

# Application for taught degree awarding powers: Anglo-European College of Chiropractic

## Scrutiny team report

November 2015

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## About this report

This report reflects the findings of a team appointed by the Quality Assurance Agency for Higher Education (QAA) to conduct a detailed scrutiny of an application from the Anglo-European College of Chiropractic for the power to award taught degrees.

The application was considered under criteria approved by Government in 2004. In advising on applications, QAA is guided by the relevant criteria and the associated evidence requirements. QAA's work in this area is overseen by its Advisory Committee on Degree Awarding Powers (ACDAP), a subcommittee of the QAA Board.

ACDAP's initial consideration of applications establishes whether an applicant has made a case to proceed to detailed scrutiny of the application and the evidence on which it is based. If satisfied on this matter, ACDAP agrees that a team may be appointed to conduct the scrutiny and prepare a report, enabling ACDAP to determine the nature of the recommendation it will make to the QAA Board.

Scrutiny teams produce reports following each of the engagements undertaken. The final report reflects the team's findings and is structured around the four main criteria contained in the 2004 TDAP criteria,<sup>1</sup> namely:

- governance and academic management
- academic standards and quality assurance
- scholarship and the pedagogical effectiveness of academic staff
- the environment supporting the delivery of taught higher education programmes.

Subject to the approval of the Board, QAA's advice is communicated to the appropriate minister. This advice is provided in confidence. The minister determines whether it should be disclosed to the applicant. A final decision on an application, and the notification of that decision, is a matter for the Privy Council.

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<sup>1</sup> The TDAP criteria are available in Appendix 1 of the Department for Business, Innovation and Skills' *Applications for the grant of taught degree awarding powers, research degree awarding powers and university title: Guidance for applicant organisations in England and Wales (August 2004)* at [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/32388/11-781-applications-for-degree-awarding-powers-guidance.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/32388/11-781-applications-for-degree-awarding-powers-guidance.pdf) (PDF, 304KB).

## Executive summary

### Governance and academic management

The Anglo-European College of Chiropractic is a well-established institution, which celebrated its 50th anniversary in 2015. Since 2005 it has been an Associate College of Bournemouth University, the highest status with the greatest level of autonomy offered by the University to partner institutions. Its application is fully supported by the University. It is a well-respected and major provider of chiropractic and musculoskeletal healthcare higher education with recognition of its qualifications by the key professional bodies.

It is governed by a highly competent Board of Governors, which also acts as trustee in relation to the College's charitable status. In 2014-15, the College set a deficit budget which it was well able to finance from its strong balance sheet, and introduced corrective action to enhance its revenues so that a return to surplus is anticipated in the 2015-16 budget.

It has an able and experienced managerial staff and, while managing an exceptional wide range of activities over 2014-15, there is consistent evidence that this is being done effectively. The College has a comprehensive structure of governance, management and academic committees, with clear terms of reference, membership and reporting lines. It has reviewed and, where necessary, revised these structures to ensure degree awarding powers will be supported by an effective governance and academic management framework. The College demonstrates a commitment to the regular, systematic and self-critical review of academic policies and has the depth of knowledge and experience required for the safe delivery of its own awards.

Under its current arrangements with its University partner, the College has delegated authority to manage the assessment of students and the processing of student results, which are then uploaded to the University's student record system. During the 2014 assessment board for the undergraduate Chiropractic degree programme, a processing error resulted in a small number of students receiving the incorrect degree classification. As soon as this error was detected, the College took appropriate action to safeguard the affected students, undertook a rigorous investigation of the source of the problem and introduced procedural changes to ensure the error would not happen again. The operation of the 2015 assessment boards saw no recurrence of the problem and the revised policy measures were working effectively.

### Academic standards and quality assurance

The College is well managed and demonstrates self-criticality. It has experience of developing its own regulatory framework, policies and procedures to secure the standards of the awards it delivers, and of handling its own programme development and modification processes. The General Chiropractic Council very recently commended the shared strategic vision among the staff and the enhanced inter-professional learning environment within the College. At the 2015 summer examination board, Bournemouth University expressed confidence in the College's management of the assessment process. The scrutiny team is confident that the planned regulations, policies and procedures under development in anticipation of achieving taught degree awarding powers are well considered and will ensure the security of academic standards.

The College makes good use of externality and staff are confident in their understanding of the UK Quality Code for Higher Education (Quality Code) and the requirements of the relevant professional bodies. There is evidence that the College discharges its regulatory responsibilities competently.

## **Scholarship and the pedagogical effectiveness of academic staff**

The College has suitably qualified, experienced and respected staff who are competent to teach, facilitate learning and undertake assessment to the levels required by the programmes offered. The College has effective policies and practices to maintain and enhance its scholarship, research and pedagogic practices in the future. There is a strong symbiotic relationship between the College and the chiropractic profession, which enriches the curriculum and the student experience. The College plays a significant role in chiropractic scholarship, research and governance.

## **The environment supporting the delivery of taught higher education programmes**

The College has a range of well-equipped teaching and learning facilities, with up-to-date resources that are relevant to the College's programmes. The purpose-built clinic and Centre for Ultrasound Studies offer appropriate equipment and facilities for student learning and observation and for patient-centred practice. Library and online journal resources are good. The College is moving towards a central, interactive portal for student learning needs.

The College provides a very supportive environment for the full student journey from induction to graduation and beyond. Support is tailored to the circumstances and needs of individual students: by level, mode of attendance and location. The team found that student progress is monitored very carefully. The data used is accurate, secure and accessible. The team witnessed sound monitoring and decision-making based on this data.

The College gives full recognition to student representation and the student voice in its academic decision-making. The views of students are regularly and routinely sought and considered, and appropriate responses are made. Communication between the senior management team and staff is open and regular.

## **Privy Council's decision**

The Privy Council's decision is to grant the Anglo-European College of Chiropractic taught degree awarding powers for six years from 24 May 2016 to 23 May 2022.

## Introduction

This report provides a summary of the work and findings of the scrutiny team (the team) appointed by QAA to review in detail the evidence submitted in support of an application for taught degree awarding powers (TDAP) by the Anglo-European College of Chiropractic (the College).

The application was considered by QAA's Advisory Committee on Degree Awarding Powers (ACDAP) in May 2014, when the Committee agreed to proceed to the detailed scrutiny of the application. The team appointed to conduct the detailed scrutiny comprised Emeritus Professor Brian Anderton, Emeritus Professor Geoffrey Channon, Mrs Trudy Stiles and Mr David Batty (scrutiny secretary). The detailed scrutiny was managed on behalf of QAA by Mr Alan Weale, Assistant Director.

The detailed scrutiny began in October 2014, culminating in a report to ACDAP in November 2015. In the course of the scrutiny, the team read a wide range of documents presented in support of the application. The team also spoke to a range of stakeholders and observed meetings and events pertinent to the application. ACDAP's consideration of the final report suggested that it would be helpful for a sub-panel of the Committee to visit the College to explore further several areas of particular relevance to Criterion A Governance and Academic Management. The sub-panel's report from the visit (see Appendix) was considered by ACDAP at its meeting in February 2016.

### Key information about the College

The Anglo-European College of Chiropractic was founded in 1960, taking its first students in 1965. It offers the following Bournemouth University degrees:

- MChiro (Hons) Master of Chiropractic (from September 2015)
- Master of Chiropractic (MChiro) (programme closed, final year of delivery 2014-15)
- Bachelor of Science Clinical Exercise Science (jointly delivered with Bournemouth University)
- Postgraduate Certificate of Professional Development (Chiropractic)
- Master of Science (MSc) Medical Ultrasound
- Master of Science (MSc) Advanced Professional Practice (Clinical Sciences)
- Master of Science (MSc) Advanced Professional Practice (Paediatric Musculoskeletal Health)
- Master of Science (MSc) Advanced Professional Practice (Functional Musculoskeletal Health) (from October 2015)
- Bachelor of Science (BSc) Human Sciences/Master of Science (MSc) Chiropractic (programme closed to new entrants from July 2015)
- Master of Science (MSc) Advanced Professional Practice (Musculoskeletal Rehabilitation) (programme closed to new entrants April 2015 and is being taught out)
- Master of Science (MSc) Advanced Professional Practice (Sports and Rehabilitation) (programme closed to new entrants April 2015 and is being taught out)
- Master of Science (MSc) Advanced Professional (Orthopaedics) (programme closed to new entrants April 2015 and is being taught out).

The following awards closed in 2013 and are currently being taught out:

- Master of Science (MSc) Ultrasound (Musculoskeletal)
- Master of Science (MSc) Ultrasound (General)
- Master of Science (MSc) Ultrasound (Obstetrics)
- Master of Science (MSc) Ultrasound (Gynaecology)

- Master of Science (MSc) Ultrasound (General and Gynaecology)
- Master of Science (MSc) Ultrasound (Obstetrics and Gynaecology).

In addition, it offers the following award:

- Access to Higher Education Diploma (Health Sciences) (Access Programme Transform).

There are no separate academic departments within the College structure.

The College works with one validating university, Bournemouth University, in respect of its higher education awards. The College first developed a partnership with the University in 2005 as an associate college of the University. During the ensuing five years, validation arrangements operated under the University's standard collaborative provision arrangements. In 2010 a second five-year agreement was signed followed by a franchise agreement in 2014. While aligning with the University's quality assurance systems, the College has autonomy to develop its own regulatory framework, overseen by the University. The College chairs its own assessment boards and has its own academic regulations, policies and procedures for the core chiropractic programme leading to registration.

The College had 674 registered students in 2014-15. Forty-three per cent of students were from the UK, 27 per cent from the EU and 30 per cent were classed as international students.

<b>Programme</b>	<b>Number of students</b>
MChiro	109
MSc Chiropractic (1)	75
BSc Human Sciences/MSc Chiropractic	295
BSc Clinical Exercise Science	51*
MSc Ultrasound	23*
MSc Medical Ultrasound	51*
MSc Advance Professional Practice	39*
Postgraduate Certificate in Professional Development (Chiropractic)	12*
Access to Higher Education Diploma (Health Sciences)	19*

\* Part-time or jointly delivered with Bournemouth University

There is a relatively large number (32) of full-time permanent academic staff, 13 part-time permanent academic staff and a large number (26) of part-time hourly paid staff. Hourly paid staff are mostly clinicians working in either the NHS or private practice. They are employed to bring their clinical experience and specialist skills into the academic setting. Of the permanent staff, there are three professors, one associate professor and one reader. The College also employs approximately 70 administrative staff.

The College's mission is to promote 'A healthier society through education, research and clinical care'. It is an independent, higher education institution, a private company limited by guarantee and a not-for-profit, charitable institution. The College can be defined as a Higher Education Funding Council for England-designated specialist higher education institution. It is relatively small and operates in a niche market with an emphasis on vocational qualifications and employability.

The College was registered as a charity in 1960 for the provision of undergraduate education and training of chiropractors. It was named on the basis of being, at the time, the only provider of chiropractic education in Europe. Since then, a number of similar accredited providers have been established in Europe, as well as an additional two providers in the UK. The College is the largest UK provider of undergraduate chiropractic education and training.

In 1981, the College moved from its original location in Bournemouth to its present site, a former convent with Grade II listed status, also in Bournemouth. The campus has facilities for education, clinical training and research. It also provides clinical services, which include chiropractic clinics, radiology, ultrasound and magnetic resonance imaging (MRI).

In 1994, the Chiropractors Act was made law, followed in 1998 by the establishment of the General Chiropractic Council (GCC) as the professional, statutory and regulatory body (PSRB) of chiropractic practice in the UK. From 2001, the title of chiropractor was protected by law for use only by practitioners registered with the GCC.

The College remained solely focused on undergraduate chiropractic education and training until 1995, at which time a postgraduate programme for chiropractors (MSc Clinical Chiropractic) was established. Today, the institution's higher education provision is no longer exclusive to chiropractic but consists of undergraduate and postgraduate programmes for a range of healthcare practitioners including chiropractors, medical doctors, nurses and midwives, radiographers and sonographers, physiotherapists and osteopaths.

In 2002, a review of the College by the Quality Assurance Agency (QAA) reported that, although fit and proper to receive public funding, the College was too small to receive direct funding. Instead, QAA recommended that the College seek a higher education partner through which public funds could be channelled. In 2005 the College entered into a legal agreement with Bournemouth University on the basis that the University had available places. Moreover, the close proximity of the two institutions meant there was potential to facilitate research and teaching collaboration as well as shared learning facilities.

Since 2008 the College has steadily built a reputation in postgraduate musculoskeletal diagnostic ultrasound education and training and is now a leading provider in the UK. Additionally, the College's teaching portfolio includes co-delivery (with Bournemouth University's School of Health and Social Care) of the BSc Clinical Exercise Science programme, and the Access to Higher Education Diploma (Health Sciences).

The College's current strategic plan covers the period 2012-20 and contains a statement of the College's vision: achievement of global recognition as a leading provider of multidisciplinary musculoskeletal healthcare education; contribution to substantive advances in evidence-based healthcare through robust, well-funded, international collaborative programmes of research on musculoskeletal conditions; becoming a major provider of the diagnosis and treatment of musculoskeletal conditions; and successfully exploiting the College brand, reputation, facilities, skills and intellectual property through entrepreneurial innovation and business development.

## Detailed scrutiny: taught degree awarding powers criteria

### A Governance and academic management

#### Criterion A1

An organisation granted taught degree awarding powers is governed, managed and administered effectively, with clear and appropriate lines of accountability for its academic responsibilities. Its financial management is sound and a clear relationship exists between its financial policy and the safeguarding of the quality and standards of its higher education provision. In the case of an organisation that is not primarily a higher education institution; its principal activities are compatible with the provision of higher education programmes and awards.

1 The College has a track record of self-governance, financial planning and resource allocation. Quality assurance of its academic provision is implemented on a devolved basis within the framework of its validating University's quality assurance framework. Ultimate responsibility for strategy, performance and viability is vested in the Board of Governors, which delegates responsibility for all academic matters to the Academic Board. The Principal is Chief Executive Officer of the College with powers to lead and manage delegated by the Board. The post is supported by the Executive Management Group (EMG) and the Senior Management Group (SMG). The former is a subset of the latter. SMG is tasked with monitoring institutional performance against strategic targets. There is also a middle-management layer, and a number of management groups to complete the management structure of the College.

2 The College has a formal Strategic Plan 2012-20 approved by the Board of Governors in March 2014. It is based on three core competencies: education, research and clinical care. A key feature of the College's strategy is to move away from being a monotechnic provider of undergraduate chiropractic education to the provision of a range of multidisciplinary programmes at both undergraduate and postgraduate levels, but given coherence through their location within the field of musculoskeletal healthcare. The development of the plan was driven by the Principal and involved full consultation with the Board of Governors, SMG and staff. EMG and SMG are responsible for the annual process of monitoring implementation of the plan, and key performance targets are included in the plan.

3 The College operates a system of five-year financial plans designed to ensure it has the financial resources to achieve its strategic planning objectives. The current five-year plan 2014-15 to 2018-19 resulted from an updating process, with the changes agreed at the Finance and General Purposes Committee (F&GP) meeting in October 2014, and was presented to and approved by the Board of Governors at its meeting in November 2014. The five-year plan is a comprehensive document prepared by the Finance Director, with clearly articulated assumptions underlying its preparation, and it provides the College with a clear view of its likely financial position over the next five years, subject to these assumptions being met.

4 The College incurred a loss in 2013-14 and had budgeted for a further loss in 2014-15, though the actual loss was significantly less than budgeted. The principal financial problems were twofold. First, there was a dip in student fee income from the main BSc Human Sciences/MSc Chiropractic degree, a three-plus-two programme on which students are not able to access student loan finance for the final two years. This created the risk that a substantial number of students would transfer to other providers at the end of their third year, and acted as a deterrent to new student recruitment. The College response was to complete a fast-track validation of a new, one-plus-four, MChiro programme to be offered to new students from 2015-16, validated by Bournemouth University in spring 2015 and subsequently given professional recognition by the GCC and Privy Council in September 2015. This programme will



enable students to access funding for all five years. The second issue was the level of validation fees being levied by the University under the current contract with the College. The Principal was mandated by the Board to renegotiate this fee, and had achieved a significant reduction for the remaining years, 2014-15 to 2016-17, which was described as making a significant positive contribution to the budget. The team heard that the deficits in 2013-14 and 2014-15 have not affected the strategic plans of the College and found no evidence that would contradict this view.

5 The five-year financial plan 2014-15 to 2018-19 projects that the College will operate profitably from 2015-16, albeit the projected surpluses for the planning period are small and adverse changes could result in an operating loss. It is important to note the College had taken the deliberate and planned decision to operate a deficit budget, rather than to curtail its academic and clinical activities, or seek other cost reductions such as staff redundancies. It has been able to set and operate a deficit budget in 2014-15 as a result of its substantial free reserves and cash balances, which were readily able to absorb any losses. The balance sheet is very strong and includes freehold premises currently valued at substantially below their likely market value.

6 The underlying assumptions of the plan include successful achievement of TDAP and a move away from validated provision from Bournemouth University with its associated validation costs. However, this would depend on a successful outcome to the College's application to the Department for Business, Innovation and Skills for Institutional Designation, which would enable it to charge the full undergraduate fee on its own degree award programmes. Without this, the College would need to continue to rely on the University to access funding. The Board of Governors had concluded that the current five-year plan demonstrated the sustainability of the College, but it was dependent on the assumptions that the College would award its own degrees and that no fees would be payable to Bournemouth University.

7 There is an annual budgeting process, with monthly reporting. The final decision on budgetary approval, including staffing, lies with the Principal in consultation with the Executive and ratified by the F&GP Committee. Overall, the College exhibits a well-founded and rigorous approach to the development and management of budgets within its five-year financial plan.

8 The College's programmes are validated provision of Bournemouth University, and come under the quality assurance arrangements of the University, which is responsible for academic standards. The College has Associate College status of the University, which means it has the highest level of autonomy the University grants to partners to operate within its regulatory framework. Staff from the University indicated they had a high level of trust in the College to implement its quality assurance and regulatory frameworks, and that the College has worked well within the University's framework and was confident in its implementation of the University's policies relating to quality assurance and assessment. The College is scrupulous in its implementation of the University's quality assurance and regulatory framework.

9 The College operates within Bournemouth University's framework of quality assurance procedures, and academic regulations and policies. These are informed by the Quality Code so that, indirectly, the College's higher education activities are also aligned.

10 The College also seeks professional accreditation for most of its programmes, which enables its graduates to gain professional recognition and become authorised practitioners. Chief among these professional bodies are the GCC, the European Council for Chiropractic Education (ECCE) and the Consortium for Accreditation of Sonographic Education (CASE). The College pays very close attention to the requirements of the professional bodies with which it has accreditation arrangements, and the maintenance of these external professional accreditations is a core part of the management of its higher education activities.

11 Through its Academic Audit Committee (AAC), the College is undertaking a systematic analysis of its policies and procedures against each of the sections of the Quality Code. Once the initial exercise has been completed, the intention is for each of the audits of alignment against the Code to be revisited on a regular basis. Academic Board receives regular reports on progress with this exercise, as part of its monitoring of the work of AAC. The College is engaging effectively with the Quality Code, and the changes required to support the implementation of TDAP are being identified for action.

12 Other external inputs are also evidenced in relation to the College's higher education activities. There are two external representatives on Academic Board, one from Bournemouth University and one from Southampton University. This adds a useful external perspective to discussion. In relation to enhancing its effectiveness, the Board of Governors is involved in an ongoing review of how it complies with the new guidelines of the Committee of University Chairs (CUC), and what changes or additions it needs to make to be compliant.

13 The College's higher education mission is articulated in the College's Strategic Plan: 2020 Vision 2012-2020. Development of the Plan entailed consultation and away days that included staff, students and external stakeholders. The Plan was revised in 2014 following a further away day held in 2013, which included members of the Board of Governors and student representatives.

14 Communication of mission and policies to staff is achieved through a variety of modes including the staff portal, the Grapevine staff newsletter, team meetings, staff meetings and staff assemblies chaired by the Principal. Staff are well briefed and have a good understanding of the College, its mission, strategic direction and operational imperatives.

15 Students similarly have a significant range of mechanisms whereby they are kept informed. They also have considerable scope to contribute to the quality assurance and academic management of the College. They have good information about their programme of study, assessment requirements and plagiarism policies through their programme handbook, which is available in electronic formats, and through the College virtual learning environment (VLE).

16 The College has a Students' Union with elected officers, and a comprehensive approach to student representation. The Students' Union President is an ex officio member of the Board of Governors, and also Academic Board. All other academic committees and subcommittees of the College have two student representatives selected by the student body. In addition, there is a Student-Staff Liaison Sub-Committee (SSLSC), which was reconfigured at the start of 2014-15 with an increase in student representation. Students felt this new arrangement was bedding down well.

17 Student representatives are trained in their role by the Students' Union. While students could give examples of the effectiveness of the student voice, for example the development of a policy relating to the recording of lectures, there was a view that neither student representatives nor administrative staff were always effective in feedback to the student body on the outcomes from issues raised. The Principal makes particular efforts to stay informed about student views. He has regular meetings with the Students' Union, holds lunch meetings for the academic year representatives and generally maintains an open-door policy for students. The student representation system is working, though the level of involvement of student representatives shows some variability.

18 The College has a comprehensive structure of governance, management and academic committees, with clear terms of reference, membership and reporting lines. The College is governed and managed as an autonomous body. In relation to academic management of standards and quality, the University has granted its highest level of delegated authority to the College as an Associate College.

19 The Board of Governors has ultimate responsibility for the strategy, performance and sustainability of the institution. It approves the College's mission and strategy, monitors institutional performance and ensures its effective management. The Board of Governors consists of 12 to 18 members. Appointments are for four years and may be renewed for a second term. The Principal, the staff Governor and the Students' Union President are ex officio members. The remaining Board members are independent lay members elected for their expertise (some of these lay members may also be chiropractors). The Board has had three standing committees for a number of years: F&GP Committee, Remuneration Committee and Nominations Committee. A fourth subcommittee, the Audit Committee, was added during 2014-15. Overall, there is a robust and effective governance structure, and a willingness to undertake self-evaluation of the College's performance and alignment with good practice in the sector.

20 The Principal is supported by the EMG and SMG, and also by a middle-management committee structure. SMG operates in a manner consistent with its purpose as outlined in its Terms of Reference and in the Critical Self Analysis (CSA). It provides a forum for keeping senior managers abreast of developments in the College, and it is also prepared to challenge the executive on important issues. It operates in a business-like fashion with effective but collegiate chairing. Complementing the SMG is a middle-management layer, with a number of management groups reporting to and supporting the Principal. These include the Human Resources Policy Group, Marketing Group, Clinic Advisory Group, Clinical Governance Group, Premises and Estates Group, and Health and Safety Committee. The management groups generally operate effectively and in a manner consistent with their terms of reference.

21 The College operates its own academic management structure responsible for safeguarding standards and assuring and enhancing the quality of student learning opportunities. Responsibility for all academic matters has been delegated to the Academic Board and its subcommittees. A significant review of the academic committee structure was undertaken in 2013 focusing on membership, clearer demarcation of business between committees, and the creation of a SSLSC and AAC.

22 Under the Academic Board there are now three senior academic committees: first, the Academic Development and Quality Committee (ADQC) with oversight of programme approval and modification, programme monitoring and periodic review, which has three subcommittees (Learning & Teaching Sub-Committee - LTSC, SSLSC and the Programme Steering Groups). Second, the AAC with a remit to review academic policies and procedures, with oversight of one subcommittee, Admissions. Third, the Research and Staff Development Committee, which has one subcommittee (Research Ethics Sub-Committee). During 2014-15 a planned review of the operation of the new committee structure was undertaken but only minimal change was found to be necessary.

23 The business of Academic Board and its subcommittees is consistent with the relevant terms of reference. It operates in a business-like way with all members making a contribution. Membership includes two external advisers who attend regularly.

24 Subcommittees of Academic Board generally show a similar picture of effectiveness, though this was not universally the case. AAC was a new creation in 2013, and so has a limited track record. AAC, though, is fulfilling its terms of reference. However, the Committee does not demonstrate evidence of significant engagement of its members, with papers presented for discussion evoking minimal discussion in most cases. Also, a number of agenda items were still works in progress and little seemed to have been achieved by bringing them forward to AAC at this stage. There is almost a sense that, in setting its agenda, AAC is manufacturing business to keep it employed.

25 The organisational function and responsibility of some of the second-tier academic committees, notably LTSC, SSLSC and the Postgraduate and Undergraduate Programme Steering Groups, have also been considered. The LTSC is relatively new, replacing the former Learning Resources Committee. The terms of reference reflect both the aspirations for the new committee (oversight of teaching and learning provision, oversight of good practice in teaching and learning in the higher education sector, review of developments in and identify opportunities for implementation of learning technology) and the legacy of the previous committee (consider and make recommendations on the acquisition, distribution and allocation of teaching and learning resources).

26 The academic committee review had considered student concerns that they were under-represented on SSLSC, which tended to inhibit their contributions. As a consequence, the membership was revised to strengthen student representation. There was some evidence that the revised student representation arrangements had enhanced effectiveness. The Manager of the Students' Union chairs the SSLSC.

27 Postgraduate and Undergraduate Programme Steering Groups consider academic issues relating to programme management, and membership includes year tutors, Quality Assurance staff, Programmes Office staff, Clinical Exams Group and the Students' Union. Overall, the second-tier committees and groups operate in a manner consistent with their terms of reference, and are efficiently and effectively chaired, though it was suggested by support and administrative staff who met the team that some of the initial difficulties of the SSLSC might have been mitigated by the provision of appropriate training.

28 Academic Board delegates authority to Assessment Boards for decisions on individual students in terms of their internal progression and award of qualifications. The College is wholly responsible for the administration and conduct of Assessment Boards (except the Access to Higher Education provision). The team was made aware of an issue that had arisen in connection with the information presented to the summer 2014 MChiro Assessment Board. It arose because the structure of this programme and the bespoke assessment regulations that apply require an algorithm to be implemented to give an appropriate weighting of marks from each year towards the overall aggregate marks and classification of graduating students. A set of circumstances occasioned by over-reliance on the tacit knowledge of a key member of staff relating to the weighting algorithm, and the absence of that member of staff at a critical period prior to the Assessment Board, had resulted in a number of students being misclassified for honours, with some receiving awards at a class that was too high and some a class too low. The miscalculation of the honours awards for some students had only come to light when the results had gone forward to the University for inclusion in its student records system.

29 This issue, which clearly had the potential to put academic standards at risk, had been extensively discussed in a number of boards and committees in the governance, management and academic strands of the College, and also at the joint University-College Partnership Board. Consideration was given to rectifying the miscalculation of honours and, so that students would not be retrospectively disadvantaged, those students who had received too low a classification were re-classified, while the limited number of students who had received too high a classification were allowed to keep this. In the team's view this was a sensible approach, since it was unfair to retrospectively penalise students for what was a College error. In no case was the threshold for the award of a degree breached.

30 Analysis was also conducted of the causes of the failure, and policy measures have been put in place to ensure there is no repetition of the errors which arose in 2014. The team had the opportunity to observe the revised policy measures in operation during the 2015 assessment boards and were satisfied that these were operating effectively (see paragraph 170). Overall, from the wide array of observations of how the College faced up to this serious issue, and the openness and seriousness with which it was managed, the team found good

evidence that, from the Board of Governors to senior and middle management, there had been a thorough, sustained and critical response to the errors and deficiencies revealed in the Assessment Board process in 2013-14, and an effective response had been made.

31 The QAA Institutional Review (2012) noted 'the complex nature of the committee structure of the College and the potential for duplication of effort and/or a lack of clarity regarding decision-making, and that opportunities for rationalisation will be considered by the College'. This was addressed through the College's 2013 review of the academic committee structure. While it remains the case that, for a relatively small higher education institution, the College continues with a somewhat elaborate academic committee structure, the minutes of meetings and observations of various academic committees by the team suggest the academic committee structure is working effectively. Business is conducted in a professional manner and reflects the terms of reference of the respective committees; committee members are generally fully engaged and well briefed; and the minutes produced are accurate and comprehensive, and readily accessible to all staff. The team concluded that the College had developed an academic committee structure that is fit for purpose, both in terms of its current situation and in terms of supporting the future exercise of TDAP.

32 Responsibility for the academic provision of the College is delegated by the Board of Governors to the Principal who is Chair of the Academic Board. Operationally, the College's academic provision is managed by the two Vice Principals and, together with the Principal, they form the academic executive group which advises the EMG and SMG. The Vice Principals are supported by programme leaders who have a formal job description and, for the undergraduate programme, year tutors. There are also individual unit tutors.

33 The two Vice Principals have distinctive and complementary roles. The Vice Principal Undergraduate Studies and Quality's main responsibilities are leading, expanding and developing the College's undergraduate programmes in chiropractic and health studies, including maintaining relations with the relevant professional body. The Vice Principal Undergraduate Studies and Quality must be a registered Chiropractor with the GCC. The Vice Principal Postgraduate Studies and Research's principal responsibilities are for leading, expanding, developing, directing and managing the College's research activities and postgraduate programmes, the continuing professional development (CPD) programme, and the Centre for Ultrasound Studies. Both post-holders are budget-holders, and they both have overarching responsibilities for providing academic leadership to the College.

34 There is a generic job description for the role of programme leader. Programme leaders chair the Programme Steering Groups (effectively the Programme Boards of Studies). The Programme Steering Group receives regular action plan reports, and discusses the programme annual monitoring report together with the outcomes of discussion of this report at ADQC. Programme leaders review the annual reports produced by unit tutors, and so have a direct role in consolidating review information into the Programme Annual Monitoring Report. Programme leaders sit on the main academic committees of the College. Because of the scale of the undergraduate chiropractic programme provision, there are also year tutors who chair the Programme Team Meetings. Programme leaders discharge their academic management responsibilities effectively.

35 The EMG, chaired by the Principal, comprises the Vice Principals; the Executive Director of Administration and Estates, who is responsible for the management of all academic support services including the human resource management function, estates and student services; and the Executive Director of Finance and Purchasing, responsible for the management of financial systems and financial planning, and production of monthly management accounts. The style of the meeting is informal with all members contributing, though the business is very much led by the Principal.

36 SMG is the forum that brings together staff with managerial responsibilities, and it comprises the EMG members plus the Academic Registrar, Director of Clinic, Director of Research, Director of the Institute for Musculoskeletal Research and Clinical Implementation, Director of the Centre for Ultrasound Studies, Head of Marketing and Head of Clinical Business Development. These are all staff with key responsibilities in terms of managing the College's strategic targets, and SMG monitors performance against the agreed Key Performance Indicators (KPIs). The SMG is chaired by the Principal and, unlike the EMG, generates formal minutes. The EMG is characterised by the College as a small, fluid body with no reporting line, while SMG business is more systematic with agendas and minutes. Capital bids come to SMG, not the EMG.

37 SMG meetings are chaired efficiently and effectively, and SMG operates in a business-like way with all members making a contribution. The culture of the meetings is collegial, and SMG members exhibited a willingness to be critical and challenging in relation to the management of the College. In one meeting, members were critical of the way a capital investment project had not gone out to tender, and were also critical of the proposal to deliver a supported teaching programme in Gdansk, Poland.

38 Currently, senior managers of the College need to manage a wide range of major projects. These include its TDAP application and application for Institutional Designation; significant programme development activities, including the urgent revalidation and re-accreditation of the main undergraduate chiropractic programme and the new BSc Ultrasound programme with its major challenges regarding professional body and NHS recognition; the implementation of a major clinical investment project, the vertical MRI scanner; and a project with a Polish university to develop and deliver a professional conversion route in chiropractic in Gdansk (though this was put on hold in 2014-15 because of a lack of students recruited in Poland).

39 The current year (2015) is also the 50th anniversary of the first year students were admitted to the College, and the events planned for this necessarily absorb management resources. Though well supported by middle-management staff, the College Executive, particularly the Principal and the two Vice Principals, were extensively engaged in all of the project activities of the College. The Principal and the two Vice Principals chaired, or were members of, all the main academic committees and were also involved in governance committees. The team was assured that, although the management team was stretched in a few areas, notably data management, overall the College was confident it had the experienced management team it required to discharge all its commitments effectively. All of the evidence available has supported the view that the management team is working effectively to meet its commitments. However, there is the potential for over-commitment, and the Board of Governors demonstrated awareness of this when discussing the proposal to deliver a programme in Gdansk, Poland, which was subsequently put on hold.

40 The College aligns its quality assurance systems, policies and procedures with Bournemouth University, but has autonomy to develop its own regulatory framework overseen by the University. This is most obvious in relation to its flagship undergraduate chiropractic programme where the College has developed its own academic regulations, policies and procedures reflecting the distinctive structure of the programme. By contrast, the College's postgraduate provision fully reflects Bournemouth University's academic regulations, policies and procedures. While policies and procedures relating to key quality assurance activities, such as programme approval, periodic review, and annual monitoring, also follow the University's framework, the College has delegated authority to chair its own assessment boards and to undertake minor modifications. The College also has its own academic committee structure with both staff and student representation on most academic committees.

41 The College is developing and refining its existing academic policies through its academic committee structure, and also bringing forward new academic policies; for example, a policy on the recording of lectures by students, a development that has arisen as a result of student feedback to the College. All the key academic committees have both student and staff representation, so that both groups have the opportunity to contribute to and be informed about the development of the academic policy and procedures framework of the College. Academic committees have high levels of attendance by both staff and student representatives, and a reasonable level of both staff and student engagement in discussion within the committees, though the level of student engagement tends to be more variable than that of staff.

42 A variety of mechanisms, including staff assemblies, team meetings and the Staff Information Portal, keep staff informed about the academic management of the College and important changes to policies and procedures. The Principal holds regular meetings with the Students' Union officers. These enable him to keep the student body informed of academic policy developments as well as to seek student views. Overall, there is strong evidence of a commitment to the regular, systematic and self-critical review of academic policies in anticipation of TDAP.

43 The review of academic policies and procedures, including assessment regulations, is the remit of the new AAC. Initially, its work has involved taking each of the sections of the Quality Code and examining the alignment of the College's academic policies and procedures in relation to it, identifying areas where action is needed to enhance policies and procedures, and considering the implications for when the College has gained TDAP. AAC has also discussed the commencement of a rolling programme of academic policy reviews. There is an evident commitment to the regular, systematic and self-critical review of academic policies in anticipation of TDAP.

44 The College undertakes annual monitoring of its academic programmes using the Bournemouth University procedure of Annual Reports on Framework Monitoring (ARFM). Annual monitoring also incorporates a process of continuous action planning. All the information relating to the ARFM process for each of the College's programmes is made available in full to all staff through the staff portal. The outcomes of the ARFM procedure for each programme are consolidated into a College Annual Monitoring Report, which includes an action plan for all taught provision in the College. Scrutiny and detailed consideration of the annual monitoring outcomes for each programme are undertaken by ADQC; reports go forward to Academic Board for consideration and approval before being sent to the University. The College implements the procedure for the annual monitoring of its academic activities in a rigorous and effective manner, and the academic committee structure of the College provides effective scrutiny and oversight of the annual monitoring process. The Board of Governors also now receives the College Quality Report.

45 The Board of Governors has overall responsibility for managing risk through the risk register and disaster recovery plan. The risk register is reviewed regularly by the Board, its F&GP Committee and the SMG.

46 The evolving approach to risk management and the risk register at the College was tracked during the scrutiny period. The Board of Governors has recognised the need for more effective management of risk, and the new risk register approach will enable it to focus more effectively on strategic rather than operational risks. At the same time, the Audit Committee has, as one of its terms of reference, 'to keep under review the effectiveness of the risk management, control and governance arrangements' of the College. The College is developing department-level risk registers, which will feed into the institution-level risk register, coordinated by the Executive Director, Administration.

47 The Board has been told that the process to compile departmental risk registers is ongoing, and it was anticipated that the departmental risk registers would be submitted to the SMG and that the corporate risk register would be extracted from these. The Board expected the top 10 red/amber risks to be submitted to it for consideration, and it also expected to see significant, lower-rated risks that were occurring in multiple departments. The Board noted that its 'risk appetite' would need to be considered as part of the Board training session planned for July 2015.

48 Overall, the approach to risk management and the development of the new risk register have the potential to afford the College effective oversight of the range of risks it faces, to be able to prioritise risks for action and to develop appropriate responses. However, the new approach to risk management is still a work in progress, and it is too soon to make any judgement as to how effectively these new arrangements will work in practice.

49 The quality framework for all taught provision is managed centrally by the two Vice Principals, the Academic Registrar, the Quality Assurance Advisor and the Quality and Enhancement Manager. The College has developed bespoke academic and assessment regulations for the undergraduate chiropractic programme under delegated authority from the University to ensure that the requirements of the accrediting PSRB are met. Other undergraduate and postgraduate degree programmes currently operate under the relevant University assessment regulations.

50 ADQC is the decision-making authority charged with maintaining academic standards and quality enhancement. Its role, under authority delegated to it by Academic Board, is to approve proposals for new programmes, and modifications to and discontinuations of programmes. The Committee also has an oversight role in relation to programme annual monitoring and periodic review. The College's approach to programme approval, annual monitoring and periodic programme review is currently that contained within the University's academic regulatory structure. ADQC receives and responds effectively to the ARFM reports (see paragraph 44). The programmes of the College are also subject to annual reporting and periodic re-accreditation by the relevant professional bodies.

51 There is a system of internal moderation and external examiners are appointed to each programme. During March, teams of tutors are allocated time slots for moderation and standard setting of the summer examination and resit papers. The team found that the standard-setting process was secure and well understood by staff. External examiners are also involved in the approval of assessments. External examiners are nominated by the College but formally appointed by the University, and the College manages the external examining process within the framework of the University's External Examining: Policies and Procedures.

52 The College assumes responsibility for considering annual external examiner reports and directly responding to these. The reports are considered by the Framework/Programme Leader in the first instance and discussed by the entire programme team at the relevant Programme Steering Group. A response to each of the reports is made by the appropriate Framework Leader, and incorporated in the continuous action plan of the College's annual monitoring process as well as in the College's Quality Report to the University. External examiner reports and responses are also received by ADQC and Academic Board as part of the annual report on framework monitoring. The management by the College of the assessment process and the external examining system, within the considerable authority delegated to the College by its validating University, is robust and effectively safeguards the academic standards of awards.

53 The College's status as an Associate College of Bournemouth University means that it has experience of managing academic standards. The College has discharged its delegated authority effectively. An exception to this was the problem encountered with the accuracy of



data to support the summer 2014 undergraduate Chiropractic Assessment Board (see paragraphs 28 to 30). However, the College has reviewed with great care the circumstances that led to this problem, and has instigated action to ensure it does not recur. There was no repetition of the issue in the 2015 Assessment Boards.

54 It is also the case that the establishment of the AAC in 2013 provides the College with a formalised system of reviewing and monitoring academic practice. The team considers that, though it was still in a settling-in phase, AAC has the potential to address the enhancement agenda, and to support the College effectively in developing frameworks for academic quality assurance and for regulation.

55 The College has recognised the additional responsibilities and demands on resources that will arise from the award of TDAP and has identified a number of areas for development, including replacement of Bournemouth University learning resources, a new VLE and its own centralised student data management system. Costings for the additional facilities required have also been undertaken. It intends to build on its experience of operating with high levels of delegated authority and the confidence it derives from it to develop and operate its own regulatory framework. The College will have the option to continue using, with some amendments, Bournemouth University's regulations/procedures with which staff are familiar. The College already has autonomy in relation to marketing, provision of information, application and enrolment processes. The extent to which the College has been able to address the issues it has identified, and the timeliness of this, will be a major determinant of the College's capability to manage successfully the additional responsibilities associated with TDAP.

56 While developing a regulatory framework is the major task in preparation for TDAP, the College was not anticipating a significant step-change in making the transition from the University's regulations to its own. The intention is to adopt the individual elements of the University framework, which already work well for the College and with which staff are already very familiar, adapting these for its own use as necessary. The Quality and Enhancement Manager and/or Academic Registrar will be responsible for the initial drafting of documentation and there will be consultation with stakeholders, including students, where appropriate. The approach being adopted and the progress to date provide confidence that the College will have in place appropriate frameworks by the time it might realistically gain TDAP.

57 As a result of the review of the academic committee structure, the College considers the new structure to be a key step in improving the institution's academic governance and in addressing its additional academic responsibilities associated with a successful TDAP application. Academic Board in March 2015 concluded that the academic committee arrangements were generally found to be fit for purpose after their first year of operation. The main areas of weakness are SSLSC and LTC where it is recognised further work is needed.

58 The College has recognised that it will no longer have access to the University's student record system (Unit-E), and has taken action to replace this with its own student records system. An independent College Student Record System (SRS) has been built and is already in use in 2014-15, shadowing the University system, with refinements planned during this year. Input from HEFCE following the dummy HESA return and an associated mock audit will also be used to refine the system. As well as acting as the repository for student data, the SRS will be used to generate Assessment Board Reports and final awards. A 'dummy run' based on 2014-15 data is being carried out, and further refinements are expected, and will be carried out in 2015-16. Access to Unit-E for archive purposes will continue to be needed, and forms part of the discussions with the University concerning the transition arrangements. To support its obligations in relation to student records post TDAP, the College is making two new appointments: Student Records Manager and Student Records Developer.

59 The College already manages its own admissions process and, for its full-time undergraduate programme, already works with the Universities and Colleges Admissions Service (UCAS). It also has its own Tier 4 licence for the issue of visas to non-EU students, and does not rely on the University. Students will no longer be eligible to become members of the Students' Union of Bournemouth University, but the College already has its own well-established Students' Union. Similarly, the College has established and is already operating its own systems for student representation and student engagement.

60 The College recognises that it will no longer be able to rely on the University for provision of some learning resources, student support services and IT infrastructure. Support staff indicated that a significant investment in learning resources was needed, notably in electronic information resources, to replace the resources available through the University. Funding had been identified to enhance e-learning facilities, with a cascade approach to staff development in this area. Learner support services are also currently offered by the University, and consideration needs to be given to whether it would be more cost-effective to continue to buy these from the University or to provide them in-house. The College has already introduced its own VLE to replace access to the University's facility. The undergraduate chiropractic students migrated to the College VLE in 2014-15, and all the College's other programmes will follow from 2015-16.

61 The College has its own library to support students and staff. However, following TDAP, students and staff will lose access to the University's more broadly based library facilities, and in particular electronic journals. Some study skills materials may also cease to be available to students. Replacement costs were calculated at the time the College made its initial application for TDAP, and a list of replacement resources was included in the application. In the case of the library, this amounted to an additional annual spend estimated at £98,200 to cover subject and medical databases, assistive technology and learning development, journal archives, and staffing for extended opening times.

62 The College already provides and manages its own IT infrastructure and provides support for students and staff. Replacement costs were calculated at the time of initial application for TDAP and related primarily to the establishment of a JANET link. Development of the IT infrastructure has continued during 2014-15, with the installation of a new firewall, important because of the storage and transmission of confidential patient data and images, and the development of a new multimedia edit suite available to staff and students. At an observed meeting of the Audit Sub-committee of the Board of Governors, the IT Manual for the College was listed for discussion. In practice, the document presented was a single A4 sheet listing the disparate IT systems and policies which existed within the College and in a relatively unconnected way. The Principal said the document presented was not in fact an IT Manual, but rather a contents list of what needed to be done (an IT Manual was in place at this time and subsequently updated in April 2015). The management and development of the IT infrastructure to support the College in its transition to TDAP need to be given greater priority.

63 The College has strengthened its governance structure by bringing in two new Board members with higher education experience. In January 2014 it also created the new post of Quality and Enhancement Manager to support the TDAP application process, and the subsequent implementation of TDAP. While recognising that support for managers in some areas is stretched, for example fragmented institutional data management systems need to be addressed, the Principal believes the SMG has the capacity and experience to successfully go forward with TDAP. The team saw no evidence to contradict this view.

64 Currently, as the awarding body, the University manages a number of external relationships, for which the College will need to take responsibility post TDAP. The College is currently covered by the University's access agreement approved by the Office for Fair Access (OFFA). It has opened a discussion with OFFA to take over this post TDAP. The College will

also have full responsibility for its engagement with the National Student Survey (NSS) and KIS, and it is in contact with the Office of the Independent Adjudicator (OIA). It will also need to set up a Freedom of Information policy, and marketing protocols to replace those of the University within which it currently operates.

65 The College has started to consider more closely possible timelines in relation to TDAP and Institutional Designation, and is at the early stages of discussing with Bournemouth University details regarding procedure and process for transition arrangements. With the proviso that it achieves a successful outcome to the TDAP application and is progressing well with institutional designation, autumn 2016 would be the absolute earliest the College will be in a position to award its own degrees and have obtained institutional designation. It will need to put in place procedures for students who wish to do so to switch their registration from a Bournemouth University award to an Anglo-European College of Chiropractic degree.

66 The team met representatives of the University to discuss their view of the readiness of the College for TDAP. It also met a representative of the College's major accrediting PSRB. University staff said this was a long-standing partnership (circa 10 years), and the College was the University's only associate college, with high levels of autonomy reflecting the University's confidence in the College. In many ways it was treated as another faculty of the University. There was reciprocal membership on committees, the College is familiar and confident in its operation of the University's regulatory framework, and the College's documentation in relation to quality assurance is of a very high standard. Overall the University characterised the relationship with the College as mature, confident and collegial. The successful outcome to the recent partnership review by the University, with only a small number of conditions to address, was evidence of the effectiveness of the relationship.

67 With respect to the issue of misclassification of some degrees (see paragraphs 28 to 30), the University believed the way the College had addressed this issue gives confidence in its ability to discharge its TDAP obligations. The University did not believe any significant changes are required in relation to the exercise of TDAP by the College, and overall the University would have confidence in the College in relation to TDAP.

68 The representative of the General Chiropractic Council who met the team indicated that while it was GCC policy not to express a view on TDAP, it had no objection to the grant of TDAP to the College. GCC was positive about the College's diversification strategy into other related areas and, overall, the College is seen by the GCC as responsive at all levels.

69 Overall, the College has undertaken a careful analysis to identify what activities would be necessary to support the successful management of the additional responsibilities that will arise from the grant of TDAP. It has already set in motion a number of actions designed to support the implementation of TDAP, and has plans and approaches identified to address many of the other requirements. The decision to develop its regulatory and quality management frameworks as a modest evolution of the University's frameworks, with which its staff are familiar, also constitutes a sensible approach to securing the standards of its future awards. It is noted that the College has not developed a fully documented and integrated strategy for TDAP preparation, with timelines and identified responsibilities. The College would derive some benefit from codifying the diverse range of activities it is pursuing to support TDAP within an integrated strategic framework.

## **B Academic standards and quality assurance**

### **Criterion B1**

An organisation granted taught degree awarding powers has in place an appropriate regulatory framework to govern the award of its higher education qualifications.

70 As previously indicated, as an Associate College, the College has a high degree of autonomy delegated by the awarding University, including development of its own regulatory framework, chairing its assessment boards and handling its programme modification processes. The undergraduate chiropractic degree has its own bespoke academic regulations, policies and procedures, which are aligned with the University's standard regulations, policies and procedures. There is a formal Partnership Board that manages the operational relationship between the University and the College. There is also cross-membership of committees, with senior College staff being members of University academic committees. The College has in place an academic committee structure, which has been reviewed and modified to enhance its effectiveness. A change to the Vice Principal job descriptions and new posts of Programme Leader and Quality and Enhancement Manager together strengthen management of the regulatory framework.

71 The College has experience of running academic appeals procedures for its undergraduate chiropractic students, and also its own complaints procedure. Following a thorough and inclusive review of the academic appeals system, the Academic Board approved a revised policy in March 2015. Any appeal hearing will now take place within 10 days of a request and the panel will include a trained student member.

72 The annual monitoring of academic programmes uses the Bournemouth University procedure of Annual Reports on Framework Monitoring (ARFM) as described in paragraph 44.

73 The Department of Health publishes 'checklist guidelines for reporting, managing and investigating information governance and security incidents requiring investigation', based on the original Caldicott review, that are applicable to all organisations processing health and personal data. The College has an appointed Caldicott Guardian who is concerned with safeguarding patient-identifiable information, who reports directly to the Principal and diligently ensures all staff are fully aware of NHS policies on disclosure of confidential patient information. An annual Caldicott Report details and grades all relevant issues and action taken for the SMG to discuss and act upon. Issues are not all incidents but include general data protection questions. The Caldicott Report (2014) demonstrates proactive diligence by the Caldicott Guardian, prompt responses (often immediate or same day) and no major issues within the College.

74 The General Chiropractic Council (GCC) carried out a two-day Recognition Visit at the College in July 2015 to approve the new MChiro programme. The GCC team gave feedback in which they commended the Executive Team on the shared strategic vision among all staff and the staff's enthusiasm and forward thinking. They noted that all staff demonstrate a working knowledge of the College regulatory framework and the implications and demands of TDAP. The College responds to the University and to issues that arise in a professional, positive and timely manner. Assessment processes have been strengthened and the awarding University has confidence in the College.

75 The Quality and Enhancement Manager has critically analysed all policies and procedures relating to the student lifecycle to produce a document detailing existing responsibilities and gaps requiring further development and expertise for the post-TDAP period. The College takes the University regulations and adapts them for its own use. The College executive and senior managers fully understand the preparations required to manage the

post-TDAP period, and have an outline plan for completing the regulatory framework (see paragraph 56).

76 A continuing series of thematic audits has raised awareness of the Quality Code among staff and improved existing policies and procedures. Practical application of the Quality Code as it relates to learning and teaching was considered during a Staff Development Day. Overall, staff demonstrate sound knowledge, understanding and application of the Quality Code across the College.

#### **Criterion B2**

An organisation granted taught degree awarding powers has clear and consistently applied mechanisms for defining and securing the academic standards of its higher education provision.

77 All higher education programmes are validated in alignment with the FHEQ. Most are also accredited by a relevant PSRB, which is often also a requirement for professional practice. The College staff have well-established experience of designing their taught programmes. External examiners confirm that awards are made at the appropriate levels.

78 Review and accreditation activities undertaken by QAA, Bournemouth University, external examiners and professional bodies have all confirmed appropriate alignment with the Quality Code. The work of the new AAC is strengthening alignment through its ongoing series of thematic audits. Each audit team is selected for its relevant expertise and experience, so increasing the number of staff benefiting from exposure to the Quality Code and other guidance.

79 The well-attended Staff Development Day in December 2014 included a presentation on the Quality Code with opportunities for staff discussions, resulting in constructive suggestions. Staff are made aware of the Quality Code Expectations through membership of thematic audit teams, Programme Steering Groups, the College VLE and other committee meetings.

80 The College has well-grounded experience of meeting the requirements of PSRBs. As well as the GCC, the College works with several other PSRBs. The Postgraduate Certificate in Professional Development (Chiropractic) satisfies the requirements of the Royal College of Chiropractors (RCC) and the British Chiropractic Association and overall benefits stakeholders. Post Registration Training (PRT) enables newly qualified chiropractors to work in professional clinical settings and is compulsory for Royal College of Chiropractors registration.

81 Students are fully aware of the impact of PSRB requirements on their courses, not least because accreditation, in many cases, enables them to practise. As many students are international, the College also meets the comparable requirements of other represented countries.

82 The College already appoints its external examiners in line with processes within its Quality Framework, and complies with relevant guidance as described in paragraph 51.

83 There is formal scrutiny and accreditation by PSRBs of most of the College's provision, and annual reporting by the College to these bodies is a requirement. There are links, both at institutional and individual staff level, with PSRBs, other specialist chiropractic colleges, and other higher education institutions in the UK and abroad. External examiners moderate standards on the taught programmes; their reports are discussed in academic committees and a formal response is made to each report. The reports make a significant contribution to the annual monitoring process and are made available to both staff and students. The GCC

confirmed its confidence in the College management of academic standards at its recognition visit in June 2015.

84 The College is experienced in programme design, taking account of input from employers, PSRBs and external reference points. The process for annual monitoring (Annual Report on Framework Monitoring) incorporates information from a range of sources including programme leader reports, unit reports, external examiner reports, student feedback, PSRB reports and progression data. The process incorporates a continuous action plan for each programme that is considered and updated at each Programme Committee meeting. Annual monitoring reports are received by the Academic Standards and Quality Committee. Outcomes are combined to produce an institutional Quality Report with an overall institutional action plan. Annual reporting, with periodic re-accreditation, is also required by the College's accrediting PSRBs. Periodic review has to date been undertaken by the University and has incorporated externality.

85 The MChiro was successfully validated by the University in February 2015, with approval of the transitional arrangements. The programme was subsequently recognised by the GCC and received Privy Council approval in August 2015. The periodic review of the Postgraduate Certificate in Professional Development (Chiropractic) in March 2015 was also successful.

86 The academic planning and resource allocation system is clearly understood by College staff. There is a process for annual budgeting, with planning commencing in January. Budgets are finalised in May and implemented from September. Resourcing requirements are also identified and considered as part of the course approval process. Ongoing resource requirements are identified through the Programme Steering Groups, LTSC and AAC. Any increase to academic staff costs has to be justified by the relevant manager and then approved at executive level. Vice Principals who attend these meetings are charged with ensuring that recommendations are considered and discussed in detail at EMG and SMG meetings. Final decisions on allocations, including staff posts, are made by the College Principal, in accordance with the annual budget approved by the Board, and ratified by the F&GP Committee. The Principal also has a contingency fund to purchase learning resources outside the budgetary process. Resource implications were carefully explained and considered during the successful periodic review of the Postgraduate Certificate in Professional Development (Chiropractic). Students spoke highly of their experience on the Postgraduate Certificate in Professional Development (Chiropractic) and of the resources, support and overall benefits of the programme.

### **Criterion B3**

The education provision of an organisation granted taught degree awarding powers consistently meets its stated learning objectives and achieves its intended outcomes.

87 The College's Enhancement of Learning and Teaching Strategy defines its aims for teaching, learning and assessment and describes its expectations about the academic qualities and characteristics of its award holders. It is made available through the staff portal. The Strategy was last revised in June 2015.

88 The processes for monitoring and reviewing programmes include consideration of the assessment strategy for the programme and the effectiveness of the operation of assessment. Students met by the team were clear about the requirements for assessment, and staff also reported being well informed about both the awarding University and the College's assessment practice and requirements.

89 In establishing its programme learning outcomes, the College makes appropriate use of external reference points such as the Quality Code and relevant PSRB requirements, with programmes being aligned to the FHEQ. These are reviewed through its approval, monitoring and review mechanisms, which have appropriate external involvement. Programme specifications clearly set out the programme aims and intended learning outcomes in matrix form, ensuring that all programme outcomes are addressed at the appropriate level in the programme.

90 The policies and procedures that guide programme design, monitoring and review are made readily available on the staff portal. The AAC and Quality and Enhancement Manager evaluate day-to-day processes and procedures and have oversight of quality and enhancement respectively. The team found both academic and support staff to be confident in their roles and to have a good working knowledge of the regulatory framework. Communication is very good across the College through formal and informal means, including publications, section meetings, Principal's meetings and various electronic methods. The College staff portal is used to disseminate a wide range of information relating to academic regulations, policies and procedures, committee minutes, and annual monitoring reports.

91 ADQC, supported by its subcommittees, has delegated authority from Academic Board to approve programme modifications and discontinuations and, in turn, currently does so under authority delegated to it by Bournemouth University following an approved process. The team followed the design phase of the Postgraduate Certificate in Professional Development (Chiropractic) periodic review, which was well planned and executed. The programme team members demonstrated critical self-assessment of the programme and carefully considered improvements to the programme for which they have responsibility. The ongoing current development of the BSc Ultrasound, the recent periodic review of the Postgraduate Certificate in Professional Development (Chiropractic), and the validation and recognition of the new MChiro (Hons) Master of Chiropractic all demonstrate a thorough and carefully reasoned approach to programme development and amendment as confirmed by both the awarding University and the GCC.

92 The coherence of programmes is initially established and affirmed through formal validation. The specific requirements of the PSRBs, employers and other stakeholders are integrated into validated pathways. Year tutors have responsibility for the horizontal integration of taught units. Clinic tutors, who meet weekly, and the Clinic Advisory Group oversee the achievement of required clinical learning and experience.

93 The needs of students are integral to the College programme planning and review processes as evidenced by the positive Student Services involvement in periodic review and the validation and recognition of the new undergraduate MChiro (Hons) Master of Chiropractic. Academic committees include support staff and student representatives; students are also included in the annual and periodic review of programmes. The College provides a language tutor to support students who do not have English as a first language; study skills lectures are also available. It recognises that, in achieving TDAP, it will have to provide the student services currently provided by Bournemouth University. The College is developing its own VLE and is continuing to develop interactive tutorials to enable self-directed learning, and has a new video suite for staff use to provide students with learning opportunities online and remotely, and to continue to improve learning resources generally. Staff and student surveys of the library are conducted every two years.

94 The College delivers one of its postgraduate programmes off-campus in Norway. It is subject to the same quality assurance processes as on-campus delivery and is delivered by the College flying faculty staff. It is considered more efficient to fly one lecturer to Norway than to bring a cohort of students to Bournemouth. Some postgraduate programmes include

placements in clinical practice and hospital settings, with students working one-to-one with mentors.

95 The College also delivers short non-award-bearing continuing professional development courses off-campus. Students on the Postgraduate Certificate in Professional Development (Chiropractic) work, and therefore study, at a distance from the College and some do so overseas. At the periodic review of the programme, student representatives spoke positively of their experiences on the course and of its benefits. The review panel commended the level of support from staff and the accessible level of library support. It was also recommended that the College include guidance to mentors in the programme handbook. The team found that the programme team had carefully considered the range of teaching and learning methods and assessment appropriate to distance learning within students' work environment. Students have access to an increasing number of high-quality materials on the VLE, including interactive tutorials, while offsite.

96 Learning through clinical placements is supported by a mentor who supervises the student, receives information on their role and responsibilities, and reports on the student's progress.

97 The College recognises the role of assessment in ensuring the academic standards of its awards and in meeting PSRB requirements. It is fully aware that responsibility for awards will transfer to the College from the University and is planning accordingly. The College already has significant delegated responsibility for external examiners. The annual monitoring process is clearly defined as described in paragraph 44 and includes consideration of assessment practices and the maintenance of academic standards. Analysis of the annual monitoring data and outcomes by the College Reader indicates that academic standards are being robustly monitored and maintained. PSRBs have commended the enthusiasm and forward thinking of staff and the enhanced inter-professional learning environment. The team agrees with these conclusions.

98 Assessment regulations, criteria and practices are explained and made available to students through programme student handbooks, available through the VLE and on the student portal. Both staff and students understand the assessment criteria, which are introduced at induction and clearly documented in relevant handbooks.

99 All assessments are standardised and moderated internally, and approved by external examiners, thus ensuring learning outcomes are covered and assessment methods are appropriate. Assessment practices include setting assessments in line with sound pedagogic practice and with benchmark standards, and engaging external peers. The standard-setting process is clearly documented, well understood, secure and anonymous. The assessment is set by the unit tutor and moderated by a team of tutors, one from a different discipline. The first phase of standard setting is to agree the level of difficulty of a question; the second phase is to allocate themes and learning outcomes to questions. The more explicit documentation within the revised moderation and standard-setting process is a result of using feedback received from the previous year.

100 There are established systems for internal moderation of assessment, and for external examiner scrutiny of samples of marking and internal assessor feedback to students. External examiners are currently nominated by the College and formally appointed by the University. The College manages the relationship with external examiners, briefs them and provides supporting documentation, and receives and responds to their reports; external examiners attend College assessment boards. The external examiner reports are accessible to staff and students via the student portal and VLE.

101 External examiners now scrutinise student work through new online module boxes but still speak to students before the assessment boards. The newly appointed external examiner,



who starts next academic year, shadowed the undergraduate and postgraduate assessment boards. In a few cases, a board exercised its discretionary powers to consider the elevation of a student beyond the award suggested by the average mark, but did so with great care. At the Undergraduate Assessment Board decisions concurred with those made at the Preparatory Board. At all boards, the external examiners confirmed that the marking was consistent and standards were comparable to other institutions. The awarding University representative stated that the process followed, and decisions made, accorded with the University regulations and practice.

102 External examiner reports are considered by the relevant programme leader and discussed at the Programme Steering Group. Responses are incorporated in the annual monitoring process action plan and the College Quality Report to Bournemouth University. Continuous action plans are formally revisited and monitored.

103 Internal preparatory boards are held for both undergraduate and postgraduate programmes in which all marks and student profiles are considered. Full and careful discussion takes place for each non-pass mark, borderline awards and agreed mitigating circumstances. Assessment regulations and assessment board decision-making procedures are followed meticulously. Tutors comment on individual students as necessary to understand individual situations. The board's considerations and decisions are thorough and fair, ensuring no student is disadvantaged while continuing to uphold academic standards.

104 ADQC oversees programme closures, and does so currently by following the University's policies and procedures; these include the need to safeguard the interests of current students. The replacement undergraduate MChiro programme was developed as a result of changes in funding to enable more students to complete all years. The Executive, SMG, Board of Governors, ADQC and the University all discussed and agreed the change, which comes with a guarantee to students of support to complete within their registration period. Progression routes are planned and clearly mapped to ensure all existing students can make an informed decision on whether to continue on their current programme or transfer to the new programme. The GCC recognition panel ensured all appropriate arrangements were in place for the College to honour the contract with the students.

#### **Criterion B4**

An organisation granted taught degree awarding powers takes effective action to promote strengths and respond to identified limitations.

105 The College has recognised the potential for insularity in a small institution and has built links with external professional and educational bodies to mitigate this risk. Following the QAA Institutional Review (2012), it has reorganised its academic committees to improve the oversight of academic practice (see also paragraph 21). The new post of Quality Enhancement Manager has resulted in improved levels of organisational critical self-awareness.

106 The College is using its knowledge and experience of Bournemouth University's procedures to further develop and adapt its own procedures. The monitoring and review processes are aligned to the Quality Code, with processes and responsibilities clearly defined. Scrutiny by Bournemouth University and the GCC of the periodic review of Postgraduate Certificate in Professional Development (Chiropractic) and the validation and recognition of the new MChiro (Hons) Master of Chiropractic clearly demonstrates the competence with which the College staff understand and discharge their responsibilities.

107 The College is responsive to developments in the professional and employment sectors, and also to pedagogic developments. The willingness to consider improvements to programme design is embedded within the ethos of the College. Periodic review (under the

control of Bournemouth) involves external input, while re-accreditation by PSRBs also involves external scrutiny. Monitoring and development of the essential clinical practice element of programmes by the Clinic include both student and external stakeholder participation, which is both positive and constructive. The design and development of the BSc Diagnostic Ultrasound programme incorporates both the expertise of College staff and a wide range of employers, practitioners and students.

108 The team saw evidence of the College's increasing confidence and self-criticality during the scrutiny period, including the strengthening of assessment practice through moderation and the standardisation of assessment briefings for assessment boards. Governance and oversight of the Clinic are enhanced with the separation of the formal Clinical Governance Committee and the informal Clinic Advisory Group that include positive practitioner and student participation. The College undertakes annual surveys to ascertain the preparedness of the College's students and graduates for clinical practice. There is strong monitoring of student progress through weekly tutor groups and both programme and Clinic meetings. Staff development days are a platform for staff discussion of pertinent issues and sharing of good practice. The effective annual monitoring process ensures that programmes remain current in knowledge and application with recommendations for change captured in an overall action plan.

## C Scholarship and the pedagogical effectiveness of academic staff

### Criterion C1

The staff of an organisation granted powers to award taught degrees will be competent to teach, facilitate learning and undertake assessment to the level of the qualifications being awarded.

109 The staff profile reflects the orientation of the programmes offered by the College towards academic knowledge in musculoskeletal health combined with associated professional qualifications and expertise. The staff skill set has been broadened in recent years beyond the original chiropractic to support the College's diversification strategy, albeit within the boundaries of musculoskeletal health. However, most staff are chiropractors.

110 Of a total head count of 32 full-time permanent academic staff and 13 part-time permanent academic staff (excluding research staff), 89 per cent hold appropriate professional qualifications; 60 per cent hold academic qualifications at master's level; 33 per cent hold doctorates; and 29 per cent have a teaching qualification for higher education. Almost half of the current academic staff achieved a postgraduate qualification while employed by the College.

111 To support the professional and practice orientation of programmes, there is a significant degree of part-time input from hourly paid, associate lecturers (26), who are clinicians. They are either in private practice or work in the NHS. Students confirmed that they value this input because it enriches their learning experience. The College relies on senior NHS consultants and general practitioners to contribute to the postgraduate diagnostic ultrasound programmes.

112 The College's learning and teaching strategy stresses 'the development of learner autonomy, implementation of innovative teaching, learning and assessment methods, and the promotion of good practice based on best practice within the institution and the wider higher education sector'. The team found that the College provides a wide spectrum of opportunities to enable staff to engage with pedagogic practices within the wider academic community. This engagement serves to offset the limitations posed by the smallness of the College and the potential for pedagogic insularity. The College is planning to focus in 2015-16 on the articulation of a vision of learning and teaching for the College.

113 Staff are encouraged to attend staff development activities at Bournemouth University and all new academic staff attend the University's three-day course for postgraduate research students on teaching skills. Staff work on doctoral supervisions alongside university staff, not only at Bournemouth but also at Portsmouth and Southampton universities.

114 From 2013 all new academic staff without teaching experience have been required to complete an appropriate teaching qualification, resourced by the College. The qualification reflects the needs of the role and circumstances of the individual member of staff. For all staff the minimum qualification is the online Essential Skills in Medical Education. Other qualifications can be undertaken instead, including the Postgraduate Certificate in Higher Education. The College encourages and supports all academic staff to become members of the Higher Education Academy (HEA). Of the total of 43 permanent academic staff, 15 staff (35 per cent) are associate members or fellows of the HEA.

115 The CSA explained that the College spends approximately two per cent of the total salary costs on professional subscriptions. The College pays the full fee for full-time staff and pro rata for part-time staff. All chiropractic staff must be registered with the General Chiropractic Council (GCC) and are required to undertake documented continuous professional development

(CPD) to retain registration. The College also supports a wide range of other relevant memberships. Clinical staff must have full registration with the relevant PSRB.

116 The College says that it has a commitment to research and recognises its value in informing the taught knowledge base, the student learning experience and clinical training and practice. Research is one of the three core competences on which the Strategic Plan is based.

117 The accreditation body (GCC) confirmed to the team that the College is 'a major research hub'. Research activities are documented in the College biennial research reports for 2009-11 and 2011-13. These reports cover a range of topics from publications and presentations to memberships and public involvement. College staff have successfully attracted grants from organisations in collaboration with universities. Academic staffing information indicates that 35 per cent of the current staff have published articles within the area of musculoskeletal research; eight per cent have published book chapters; and 42 per cent have made conference presentations.

118 To support this profile the College has appointed staff with expertise in research and scholarship and supported staff wishing to undertake a research degree. The CSA explained that all non-clinical academic staff are expected to have a PhD or other doctoral qualification. A professional or research doctorate is increasingly seen by the College as necessary for an individual's progression and promotion. Over the last 10 years, eight existing staff have successfully completed doctorate degrees.

119 The College does not ring-fence time for staff to undertake research. Published output is concentrated on a small number of staff. However, those who are not research active are able, through various staff development activities and short courses, to keep abreast of advanced scholarship and can access the College's professional development programme free of charge.

120 The College does not offer a doctoral programme. Staff work alongside university staff as members of joint PhD supervision teams in the universities of Bournemouth, Portsmouth and Southampton. The primary supervisor is a member of College academic staff. The current supervisors in the College are all active in research and scholarship. In the period 2011-13 College academic staff supervised a total of nine PhD students.

121 The CSA emphasised that the College encourages all academic staff to undertake further education and training to maintain and enhance their academic and professional practice. The team found that the College has in place a range of appropriate interventions to support the professional development of all teaching staff, whether full-time or part-time, or new or established. According to the CSA, the College commits approximately three per cent of the annual budget to staff development.

122 The College has a very extensive programme of CPD short courses and seminars, which all staff can attend free of charge. The College sets aside three days each year for staff development activities and workshops, with a strong focus on pedagogic issues. The College also supports membership of and subscriptions to relevant professional bodies.

123 The Research and Staff Development Committee provides oversight of the College's research strategy and operational activity. The Committee considers applications only for award-bearing courses, makes recommendations to the Principal and monitors the progress of staff and research students. All new academic staff are expected to have a teaching qualification. Existing staff without such a qualification are encouraged to acquire one. At the observed meeting of the Committee, all of the applications from existing staff for that purpose were endorsed. The Committee has no budgetary authority and recommendations go forward for the executive to sign off.

124 Using a standard pro forma, line managers appraise all permanent full-time and part-time staff employed by the College annually on their performance. Part-time staff that have a substantive NHS post can be appraised through a joint College/NHS meeting, subject to a local service agreement. Hourly paid or sessional lecturers in the Centre for Ultrasound Studies are not appraised through a formal system. The College's own process draws upon student evaluations and all aspects of the individual's activity. The action plan takes account of the College's strategic direction and the aspirations of the individual. The cycle involves the completion of a standard written document and an interview lasting between 60 and 90 minutes. It results in an individual action plan, in which targets are set, and education and training needs are identified. The progress of appraisal interviews and reports is tracked by the Human Resources Department and reported to the Human Relations and Policy Group. For the 2014-15 academic year, all of the appraisal interviews had been completed by March 2015. The allocations of resources for development activities, if needed and available, follow in the summer for the next academic year. Part-time staff can apply for support for award-bearing courses and can attend CPD events free of charge.

125 The teaching staff told the team that there are many channels for peer-to-peer review, such as laboratory interactions and staff development days. The team noted, however, that there is no formal programme of peer observation.

126 The team found that College programme leaders have extensive experience of curriculum development and assessment design that is directly relevant to the programmes currently offered and planned.

127 Over the 10 years in which Bournemouth University has been the College's validating partner, the College has been consistently successful in all the programmes it has developed and presented for validation. Senior staff are members of the Academic Board of Bournemouth University and are members of other committees of the University. Five academic staff are members of Bournemouth University's Quality Assurance and Enhancement Group, which offers them access to knowledge about curricular and pedagogical developments in disciplines outside of musculoskeletal health.

128 Several senior staff have experience in chiropractic education in other leading institutions overseas and have been involved in NHS groups, as well as holding postgraduate qualifications in areas such as medical education. The College also makes a contribution to chiropractic education through articles in specialist publications. The Director of the Clinic was a member of a QAA benchmarking project in 2003 and 2006. Several staff play or have played prominent parts in the programme accreditation activities of the European Council for Chiropractic Education.

129 The College is the largest organisation in the UK for the training of chiropractors, with an international reach. However, this is a much specialised field with only a small number of comparable institutions in the UK and overseas. The number of opportunities for engagement with other organisations is therefore limited. In view of this, the team found that academic leaders are involved in a pertinent range of external activities with professional bodies and higher education institutions in the UK and Europe.

130 Of the 10 academic leaders, two currently act as external examiners; one had been involved with a QAA benchmarking project (2003 and 2006) and five are or have been involved in other relevant activities, including those of the GCC.

131 The Vice Principal Undergraduate and Quality is the Chair of the Commission on Accreditation of the European Council of Chiropractic Education (ECCE), a body that currently accredits nine institutions worldwide, including the College. The Principal and Vice Principal Postgraduate and Research have chaired accreditation panels on behalf of the Council.

## D The environment supporting the delivery of taught higher education programmes

### Criterion D1

The teaching and learning infrastructure of an organisation granted taught degree awarding powers, including its student support and administrative support arrangements, is effective and monitored.

132 The programme management groups and ADQC monitor effectiveness in teaching and learning. Annual monitoring reports are produced for each course. Effectiveness is also monitored through the internal and external examination processes. Student questionnaires are used as an important evidential and analytical tool.

133 At the level of monitoring the progress of individual students, the undergraduate student progress group and the Assessment Boards play very important roles. The former Group meets three times a year to scrutinise the assessment results to date and to note any concerns about student attendance and mitigating circumstances. The team observed that there is strong evidence of a sound system for identifying, informing and meeting with students whose performance puts them at risk of failing or not completing their programme. The team observed the same degree of care in the evidence used, and the decisions made, by the end-of-year Undergraduate (Chiropractic) and Postgraduate Assessment Boards. The Boards also considered continuation and wastage trends for the last three years.

134 The student intranet and VLE, which can be accessed remotely, provide notices about assessment deadlines and examinations. Student progress groups for undergraduate programmes meet once a term, and for postgraduate programmes twice a year to review examination and coursework results, enabling the identification of problem cases and the provision of support.

135 The CSA explained that written assessments are normally returned to students, with feedback, within the stipulated three weeks of submission. The data suggests that there is a strong compliance with this rule. Detailed statistics on turnaround times are reported as part of the annual monitoring process. For 2013-14, between 92 and 98 per cent of assignments submitted were returned within the time limit across all Bournemouth University-validated programmes, which marked an improvement over the previous year.

136 Students receive formalised written feedback on summative assignments. In the CSA it is reported that the quality of feedback has received favourable comment from external examiners.

137 The team notes a more varied picture with respect to both formative and summative feedback. The Partner Review conducted by Bournemouth University in March 2015 also found some mixed practice with respect to the consistency of assessment feedback. Undergraduate students who met the team in October 2014 commented on the variability in face-to-face feedback on written assignments. However, in July 2015 students reported to the GCC that feedback on assignments had improved.

138 The CSA explained that the nature of many of the programmes in teaching practical and clinical skills in clinic and workshop settings facilitates continuous and individual feedback to students. This corresponded to the experience that students reported to the team. There is a new initiative to use audience response technology to provide formative feedback in real time. It is unclear as yet how far and with what success this has been adopted. Feedback for those students who fail in clinical assessments was said by students to be quick and helpful, whereas feedback on examinations was slower and vaguer, and varied between lecturers.

139 In addition to standard programme evaluation questionnaires and the NSS, there is a system of student representation managed by the Students' Union through year groups and course groups.

140 The College has its own student evaluation questionnaires, which differ for undergraduate and postgraduate students. The undergraduate chiropractic students complete an electronic Student Perception of Course (PSoC) survey but the response rate has in past years been relatively low. The timing has been adjusted for 2015 to encourage a higher response rate. Postgraduate students complete an end-of-year feedback questionnaire, with a generally good response rate.

141 The College has its own Students' Union with a number of Executive Officers, including the Students' Union President, who is at the same time a current student. A Students' Union Manager, who is a full-time member of staff, supports the Students' Union. The Students' Union trains the representatives for their roles. Students are members of all the academic committees except the Ethics Subcommittee of the Research Committee. Student representatives are asked by the Students' Union to provide written reports for meetings. The President of the Students' Union is a member of the Board of Governors. At a less formal level, there are regular meetings between the senior management and officers of the Students' Union and academic year and cohort representatives. The Principal has an open-door policy.

142 As part of the response to one of the recommendations of the 2012 QAA Institutional Review, the College recently established a SSLSC, which reports to ADQC. This is to provide a formal channel for feedback on quality assurance and the enhancement of learning opportunities. Team members observed a variable level of student engagement in discussion in the meetings they attended of this and other committees, despite the efforts of the respective chairs to seek student views. Students did not contribute to discussions about institutional policy and strategy on quality assurance and enhancement.

143 However, there is evidence that their views are regularly and routinely sought and given on matters that touch the student experience more directly and immediately. There are two representatives for each year of each programme. Chiropractic student representatives have a review session each term with their year group to collect feedback for submission to the Year Tutor. The Year Tutor provides a written response to all the feedback received for the Student Representative to share with the student body. Postgraduate students normally provide feedback via email, as they are normally studying at a distance from the College. Students expressed general satisfaction with the student representation system.

144 Students are especially active and vocal where issues of immediate concern to them are being considered. Students who met the team said that student representation allowed discussion with various elements of the College, which they valued. An example is the positive response to their specific request to record lectures. However, the team heard some reservations about the responsiveness of the College to the students' input. An outstanding example is the initial failure, in the students' view, of the College to provide sufficient information about the arrangements for the transition of existing students to the new MChiro. Bournemouth University requested that information on this matter should not be provided until after arrangements had been approved by the University's Academic Standards Committee. This context resulted in some difficulty for the College but as soon as it was in a position to do so, the College SMG responded by meeting with student groups and providing information about transition arrangements on the VLE, which put a halt to rumours and allayed anxieties, according to students.

145 It is evident from the 2014 NSS results that there had been a sharp dip in the scores for assessment and feedback questions, academic support, and organisation and management compared with the sector average; the average for Bournemouth University; and the MChiro in

the previous year's survey. The College had sought student views on these outcomes and reported the views in full at a Staff Development Day. The students had commented that there was a lot of variability in the quality and timeliness of assessment feedback at the undergraduate level, especially for written work. As noted earlier, however, the data suggests turnaround times are very good for formative assignments, which led the team to conclude that timeliness is not a general issue. Students commented that feedback in the clinic was quick and helpful. The team gained the view that students are consulted about and engaged with the design of programmes, for example the new MChiro.

146 All members of staff belong to the Staff Association. The Association serves as a vehicle for staff in formal discussions with the College management. The Chair of the Association, who is elected from the staff, has direct access to the Principal and is a member of the Human Resources Policy Group. There are termly staff breakfast meetings for all staff hosted by the Principal and termly staff assemblies. There is a weekly online bulletin, Grapevine, published by the marketing department, to inform staff (and students) about College news. The staff that met the team were confident that the staff voice is heard both formally and informally.

147 Employers in the chiropractic field tend to work in small businesses, which limits the ability of the College to garner regular and consistent feedback from them. The GCC, which has a role in representing the requirements of the profession, is well placed to offer feedback and advice, especially through the recognition process. Stakeholder feedback is provided through specialist inputs to programme design (illustrated in the College's current plans to develop a BSc Ultrasound); to approval and review; guest lectures; and through the Preparedness to Practice annual surveys, now in their sixth year, of chiropractic graduates.

148 The College undertakes an annual survey to ascertain the effectiveness of its provision in preparing students and graduates for clinical practice. From the intern cohort of 2013-14, more than 85 per cent of respondents to the survey reported that the College experience had prepared them fairly well or better. A survey in 2012 of the impact of the postgraduate programme on professional practice also yielded a positive result. The team found evidence that the outcomes of questionnaires are discussed at staff development days in an open and self-critical way and used to inform new programme design, for example in the decision to include a business management unit in the new MSc Chiropractic programme.

149 The Board of Governors includes several external stakeholders with a range of skill sets, including chiropractic, medicine, finance, health regulation and practice, higher education and law. The Board has a clear strategy to ensure appropriate membership through its nominations procedure and decided recently to reduce the proportion of chiropractic representatives to reflect the College's strategic repositioning.

150 There are two external representatives on Academic Board, one from Bournemouth University and one from Southampton University. This adds a useful external perspective to discussion.

151 The team concluded that the College has very good mechanisms for obtaining and evaluating feedback and returning feedback to its stakeholders.

152 In the entire process of supplying information for potential applicants and handling applications and enrolment, the College acts independently of the University.

153 Information for prospective students is provided on the College's website and through its paper prospectus. Academic Registry staff handle requests for information and deal with queries from both undergraduate and postgraduate potential students. In the view of the undergraduate students who met the team, the public information provides an accurate representation of the College and its programmes.



154 UK undergraduate applicants are all interviewed. From September 2013 the UK interview panel has included student representation. Norwegian applicants are interviewed in country or remotely via internet videoconferencing by the Vice Principal (Undergraduate and Quality). Other non-UK applicants are required to present a letter from their national chiropractic association and are expected to have a certified capacity with English language at an appropriate level.

155 The Academic Registrar is responsible for the two-day induction programme for undergraduates. The programme includes contributions from academic and administrative staff and student officers of the Students' Union. A 'Survival guide' is prepared by the Students' Union, which is sent to students in advance of induction. Students on the BSc Clinical Exercise Science programme, co-delivered with the University, spend one day of their induction period at the College and the remainder at the University.

156 By contrast, postgraduate students, who are usually more mature and in employment, often at a senior level, attend College only on an occasional basis. They receive a half-day induction, organised by the Postgraduate Office, which focuses particularly on their programme of study, the regulatory framework and using the VLE effectively.

157 Students commented favourably on the support and advice they had received in their application, including reference to special needs. They said the induction programme was very clear, easy to follow and well organised, as were the introductions to the library and e-learning resources.

158 Undergraduate students are supported by an academic tutor system. The role of the personal tutor is defined in the student handbooks. All students meet their year one tutor and personal tutor at an introductory lecture during the first week of term. The personal tutor provides support throughout their programme of study. Students have regular timetabled meetings with tutors. Students commented favourably on the accessibility of staff and on their open-door policy. Such tutors are generally full-time members of staff. From 2012 there has been a mentoring system whereby new students are provided with mentors drawn from the year two student cohort. There is also an in-course induction, valued by students, as undergraduate students make the transition from years three to four in the undergraduate chiropractic programme, and move into a clinical learning environment.

159 The College receives applications from a relatively high proportion of overseas candidates, with over 50 per cent coming from Europe. The Institutional Review by QAA in 2012 recommended that the College put in place a formal induction process for the start of 2012-13. The College website has a dedicated section, International Students' Information, and offers an interactive web learning tool, Prepare for Success. Responsibility for assisting overseas students to settle into College life in Bournemouth rests with the Students' Union through an International Officer, rather than the College itself. The international students who met the team expressed satisfaction with the arrangements.

160 The team found that the College has a range of well-equipped teaching facilities, with up-to-date resources that are relevant to the College's programmes. The team was also satisfied that the College has sufficient resources to acquire, maintain and replace these resources. These facilities include the teaching clinic and the Centre for Ultrasound Studies, a range of teaching rooms and laboratories, a human prosection facility and a specialist library. Students learn anatomy from embalmed specimens in a facility regulated by the Human Tissue Authority, as well as from anatomical models. There are dedicated computer areas with printer access with a student:computer ratio of 5:1, and wireless access throughout the campus. Students can access course notes and downloadable hand-outs on the student intranet and VLE.

161 The purpose-built clinic and the Centre for Ultrasound Studies are important sources of learning resources. They offer appropriate equipment and facilities for student learning and observation and for patient-centred practice. The QAA Institutional Review (2012) report identified the clinic as a feature of good practice. The on-site clinical learning facilities for the MSc Medical Ultrasound were commended in the evaluation report for that programme.

162 In the NSS (2014) students expressed more satisfaction with the category 'learning resources' than any other. The College average was above the averages for Bournemouth University and the sector. Students who met the team considered that resources, including online resources and induction support, are very good. Students also reported that the library staff are 'very helpful'. The library conducts user surveys (students and staff) every two years. However, students expressed some concern about access to Bournemouth University's medical journals database, post TDAP. The team learned that the College had made considerable investment in learning resources. The College's electronic journals number around 6,000 and there are also anatomical and image databases.

163 The College has developed the Learning and Teaching Technology Road Map (2013) relating to learning opportunities based on information and communication technologies. The plan is to shift away from a VLE, which acts as a content management system, to a platform that evolves into a functioning managed learning environment. This is planned to offer a central, interactive portal for student learning needs. In 2014-15 the College consolidated its own VLE and ceased to use the Bournemouth University VLE for any of its own provision. Students have input into the use of the College VLE as a learning resource. A new multimedia suite, to populate the VLE, is available to students and staff through a booking system. The suite opened at the end of 2014. The team was told that the College is relying on a cascading approach to staff training in the development and use of e-learning materials.

164 The team found that the College has a very conscientious, empathetic and systematic approach to the support of students who require additional learning support, using its own resources and those of its partner University.

165 Student progress groups for undergraduate and postgraduate programmes play a critical role. These meet regularly to discuss students who are not making satisfactory progress on an individual basis, and refer them to appropriate sources of help. Undergraduate students are invited to an interview with their Year Tutor, and a period of academic probation with a personal action plan may be implemented. In the case of postgraduate students, there is an equivalent Student Progress Committee, which is similarly conscientious in its identification of and support for students who are at academic risk. Due to the wide geographical dispersal of the students, and infrequency of face-to-face contact with staff, support for some students who are at academic risk is through regular online communication. The team noted the in-depth knowledge of individual students and the judicious professionalism shown by the student progress groups.

166 Additional specialist support is available in the College for English language and study skills. Other specialist support, for example for dyslexic students, is available to College students through the Bournemouth University Learning Support Team and counselling services. Students who met the team were positive about the University support services. The College has identified the needs and funding required to sustain support post TDAP.

167 In the CSA the College recognises that with the growth of programmes, the management information systems had become fragmented, with information recorded in several databases, which limited accessibility. The QAA Institutional Review (2012) recommended that the College should develop a more systematic, comprehensive and centralised process for monitoring student data.

168 The College reviewed its information systems in 2012-13. The outcome was that the College put on hold the purchase of a commercial information management package. It is implementing an interim solution and has revised its plans to have a centralised student database by the end of 2013-14. The team witnessed the application of the interim solution.

169 Student admissions and enrolment data are held by the registry and student progress data by the appropriate programme office. The College manages its own assessment boards for its franchised programmes. In August 2014 a number of significant errors relating to data processing for assessment boards came to light (see paragraph 28 for detail). As a consequence, an Assessment Board Progress Chart has been developed to clarify where responsibility lies and to identify staff that need to be trained. The new process is designed to remove any single point of failure.

170 From the team's observations of student progress groups, and of the assessment boards held in July 2015, there is evidence that the data used is accurate, secure and accessible. The team witnessed sound monitoring and decision-making on student progression and performance based on this data.

171 For its undergraduate chiropractic and Access to Higher Education provision, the College has developed its own policies and procedures covering student complaints and student appeals. These are set out in the generic student handbook in e-format. The QAA Institutional Review (2012) recommended that the College should review its policies and procedures on appeals to align them with the expanded academic portfolio. The Access to Higher Education Diploma (Health Sciences) is aligned to APT awards (the College's validating partner for this programme), underpinned by modified versions of the College's regulations, policies and procedures.

172 Postgraduate programmes follow the University's standard procedures on complaints and appeals for taught postgraduate degrees, while the BSc Clinical Exercise Science programme, which is co-taught with the College and University, is entirely governed by the University's standard regulations, policies and procedures.

173 Students can seek advice from the Students' Union Manager, the Undergraduate Programmes Office and the Academic Registrar, each of which offers students distance from those directly responsible for the delivery of their programme. The Academic Registrar deals with formal complaints and academic appeals.

174 In the light of the QAA recommendation and a request from the Students' Union, the College recently reviewed and amended its academic appeals process. It is evident from the supporting papers and the discussion at the Board that student concerns had been taken very seriously by the senior staff. The Board agreed to a more effective filtering process before the full Academic Appeals Panel considers appeals. There is to be a separation between those involved in advising appellants and those involved in undertaking the initial investigation of the validity of the student's appeal. It was confirmed that, in future, there would be a student member on the Academic Appeals Panel, who would be trained, and that normally the hearing would be held within 10 working days of the request. It was agreed that implementation would be immediate. A current student, who requested it, could appeal against the existing rather than the new regulations.

175 The team found that the College has well-developed policies and procedures to support the professional development of all staff in most respects. The Human Resources Policy Group, which meets monthly, is a management group which has oversight of human resource policies and procedures for all staff, including training and professional development.

176 All staff (academic, administrative and support) have an annual appraisal with their line manager, which may identify education and training needs. Staff who wish to enrol on a higher

degree award make an application to the Research and Staff Development Committee. The team noted that, of the eight applicants for the year 2015-16, the applications of the three who are administrative and support staff were given approval. For other kinds of staff development, heads of department have the authority to support staff from their own budgets.

177 From 2013 all new academic staff without teaching experience have been required to complete an appropriate teaching qualification, resourced by the College. The qualification reflects the needs of the role and circumstances of the individual member of staff and is most commonly either the Essential Skills in Medical Education (ESME) certificate or the PgCert HE. The College encourages and supports all academic staff to become members of the Higher Education Academy (HEA). Of the total of 43 permanent academic staff, 15 (or 35 per cent) are associate members or fellows of the HEA.

178 The College runs a very extensive continuing professional development programme of seminars and workshops for practitioners, which full-time and part-time staff can attend free of charge, as can students. The programme is timed to facilitate the attendance of part-time staff and external practitioners. The programme covers new developments in the practice of musculoskeletal medicine and allied areas. As these events often involve external speakers, staff are given the opportunity to engage with and contribute to developments in professional practice.

179 The College has been running a one-day staff development seminar once a term since December 2009. The purpose is to provide an opportunity for academic staff to engage with pedagogic developments and current programme issues and to share good practice across the College's taught programmes. Visiting speakers from Bournemouth University, other universities or the profession are often invited. All internal academic staff are expected to attend unless they have timetabled clinical or teaching commitments, and administrative support staff may attend sessions that are deemed to be relevant to their brief. At the seminar observed by the team, of the 31 staff who attended, 25 were academics (58 per cent of academic staff) and five were administrative and support staff. The meeting was provided with appropriate information and materials, and there was a high level of engagement by participants. Presentational materials were circulated after the development day. There was no explicit attempt to identify a programme of future action.

180 A weekly online bulletin published by the marketing department is intended to keep all staff up to date with College news. There is a scheduled Staff Assembly once a term, open to all staff, at which the Principal updates staff on key developments in the College and invites questions and comments. The presentation is made available electronically to staff afterwards and placed in the staff room. From the team's observation, the Principal addressed the main strategic issues facing the College in an open and comprehensive way. Around 60 academic, administrative and support staff attended the meeting.

181 Clinical staff must have full registration with the relevant PSRB. Academic clinicians must be registered with the GCC and are required to undertake documented continuing professional development to retain registration. The College also supports a wide range of other relevant memberships.

182 The team concluded that the external information system is generally sound. It is overseen by the marketing department, with sign-off responsibility by individual line managers. The Centre for Ultrasound Studies has its own website, describing programmes and courses in diagnostic ultrasound, as does the Spine Centre, describing products and devices for health practitioners. However, in its quest to maintain and improve the College's market position, the senior management is seeking to achieve more consistency in its approach to brand, images and marketing. In this respect, the Marketing Group, which has oversight of the College's

marketing and promotional activities, is seen by the senior management to play an important role.

183 The College website contains a great deal of information for all stakeholders, including students, alumni, employers, patients and the general public. It is easy to navigate. The College Prospectus, which is updated annually, offers another significant resource for prospective students. The students whom the team met confirmed that in their experience the published material was accurate and comprehensive.

184 The College's Strategic Plan: 2020 Vision (Revision - March 2013) states that the College is committed to developing and maintaining an institution where students from all backgrounds can flourish. In the Plan, the College recognises the importance of equality of opportunity and promoting diversity. The team found that the College gives attention to equality of opportunity. However, it does not engage in the systematic analysis of the impact of its policies and practices on equality of opportunity. The CSA states that the College applies its admissions policies and procedures with due regard to the Equality Act 2010 and its own Dignity, Diversity and Equality (DDE) policy and procedures, the latter also applying to staff recruitment. The policy is reviewed every five years unless relevant legislation changes.

185 The College is aware that the age and listed status of the main College building prevent it from being disability-accessible, though in any case students must be able-bodied to meet the requirements of the GCC for safe practice. The new clinic building is Equality Act-compliant, as is the Centre for Ultrasound Studies.

186 The College uses the services of the Bournemouth University Additional Learning Support Team on a needs basis. The College is committed to the continuation of a comparable service post TDAP. Students reported to the team that this service is well organised and effective.

187 As noted earlier, the College has a high proportion of international students. Such students are fully integrated at the teaching group level. It also has a number of international members of staff which, according to the staff who met the team, can assist integration. The team found evidence that adjustments are made, where possible, to the cultural or religious preferences of individual students. In one case the College respected the wishes of a Muslim student to treat, and only be treated by, female students in training.

188 The College admits applicants with evidence of prior learning equivalent to the intended programme of study for chiropractic undergraduate and postgraduate programmes. Decisions are taken by the Programme Leader and ratified by the relevant assessment board.

189 The College participates in the University's access agreement approved by OFFA but acknowledges that, because chiropractic as a health profession is less well known than comparable professions, it is difficult to widen access outside of circles where students are already familiar with chiropractic. The College has plans to reach potential students from more diverse backgrounds through a targeted marketing campaign.

190 The College also pays close attention to the retention of students through the careful monitoring of attendance. Through the student progress committees there are effective formal mechanisms that activate support where there is cause for concern.

191 Following a recommendation from the QAA Institutional Review (2012), the College reviewed its induction policy and procedures for academic staff. There is now a full induction and a comprehensive checklist used by managers to cover all the information and procedures relevant to new employees. New employees are paired with a mentor during their 10-month probation period.

192 The College has a comprehensive equality and diversity training programme, which is a requirement for all staff. The programme involves an online Educare E-Learning course monitored by the Human Resources Policy Group, reinforced by a half-day workshop. There is specific training for chairs of interview panels.

193 The College gives attention to part-time staff, availing them of the same opportunities as full-time staff. These opportunities include keeping them in the loop via the newsletter and invitations to training events and meetings, and appraisal. Part-time staff can apply for funded support for award-bearing courses.

## Annex: Sub-panel visit report

### Introduction

194 The Anglo-European College of Chiropractic's (the College's) application was considered by QAA's Advisory Committee on Degree Awarding Powers (ACDAP) in May 2014 when the Committee agreed to proceed to the detailed scrutiny of the application. A final report on the detailed scrutiny was considered by ACDAP in November 2015.

195 ACDAP's consideration of the final report suggested that it would be helpful for a sub-panel of the Committee to visit the College to explore further several areas of particular relevance to Criterion A Governance and Academic Management, as follows:

- the College's financial position
- compliance with *The Higher Education Code of Governance* (Committee of University Chairs, 2014)
- the capacity of the Board of Governors to oversee the academic governance of the institution
- risk management and the role of the recently established (2014-15) Audit Committee
- the extent to which the College has engaged in mature reflection of the effectiveness of the revised academic committee structure.

196 An ACDAP sub-panel was appointed comprising Mr Andrew Ramsay (Chair), Mr Aaron Porter and Professor Nigel Savage. The work of the sub-panel was coordinated by Dr Irene Ainsworth and Mr Matthew Cott, on behalf of QAA.

197 The sub-panel agreed a programme and visited the College on Thursday 28 January 2016 to meet members of the Board of Governors; the Principal; members of the Senior Management Group; and members of the Student-Staff Liaison Committee, Learning and Teaching Committee and Academic Audit Committee. The sub-panel's report from the visit was shared with the College and the College was invited to respond to the report if it wished alongside the report to be considered by ACDAP at its meeting on 4 February 2016.

### Structure of this report

198 The report structure reflects discussion of those matters of further interest to the Committee.

### The College's financial position

199 The scrutiny team's report had drawn attention to losses incurred in 2013-14 and the sub-panel noted the progressive increase in expenditure against a fairly static income since 2010. The sub-panel therefore sought to establish the health of the College's current and likely future financial position.

200 In January 2016 the College had been notified by the Minister for State for Universities and Science that the College met the legislative criterion, principles and tests for designation as an institution eligible to receive support from funds administered by the Higher Education Funding Council for England. The College has introduced a revised curriculum model and applications from potential students increased by 17 per cent in 2015-16, with applications for 2016-17 increasing by a further 17 per cent. Student recruitment targets are therefore looking healthy. Previous rates of conversion of applications to enrolments were reported as 52 per cent and, if that trend continued, the senior management team considered that the College would be well ahead of its projected income targets.

201 The College has a five-year budget and income in the current year is in line with projections to achieve a surplus of £100,000. These indicators, coupled with a reduction in overhead costs as a consequence of renegotiating the fees payable to the College's validating university, have contributed to a stronger financial position.

202 The College provided a clear account, in terms of its liabilities, of its pension scheme. Members of the Board of Governors confirmed that the College is free of debt and has significant reserves and assets. Overall, the sub-panel was reassured that the deficit budget operated by the College had been planned as a temporary period, that its financial position is now improving and that prospects look strong for the future.

## **Compliance with The Higher Education Code of Governance**

203 The scrutiny team's report noted that, in enhancing its effectiveness, the Board of Governors was undertaking an ongoing review of how it complies with *The Higher Education Code of Governance* (the Code) published in December 2014 by the Committee of University Chairs (CUC).

204 The sub-panel found that the College has made considerable progress in embedding compliance with the Code. Governors have received training on the requirements of the Code and the College has developed a comprehensive mapping document, setting out evidence of compliance and progress to date. A column in the document indicates any actions required and who is responsible for that action. Actions are highlighted using a red, amber and green system. The members of the Board who met the sub-panel showed strong awareness of the Code. Together with the responses from other participants, the sub-panel concluded that the College is taking clear steps to ensure compliance with the Code.

## **Capacity of the Board of Governors to oversee academic governance of the institution**

205 The sub-panel met six members of the Board of Governors and discussed a range of topics related to the academic governance of the College. It was clear from the discussion that both individually and collectively there is sufficient experience and expertise to oversee the academic governance of the College.

206 The sub-panel was reassured that the Board had been actively engaged, for example, in the discussions and decisions about the changes to the curriculum model deemed necessary to address a decline in applications for standalone taught master's degrees. Here, the sub-panel was also informed by student representatives that there had been some uncertainty among students about the revised curriculum and its implications for their studies, which may have accounted for a dip in some scores in the National Student Survey. The Board of Governors members' responses to the sub-panel's questions demonstrated that they were aware of, and in touch with, this issue.

## **Risk management and the role of the recently established Audit Committee**

207 The College explained to the sub-panel that it had taken steps to formalise risk management arrangements over the last two years. Before this, risk management activity had been undertaken but was more implicit in the College's practice. The College now has departmental risk registers linked to the corporate risk register. The sub-panel also read minutes of the Audit Committee and internal audit plans to understand further the College's emerging formalised approach. Following a period of testing the new approach, the Board of Governors expected to sign off the finalised format for its corporate risk register in spring 2016.



The sub-panel concluded that there was sufficient evidence to demonstrate that the College is on track with embedding its more formalised approach to risk management.

208 The sub-panel found that the Audit Committee, established in 2014-15, is functioning effectively in the new risk management arrangements that have been adopted by the College, with evidence of independent review and governor challenge to management responses.

### **Effectiveness of the revised academic committee structure**

209 The scrutiny team's report explained that the College reviewed and made revisions to its academic committee structure in 2014 and that, in 2015, the College reviewed the new structure and concluded that it was fit for purpose. The sub-panel discussed the effectiveness of the revised committee structure with those it met during the visit, including student representatives who sit on those committees. The sub-panel noted the balanced views expressed that the revised structure was working effectively and was also reassured by the College's acknowledgement that a further review, already planned for the period post taught degree awarding powers scrutiny, would be likely to lead to further changes to reflect the loss of Bournemouth University's oversight of academic review and the need to strengthen teaching resources (for which planning was well advanced). The sub-panel concluded that the College has reflected on the effectiveness of the revised academic committee structure and can be expected to continue to do so.

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