



Higher Education Review (Alternative Providers) of The Metanoia Institute

December 2017

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About this review

This is a report of a Higher Education Review (Alternative Providers) conducted by the Quality Assurance Agency for Higher Education (QAA) at The Metanoia Institute. The review took place from 29 November to 1 December 2017 and was conducted by a team of three reviewers, as follows:

- Professor Mary Carswell
- Reverend David Howell
- Mr Harry Williams (student reviewer).

The main purpose of the review was to investigate the higher education provision and to make judgements as to whether or not academic standards and quality meet UK expectations. These expectations are the statements in the [UK Quality Code for Higher Education](#) (the Quality Code)¹ setting out what all UK higher education providers expect of themselves and of each other, and what the general public can therefore expect of them.

In Higher Education Review (Alternative Providers) the QAA review team:

- makes judgements on
 - the setting and maintenance of academic standards
 - the quality of student learning opportunities
 - the information provided about higher education provision
 - the enhancement of student learning opportunities
- makes recommendations
- identifies features of good practice
- affirms action that the provider is taking or plans to take.

The QAA website gives more information [about QAA](#)² and explains the method for [Higher Education Review \(Alternative Providers\)](#).³ For an explanation of terms see the glossary at the end of this report.

¹ The UK Quality Code for Higher Education is published at: www.qaa.ac.uk/quality-code.

² QAA website: www.qaa.ac.uk.

³ Higher Education Review (Alternative Providers): www.qaa.ac.uk/reviews-and-reports/how-we-review-higher-education.

Key findings

Judgements

The QAA review team formed the following judgements about the higher education provision.

- The maintenance of the academic standards of awards offered on behalf of degree-awarding bodies meets UK expectations.
- The quality of student learning opportunities meets UK expectations.
- The quality of the information about learning opportunities meets UK expectations
- The enhancement of student learning opportunities meets UK expectations.

Good practice

The QAA review team identified the following features of **good practice**.

- The strong integration of professional, personal and clinical practice within the programmes, which enhances student employment prospects (Expectation B3).
- The opportunities for students to gain initial clinical and professional experience through the Metanoia Counselling and Psychotherapy Service (MCPS), which facilitates their transition into placement (Expectation B10)
- The Institute's development of its research environment, in order to enhance student and staff engagement with research opportunities (Enhancement).

Recommendations

The QAA review team makes the following **recommendations**.

By May 2018:

- implement appraisal and peer review processes for all teaching staff to improve the quality of teaching practices and student learning opportunities (Expectation B3)
- evaluate the balance between the core academic student support provided within each programme and the extra support offered to students for an additional fee, to ensure that the core level of support is sufficient to allow all students to complete their programme successfully (Expectation B4)
- review and improve processes for monitoring and review of programmes in order to ensure they are effective, regular and systematic and provide an appropriate level of institutional oversight (Expectation B8).

By September 2018:

- review and evaluate the operation and effectiveness of the committee structure in order to improve the oversight of the governance and maintenance of academic standards. (Expectation A2.1).
- make greater use of independent external expertise in the design and development of programmes to further support the setting and maintenance of academic standards (Expectation A3.4)
- strengthen and monitor the effectiveness of arrangements for engaging students as partners in the assurance and enhancement of their educational experience (Expectation B5 and Enhancement).

About the provider

The Metanoia Institute (the Institute) was founded in 1983, and is based in Ealing, North London. It is an educational charity, and specialises in professional training courses for counsellors, psychotherapists, and allied professions. The curriculum offer began with master's programmes, and expanded into honours degrees, and from 1998 into Doctoral programmes.

The Institute's mission is to deliver excellence in counselling, counselling psychology, applied psychology and psychotherapy, and its vision is to invest in the life of individuals, organisations and communities through excellence in training, practice and research in the psychological therapies.

The Institute has two academic partners in Middlesex University, and London South Bank University (LSBU), although programmes with the latter have come to an end, and the needs of the remaining students are being addressed through existing teach-out arrangements. Since November 2016 Middlesex University has been the only validating partner for new provision.

The Institute also has strong links with regulatory bodies, and the Higher Education programmes offered, and the Institute itself, are registered with and accredited by the British Association for Counselling and Psychotherapy (BACP), the UK Council for Psychotherapy (UKCP), the European Association for Psychotherapy (EAP), the European Association for Integrative Psychotherapy (EAIP), the Health Care Professions Council (HCPC), the Humanistic and Integrative Psychotherapy College of the United Kingdom and the British Psychological Society (BPS) as appropriate.

There are currently 125 full-time and 421 part-time students registered with the Institute, 140 of the latter are studying on doctoral programmes. The vast majority are on Middlesex University provision, with 11 students remaining who are progressing through the LSBU programmes.

The most recent monitoring visit took place in 2016, and this confirmed that most actions from the 2014 review of the Institute had been substantially completed, although a small number remained in progress or required further enhancement. The current review has reflected that the Institute has continued to address the above areas, and to build upon the identified areas of good practice.

Explanation of findings

This section explains the review findings in greater detail.

1 Judgement: The maintenance of the academic standards of awards offered on behalf of degree-awarding bodies and/or other awarding organisations

Expectation (A1): In order to secure threshold academic standards, degree-awarding bodies:

a) ensure that the requirements of *The Framework for Higher Education Qualifications in England, Wales and Northern Ireland (FHEQ)* are met by:

- **positioning their qualifications at the appropriate level of the relevant framework for higher education qualifications**
- **ensuring that programme learning outcomes align with the relevant qualification descriptor in the relevant framework for higher education qualifications**
- **naming qualifications in accordance with the titling conventions specified in the frameworks for higher education qualifications**
- **awarding qualifications to mark the achievement of positively defined programme learning outcomes**

b) consider and take account of QAA's guidance on qualification characteristics

c) where they award UK credit, assign credit values and design programmes that align with the specifications of the relevant national credit framework

d) consider and take account of relevant Subject Benchmark Statements.

Quality Code, Chapter A1: UK and European Reference Points for Academic Standards

Findings

1.1 The academic standards and quality of the programmes delivered by the Institute are ultimately the responsibility of the awarding body universities, Middlesex University and London South Bank University (LSBU).

1.2 The Institute has been in a collaborative partnership with LSBU since September 2012 and this has enabled it to deliver four masters level programmes, two of which have subsequently closed. Formal notice of the termination of the relationship for the remaining two qualifications was given by LSBU in November 2016 and the Institute advised affected students of the teaching-out arrangements. These programmes currently have students who are completing their studies.

1.3 The Institute has a Collaborative Partnership with Middlesex University and a Partnership Agreement which was signed in May 2014 and which runs through to 2019. The Institute has three undergraduate, eight postgraduate and five doctoral programmes validated by the University. Threshold academic standards are ultimately the responsibility of

Middlesex University and each programme has a Memorandum of Cooperation in place.

1.4 The five taught doctoral programmes are delivered jointly with Middlesex University. This arrangement enables the students to be full members of the University with access to the University library and the University's virtual learning environment (VLE). Within the Institute the academic standards and quality, and arrangements with the Universities are managed by the Quality and Standards Committee which reports to the Academic Board.

1.5 Taken together, the arrangements in place with the relevant awarding bodies would allow the Institute to meet this Expectation.

1.6 In testing the Expectation, the review team examined documentary evidence in relation to the Institute's relationships with the awarding bodies and in relation to the management of quality and academic standards. The review team also met with the Chief Executive Officer, senior staff, students, and a Middlesex University representative.

1.7 Currently, programme development and approval is a joint activity with Middlesex University. Programme Specifications, when approved internally are submitted to the University and address the standards within the FHEQ. The Subject Benchmark Statement for Counselling and Psychotherapy is relevant to the programmes offered and covered within the Programme Specifications. The Statement on Creative Writing is addressed in the MSc in Creative Writing for Therapeutic Purposes. The Institute's academic regulations have been created to map to the University's regulations.

1.8 There are a number of Professional, Statutory and Regulatory Bodies (PSRBs) which are involved in the professional and clinical validation of six of the Institute's taught programmes. These are the British Association for Counselling and Psychotherapy (BACP), the UK Council for Psychotherapy (UKCP), the European Association for Psychotherapy (EAP), the European Association for Integrative Psychotherapy (EAIP), the Health Care Professions Council (HCPC), the Humanistic and Integrative Psychotherapy College of the United Kingdom and the British Psychological Society (BPS). The Quality and Standards Committee is currently developing a PSRB policy.

1.9 The Institute uses validation events, programme accreditation events, and periodic institutional accreditation events to ensure PSRB requirements are met. The PSRBs provide external confirmation of the Institute's professional and clinical development of students and standards of delivery.

1.10 The review team found that the Institute applies awarding body processes and standards, and has appropriate structures and processes in place to secure threshold academic standards set within programmes. The review team therefore concludes that the Expectation is met and that the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (A2.1): In order to secure their academic standards, degree-awarding bodies establish transparent and comprehensive academic frameworks and regulations to govern how they award academic credit and qualifications.

Quality Code, Chapter A2: Degree-Awarding Bodies' Reference Points for Academic Standards

Findings

1.11 The framework and regulations for all the current degrees delivered by the Institute are the responsibility of the awarding bodies and the Institute maps all of its provision to the Universities' regulations. These responsibilities are also found in the Institute's Quality and Standards Manual 2016-17, which contains systems and regulations on quality and standards.

1.12 The Institute's Academic Board takes responsibility, within the organisation, for setting and maintaining academic standards, assuring and enhancing academic quality, and ratifying all public information. The Academic Board is chaired by the Institute's Chief Executive Officer, who is also the Chair of the Executive Committee, thereby acting as a bridge between day-to-day operations and academic matters.

1.13 Within the Institute's senior management responsibility for quality, standards and implementation of the regulations rests with the Chair of the Quality and Standards Committee, who is also a member of the Executive and who reports to the Chief Executive Officer; with support from the Head of Academic Quality. The Quality and Standards Committee approves all new programmes. Responsibility for learning, teaching and enhancement rests with the Chair of the Learning, Teaching and Enhancement Committee (LTEC) who is a member of the Executive and also reports to the Chief Executive Officer.

1.14 The Institute has a process for the approval and re-approval of programmes, which incorporates academic standards set by the awarding body, and which ultimately requires approval from the University's Academic Provision Approvals Committee. Taken together, these procedures and processes would enable the Institute to meet this Expectation.

1.15 In considering the Expectation the review team examined documentation including committee structures, policies and practices, together with the awarding body checklists, and met with senior, teaching and support staff, a Middlesex University representative and students.

1.16 Following the Review for Specific Course Designation in February 2014 the Institute has reorganised itself into four faculties to take the work forward. These are the Faculty of Psychotherapy and Counselling, the Faculty of Post-Qualification and Professional Doctorates, the Faculty of Applied Social and Organisational Sciences and the Faculty of Research. Students and staff spoke about the improvements that this change had made to their learning and to the overall ethos and direction of the Institute.

1.17 In order to assure the quality of its teaching and learning and enhance its provision, the Institute has established a Learning, Teaching and Enhancement strategy which is managed by the Learning and Teaching Committee, accountable to the Academic Board. Enhancement is also considered by the Board of Trustees.

1.18 The Academic Board has seven subcommittees which are the legislative bodies that determine Institute policies and procedures for academic standards and quality assurance. In academic matters the Academic Board makes decisions and then seeks

approval from the Executive Committee.

1.19 However, the balance of decision making between the Executive and the Academic Board was not always clear, and there has on occasion been an equivalent lack of clarity between the duties and activities of the Executive Committee, the Board of Trustees and the Academic Board. In addition, the Institute could not always evidence that quoracy requirements were in place for all relevant meetings.

1.20 To address this, the review team **recommends** that the Institute review and evaluate the operation and effectiveness of the committee structure in order to improve the oversight of the governance and maintenance of academic standards.

1.21 While processes in relation to Middlesex University courses are applied consistently there was evidence of inconsistencies in the equivalent arrangements for the LSBU provision. In particular, the oversight and monitoring of the LSBU courses have been delegated to the Programme Team rather than being held at Institute level. This observation is further explored within the recommendation in Expectation B8.

1.22 However, and In order to secure academic standards, the Institute has established transparent and comprehensive academic frameworks and regulations which govern how they propose to awarding bodies the academic credit and qualifications for the programmes they deliver. Therefore the review team concludes that the Expectation is met and that the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (A2.2): Degree-awarding bodies maintain a definitive record of each programme and qualification that they approve (and of subsequent changes to it) which constitutes the reference point for delivery and assessment of the programme, its monitoring and review, and for the provision of records of study to students and alumni.

Quality Code, Chapter A2: Degree-Awarding Bodies' Reference Points for Academic Standards

Findings

1.23 The Institute shares the responsibility for the production, development, and maintenance of definitive programme records, in the form of programme specifications, with its two awarding bodies. The respective responsibilities of the Institute and its awarding bodies are outlined in the formal governance documentation existing between the Institute and its awarding bodies.

1.24 Programme specifications produced by the Institute articulate course title and award, course structure and detail, and outline the aims and learning outcomes of the programme. In addition to formal programme specifications, the Institute produces a programme handbook. These introduce the programme, provide staff contact information, and outline the pastoral support available to students. Programme handbooks also include module information including module titles, credits awarded, and module restrictions. The Institute's student information booklet provides additional information relating to health and safety, local rules at each campus, and introduces the Institute's operational management.

1.25 The processes and documentation in place would allow the Expectation to be met.

1.26 The review team tested this Expectation through meetings with senior staff, teaching staff, students, and a representative from Middlesex University. The review team also examined documentation relating to programme administration and structure.

1.27 In meetings during the review visit, the team were advised that programme management are responsible for producing content for programme specifications. In collaboration with the Institute's programme administrative teams, programme management are also responsible for ensuring that programme specifications and other programme materials remain up to date and accurate.

1.28 The Institute's Academic Board and one of its subcommittees, the Quality and Standards Committee, are responsible for overseeing this work. The Institute's awarding bodies, Middlesex University and LSBU, scrutinise programme materials, such as programme specifications, as part of (re-)validation and ongoing due diligence monitoring processes.

1.29 The review team heard from staff that programme specifications are used in their delivery of modules and programmes. Students were complimentary about the comprehensive nature of the programme specifications and explained they were often used as signposting documents.

1.30 Based upon the foregoing, the review team concludes that the Expectation is met with a low level of risk.

Expectation: Met
Level of risk: Low

Expectation (A3.1): Degree-awarding bodies establish and consistently implement processes for the approval of taught programmes and research degrees that ensure that academic standards are set at a level which meets the UK threshold standard for the qualification and are in accordance with their own academic frameworks and regulations.

Quality Code, Chapter A3: Securing Academic Standards and an Outcomes-Based Approach to Academic Awards

Findings

1.31 The Memoranda of Co-operation with Middlesex University and with LSBU confirm that all programmes to be run under the auspices of each University are subject to their approval and published quality assurance and review procedures.

1.32 Institute staff are responsible for the initial development and design of programmes using guidance in the Institute's Programme Design, Development and Approval Policy which applies to both taught and research programmes. It sets out the criteria, design guidance and the process to be adopted for approval, linking back to the university requirements. The process requires reference to Subject Benchmark Statements, QAA level descriptors and appropriate professional, statutory and regulatory body guidance. Each award must be identified at the appropriate level of the FHEQ, set within the higher education credit framework for England, and learning outcomes must be appropriately aligned with relevant qualification descriptors and take into account the relevant Subject Benchmark Statements.

1.33 The Institute's processes combined with the University approval procedures would allow the Expectation to be met.

1.34 The review team tested the operation of these processes by reviewing a range of documentation including quality guidance, programme specifications and validation reports and by meeting specific staff from the Institute and from Middlesex University.

1.35 LSBU gave notice to the Institute in November 2016 of its intention to withdraw from the partnership for strategic reasons. Although both universities' procedures clearly require information and assurances with regards to threshold standards, the Institute's Programme Design, Development and Approval Policy now only references Middlesex University as it is their sole partner for any new course approvals. Programme specifications indicate appropriate reference to these expected standards and include detailed learning outcomes. The Institute's Programme Proposal Form includes details on how the proposal has made use of external reference points. The approval process, which includes appropriately qualified external advisors as members of a Middlesex approval panel, includes consideration of the UK threshold standards and any relevant PSRB requirements.

1.36 Research degrees are considered through the same approval and review processes as taught programmes and appropriate attention is given to the level of academic standards being set.

1.37 The review team found that the design of programmes and the associated approval processes are clearly cross-referenced to UK threshold standards. They are also in line with the universities' and the Institute's own academic regulations. The review team concludes therefore that the Expectation is met and the associated level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (A3.2): Degree-awarding bodies ensure that credit and qualifications are awarded only where:

- **the achievement of relevant learning outcomes (module learning outcomes in the case of credit and programme outcomes in the case of qualifications) has been demonstrated through assessment**
- **both UK threshold standards and their own academic standards have been satisfied.**

Quality Code, Chapter A3: Securing Academic Standards and an Outcomes-Based Approach to Academic Awards

Findings

1.38 Middlesex University and LSBU hold overall responsibility for the programmes and awards but assessment is delegated to the Institute. The approach to assessment forms part of the University approval processes. Learning outcomes and the way in which they will be assessed are set out in the programme specifications that form part of the universities' validation processes and are included in Programme Handbooks.

1.39 The Institute's procedures together with the universities' oversight would allow the expectation to be met.

1.40 The review team tested the operation of these processes by reviewing a range of documentation including quality guidance, programme handbooks and external examiner reports and by meeting a range of staff from the Institute and from Middlesex University.

1.41 Programme Handbooks include extensive information on assessment of learning outcomes and are approved annually by Middlesex University prior to release to students. The programme outcomes link clearly to the programme aims and are expressed in terms of knowledge and understanding, cognitive skills, practical skills and graduate skills at each FHEQ level. Module learning outcomes are derived from module aims which link back to the overall programme aims and outcomes. Programme specifications include a curriculum map showing these links.

1.42 Assessments are set by the Institute staff and are designed to assess the validated module learning outcomes. They are set as part of the programme approval process. Assessments are in the main set in the context of practice, so are adaptable, and rarely require any changes to be made. Where any changes are required assessment briefs are submitted to the University for approval.

1.43 Students confirmed that they see assessment as getting more challenging as they progress through their course and that marking is consistent and appropriate.

1.44 The outcomes of assessment are subject to scrutiny by external examiners appointed by the universities. They are confirmed by the relevant assessment board which is attended by the external examiner and the University Link Tutor as well as relevant Institutional Staff. It had been reported to the Board of Trustees in July 2016 that the management of assessment boards was inefficient because of such issues as lack of attention to detail and lack of knowledge on their requirements but this has since been addressed through the appointment of a Registrar and a Head of Academic Quality.

1.45 The procedures of the Institute together with oversight by the Universities, which includes the appointment of an external examiner and a Link Tutor, ensure that the achievement of relevant learning outcomes is demonstrated through assessment and that

both UK threshold standards and the standards of each university are satisfied.
The Expectation is met and the level of risk is low.

Expectation: Met

Level of risk: Low

Expectation (A3.3): Degree-awarding bodies ensure that processes for the monitoring and review of programmes are implemented which explicitly address whether the UK threshold academic standards are achieved and whether the academic standards required by the individual degree-awarding body are being maintained.

Quality Code, Chapter A3: Securing Academic Standards and an Outcomes-Based Approach to Academic Awards

Findings

1.46 The Institute's Quality and Standards Manual states that the principles of annual programme monitoring and periodic review include ensuring the programmes are of an appropriate standard and quality. Annual monitoring reports are completed by Programme Leaders in consultation with the programme team following the guidance provided by the Institute. They are considered internally by the Quality and Standards Committee and Academic Board and submitted to the relevant University.

1.47 The Institute's Quality and Standards Manual also refers to the periodic review of programmes as a process typically undertaken once every five years to confirm that programmes are of an appropriate academic standard and quality.

1.48 The Institute's procedures together with the Universities' oversight would allow the Expectation to be met.

1.49 The review team tested the operation of these processes by reviewing a range of documentation including committee minutes, programme monitoring and review reports, and by meeting a range of staff and students.

1.50 Programmes are reviewed periodically by each University as set out in their Memoranda of Co-operation. The periodic programme review process for Middlesex University programmes includes consideration by a University appointed panel of the programme specification against the qualification descriptors, relevant benchmark statements and the FHEQ. It considers a range of programme-related evidence including performance data and external examiner reports. A report is produced and any conditions and recommendations are then responded to by the Institute.

1.51 The Institute has a Programme Review Policy which states that all Programme Leaders must prepare an annual monitoring report for consideration by Quality and Standards Committee (QSC). These are prepared using the relevant university templates which both include progression and achievement data and refer to external examiner reports to provide assurance that threshold standards are being set and met. The external examiner is asked to confirm that standards achieved are at the right level for the qualification. The annual monitoring reports include an action plan and follow-up of actions from previous years.

1.52 For Middlesex University programmes the review team saw a range of annual monitoring reports which included appropriate consideration of academic standards including reference to external examiner comments. The review team also saw and heard evidence of consideration of these reports by the University, which included written feedback from the Link Tutor to the Institute.

1.53 The review team found that no annual monitoring report had been produced for the LSBU programmes for 2016 delivery, although previous reports which addressed standards issues had been produced. It also found that although there was evidence of consideration

of annual monitoring reports by QSC the process was not consistent or systematic. Both of these issues are explored more fully in Expectation B8. Despite these shortcomings in the Institute's processes the review team felt that the controls that are in place, in particular the strength of the approval processes and the ongoing involvement of external examiners mean that monitoring and review of academic standards has still been in place.

1.54 The Institute's processes for monitoring and review adequately address whether the UK threshold academic standards are achieved and whether the academic standards required by each university are being maintained. The Expectation is met and the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (A3.4): In order to be transparent and publicly accountable, degree-awarding bodies use external and independent expertise at key stages of setting and maintaining academic standards to advise on whether:

- **UK threshold academic standards are set, delivered and achieved**
- **the academic standards of the degree-awarding body are appropriately set and maintained.**

Quality Code, Chapter A3: Securing Academic Standards and an Outcomes-Based Approach to Academic Awards

Findings

1.55 The awarding bodies are ultimately responsible for the setting and maintaining of academic standards in line with UK thresholds, and the Institute undertakes to maintain those standards. Programme creation, design, and delivery is undertaken by the Institute in line with the relevant university's systems and regulations. For undergraduate and taught postgraduate programmes which carry professional recognition, they are also aligned with the requirements of the relevant PSRB.

1.56 The Institute's programmes are reviewed by external examiners with appropriate subject expertise and seniority in the approval and review of programmes to ensure that UK standards are set, delivered and achieved, and that the academic standards are appropriately set and maintained.

1.57 Six of the programmes delivered by the Institute have an associated professional accreditation requiring the provision of learning opportunities which meet external professional requirements. As such, each PSRB's requirements has an impact upon the design and delivery of the relevant programmes. The UK Council for Psychotherapy (UKCP), for example, requires the Institute to employ an external moderator to be the liaison between the PSRB and the Institute and who prepares the quinquennial review (QQR) of the Institute for the UKCP.

1.58 External examiners for all programmes are recommended by the Institute to the awarding bodies who make the formal appointments and who receive the reports. The Institute uses these reports in its annual monitoring processes.

1.59 These processes and procedures would enable the Expectation to be met.

1.60 In considering the Expectation the review team examined documents provided by the Institute, information on the website and held meetings with the senior management, teaching staff, support staff, students and external placement providers.

1.61 Comprehensive PSRB scrutiny is evidenced in the validation and revalidation of programmes, and in the approval of supervisors and accreditation of clinical placements. Many of the staff are part-time and have clinical practices outside of the Institute, and as such, they bring practice-based external perspectives.

1.62 Further, the Institute's Programme Design, Development & Approval Policy does state that 'authors should take advice...and refer to employers and external organisations' although it does not include externals in its criteria. The team found that, for example, the revalidation proposal for the Doctorate in Psychotherapy by Professional Studies did not contain any explicit independent external support. Further, neither the Executive Committee, nor the Academic Board which review these developments are supported by independent external academic expertise for this stage of the process.

1.63 Although the professional bodies and staff provide the Institute with some vocational externality, the review team **recommends** that the Institute make greater use of independent external expertise in the design and development of programmes to further support the setting and maintenance of academic standards.

1.64 Overall, the Institute, working with the awarding bodies and the PSRBs and through its staff uses external expertise to inform the setting and maintenance of academic standards. Based upon this, the review team feel that the Expectation is met and the level of risk is low.

Expectation: Met
Level of risk: Low

The maintenance of the academic standards of awards offered on behalf of degree-awarding bodies and/or other awarding organisations: Summary of findings

1.65 In reaching its judgement the review team matched its findings against the criteria specified in Annex 2 of the published handbook.

1.66 All seven Expectations in the judgement area are met, and all have a low level of risk. There are two recommendations made in relation to these Expectations. The first of these relates to Expectation A2.1, and recommends review and evaluation of the operation and effectiveness of the committee structure in order to improve the oversight of the governance and maintenance of academic standards.

1.67 The other recommendation refers to Expectation A3.4, and recommends greater use of independent external expertise in the design and development of programmes to further support the setting and maintenance of academic standards

1.68 There are no features of good practice, or affirmations which relate to these Expectations.

1.69 The review team concludes that the maintenance of the academic standards of awards offered on behalf of degree-awarding bodies and/or other awarding organisations at the provider **meets** UK expectations.

2 Judgement: The quality of student learning opportunities

Expectation (B1): Higher education providers, in discharging their responsibilities for setting and maintaining academic standards and assuring and enhancing the quality of learning opportunities, operate effective processes for the design, development and approval of programmes.

Quality Code, Chapter B1: Programme Design, Development and Approval

Findings

2.1 The Institute has a clear vision and mission which informs the development of its academic portfolio with all programmes having a strategic fit with the Institute's mission. Its processes for the design, development and approval of programmes are set out in its Quality and Standards Manual and its Programme Design, Development and Approval Policy which have been designed to meet the expectations of the Quality Code.

2.2 The approval process involves initial approval by the Institute followed by the University validation process. Since November 2016 Middlesex University has been the only validating partner. Documentation submitted to the University includes fully completed University templates for programme and module specifications.

2.3 Most programmes also have professional, statutory and regulatory body approval and these bodies are involved in the approval process sometimes as early as the initial design phase.

2.4 The Institute's procedures together with the University's approval would allow the Expectation to be met.

2.5 The review team tested the operation of these processes by reviewing a range of documentation including committee minutes, quality procedures and approval documentation and by meeting relevant staff from the Institute and Middlesex University.

2.6 The programme approval process is the same for taught and doctoral programmes. It has three stages: initial business approval, initial academic approval and validation. The initial business approval is managed by the Institute Executive, with proposals for new programmes being considered on the basis of market intelligence, alignment to the Institute's strategic aims as well as its academic rationale and coherence. If approved by the Executive the proposal is developed for consideration by QSC and thereafter by the University partner for initial academic approval. If approved it proceeds to a panel-based validation event managed by Middlesex University involving external subject specialists.

2.7 Initial approval by Middlesex University is managed by the Science and Technology School Committee then the Academic Provision Approvals Committee (APAC) and administered by the academic partnerships team.

2.8 The Institute has not had any new taught programmes validated since 2014-15. Documentation provided by the Institute as part of the approval process for a new programme met the University's requirements and addressed all relevant issues although there was little evidence of programme design being directly informed by employers. Most programmes are accredited by a professional body and the design is informed by their requirements and most staff are active practitioners able to bring their professional experience into programme design. Placement providers seen by the review team had not been asked to contribute to or comment on programme design. The review team felt greater

use could be made of independent external expertise and this has been discussed in more detail in Section A3.4.

2.9 The review team saw an example of a recent Programme Proposal Form which was comprehensive and met the requirements of the Institute's processes. The review team did note that the proposal was not formally considered by QSC as it failed to meet the deadline and there was no record in the minutes of it being scrutinised and approved prior to submission to Middlesex University.

2.10 A new process for approving changes to existing programmes was introduced in 2016-17 in which changes must be supported by evidence of approval by the relevant External Examiner and affected students, and be adequately justified and approved by Middlesex University. Prior to this any changes were considered by QSC and submitted to Middlesex University for scrutiny. Staff confirmed that they were aware of the need for changes to be approved by the University.

2.11 The University validation processes and the Institute's own processes ensure that the Institute operates effective processes for the design, development and approval of programmes. The Expectation is met and the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B2): Recruitment, selection and admission policies and procedures adhere to the principles of fair admission. They are transparent, reliable, valid, inclusive and underpinned by appropriate organisational structures and processes. They support higher education providers in the selection of students who are able to complete their programme.

Quality Code, Chapter B2: Recruitment, Selection and Admission to Higher Education

Findings

2.12 The Institute shares the responsibility for the recruitment, selection, and admission of students to their higher education provision with the Institute's awarding bodies. The Institute's approach to recruitment and admission is outlined in their admissions policy. Applications are made directly to the Institute rather than via any awarding partner.

2.13 The Institute assesses the suitability of an applicant through a comprehensive series of group and one-to-one interviews and workshops. Oversight of the admissions and recruitment process is operationally-based at programme and faculty level with institutional oversight maintained through the Institute's Academic Board and Executive Committee. Marketing activities inform both the public and prospective students as to the Institute's higher education provision.

2.14 The processes in place would allow the Expectation to be met.

2.15 The review team tested the Expectation through meetings with senior staff, teaching staff, professional support staff, and students. The review team also examined documentation relating to marketing, recruitment, and admissions.

2.16 The Institute is responsible for the management of the recruitment, selection, and admission process with oversight of the process maintained by the Institute's awarding bodies. The Institute's admissions policy outlines their approach to the recruitment and admissions process and the members of staff likely to be involved. Applicants are invited to submit an application to study via the Institute's online website, or in paper form.

2.17 Once an application has been received the individual will be invited to one of the Institute's study weekends. These allow the Institute to see candidates in one-on-one and group settings in the context of a counselling programme; during the review visit, the review team heard from both students and staff how useful the study weekends are in preparing students for higher education study at the Institute. The decision to make an offer to an applicant rests with the programme and faculty management. Once the admissions process has concluded the Registrar becomes responsible for managing the student registration and enrolment process.

2.18 Applicants who are dissatisfied with the application and admissions process may submit a complaint via the Institute's published complaints policy. In this case, the Institute's Academic Quality Manager would be responsible for investigating and reporting on the complaint. Staff involved in recruitment and admissions are provided with training and continuous professional development opportunities.

2.19 The recruitment and admissions process is the responsibility of the Institute's Academic Quality Manager in consultation with the relevant Faculty Head. Although their minutes do not always reflect relevant discussions, the Institute's Academic Board is responsible for setting the criteria for the admission of students to higher education programmes alongside the Institute's Executive Committee which is responsible for

monitoring student applications and recruitment.

2.20 During the review visit, the review team heard that historically, the Institute has exercised oversight of the admissions and recruitment process informally at programme-level. However, the review team were also advised that the Institute is in a period of transition with various administrative functions becoming more centralised to enable senior management greater oversight of the recruitment and admissions process. Specifically, the Institute highlighted the introduction of the new committee structure as a means of furthering institutional oversight of various processes, including admissions and recruitment.

2.21 The Institute publishes on its website a prospectus that outlines the higher education offer, which includes programme information, fees, and entry requirements. Other marketing materials provide additional information to both prospective students and the public about the Institute's higher education offer. These fall under the Institute's public information policy. Staff responsible for the recruitment and admissions process are also involved in the production and maintenance of published information.

2.22 The Institute, in collaboration with its awarding bodies, has processes in place for the recruitment, selection, and admission of students. The review team therefore concludes that the Expectation is met, and the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B3): Higher education providers, working with their staff, students and other stakeholders, articulate and systematically review and enhance the provision of learning opportunities and teaching practices, so that every student is enabled to develop as an independent learner, study their chosen subject(s) in depth and enhance their capacity for analytical, critical and creative thinking.

Quality Code, *Chapter B3: Learning and Teaching*

Findings

2.23 Learning and teaching activities are informed by the Institute's Learning, Teaching and Enhancement Strategy and by its Assessment Strategy. Both are maintained by the Learning, Teaching and Enhancement Committee and approved by the Academic Board. The Quality and Standards Committee, which is a subcommittee of the Academic Board, has oversight of all academic developments and quality issues.

2.24 The Institute's Learning Teaching and Enhancement Strategy is reviewed on a biennial basis, reflecting the Institute's commitment to sharing good practice and systematically improving the quality of the provision. It also articulates the Institute's strategic learning and teaching priorities, which include the enhancement of teaching practice and quality, and the production of graduates who have the knowledge, skills, confidence and ambition to achieve success in their chosen careers.

2.25 The Board of Studies involves staff and students from all of the taught programme and facilitates discussions around development and enhancement issues. The Board of Studies is accountable to the Joint Staff Student Committee (JSSC) for assuring and enhancing the quality of the student experience at programme level. The JSSC has two faculty representatives and the Institute's CEO has assumed the role of chair in order to develop the links with senior management.

2.26 The Institute has changed its structure to four faculties to address the perceived disconnect between faculties and committees. Students and staff spoke about the positive change this has made to the ethos of the Institute and to the increased effectiveness of working together.

2.27 The above processes, procedures and infrastructure within the Institute would enable the Expectation to be met.

2.28 In testing this Expectation the review team examined documentary evidence and met with staff, students and clinical placement providers and supervisors.

2.29 The majority of the teaching staff are part-time and either have their own clinical practice or are practicing in other settings as qualified psychotherapists and counsellors, and as such they are engaged with professional and clinical practice. The review team therefore considers the strong integration of professional, personal and clinical practice within the programmes, which enhances student employment prospects, to be **good practice**.

2.30 The Institute has a policy in place for annual programme monitoring and review, which incorporates reflection upon teaching and learning practices. The University undertakes reviews of the programmes validated which are supported by the Institute's Self-Critical Review system. There is a Board of Studies for taught Middlesex programmes which enables all student representatives to meet with staff and discuss the programmes. The committee is accountable to the Joint Staff Student Committee (JSSC) for assuring and

enhancing the quality of the student experience at the programme level. The JSSC is, in its turn, accountable to the Academic Board for assuring and enhancing the quality of the student experience at the Institute.

2.31 There is a Staff Development Register outlining CPD and the Institute are planning to work with Middlesex University to offer its staff the opportunity to complete the Postgraduate Certificate in Higher Education. There is also a proposed new policy for peer observation, and the Institute is working towards biennial peer observation for ongoing staff development from the current triennial approach.

2.32 The need to fully implement the peer review of teaching staff was highlighted in the Specific Course Designation Monitoring visit in March 2016. The review team found that this area is still being addressed, and has yet to be rolled out to all staff delivering the curriculum. Consequently the team **recommends** that the Institute implement appraisal and peer review processes for all teaching staff to improve the quality of teaching practices and student learning opportunities.

2.33 However, the Institute works with staff, students, awarding bodies and PSRBs to monitor and systematically review the provision of learning opportunities and teaching practices to support student development. Therefore the review team concludes that the Expectation is met and that the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B4): Higher education providers have in place, monitor and evaluate arrangements and resources which enable students to develop their academic, personal and professional potential.

Quality Code, Chapter B4: Enabling Student Development and Achievement

Findings

2.34 The Institute has systems and processes in place to address the needs of its specific student cohort, and develops strong partnerships with external employers and PSRBs to ensure that the students have the opportunity to fully develop as practitioners. Staff also bring their individual expertise which is situated within their professional clinical practice.

2.35 The Institute locates responsibilities for monitoring, reviewing and supporting students in their academic and professional development within the roles and responsibilities of relevant staff and the underpinning Committee Structure.

2.36 The Institute's LTEC is accountable to the Academic Board for providing guidance on learning and teaching issues and for developing and collaborating on systematic mechanisms for improving the quality of provision for all students. Monitoring and evaluating is also carried out by the Board of Studies, which relates to taught degree programmes, and by the Joint Staff Student Committee (JSSC). The processes in place facilitate external examiners and students reporting on assessment feedback systems.

2.37 As part of a commitment to a VLE for the students and staff, the Institute introduced an online learning platform and other web-based resources which are developing over the current academic year.

2.38 Professional development opportunities are in place for all support and service staff. There is an annual review for each employee and the HR Officer summarises themes and suggestions for group training needs. Professionally qualified staff are encouraged to maintain and improve skills through CPD. There are academic advisers and academic consultants who work with doctoral students to support their learning and students can buy up to 10 hours extra support.

2.39 The above arrangements would allow the Expectation to be met.

2.40 In considering this Expectation the review team examined student support policies and processes and met with academic and professional support staff, clinical placement providers and students.

2.41 The team were informed that there is no central collection of data for student admissions, retention, progression and achievement, although these details are contained in the individual programme Annual Monitoring Reviews. In order to improve the administration of student data and assist the Head of Academic Quality, the Institute has appointed a Quality and Data Coordinator and is bringing in a new student data system.

2.42 Progression and completion information shows that many students were awarded extensions at the Assessment, Progression and Award Boards. Minutes indicate that in July 2016 the overall completion rate was 64.5 per cent, and that as a consequence the Institute is increasing monitoring of student progression. A recent external examiner's report indicates that staff are successfully working hard to improve completion rates.

2.43 Learning resources are regularly discussed at the JSSC and students highlighted that there are not enough copies of the critical texts available in the libraries and that the

electronic resources could be better organised. However, CD-ROM learning packs have been developed for some modules to support student learning.

2.44 For the undergraduate and taught post-graduate programmes, Middlesex University does not provide the students with access to its library; instead the Institute is required to provide all learning resources. Arrangements have been made with other libraries which the students can access and the Institute's library has extended its opening hours and also has a facility to provide texts to students in alternative formats. The agreements for the joint doctoral programmes with Middlesex University indicate that students can access the University's library and resource systems.

2.45 Support for students with disabilities is in place. Students are aware that library staff have received dyslexia training and that there are plans for a dedicated staff member to support such students from late 2017. A hearing loop has been successfully introduced at the Gunnersbury Avenue campus, and the Library and administrative staff also provide access to a range of pastoral support services. Extensive support is also provided to ensure that students are ready to undertake placements, and placement providers have commented favourably on this, noting that Institute students were specifically well equipped to undertake their placement.

2.46 The review team noted that arrangements were in place within the Institute for students who felt they needed additional support for meeting the written academic requirements, to buy it from academic staff or assistant tutors in order to achieve the required level of academic writing and presentation required for the programmes. However, it was not wholly clear how the Institute demonstrated the differentiation between core and additional support. Therefore, the review team **recommends** the Institute to evaluate the balance between the core academic student support provided within each programme and the extra support offered to students for an additional fee, to ensure that the core level of support is sufficient to allow all students to complete their programme successfully.

2.47 Overall, the Institution has systems, processes and arrangements in place to enable students to develop academically, personally, professionally and as clinical practitioners. The Expectation is therefore met and the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B5): Higher education providers take deliberate steps to engage all students, individually and collectively, as partners in the assurance and enhancement of their educational experience.

Quality Code, Chapter B5: Student Engagement

Findings

2.48 The Institute aims to engage and involve students in quality assurance processes through student representation on committees and student feedback. Student representatives are elected per cohort and attend Institute committees involved with quality assurance including Boards of Study, the Joint Staff Student Committee, and Academic Board. Students are encouraged to work with senior and programme management to effect change at the Institute. The Institute monitors the effectiveness of student engagement initiatives via the Joint Staff Student Committee and Academic Board, and the engagement of students at quality assurance committees and groups.

2.49 The processes in place would allow the Expectation to be met.

2.50 The review team tested the Expectation through meetings with senior staff, teaching staff, students, and professional support staff. The review team also examined documentation relating to student engagement, including committee meeting minutes, student feedback analysis, and the student submission.

2.51 The Institute promotes and engages its students through student surveys, student representatives, and via their attendance at formal meetings. Students are represented at Academic Board and a number of its subcommittees: Quality and Standards Committee, Equality and Diversity Committee, Research Committee, Learning, Teaching and Enhancement Committee, and the Joint Staff Student Committee. The Joint Staff Student Committee is accountable to the Academic Board and is responsible for enhancing the quality of the student experience at the Institute and leads on the development of the student engagement strategy.

2.52 The Institute aims to take a developmental approach with students and staff working collaboratively in decision making; for example, the Institute's Learning, Teaching, and Enhancement strategy was formed following consultations with both students and staff. Similarly, the Institute's Student Charter was developed by the Joint Staff Student Committee. Additionally, the Institute's Programme Design, Development, and Approval Policy encourages staff to engage and consult with students on potential alterations to their courses.

2.53 Student representatives are elected per cohort of each programme. Though student representatives are not provided with formal training, they are supported in their roles by the respective Chairs of each committee they attend. Additional support from professional support staff and programme management is also provided. In meetings during the review visit, the review team heard that the Institute would like to develop its student representative system leading to a more formal and organised student association structure. Despite this being in the early planning stages, the review team heard the Institute hopes this will lead to additional training for student representatives who will then be allocated more responsibility.

2.54 Student surveys provide the opportunity for the Institute to collect quantitative data relating to information, assessment, and teaching on courses. In meetings during the review visit, the Institute indicated that internal student surveys are considered by the Joint Staff Student Committee, Academic Board, and ultimately, the Board of Trustees; however, minutes reflecting discussion of student surveys and other relevant data were

underdeveloped. The review team were advised in meetings with the Institute that the newly appointed Registrar was due to work with the team of Academic Coordinators to improve the robustness of the Institute's approach to considering student surveys and other data.

2.55 The Institute indicated that student engagement in quality assurance is monitored and reviewed regularly; however, the review team found that documentary evidence to this effect was limited. Additionally, the review team found little discussion of student engagement initiatives at committees tasked with monitoring these. Therefore, the review team **recommends** that the Institute strengthen and monitor the effectiveness of arrangements for engaging students as partners in the assurance and enhancement of their educational experience.

2.56 Overall, the Institute has in place processes and procedures for engaging all students, individually and collectively, as partners in the assurance and enhancement of their educational experience. Therefore, notwithstanding the recommendation in this Expectation, the review team concludes that the Expectation is met, and the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B6): Higher education providers operate equitable, valid and reliable processes of assessment, including for the recognition of prior learning, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought.

Quality Code, Chapter B6: Assessment of Students and the Recognition of Prior Learning

Findings

2.57 The Institute's policy, as set out in its Quality and Standards Manual, states that it seeks to ensure that it 'operates equitable, valid and reliable processes of assessment, including for the recognition of prior learning, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought'.

2.58 The university partners hold overall responsibility for the programmes and awards but the setting, marking, moderation and feedback associated with assessment is delegated to the Institute. The approach to assessment forms part of the university approval processes. The Institute operates its own Academic Regulations which are approved by the universities. These include the principles that all assessment should be clear, consistent and appropriate, and that its relationship to the learning outcomes should be clear to students. They also include the rules governing the award of credit, progression between levels, and the conferment of awards.

2.59 Learning outcomes and the way in which they will be assessed are set out in the programme specifications and are included for students in Programme Handbooks.

2.60 The Institute's procedures together with the Universities' oversight would allow the Expectation to be met.

2.61 The review team tested the operation of these processes by reviewing a range of documentation including programme handbooks, assessment briefs and external examiner reports and by meeting students and staff involved in all aspects of the assessment process.

2.62 Programme Handbooks include extensive information on assessment of learning outcomes and are approved annually internally and by Middlesex University prior to release to students. The programme outcomes link clearly to the programme aims and are expressed in terms of knowledge and understanding, cognitive skills, practical skills and graduate skills at each FHEQ level. These are all articulated in the Programme Specifications.

2.63 Module learning outcomes are derived from module aims which link back to the overall programme aims and outcomes. Programme Specifications include a curriculum map showing these links.

2.64 Assessments are set by the Institute staff and are designed to assess module learning outcomes. Assessment briefs provide students with information regarding assessment methods, and indicate links to assessment criteria and grading criteria. All summative assessments are approved by an external examiner appointed by the relevant university.

2.65 The Middlesex University 20 point scale is used for grading assessments with details set out in the Grade Criteria Guide which is made available to students to help them

interpret the assessment criteria against which they are assessed. The principles of assessment set out in the Academic Regulations require there to be a balance of formative and summative assessment as well as the use of a variety of assessment methods.

2.66 The use of moderation and double marking to ensure the assessment process is fair and equitable is a clear requirement in the Quality and Standards Handbook and external examiner reports confirm that it is applied effectively. An Assessment Strategy has been drafted to provide more explicit guidance on the assessment process and is being considered by the LTEC and QSC. It sets out clear expectations on such issues as moderation and sets out a policy on turnaround times for student feedback. Current practice is for students to receive feedback four weeks after submission, usually timed to coincide with an attendance session to enable additional verbal feedback. Students did not report concerns with feedback times, but the draft strategy proposes reducing this to 15 working days.

2.67 In addition to formal assessments students meet on a six-monthly basis with their tutor to review their achievement to date against the intended learning outcomes for the year. Students reported this to be a very positive aspect of the assessment and feedback process.

2.68 The outcomes of assessment are subject to scrutiny by external examiners who have confirmed their satisfaction with the assessment processes. Outcomes are considered and confirmed by the relevant assessment board which is attended by the external examiner and the University Link Tutor as well as the relevant Institute staff. The review team were assured that the Link Tutor or nominee was required to attend all Boards, but saw several examples where no Middlesex University representative was present, including one board where awards were made. This relates to the recommendation made in Expectation 2.1.

2.69 The Institute provides comprehensive and clear guidance to students on Accreditation of Prior Experiential Learning (APEL) including Faculty-specific handbooks. All APEL is against approved module learning outcomes for the programme and was reported in a student meeting as being a clear and supportive process. There are limits set by both the Universities and professional bodies as to the amount of a programme that can be achieved by APEL. It has been used by around 10 students each year and is subject to the same scrutiny as other assessed work including approval by the relevant assessment board.

2.70 The Institute operates equitable, valid and reliable processes of assessment, including for the recognition of prior learning, and there is appropriate oversight by the Universities through external examiners and link tutors. Therefore the Expectation is met and the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B7): Higher education providers make scrupulous use of external examiners.

Quality Code, *Chapter B7: External Examining*

Findings

2.71 For the degrees validated by LSBU the external examiners are appointed by the University and serve the University's Award and Progression Examination Board within the Faculty of Arts and Human Sciences. For the degrees validated by Middlesex University, the Institute is responsible for nominating external examiners with the approval of nominees reserved to the University's Academic Quality Services Committee. In practice, Programme Leaders suggest external examiners which are then considered by the Institute's Quality and Standards Committee before forwarding to the University.

2.72 To enable the external examiners to assess student work a sampling system is in place. The Institute's Quality Manual requires the externals to comment on whether or not the Institute is maintaining threshold academic standards set for their awards in accordance with the Framework for Higher Education Qualifications and applicable Subject Benchmark Statements.

2.73 The arrangements in place would allow the Expectation to be met.

2.74 In considering this Expectation the review team examined relevant committee minutes and reports and met with senior staff, academic staff and a representative from Middlesex University.

2.75 Assessment Boards are in place to ensure that both academic and professional and clinical standards are met. The external examiners report to the universities who forward the report to the Institute for a response. The reports are seen by the CEO, the chair of the QSC, the Head of Academic Quality and the Board of Trustees. Programme Leaders respond to external examiner reports and those responses are considered and approved by the Quality and Standards Committee prior to being returned to the University.

2.76 External examiners are on all three Boards, Assessment, Progression and Award, but are not required to be present for the board to be quorate. If they are unable to be present then arrangements are made for a report to be received, or involvement through video conferencing. Although there are three Boards and each has a distinct set of terms of reference the minutes provided indicate that the Boards are combined. Although the review team noted that some Award Boards have gone ahead without a university nominee present, the process overall requires the Link Tutor or nominee to be present for the Board to be quorate. This cross-refers to Expectations A3.4 and B6.

2.77 External examiner reports form part of the Annual Monitoring Report which each programme team for a programme validated by Middlesex sends to the University. They are also included in the Course Monitoring Reports returned to LSBU, which is considered further in Expectation B8. The review team noted that there was no over-arching review of programmes and action plan for 2016-17, but understand that the Institute is currently working on a system to enable a plenary consideration of all programmes annually. The Institute consults external examiners on changes to summative assessment tasks.

2.78 The Institute makes good use of its external examiners and their reports, and the review team therefore concludes that the Expectation is met and the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B8): Higher education providers, in discharging their responsibilities for setting and maintaining academic standards and assuring and enhancing the quality of learning opportunities, operate effective, regular and systematic processes for monitoring and for review of programmes.

Quality Code, Chapter B8: Programme Monitoring and Review

Findings

2.79 The Institute's Quality and Standards Manual states that the principles of annual programme monitoring and periodic review include ensuring the programmes are of an appropriate standard and quality and continue to meet the needs of the student community in terms of curriculum, employability, learning, teaching and assessment. Programmes are subject to annual monitoring and review in the autumn term each year. An annual monitoring report is completed by the Programme Leader in consultation with the programme team following the guidance provided by the Institute. It is considered internally by QSC and Academic Board and also submitted to the relevant University.

2.80 The Institute's Quality and Standards Manual also refers to the periodic review of programmes as a process typically undertaken once every five years to confirm that programmes are of an appropriate academic standard and quality.

2.81 The Institute's procedures together with the oversight of each University would allow the Expectation to be met.

2.82 The review team tested the operation of these processes by reviewing a range of documentation including committee minutes, programme monitoring and review reports, and by meeting academic, management and support staff and students.

2.83 Programmes are reviewed periodically by each University as set out in their Memoranda of Co-operation. The periodic programme review process for Middlesex programmes involves a self-critical review of the programme. This review, together with a range of programme-related evidence including performance data, is considered by a University appointed panel. A report is produced and any conditions and recommendations are then responded to by the Institute.

2.84 The Institute has a Programme Review Policy which covers annual monitoring and review but does not refer to periodic review. The annual monitoring reports are prepared using the relevant university template with Middlesex University requiring an Annual Monitoring Report (AMR) and LSBU a Course Monitoring Report (CMR). These both include progression and achievement data and refer to external examiner reports to provide assurance that threshold standards are being set and met. The external examiner is asked to confirm that standards achieved are at the right level for the qualification. The annual monitoring reports include an action plan and follow up of actions from previous years.

2.85 For Middlesex programmes the review team saw a range of AMRs which included appropriate consideration of the programmes together with actions and their follow-through and made reference to external examiner comments. The review team also noted evidence of consideration of these reports by Middlesex University, which included written feedback from the Link Tutor to the Institute.

2.86 LSBU gave notice to the Institute in November 2016 that it was terminating its agreement to award the MA Psychological Coaching and MSc Coaching Psychology but would ensure that current students' interests were protected. As the programmes run on a calendar year basis, the last recruitment to these programmes was January 2016 and

arrangements were made to allow the existing students to complete.

2.87 For these programmes the review team found that the most recent CMR covered delivery during the 2015 calendar year. The last response from the Institute to an external examiner report was dated April 2016 although the external examiner did attend the most recent Assessment Board in January 2017. The Institute contacted LSBU in October 2017 to ask if a CMR was required for 2016 and as it did not receive confirmation back from LSBU of such a requirement no report was produced. In addition to no annual monitoring report being produced for 2016, the course was not formally reviewed by any of the Institute's committees. The review team heard that the Programme Team had decided that an informal approach to programme monitoring was adequate during its run-out period and that, as the external examiner had raised no concerns, a response to her report was not needed. QSC has within its terms of reference responsibility to 'consider and approve all annual and periodic monitoring reports at both the programme and modular level' but this decision at programme level was not discussed or recorded in any QSC minutes nor was any comment made in those minutes about an annual report not being available. The review team concludes that the monitoring of LSBU programmes in this time period did not meet the requirements of either the Institute or of LSBU.

2.88 QSC has primary responsibility for considering and ensuring follow-through of all annual monitoring reports. In February 2016 QSC members reviewed the AMRs for 2014-15 and resolved that actions from the AMRs would be included in the Quality and Enhancement (QAE) action plan. In July 2016 QSC decided to build on the success of this approach and hold the plenary in advance of submission so that it could take the form of an approval meeting as well as an enhancement exercise, although it felt this would be too difficult to achieve for the 2015-16 reports. In October 2017 QSC reported that the intended peer review of 2016-17 AMRs prior to submission had not been achieved and agreed that peer review was to be encouraged for the following year. Concern was also expressed at that meeting about ensuring Programme Leaders value the report mechanism, a lack of consistency in the use of data and that issues raised by the Quality Department had not been recognised by the Faculty. There is no Institute-level report summarising or evaluating the outcomes of annual monitoring reports or the process although it has now been agreed by QSC that the Head of Academic Quality should devise a summary report on 2016-17 AMRs. There is recognition among the senior team that improvements could be made to the oversight of annual monitoring and they feel the revised faculty structure will be helpful in achieving this. The review team concludes that the process for institutional-level monitoring of annual monitoring reports was inconsistent and unclear.

2.89 In addition to the annual monitoring reports, the effectiveness of learning and teaching is monitored and evaluated through student feedback. Student feedback mechanisms include qualitative methods such as Boards of Studies, internal surveys and the NSS published results. While good use is made of regular programme-level feedback questionnaires the number of responses to the Institute-wide survey has been low with just 30 students taking part in 2017 compared to 90 the previous year. JSSC and Academic Board have considered the results of both internal surveys and the NSS but this has not been consistent and no consideration for surveys of 2015-16 delivery was evident. This was attributed to staff changes and a decision to run a specific survey about a potential student association. In November 2017 JSSC did discuss the NSS and the Institute's own survey results, including the low response rates, but there were no associated actions. The review team concluded that there is no consistent, routine consideration of survey results and actions and no clear strategy in place to increase student participation and the value of the survey processes.

2.90 The review team **recommends** that the Institute should review and improve its processes for monitoring and review of programmes in order to ensure they are effective,

regular and systematic and provide an appropriate level of institutional oversight in assuring and enhancing the quality of learning opportunities.

2.91 The Institute has systems and processes for monitoring and reviewing its programmes. However, the application of these processes, especially in relation to Institutional-level monitoring of annual reports, and to the systematic consideration of student survey outputs was inconsistent and unclear. Therefore the team conclude that the Expectation is not met, and the shortcomings in terms of the rigour with which these systems are applied makes the level of risk moderate.

Expectation: Not met

Level of risk: Moderate

Expectation (B9): Higher education providers have procedures for handling academic appeals and student complaints about the quality of learning opportunities; these procedures are fair, accessible and timely, and enable enhancement.

Quality Code, Chapter B9: Academic Appeals and Student Complaints

Findings

2.92 The Institute has both an academic appeals and student complaints policy. Students may submit complaints directly to the Institute and, if they are dissatisfied with the outcome of their complaint, they may approach the relevant awarding body to request an external review of their complaint.

2.93 The Institute is a member of the Office of the Independent Adjudicator's Higher Education scheme; therefore, students may access the Office of the Independent Adjudicator (OIA) once internal processes have been exhausted. Academic appeals are dealt with, in the first instance; internally by the Institute with students able to take appeals to the relevant awarding partner should the outcome of their academic appeal be unsatisfactory.

2.94 The processes in place would allow the Expectation to be met.

2.95 The review team tested the Expectation through meetings with senior staff, teaching staff, students, and student representatives. The review team also examined documentation relating to student complaints and academic appeals in the context of the respective awarding bodies' academic framework.

2.96 The Institute's complaints policy describes the processes by which a student can submit a non-academic student complaint. The Institute is currently consulting on an updated policy. The policy clearly distinguishes between an academic appeal, ethical complaint and non-academic student complaint and which students may submit to the Institute. Students are encouraged to resolve complaints at the informal complaint stage through talking to their Faculty Head. In the event a complaint cannot be resolved through informal means, students may submit a formal complaint to the Academic Quality Manager who will appoint an alternative Faculty Head to investigate the complaint. There is a clear process for this to be escalated and students can ultimately appeal the decision to the Academic Quality Manager. If this does not lead to an acceptable resolution, the complainant may then submit an appeal to the OIA.

2.97 Students who believe their work has been marked unfairly, inconsistently, or not in accordance with the standards and level required by the awarding body have the right to appeal against the mark or final outcome. The Institute's academic appeals policy outlines the process for submitting an academic appeal. In the first instance, students are encouraged to approach the Chair of the appropriate Assessment Board prior to submitting an appeal. In the event a student wishes to submit a formal academic appeal this must be via the Academic Quality Manager. Students on validated and joint programmes may, if they consider the outcome of their academic appeal is unsatisfactory, make an appeal to either awarding partner.

2.98 The Institute reports instances of non-academic complaints and academic appeals to the Quality and Standards Committee and Academic Board. Information on submitting a non-academic complaint and academic appeal is included in the Institute's student handbooks, via the Institute's website and on the virtual learning environment. Information on the Institute's complaints and appeals processes is also provided to students during their

induction process.

2.99 The Institute, in collaboration with its awarding bodies, has effective procedures for handling academic appeals and student complaints. Therefore, the review team concludes that the Expectation is met, and the level of risk is low.

Expectation: Met

Level of risk: Low

Expectation (B10): Degree-awarding bodies take ultimate responsibility for academic standards and the quality of learning opportunities, irrespective of where these are delivered or who provides them. Arrangements for delivering learning opportunities with organisations other than the degree-awarding body are implemented securely and managed effectively.

Quality Code, Chapter B10: Managing Higher Education Provision with Others

Findings

2.100 In order to provide competent graduates who meet PSRB requirements, all students registered on the relevant undergraduate or postgraduate taught programmes are required to undertake defined amounts of clinical practice and also to be subject to personal therapeutic counselling and ongoing work-based supervision. The majority of clinical practice is undertaken in organisations which are external to the Institute.

2.101 There is an extensive Placement Handbook which details how a placement is to be sourced, commenced, completed and reported upon. The Institute has a database of over 300 potential placement providers which students can access. It is the responsibility of students to set up placements, normally in a different setting each academic year, thus providing a range of counselling experiences. Students normally undertake clinical placements with an external counselling/psychotherapy organisation who are required to meet PSRB standards and where the organisation's staff and therapists are members of the PSRB. Assessment of competence is undertaken by teaching staff of the Institute and by the supervisors based in the clinical practice areas who are also members of the relevant PSRB.

2.102 The Institute has a Placements Coordinator who supports the students to set up their clinical practice and a Clinical Placements Officer. Both of these members of staff are graduates of the Institute and trained psychotherapists and thus know the systems and processes that the students need to go through. Students are required to complete and submit a 'Placement Record' prior to the start of their placement. Once this is complete, students must complete the 'Placement Agreement, which outlines the responsibilities of each party and is countersigned by the student, the placement provider, and a representative from the Institute.

2.103 Supervisors are involved in the assessment process, reporting on the competency of the student. They are also required to report immediately on any breaches of the Metanoia Institute/UKCP/BACP Code of Ethics or report where there is a lack of competence.

2.104 These arrangements and processes would allow the Institute to meet this Expectation.

2.105 The review team examined placement policies and guidance for staff and students, and also held meetings with the staff, the students and clinical placement providers.

2.106 All of the clinicians and the majority of teaching staff are members of the relevant PSRB, as are the supervisors in the clinical placements. As a result the ethos, ethics and practices of the relevant professions are embedded in the work of the Institute.

2.107 Students are able, if they wish, to undertake a first placement through the Institute's own service: the Metanoia Counselling and Psychotherapy Service (MCPS). This has advantages for the students in that they are able to gain experience through the placement and then progress on to more complex work with other providers in the region. Many of the placement providers require previous experience in providing counselling and

psychotherapy. The opportunities for students to gain initial clinical and professional experience through the Metanoia Counselling and Psychotherapy Service (MCPS), which facilitates their transition into placement, is **good practice**.

2.108 Students are required to make their own contract with a supervisor and to pay the supervisor directly. The Institute maintains a list of approved supervisors within the clinical placements, whom the students may contact. Many of the approved supervisors are themselves graduates of the Institute.

2.109 The Institute maintain strong relationships with other universities and with clinical provision of counselling and psychotherapy services. There are joint teaching activities with the Anna Freud Centre and the Tavistock Centre (Tavistock and Portman NHS Trust). Members of staff are also members of the various PSRBs and some serve on the governing bodies of those organisations.

2.110 The arrangements for delivering learning opportunities with organisations other than the degree-awarding body are implemented safely and securely and managed effectively by the Institute. The review team therefore concludes that the Expectation is met and that the level of risk is low.

Expectation: Met
Level of risk: Low

Expectation (B11): Research degrees are awarded in a research environment that provides secure academic standards for doing research and learning about research approaches, methods, procedures and protocols. This environment offers students quality of opportunities and the support they need to achieve successful academic, personal and professional outcomes from their research degrees.

Quality Code, *Chapter B11: Research Degrees*

Findings

2.111 The Institute offers DPpsych joint research degrees validated by Middlesex University, and the relationship between the Institute and Middlesex University is outlined in formal partnership documentation.

2.112 Under the current arrangement, the Institute applies and adheres to the Middlesex University academic regulations. The Institute's Academic Board and Research Committee are responsible for managing delivery and provision of research degrees in collaboration with Middlesex University. Staff involved in the delivery of research degree programmes are mostly active researchers or practicing clinicians who contribute to the Institute's active research environment.

2.113 The processes and documentation in place would allow the Expectation to be met.

2.114 The review team tested this Expectation through meetings with senior staff, teaching staff, students, and a representative from Middlesex University. The review team also examined documentation relating to the delivery and maintenance of research degrees.

2.115 The Institute has a long-standing relationship with Middlesex University with which the Institute awards a number of research degrees. The Faculty of Post-Qualification and Professional Doctorates oversees the work of staff and students involved in the Doctorate in Psychotherapy (by public works and professional studies), Doctorate in Counselling Psychology (by professional studies), and PhD. Staff involved in the delivery of research degrees are required to undertake relevant research and other scholarly activity supported through funding from a dedicated research budget.

2.116 Selection procedures are designed to ensure that only qualified applicants are admitted as per the Institute's admissions policy. Prospective students apply via the Institute's website and are invited to attend a study weekend. The decision to make an offer to an applicant rests with the programme and faculty management. Once the admissions process has concluded the Registrar is responsible for managing the student registration and enrolment process.

2.117 Supervision is carried out by carefully selected Academic Advisors and Academic Consultants. Within the Institute, academic advisers offer guidance relating to students' progression through the entire programme until the sought-after award is achieved. Academic Consultants are senior academics or experts who are able to fulfil a specialist or subject-consult in the particular research topic. The review team heard from students a high degree of satisfaction with the level of supervision at the Institute. Student progression is monitored through routine supervision events and through the completion of compulsory modules. Examiners, recommended by teaching staff and faculty leadership, are approved by Middlesex University.

2.118 Staff delivering the programmes are mostly active researchers. They are also required to engage in continual professional development such as undertaking research or

other scholarly activity, presentations at relevant conferences, and achieving publication in peer-reviewed professional journals. There is a central budget within the Institute from which staff are encouraged to seek funding for their research projects.

2.119 There is a rich research culture within the Institute developed by the Research Committee, and it has developed a programme of research seminars with students and staff invited to present their work and receive feedback. In addition to the internal research community, the Institute has sought to engage with the international research community by hosting conferences.

2.120 Research students at the Institute read for their degree in a secure and supportive academic and professional environment. The review team therefore concludes that the Expectation is therefore met, and the level of risk is low.

Expectation: Met
Level of risk: Low

The quality of student learning opportunities: Summary of findings

2.121 In reaching its judgement about the quality of student learning opportunities, the review team matched its findings against the criteria in Annex 2 of the published handbook.

2.122 There are eleven Expectations in this judgement area, and ten of these are met, all with a low risk. In relation to Expectation B8 the review team concludes that it was not met, with a moderate risk. This relates to the systems and processes which the Institute has for monitoring and reviewing its programmes. The application of these processes, especially in relation to Institutional-level monitoring of annual reports, and to the systematic consideration of student survey outputs was inconsistent and unclear. It is therefore recommends that the Institute should review and improve its processes for monitoring and review of programmes in order to ensure they are effective, regular and systematic and provide an appropriate level of institutional oversight in assuring and enhancing the quality of learning opportunities.

2.123 There are three other recommendations in this area. One relates to Expectation B3, encompassing the extension of appraisal and review processes to all teaching staff, and another to Expectation B4 regarding evaluation of the balance between the core academic student support provided within each programme and the extra support offered to students for an additional fee

2.124 The third of these recommendations is in respect of Expectation B5, which links to Enhancement, and concerns the strengthening and monitoring of the effectiveness of arrangements for engaging students as partners

2.125 The review team also identified two instances of good practice in relation to student learning opportunities, and these surrounded the strong integration of professional, personal and clinical practice within the programmes (Expectation B3), and the opportunities for students to gain initial clinical and professional experience through the Metanoia Counselling and Psychotherapy Service (MCPS) (Expectation B10).

2.126 The review team concludes that the quality of student learning opportunities at the provider **meets** UK expectations.

3 Judgement: The quality of the information about learning opportunities

Expectation (C): UK higher education providers produce information for their intended audiences about the higher education they offer that is fit for purpose, accessible and trustworthy.

Quality Code, Part C: Information about Higher Education Provision

Findings

3.1 The Institute has a formal policy that outlines the institutional approach to managing the sign-off and provision of published information. This does not formally include the Institute's approach to reviewing published information to ensure its continuing appropriateness and accuracy, although established processes to ensure published information remains fit for purpose are in place.

3.2 The Institute's website and VLE is their primary method for communicating with prospective students, members of the public, current students, and staff. The Institute uses both hard copy and digital media in order to inform prospective and current students about its higher education offer. The Institute works with its awarding bodies, senior management, and programme management to ensure the information they publish is fit-for-purpose, accessible, and trustworthy.

3.3 The processes in place would allow the Expectation to be met.

3.4 The review team tested the Expectation through meetings with senior staff, Programme Leaders, students, and professional support staff. The review team also examined documentation relating to the publication and management of published information for the public, students, staff, and those involved with managing quality processes.

3.5 The Institute uses its external website and internal VLE as the main two channels through which it disseminates information to the public, prospective students, current students, graduates, and staff. Information relating to programme structure, fees, and other such information pertinent to prospective students is communicated by the Institute's website. The Institute promotes its higher education courses online and through traditional outreach events, such as careers workshops. Applicants are encouraged to contact the Institute prior to making an application.

3.6 The Institute's public information policy outlines the Institute's approach to managing the sign-off and provision of published information. In order to ensure the accuracy of information there are responsibilities defined for approval and sign off of marketing materials and other published information. During the review visit, the Institute highlighted the progress to date in implementing a more formal approach to the management of information while acknowledging that additional work would further improve the robustness of the Institute's internal approval processes. The Institute's senior management team work closely with the its awarding bodies to ensure effective oversight of the management of information.

3.7 Successful applicants undergo an induction programme designed by Academic Coordinators. Induction information covers activity within the Institute and additional details specific to each course. Additionally, programme handbooks are provided to all students and outline the content of each course, as well as providing information relating to assessment. Students are also provided with an information handbook that focuses on housekeeping (fire

procedures, health and safety, for example) to supplement programme handbooks.

3.8 The Institute has recently introduced a new VLE to enhance teaching and learning. During the review visit, the review team heard from both students and staff that although the introduction of the new VLE has not been without issue, where it has been taken up by academic staff it has clearly impacted on the student learning experience positively. The Institute is continuing to develop this initiative with a view to fully implementing the VLE over the current academic year.

3.9 Important policies, such as the Institute's Academic Regulations and Quality and Standards Manual, are available via the Institute's website. Staff undergo an induction process during which the Institute's policies relating to academic standards are disseminated. Staff are also provided with a staff handbook that outlines useful information about employment with the Institute and outlines the expectations of each party.

3.10 Overall, the review team concludes that the Institute produces information that is fit for purpose, accessible, and trustworthy. Therefore, the Expectation is met, and the associated level of risk is low.

Expectation: Met
Level of risk: Low

The quality of the information about learning opportunities: Summary of findings

3.11 In reaching its judgements about the quality of the information regarding student learning opportunities, the review team matched its findings against the criteria specified in Annex 2 of the published handbook.

3.12 The one Expectation in this judgement area is met, with a low level of risk. There are no recommendations in this judgement area, no areas of good practice, and no affirmations.

3.13 The review team concludes that the quality of the information about learning opportunities at the provider meets UK expectations.

4 Judgement: The enhancement of student learning opportunities

Expectation (Enhancement): Deliberate steps are being taken at provider level to improve the quality of students' learning opportunities.

Findings

4.1 The Institute has developed its Learning, Teaching and Enhancement Strategy on the basis that enhancing the student experience has always been a high priority. The strategy articulates the Institute's commitment to systematically improving the quality of its provision and the ways in which its students' learning is supported. It was developed from the perspective of first recognising good practice and then sharing it with internal and external peers.

4.2 The strategy commits the Institute to systematically improving the quality of provision and the ways in which students' learning is supported. It also articulates the Institute's strategic learning and teaching priorities which include improving support for student learning; encouraging staff to enhance their teaching practice; improving quality; enabling the production of graduates equipped to achieve success; embedding a research ethos; and fostering a culture of continuous enhancement and improvement throughout the Institute.

4.3 The Institute's strategy for enhancement of students' learning opportunities would allow the Expectation to be met.

4.4 The review team tested the effectiveness of this strategy by reviewing a range of documentation including the Institute's Vision 2020, programme reviews and committee minutes and by meeting relevant staff, students and placement providers.

4.5 The Learning, Teaching and Enhancement Strategy was agreed by LTEC in November 2015 and approved by Academic Board in January 2016. This followed on from an earlier discussion at LTEC that gave a sense of the Institute recognising the need to move to a more formal approach. Since approval it has appeared as a standing item on LTEC but with very little discussion until October 2017 when it was reported that the strategy was not yet fully formed and was agreed that it needed to be developed and made into an operational document reflecting the ethos of enhancement at the Institute.

4.6 The review team felt that the lack of oversight described in Expectation B8 in relation to annual monitoring and student surveys were good examples of insufficient attention being given to the Institute's agreed Learning, Teaching and Enhancement Strategy and would therefore encourage the Institute to develop its strategy as recently agreed by LTEC. Furthermore, within Expectation B5, the review team found that there was little discussion of student engagement initiatives at relevant committees, and highlighted this within a recommendation in that section. However, overall there are some positive examples of deliberate steps being taken to improve the quality of students' learning opportunities.

4.7 A new four faculty structure has recently been introduced in which each Faculty Head has operational management responsibility for their Faculty which includes a specific cohesive portion of the academic portfolio plus line management of related academic, administrative and support staff. The review team heard from staff and students that this change has already led to greater sharing of good practice and associated enhancement such as improved support for students with special needs. The students were particularly positive about the change to delivery times which now means that all students studying the

same modality attend on the same days and interact informally and constructively with others on related programmes. Research students also welcomed their relocation to a research hub which allowed greater interaction with other research students and staff.

4.8 The strategic objectives of the Institute include developing a research active culture within each Faculty and it has set itself a target to develop a stronger research community within the Institute by providing more opportunities for students to engage with research activity and increase students' understanding and involvement with research through practical experience. The review team saw and heard a range of examples of the research activity of the Institute involving both staff and students. These included a longitudinal international research project into student development during training led by the Society for Psychotherapy Research; a schedule of monthly research seminars; and an ESRC funded collaborative research project into school-based counselling with the University of Roehampton as the lead university partner. All Faculty Heads and full-time academic staff are active researchers, and the Institute has recently started to create a physical 'research hub' to encourage greater interaction and sharing. Both students and staff reported positively on the research ethos of the Institute and the opportunities and advantages this offers them in terms of their learning experience and their professional development.

4.9 The review team considers that the Institute's development of its research environment in order to enhance the experience of both students and staff is **good practice**.

4.10 In order to ensure all students are able to gain practice-based experience the Institute has established the Metanoia Counselling and Psychotherapy Service (MCPS). This is a research clinic which offers placements exclusively to Metanoia trainees and in particular students beginning their practice so allowing them to build their clinical experience and learn to evaluate therapeutic practice alongside counselling skills with students being trained to use standardised evaluation methods. The review team heard from placement providers how this approach means that students from the Institute are well-prepared for their later placements and at an advantage over other students. This is identified in Expectation B10 as good practice.

4.11 Although the review team felt that enhancement had not yet been fully embedded it did see evidence of the Institute taking deliberate steps to improve the quality of students' learning opportunities. The review team concludes that the Expectation is met and the level of risk is low.

Expectation: Met
Level of risk: Low

The enhancement of student learning opportunities: Summary of findings

4.12 In reaching its judgement about the enhancement of student learning opportunities, the review team matched its findings against the criteria specified in Annex 2 of the published handbook.

4.13 The Expectation is met, with a low risk, and the review team identified one area of good practice, which relates to the Institute's development of its research environment, in order to enhance student and staff engagement with research opportunities.

4.14 One cross-referenced recommendation was made, which links to Expectation B5, and relates to strengthening and monitoring the effectiveness of arrangements for engaging students as partners in the assurance and enhancement of their educational experience.

4.15 The review team concludes that the enhancement of student learning opportunities at the provider **meets** UK expectations.

Glossary

This glossary is a quick-reference guide to terms in this report that may be unfamiliar to some readers. Definitions of key operational terms are also given on pages 21-24 of the [Higher Education Review \(Alternative Providers\) handbook](#).

If you require formal definitions of other terms please refer to the section on assuring standards and quality: www.qaa.ac.uk/assuring-standards-and-quality.

User-friendly explanations of a wide range of terms can be found in the longer Glossary on the QAA website: www.qaa.ac.uk/Pages/GlossaryEN.aspx.

Academic standards

The standards set by **degree-awarding bodies** for their courses (programmes and modules) and expected for their awards. See also **threshold academic standard**.

Award

A qualification, or academic credit, conferred in formal recognition that a student has achieved the intended **learning outcomes** and passed the assessments required to meet the academic standards set for a **programme** or unit of study.

Awarding organisation

An organisation authorised to award a particular qualification; an organisation recognised by Ofqual to award Ofqual-regulated qualifications.

Blended learning

Learning delivered by a number of different methods, usually including face-to-face and e-learning (see **technology enhanced or enabled learning**).

Credit(s)

A means of quantifying and recognising learning, used by most institutions that provide higher education **programmes of study**, expressed as numbers of credits at a specific level.

Degree-awarding body

A UK higher education provider (typically a university) with the power to award degrees, conferred by Royal Charter, or under Section 76 of the Further and Higher Education Act 1992, or under Section 48 of the Further and Higher Education (Scotland) Act 1992, or by Papal Bull, or, since 1999, granted by the Privy Council on advice from QAA (in response to applications for taught degree awarding powers, research degree awarding powers or university title).

Distance learning

A course of study that does not involve face-to-face contact between students and tutors but instead uses technology such as the internet, intranets, broadcast media, CD-ROM and video, or traditional methods of correspondence - learning 'at a distance'. See also **blended learning**.

Dual award or double award

The granting of separate awards (and certificates) for the same **programme** by two **degree-awarding bodies** who have jointly delivered the programme of study leading to them. See also **multiple award**.

e-learning

See technology enhanced or enabled learning.

Enhancement

The process by which higher education providers systematically improve the quality of provision and the ways in which students' learning is supported. It is used as a technical term in our review processes.

Expectations

Statements in the **Quality Code** that set out what all UK higher education providers expect of themselves and each other, and what the general public can therefore expect of them.

Flexible and distributed learning

A programme or module that does not require the student to attend classes or events at particular times and locations. See also **distance learning**.

Framework

A published formal structure. See also **framework for higher education qualifications**.

Framework for higher education qualifications

A published formal structure that identifies a hierarchy of national qualification levels and describes the general achievement expected of holders of the main qualification types at each level, thus assisting higher education providers in maintaining academic standards. QAA publishes the following frameworks: *The Framework for Higher Education Qualifications in England, Wales and Northern Ireland* (FHEQ) and *The Framework for Qualifications of Higher Education Institutions in Scotland* (FQHEIS).

Good practice

A process or way of working that, in the view of a QAA review team, makes a particularly positive contribution to a higher education provider's management of academic standards and the quality of its educational provision. It is used as a technical term in QAA's audit and review processes.

Learning opportunities

The provision made for students' learning, including planned study, teaching, assessment, academic and personal support, and resources (such as libraries and information systems, laboratories or studios).

Learning outcomes

What a learner is expected to know, understand and/or be able to demonstrate after completing a process of learning.

Multiple awards

An arrangement where three or more **degree-awarding bodies** together provide a single jointly delivered **programme** (or programmes) leading to a separate **award** (and separate certification) of each awarding body. The arrangement is the same as for **dual/double awards**, but with three or more awarding bodies being involved.

Operational definition

A formal definition of a term, establishing exactly what QAA means when using it in reviews and reports.

Programme (of study)

An approved course of study that provides a coherent learning experience and normally leads to a qualification.

Programme specifications

Published statements about the intended **learning outcomes** of programmes of study, containing information about teaching and learning methods, support and assessment methods, and how individual units relate to levels of achievement.

Quality Code

Short term for the UK Quality Code for Higher Education, which is the UK-wide set of **reference points** for higher education providers (agreed through consultation with the higher education community, and published by QAA), which states the **Expectations** that all providers are required to meet.

Reference points

Statements and other publications that establish criteria against which performance can be measured.

Self-evaluation document

A report submitted by a higher education provider, assessing its own performance, to be used as evidence in a QAA review.

Subject Benchmark Statement

A published statement that sets out what knowledge, understanding, abilities and skills are expected of those graduating in each of the main subject areas (mostly applying to bachelor's degrees), and explains what gives that particular discipline its coherence and identity.

Technology enhanced or enabled learning (or e-learning)

Learning that is delivered or supported through the use of technology.

Threshold academic standard

The minimum acceptable level of achievement that a student has to demonstrate to be eligible for an academic **award**. Threshold academic standards are set out in the national **frameworks** and **Subject Benchmark Statements**.

Virtual learning environment (VLE)

An intranet or password-only interactive website (also referred to as a platform or user interface) giving access to **learning opportunities** electronically. These might include such resources as course handbooks, information and reading lists; blogs, message boards and forums; recorded lectures; and/or facilities for online seminars (webinars).

Widening participation

Increasing the involvement in higher education of people from a wider range of backgrounds.

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