review / interview processes.
- c. SA AIA may decline an application if the provider is not within scope, or if evidence submission is incomplete.
- d. Service Provider Verification is separate from SA AIA membership; membership indicates affiliation/intent, while verification confirms minimum standards based on evidence.

8 Application and verification process

8.1 Application

Providers submit an application through SA AIA's defined channel(s), including:

- a. Provider profile and programme scope
- b. Requested verification level (Verified / Quality Assured)
- c. Supporting evidence pack (as specified by the Toolkit)

8.2 Desktop review

SA AIA reviewers conduct an evidence-based review using the Verification Toolkit prompts and evidence requirements.

8.3 Interview

A structured interview is conducted to clarify context, validate understanding, and confirm evidence.

8.4 On-site verification (where applicable)

On-site verification may be used:

- a. As part of Quality Assured Provider level
- b. Where desktop evidence indicates a need for observation / validation
- c. For pilots and continuous improvement testing.

8.5 Decision and outcome letter

SA AIA issues a decision with reasons and any conditions, and provides the provider with:

- a. Verification outcomes (status)
- b. Summary of strengths and gaps
- c. Conditions and timelines (if applicable)
- d. Validity period and renewal information.

9 Evidence and use of the Toolkit

The Verification Toolkit is the official instrument used to guide verification. It:

- a. Uses open-ended prompts to encourage reflective practice
- b. Requires evidence suitable to the provider's context
- c. Provides guidance and resources where appropriate.

Providers are responsible for supplying evidence. Templates / resources may be offered, but evidence must be provider-specific.

10 Decision types

Verification decisions must be documented and may include:

- a. Verified Provider / Quality Assured Provider (as applicable)
- b. Verified with Conditions / Quality Assured with Conditions
- c. Not Verified Yet (with clear reasons and pathway to reapply)

Conditions must:

- a. Be specific and time-bound
- b. Be linked to evidence gaps
- c. Include the required proof of completion

11 Validity period and renewal

- a. Verification is time-bound and subject to renewal
- b. Standard validity periods (to be confirmed after pilot implementation):
 - a. Verified Provider: [e.g., 12 months]
 - b. Quality Assured provider: [e.g., 24 months]
- c. Renewal requires submission of updated evidence and / or review appropriate to the level.

SA AIA may require an earlier review if significant concerns arise.

12 Complaints, incidents, and review triggers

Verification status may be reviewed if SA AIA receives credible information about:

- a. Serious incident(s) or repeated incidents
- b. Safeguarding concerns
- c. Material misrepresentation in evidence submitted
- d. Major operational changes that impact programme provision

A review process will be applied fairly and documented.

13 Appeals process

Providers may appeal a verification decision by submitting a formal appeal in writing within 20 days of the decision. Appeals must:

- a. State the grounds for appeal
- b. Provide any additional evidence

Appeals will be reviewed by a separate reviewer or panel where possible, and the outcome will be documented.

14 Governance controls: conflicts of interest and impartiality

All reviewers / assessors must declare conflicts of interest (COI), including:

- a. Commercial relationships
- b. Competitive relationships
- c. Personal relationships that could impact impartiality

Where a conflict exists, SA AIA will assign an alternative reviewer.

15 Confidentiality and information management

- a. Provider evidence and submissions will be treated as confidential and used for verification purposes.
- b. Providers may label documents as REFERENCE ONLY where appropriate.
- c. SA AIA will maintain secure storage, access controls, and version control for verification records.
- d. Any public sharing of provider documents is prohibited unless explicitly authorised.

16 Use of verification marks and public communication

Verified / Quality Assured marks (logos/badges) may be used by providers only:

- a. During the validity period
- b. In accordance with SA AIA brand rules
- c. Without implying “accreditation”, legal endorsement, or guarantees beyond verification scope

SA AIA may publish a list of verified providers, including verification level and validity dates.

Misuse of marks may result in review or withdrawal of status.

17 Pilot implementation and review

This policy v0.1 is issued for pilot implementation. The pilot will test:

- a. Clarity of language and scope
- b. Fairness and feasibility of evidence requirements
- c. Decision consistency
- d. Provider experience and improvement pathway

Following the pilot, SA AIA will revise this policy to v1.0 as appropriate.