Higher Education Review (Embedded Colleges)
A handbook for embedded colleges undergoing review in 2017
June 2017
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Summary

1. The Higher Education Review (Embedded Colleges) method follows the Higher Education Review process for other alternative providers, with some adaptations to accommodate the nature and operation of embedded college networks. Higher Education Review (Embedded Colleges) addresses the specific needs of providers that operate networks of colleges embedded on or near the campuses of two or more UK higher education institutions that primarily provide preparatory programmes for higher education. For the purposes of this handbook, the term 'provider' refers to the central administrative organisation that is applying for educational oversight from QAA. 'Embedded colleges' refers to the providers' centres of delivery. Typically, a provider conducts its central functions from a separate headquarters but may operate from one or more of its embedded colleges.

2. Higher Education Review (Embedded Colleges) has two components. The first component is a check on financial sustainability, management and governance (the FSMG check), which has the aim of giving students reasonable confidence that they should not be at risk of being unable to complete their course as a result of financial failure of their education provider. The second component is review of the provider's arrangements for setting and maintaining the academic standards and quality of the courses it offers (the review of quality assurance arrangements). This component aims to inform students and the wider public whether a provider and its embedded colleges meet the expectations of the higher education sector for the setting and/or maintenance of academic standards, the provision of learning opportunities, the provision of information, and the enhancement of the quality of students' learning opportunities.

3. The review of quality assurance arrangements is carried out by peer reviewers - staff and students from other higher education institutions. The reviewers are guided by the Expectations about UK higher education provision contained in the UK Quality Code for Higher Education (the Quality Code) and other relevant external reference points.

4. Students are at the heart of Higher Education Review (Embedded Colleges). There are opportunities for students to take part in the review, including by contributing a student submission, meeting the review team during the review visit, working with their embedded colleges in response to review outcomes, and acting as the lead student representative for an embedded college. In addition, review teams of four or more normally include a student reviewer.

5. Higher Education Review (Embedded Colleges) culminates in the publication of a report for each embedded college and for the provider, containing judgements and other findings. The provider and embedded colleges are then required to produce an action plan in consultation with students, describing how they intend to respond to those findings. Action plans, and the provider/embedded colleges' arrangements for ongoing quality monitoring and enhancement, are monitored through the QAA's annual monitoring process.
Part 1: Introduction and overview

Introduction

6 The mission of QAA is to safeguard standards and improve the quality of UK higher education wherever it is delivered around the world. In furtherance of this mission, QAA undertakes reviews of higher education offered by universities, colleges, alternative providers, and recognised overseas providers.

7 QAA’s principal method of review of alternative providers is called Higher Education Review (Alternative Providers). Higher Education Review (Embedded Colleges) incorporates the principles of Higher Education Review (Alternative Providers) and addresses the specific needs of providers that operate networks of colleges embedded on or near the campuses of two or more UK higher education institutions that primarily provide preparatory programmes for higher education.

8 The purpose of this handbook is to:

 state the aims of Higher Education Review (Embedded Colleges)
 give guidance to providers preparing for, and taking part in, Higher Education Review (Embedded Colleges).

9 The handbook is intended for providers going through the review process from 2017 (that is, with review visits taking place after 1 January 2017). It is also intended for teams conducting Higher Education Review (Embedded Colleges) and to provide information and guidance for degree-awarding bodies and awarding organisations involved in the review of providers/embedded colleges who deliver their awards. QAA provides separate guidance for students. QAA also provides other guidance notes to assist providers in preparing for review and supports the implementation of the method through briefing and training events.

10 Higher Education Review (Embedded Colleges) has been designed to meet the Standards and Guidelines for Quality Assurance in the European Higher Education Area.¹ QAA has been judged to be fully compliant with these standards and guidelines by the European Association for Quality Assurance in Higher Education (ENQA).

Aims of Higher Education Review (Embedded Colleges)

11 The overall aims of Higher Education Review (Embedded Colleges) are to:

 give students reasonable confidence that they should not be at risk of being unable to complete their course as a result of financial failure of their education provider or embedded college
 inform students and the wider public as to whether a provider, through its embedded colleges:
  - sets and maintains the academic standards of the qualifications it offers itself and any that it offers on behalf of its degree-awarding bodies and/or other awarding organisations²

² Providers and embedded colleges work with degree-awarding bodies and/or other awarding organisations who retain responsibility for the academic standards of any awards granted in their names, and for ensuring that the quality of learning opportunities offered is adequate to enable students to achieve the academic standards required for their awards. In addition, providers may offer their own certificates and diplomas, for which the provider is wholly responsible for the academic standards and quality of learning opportunities.
- provides learning opportunities which allow students to achieve the relevant awards and qualifications and meet the applicable Expectations outlined in the Quality Code, including the UK-wide reference points it endorses
- provides information that is fit for purpose, accessible and trustworthy for the general public, prospective students, current students, students on completion of their studies, and those with responsibility for academic standards and quality
- plans effectively to enhance the quality of its provision.

12 The first of these aims is addressed through a check on financial sustainability, management and governance (the FSMG check); the second by a review of providers’ arrangements for maintaining the academic standards and quality of the courses they offer (the review of quality assurance arrangements). The FSMG check is conducted entirely separately from the review of quality assurance arrangements. The remainder of this handbook is concerned with the review of quality assurance arrangements.

Judgements and reference points

13 In the review of quality assurance arrangements, we ask review teams to make judgements about the provider on:

- the setting and/or maintenance of academic standards
- the quality of students’ learning opportunities
- information about learning opportunities
- the enhancement of students’ learning opportunities.

14 In addition, the review team will make judgements about each embedded college on:

- the maintenance of academic standards
- the quality of students’ learning opportunities
- information about learning opportunities.

15 Review teams will write a commentary on how each embedded college is implementing the provider’s strategic approach to enhancement, but the team will not make a judgement on enhancement at college level.

16 The judgements on the setting and/or maintenance of academic standards will be expressed as one of the following: meets UK expectations, requires improvement to meet UK expectations or does not meet UK expectations. The judgements on learning opportunities, information and enhancement will each be expressed as one of the following: commended, meets UK expectations, requires improvement to meet UK expectations or does not meet UK expectations. The judgements 'commended' and 'meets UK expectations' are considered to be satisfactory judgements, whereas the judgements 'requires improvement to meet UK expectations' and 'does not meet UK expectations' are unsatisfactory.

17 The judgements are made by teams of peers by reference to the Expectations in the Quality Code and other relevant external reference points. Judgements represent the reasonable conclusions that a review team is able to come to, based on the evidence and time available. The criteria which review teams will use to determine their judgements are set out in Annex 2.

18 Review judgements may be differentiated so that different judgements may apply, for example, to pre-undergraduate degree or pre-master's programmes.
The review team will also identify for the provider and for each embedded college, features of good practice, affirm developments or plans already in progress and make recommendations for action. The recommendations will indicate the urgency with which the team thinks each recommendation should be addressed. Some good practice, affirmations or recommendations may be common across the network, others may be specific to one or more embedded college. The most urgent recommendations will have a deadline of one month after publication of the review report. QAA will expect providers and embedded colleges to take notice of these deadlines when they construct their action plans after the review.

Scope and coverage

Higher Education Review (Embedded Colleges) encompasses all higher education provision covered by The Framework for Higher Education Qualifications in England, Wales and Northern Ireland (FHEQ) and The Framework for Qualifications of Higher Education Institutions in Scotland (FQHEIS), and provision that is designed to prepare students for higher education programmes (typically equivalent to Level 3 of the Regulated Qualifications Framework). It will examine the provider's management of the academic standards of awards and the quality of learning opportunities for students offered through its embedded colleges, in the context of its collaborative agreements with partner higher education institution(s). Partner higher education institution(s) may be awarding bodies for some or all of the provision, in which case the embedded college's discharge of its responsibilities under the collaborative agreements will be considered.

Desk-based analysis

The review of quality assurance arrangements takes place in two stages. The first stage is a desk-based analysis by the review team of a wide range of information about the programmes of study on offer. Most of this information, including the self-evaluation document, is given by the provider, some is given by students and some is assembled by QAA.

An important part of the information base for the desk-based analysis is a student submission, which describes what it is like to be a student studying at an embedded college, and how students' views are considered in the provider's and embedded colleges' decision-making and quality assurance processes. Guidance and support is available from QAA to those students who are responsible for producing the student submission to ensure that it is evidence based, addresses issues relevant to the review, and represents the views of students as widely as possible.

Review period

The second stage is the review period during which reviewers will visit the provider and the embedded colleges. The visits allow the review team to meet some of the embedded colleges' students and staff (and other stakeholders, where appropriate, such as representatives from the partner higher education institution at central and/or departmental level), to meet the provider's staff responsible for quality assurance and the management of arrangements and to scrutinise further information.

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3 This includes programmes that are designed to enable entry to a specified degree programme or programmes on successful completion. In these cases, it may be necessary to use other external reference points in addition to the Quality Code to set academic standards. If the programme is free-standing, and does not have a direct relationship with a specified higher education programme, it is not covered by the Quality Code, but may be subject to other regulatory requirements.
During the review period there will be a one-day visit to the provider, followed by a visit to each embedded college. More details about how the duration of the review visits are set is given in Part 3. At the end of each visit, the review team will agree its provisional judgements and other findings, as described above. Following all the visits, the review team will meet for a one-day private meeting during the review period to finalise judgements and findings for the provider and all embedded colleges. The judgements and findings will be made available two weeks after this meeting.

The programme for, and duration of, the review visits may vary according to the outcome of the desk-based analysis. Varying the duration of review visits aims both to respond to the wishes of government to introduce a more risk-based approach to quality assurance, and to fulfil the Principles of Better Regulation of Higher Education in the UK, which were developed in 2011 by the Higher Education Better Regulation Group.4

**Reviewers and review teams**

The size of the team for the whole review (that is, the desk-based analysis and the review period) will be two, four or six reviewers depending on the number of embedded colleges. All members of the review team will visit the provider although the team may subdivide to conduct visits to the embedded colleges, with at least two reviewers visiting each college. Every team will include at least one member or former member of academic staff from another higher education institution in the UK. Teams may also include a student reviewer or reviewers with particular expertise in areas such as managing higher education provision with others. A lead QAA Review Manager will coordinate the review, support the review team and act as the primary point of contact with the provider. The lead QAA Review Manager will also be present at the review visits, although for networks with large numbers of embedded colleges, a second QAA Review Manager may be appointed to assist with some embedded college visits.

QAA reviewers have current or recent senior-level expertise and experience in the management and/or delivery of higher education provision. This expertise and experience will include the management and/or administration of quality assurance. Student reviewers are recruited from among students or sabbatical officers who have experience of participating, as a representative of students’ interests, in contributing to the management of academic standards and/or quality. More information about reviewers and the membership of review teams is provided in Part 3 and in Annex 6.

QAA recruits reviewers by inviting nominations from higher education institutions, from recognised students’ unions, or by self-nomination. The selection criteria for review team members are given in Annex 6. QAA makes every attempt to ensure that the cohort of reviewers appropriately reflects the diversity of the sector, including geographical location, size and type of institutions, as well as reflecting those from diverse backgrounds.

Training for review team members is provided by QAA. Both new team members and those who have taken part in previous review methods are required to take part in training before they conduct a review. The purpose of the training is to ensure that all team members fully understand the aims and objectives of the review process; that they are acquainted with all the procedures involved; and that they understand their own roles and tasks, and QAA’s expectations of them. We also provide opportunities for continuing development of review team members and operate procedures for managing reviewers’ performance. The latter incorporates the views of providers who have undergone review.

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The role of students

30 Students are one of the main beneficiaries of Higher Education Review (Embedded Colleges) and are at the heart of the review process. QAA’s Student Advisory Board is a formal advisory committee of QAA’s Board of Directors and has had a key role in advising on the design of the Higher Education Review method. Review teams may have student reviewers as members.

31 Students of the provider under review may also have input to the process by:

- where possible, nominating a lead student representative for each embedded college, who is involved throughout the review process
- preparing a student submission at embedded college level, which is a key part of the evidence for the desk-based analysis
- contributing their views directly for consideration during the desk-based analysis
- participating in meetings during the review visits to embedded colleges
- assisting the provider and/or embedded college in drawing up and implementing the action plan after the review.

32 More information about the role of students is given in Part 3 and Annex 5.

Facilitators

33 The provider will nominate a facilitator to liaise with the lead QAA Review Manager, across the whole network of embedded colleges, throughout the review process. The facilitator will help to provide a constructive interaction between all participants in the review process. The development of an effective working relationship between QAA and the provider through such liaison should help to avoid any misunderstanding by the provider of what QAA requires, or by QAA of the nature of the provider or the scope of its provision.

34 If the provider facilitator is unable to be present at a visit to an embedded college, the college may nominate a local facilitator to carry out the following roles during the visit:

- provide the review team with advice and guidance on the provider’s and embedded college’s structures, policies, priorities and procedures
- meet the QAA Review Manager and the lead student representative (and possibly also members of the review team) outside the formal meetings to provide or seek further clarification about particular questions or issues.

35 More detailed information about the role of the facilitator is given in Annex 4.

Lead student representatives

36 Where possible, a lead student representative may be appointed at each embedded college. This role is voluntary and can be undertaken by a current student at the embedded college or by a recent graduate of the college now studying at the partner higher education institution. The lead student representative will normally carry out the following key roles:

- organise or oversee the production of the student submission for the embedded college
- assist in the selection of students from the embedded college to meet the review team.
Where possible, the lead student representative may also:

- liaise with the provider facilitator (and/or local facilitator) throughout the process to ensure smooth communication between the student body and the embedded college
- disseminate information about the review to the student body at the embedded college ensure continuity of activity throughout the review process at embedded college level
- facilitate comments from the student body on the draft review report for the embedded college
- work with the provider and/or embedded college in the development of its action plan

QAA will provide further advice and training for both facilitators and lead student representatives in the build-up to their reviews.

The role of degree-awarding bodies and other awarding organisations

Providers and embedded colleges work with degree-awarding bodies and/or other awarding organisations. Higher Education Review (Embedded Colleges) assumes no preferred awarding model for higher education provision, other than it expects that any model must permit the awarding body/organisation to assure itself about the standards and quality of its provision, however or wherever delivered. Embedded college provision may lead to the awards of the provider and/or an external awarding body (for example, the partner higher education institution). Where external awarding bodies are involved, the review will consider how the provider discharges its responsibilities within the context of its agreements with partner higher education institution(s). Higher Education Review (Embedded College) is not concerned with how degree-awarding bodies manage their responsibilities for collaborative arrangements.

Providers may wish for their degree-awarding bodies or other awarding organisations to be involved in the review process by assisting, for example, with the preparation of the self-evaluation document or in developing the action plans. The extent of a degree-awarding body's or awarding organisation's involvement should be decided in discussion between the partners. Review teams will, however, expect to meet the representatives of degree-awarding bodies or awarding organisations during review visits.

It is the responsibility of providers to keep their degree-awarding bodies or awarding organisations informed of the progress of the review and to make any requests for support. The only correspondence QAA will copy to degree-awarding bodies or awarding organisations is that associated with the draft and final reports. Where relevant, we may also share information with Ofqual.\(^5\)

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\(^5\) QAA and Ofqual have an agreement that includes a commitment to sharing information about the educational oversight of alternative higher education providers. The agreement makes provision for QAA to share information with Ofqual that is relevant to maintaining standards and confidence in qualifications that are regulated by Ofqual, or qualifications offered by the awarding organisations that Ofqual regulates.
Part 2: The interval between review periods

42 The interval between reviews for alternative providers requiring educational oversight is four years. Following the first review, providers and embedded colleges will submit an annual return, and may receive monitoring visits, each year before the next full review. Providers and embedded colleges who receive a commendable judgement in their review (and no judgement less than 'meets expectations') or that make commendable progress on the action plan at a monitoring visit, may be exempt from a monitoring visit in the following year, unless they demonstrate specified material changes in circumstances, in which case a monitoring visit or single embedded college review would be conducted. Providers and embedded colleges who do not pass the monitoring process may request a further review in order to maintain educational oversight. It is expected that full reviews will normally take place every four years.
Part 3: The review process in detail

This part of the handbook explains the activities that need to be carried out to prepare for and take part in the review of quality assurance arrangements. In this part of the handbook, 'we' refers to QAA and 'you' to the provider or provider facilitator.

The standard timelines are given below. Please note that there may be unavoidable instances when the activities in the timetable need to take place over a shorter time period. The timeline for after the review period is given in Part 4.

<table>
<thead>
<tr>
<th>Working weeks</th>
<th>Activity</th>
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| Approx. -24   | • Provider and embedded colleges begin reviewing handbook and preparing for review.  
• Provider nominates facilitator and, where possible, embedded college lead student representatives.  
• QAA informs provider of provisional dates for the review period. |
| Approx. -20   | • For the first full review, QAA provides briefing event for facilitator and lead student representatives.  
• QAA informs provider of membership of review team and name of QAA Review Manager(s) coordinating the review visits. |
| -18           | • Preparatory meeting between QAA Review Manager, provider facilitator, and where possible, lead student representatives. This meeting may take place at the provider's head office or at an embedded college, at the discretion of the provider.  
• Provisional dates set for the visits to the provider and colleges that will take place during the review period.  
• Embedded colleges nominate local facilitators (if required). |
| -12           | • Provider uploads self-evaluation and supporting evidence to QAA's electronic folder. Lead student representatives upload student submissions for embedded colleges.  
• Review team begins desk-based analysis. |
| -9            | • QAA Review Manager informs provider facilitator of any requests for additional documentary evidence (if required). |
| -6            | • Provider uploads additional evidence (if required). |
| -4            | • Team holds first team meeting to discuss desk-based analysis and agree the duration of, and programme for, the review visits to the provider and each embedded college. |
| -4            | • QAA Review Manager informs provider facilitator of:  
- the duration of the review visits to the provider and colleges  
- the team's main lines of enquiry  
- who the team wishes to meet  
- any further requests for documentary evidence. |
| 0             | • Review visit to the provider conducted, followed by a visit to each embedded college. The review period concludes with a one-day meeting of the team to agree outcomes, which will include a final clarification meeting with staff from the provider. |
First contact with QAA

45 The first contact that you will have about your review is likely to be soon after the closure of the application window for educational oversight. We will write to you to tell you the dates of the review period.

46 Once you know the date of your review period, we will also expect you to disseminate that information to your students and tell them how they can engage with the process through the student submission, and nominate a lead student representative for each embedded college, if possible.

The review team

47 QAA will determine the size of the review team based on the information in your application form, most recent review or annual monitoring return. The size of the review team will be two, four or six reviewers depending on the number of embedded colleges to be reviewed. Once the size of the review team has been set at this stage, it will not be changed to reflect any possible changes in the scale and complexity of the provision before the review period.

48 We will tell you which organisations the members of the review team work for or where they study, and whether they have declared any other interests to us (such as external examinerships or membership of a governing body of a higher education institution). We will ask you to let us know of any potential conflicts of interest that members of the team might have with your organisation, and may make adjustments in light of that.

49 About the same time as we tell you the size and membership of the team, we will also confirm with you the name of the QAA Review Manager(s) who will be coordinating your review and the administrative support officer who will support it. You are welcome to phone or email your lead Review Manager, or visit him or her at QAA if you need to understand the review process better. The QAA Review Manager can provide advice about the review process but cannot act as a consultant for your preparation for review, nor comment on whether the processes that you have for quality assurance are appropriate or fit for purpose.

50 Finally for this stage of the process, we will ask you to nominate your facilitator (who is normally the senior quality assurance contact at the provider) and lead student representatives at the embedded colleges, where appropriate. We realise that it might be too early to know the name of the lead student representatives. A student who may have progressed to the University by the time of the review visit may be nominated, if they are able to take part in the review visit, or the embedded college can nominate a student representative closer to the time of the review visit. If the embedded college is not able to nominate a lead student representative, we may need to consider an alternative way of allowing students to contribute their views directly to the review team using an online tool. Further information about this facility is given in Annex 5.

QAA briefing

51 QAA will provide a briefing for facilitators on their roles and responsibilities. These events will be for all providers having reviews at about the same time, so the timing is flexible. We will invite your organisation to send its nominees and give you any information that you need for the briefing.
Preparatory meeting - 18 weeks before the start of your review period

52 The preparatory meeting will take place approximately 18 weeks before the start of the review period. At the preparatory meeting, the lead QAA Review Manager coordinating the review will visit you to discuss the structure of the review as a whole. The purpose of the meeting will be to:

- answer any questions about the review which remain after the briefing
- discuss the information to be provided to the review team, including the self-evaluation document (SED) and the student submissions
- discuss the information QAA has assembled from other sources
- confirm the practical arrangements for the review period
- agree provisional dates for the visits to the embedded colleges and provider.

53 The meeting should, therefore, involve those who are most immediately involved with the production of the SED, including the provider facilitator and, where possible, those involved in the student submissions. In general, attendance by other staff should be confined to those with responsibility for the operational arrangements for the review. The preparatory meeting is not an opportunity for the QAA Review Manager to brief a large number of staff about the review process. The QAA Review Manager can give you further guidance about who should participate in the meeting.

54 The discussion about the SED will be particularly important. The usefulness of the SED to the review team will be one of the main factors in determining the length of the review visits. If the SED is reflective and well targeted to the areas of the review and the evidence carefully chosen, the greater is the likelihood that the team will be able to verify the approach of the provider and embedded colleges and gather evidence of its own quickly and effectively. The same is true of the quality of accompanying documentation that you provide. It is also important that the SED makes reference to any nationally benchmarked datasets that are produced for or about your organisation. Further guidance about the structure and content of the SED is given in Annex 3.

55 The preparatory meeting also provides an opportunity to discuss information for the desk-based analysis which we have assembled from sources available directly to us. Again, more detail about what this may comprise is provided in Annex 3. You will have an opportunity at this meeting to raise any concerns about this other information.

56 The QAA Review Manager will discuss the arrangements for the review visits to be undertaken during the review period with a view to setting provisional dates at this stage. Provisional dates will be confirmed in writing after the preparatory meeting although these may be subject to change depending on the outcome of the first team meeting (see paragraph 62). Local embedded college facilitators may be identified at this stage to provide assistance to the review team should the provider facilitator be unable to attend all review visits.

57 Finally, the preparatory meeting will include discussion about the extent of student involvement and the production of student submissions. Discussion will include the scope and purpose of the student submissions and any topics beyond the standard template for the student submission that the student representatives consider appropriate. Where possible, we encourage the selection of students to be the responsibility of the lead student representative, but the lead student representative may work in conjunction with the facilitator, or with other student colleagues, if they so wish. After the preparatory meeting, the QAA Review Manager will be available to help clarify the process further with either the facilitator or the lead student representatives.
If by this stage it appears unlikely that the student body will be able to make a student submission, we will need to consider an alternative way of allowing students to contribute their views directly to the review team using an online tool. Further information about this facility is given in Annex 5.

**Uploading the self-evaluation document and student submissions - 12 weeks before the start of your review period**

You will need to upload your SED and the accompanying evidence 12 weeks before the start of your review period. The precise date for doing this will have been explained at a QAA briefing and/or by the lead QAA Review Manager at the preparatory meeting.

**Desk-based analysis and requests for additional information - nine weeks before the start of your review period**

The review team will begin its desk-based analysis of all the information as soon as the SED and student submissions are uploaded. Should the team identify any gaps in the information, or require further evidence about the issues they are pursuing, they will inform the lead QAA Review Manager. The lead QAA Review Manager will then make a request to the provider facilitator for further information about nine weeks before the start of the review period. Requests for additional information will be strictly limited to what the team requires to complete the desk-based analysis and you are entitled to ask why the team has asked to see any of the information it has requested. You should provide the additional information requested at least six weeks before the start of the review period.

**First team meeting - four weeks before the start of your review period**

About four weeks before the start of your review period, the team will hold its first team meeting, which takes place over one or two days and does not involve a visit to the provider or embedded colleges. This meeting is the culmination of the desk-based analysis. Its purposes are to allow the review team to:

- discuss its analysis of the documentary evidence
- decide on issues for further exploration at the review visits
- decide whether it requires any further documentary evidence
- agree on the duration of the review visits
- decide whom it wishes to meet at the review visits.

The review team will decide on the duration of the visits according to what the desk-based analysis reveals both about the provider's, and embedded colleges' track record in managing quality and standards and the extent to which they meet the applicable Expectations of the Quality Code. Where the desk-based analysis finds a strong track record and evidence that all or nearly all Expectations are met, the team will not require a long visit to the embedded college or provider to finish its work. Where the desk-based analysis does not suggest a strong track record and/or indicates that several Expectations may not be met (or the evidence provided is insufficient to demonstrate that the provider or embedded college is meeting its responsibilities effectively), the review team will need more time to talk to staff and students and analyse further evidence, in order to investigate its concerns thoroughly.6

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6 Not all Expectations in the Quality Code apply (or apply fully) to all providers or embedded colleges. Please see Annex 2 for further information.
The criteria that teams will use in deciding on the length of visits are set out in the table below. In practice, it is unlikely that the findings of the desk-based analysis will be consistent with all the criteria listed within a particular category. Not all criteria have to be met to justify a review visit of a particular duration.

Review teams are permitted to specify a shorter visit than the guidance indicates; this is most likely to occur where the desk-based analysis finds moderate or serious risks at a provider or embedded college with few students and, therefore, limited scope for meetings. In any case, the duration of the review visits should not be regarded as a judgement about the provider’s higher education provision; the judgements are only agreed at the end of the process.

The precise duration of the review visits will be determined by the review team within the parameters outlined below. Whether, for example, a review visit lasts one and a half or three days is likely to depend on the scale and complexity of the higher education on offer and the number of Expectations which the desk-based analysis indicates may not be met.

The review period will commence with a one day visit to the provider following which there will be a visit to each embedded college. The duration of visits to embedded colleges will typically be one and a half days for those that have been successfully reviewed under the previous Embedded College Review for Educational Oversight method. For new colleges or providers going through QAA review for the first time, the visit will typically be two days. Where there are concerns about the embedded college's track record or substantial gaps in the evidence base, the visit may be three days.

| 1.5 day visit | The provider/embedded college has a strong track record in managing quality and standards, as evidenced by the outcomes of previous external review activities (such as QAA review), and has responded to those activities fully and effectively. There is evidence that all or nearly all applicable Expectations are met. Expectations which appear not to be met present low risks to the management of the higher education provision, in that they relate to:

- minor omissions or oversights
- a need to amend or update details in documentation, where the amendment will not require or result in major structural, operational or procedural change
- completion of activity that is already underway.

The need for any remedial action has been acknowledged by the provider/embedded college and it has provided clear evidence of appropriate action being taken within a reasonable timescale. |
| 2 day visit | The provider/embedded college has a strong track record in managing quality and standards, as evidenced by the outcomes of previous external review activities (such as QAA review), but there is some evidence of it not responding to those activities fully and effectively.

There is evidence that most applicable Expectations are met.

Expectations which appear not to be met do not present serious risks, but may raise moderate risks in that they relate to:

- weaknesses in the operation of part of the provider's/embedded college's governance structure (as it relates to quality assurance) or lack of clarity about responsibilities
- insufficient emphasis or priority given to assuring standards or quality in the provider's/embedded college's planning processes
- quality assurance procedures which, while broadly adequate, have some shortcomings in terms of the rigour with which they are applied.

Plans that the provider/embedded college presents for addressing identified problems are under-developed or not fully embedded in its operational planning. |
|---|---|
| 3 day visit | The provider/embedded college does not have a strong track record in managing quality and standards and/or has failed to take appropriate action in response to previous external review activities (such as QAA review).

The provider has particularly significant formal arrangements for working with others.

The evidence is **either** insufficient to indicate that most applicable Expectations are met **or** indicates that several applicable Expectations are not being met.

In the case of the latter, the Expectations not met present serious risks in that they relate to:

- ineffective operation of parts of the provider's/embedded college's governance structure (as it relates to quality assurance)
- significant gaps in policy, structures or procedures relating to the provider's/embedded college's quality assurance
- serious breaches by the provider/embedded college of its own quality assurance procedures.

Plans for addressing identified problems are not adequate to rectify the problems or there is very little or no evidence of progress.

The provider/embedded college has not recognised that it has major problems, or has not planned significant action to address problems it has identified. |
Confirmation of the review period schedule - four weeks before the start of your review period

Within a week of the first team meeting, the lead QAA Review Manager will confirm in writing the arrangements for the review period, including:

- the duration of the review visits to the provider and each embedded college
- whom the review team wishes to meet during each visit
- whether the review team requires any further evidence
- the review team's main lines of enquiry.

Telling you about the review team's main lines of enquiry is meant to help you prepare for the review visits. The lines of enquiry will be based either on those Expectations which the desk-based analysis indicates are not being met, or on potential areas of good practice. The lines of enquiry may vary by embedded college, or may be common across the whole network. The lines of enquiry do not preclude the review team from investigating any other area or issue within the scope of the review during the visits.

Based on the outcome of the first team meeting, there may be some changes required to the provisional visit schedule agreed at the preparatory meeting stage. Any changes will be discussed with the provider to ensure that the review team will be able to meet with staff and students.

The start of the review period - week 0

As near to the beginning of each review visit as possible, the review team will hold a short meeting with the respective head of the provider or embedded college. This is the review team's meeting and the topics covered will vary from visit to visit, but the team is likely to be interested in the overall strategy for higher education, which will help to set the review visit in context.

Thereafter the activity carried out at the review visit may not be the same for every visit, but may include contact with staff (including staff from degree-awarding bodies and other awarding organisations where applicable), recent graduates, external examiners and employers. The review team will ensure that its programme includes meetings with a wide variety of students, to enable it to gain first-hand information on students' experience as learners and on their engagement with the quality assurance and enhancement processes at embedded college and/or provider level. The review team will be pleased to make use of video or teleconference facilities to meet people who may find it difficult to attend the premises, such as distance-learning students or alumni.

Each review visit to an embedded college will include a final clarification meeting between the review team, the facilitator, the lead student representative (if appointed) and senior staff of the embedded college being visited. This will not be a feedback meeting, but will be an opportunity for the team to summarise the major lines of enquiry and issues that it has pursued (and may still be pursuing). The intention will be to give the embedded college a final opportunity to offer clarification and/or present evidence that will help the team come to secure review findings. At the end of the review period, the review team will similarly hold a final clarification meeting with senior staff from the provider, prior to considering and agreeing the outcomes for the provider and all embedded colleges.

Although the facilitator and lead student representative will not be present with the team for its private meetings, we do expect the team to have contact with the facilitator and lead student representative during the visit particularly when they are invited to clarify evidence or provide information. The facilitator and lead student representative can also
suggest informal meetings if they want to alert the team to information which it might find useful.

At the end of each embedded college visit, the review team considers its findings in order to provisionally:

- decide on the grades of the judgements
- decide on the commentary on enhancement
- agree any features of good practice that it wishes to highlight
- agree any recommendations for action by the embedded college and/or provider
- agree any affirmations of courses of action that the embedded college and/or provider has already identified.

Once all review visits have been completed, the review team will have a one-day private meeting to agree the judgements and findings for the provider and all embedded colleges. For logistical reasons, this private meeting may take place at the premises of the final embedded college being visited, or at a separate location.

You can find more detail about the Expectations that teams use to make judgements in Annex 2.

A QAA Review Manager will be present during the review visits; will chair the private meetings of the team; and will test the evidence base for the team's findings.

**Contingency to extend a review visit**

In exceptional circumstances, the review team may recommend to the QAA Review Manager that it cannot come to sound judgements within a scheduled review visit. This is most likely to occur where a review team arranges for a short review visit and subsequently finds serious problems that were not apparent from the desk-based analysis. In such circumstances, QAA may ask to extend a review visit, or, if that is not feasible, to arrange for the review team to return as soon as possible after the review visit finishes.

**QAA Concerns Scheme**

As well as undertaking reviews of higher education providers, QAA can also investigate concerns about the standards and quality of higher education provision, and the information that providers produce about their learning opportunities. Where there is evidence of weaknesses that go beyond an isolated occurrence, and where the evidence suggests broader failings in the management of quality and standards, we can investigate. These concerns may be raised by students, staff, organisations, or anyone else. Further details about the Concerns Scheme are provided on our website.

When a concern becomes known to QAA in the immediate build-up to a review, we may investigate the concern within that review rather than conduct a separate investigation. If we choose to investigate through the review, we will pass the information and accompanying evidence to the review team. If the duration of the review visit has already been set at the first team meeting, the team may need to revise its decision. QAA may also add extra reviewers to the review team. We will explain the nature of the concern to the provider and embedded college(s) affected and invite them to provide a response to the review team. The review team's view of the validity and seriousness of the concern may affect the review outcome.

Where a concern becomes known to QAA during a review period, we may investigate the concern during the review period and this could be grounds for extending one
or more visits. If we choose to investigate the concern in this way, we will pass the information and accompanying evidence to the review team. We will explain the nature of the concern to the provider and embedded college(s) affected and invite the provider to produce a response to the review team. The review team's view of the validity and seriousness of the concern may affect the review outcome. Alternatively we may choose to investigate the concern after the review period has ended and this may also affect the review outcome and delay publication of the review report.

We may also use the review to follow up on a provider's response to the outcomes of a Concerns full investigation following the publication of the investigation report, or its response to Concerns initial inquiries. If we intend to use the review for this purpose, the QAA Review Manager will inform the provider and embedded college(s) and describe how the review is likely to be affected. It may, for instance, involve the submission by the provider of additional evidence, or an additional meeting at the review visit. The review team's view of the provider's response to the Concerns investigation may affect the review outcome. QAA has separate and more detailed guidance on how it considers Concerns during reviews.²

Part 4: After the review period

This part of the handbook describes what happens after the review period has ended. The standard timeline for this part of the process is given below. Please note that the deadlines in this timeline may be extended by up to two weeks for review periods occurring less than 16 weeks before Christmas. The precise dates will be confirmed to you by the QAA Review Manager.

<table>
<thead>
<tr>
<th>Working weeks</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Final team meeting of the review period +2 weeks</td>
<td>• QAA Review Manager sends key findings letter to provider (copied to UK Visas and Immigration, the embedded colleges, and the awarding bodies/organisations as relevant)</td>
</tr>
<tr>
<td>+7 weeks</td>
<td>• QAA sends draft review reports to the provider and lead student representative (copied to embedded colleges, awarding bodies/organisations as relevant)</td>
</tr>
<tr>
<td>+10 weeks</td>
<td>• Provider and lead student representatives give factual corrections (incorporating any comments from the embedded colleges and awarding bodies/organisations)</td>
</tr>
<tr>
<td>+13 weeks</td>
<td>• QAA publishes reports</td>
</tr>
<tr>
<td>+23 weeks</td>
<td>• Provider and embedded colleges publish their respective action plans on their websites</td>
</tr>
</tbody>
</table>

Reports

Two weeks after the final team meeting held at the end of the review period, you will receive a letter setting out the provisional key findings. We will copy this letter to UK Visas and Immigration. We will also copy this letter to the embedded colleges and to the relevant degree-awarding bodies or other awarding organisations.

After a further five weeks, you will receive the draft reports for the findings, which will be copied to the embedded colleges and relevant degree-awarding bodies or other awarding organisations as well. A report will be produced for each embedded college and also for the provider. We will ask you to respond within three weeks, telling us of any factual errors or errors of interpretation in the reports. Factual errors or errors of interpretation must relate to the period before or during the review period; the review team will not consider amending the reports to reflect changes or developments made by the provider or embedded college after the review period ended. We will also share the draft reports with the lead student representatives and invite their comments on it by the same deadline.

The review’s findings (judgements, recommendations, features of good practice and affirmations) will be decided by the review team as peer reviewers. The QAA Review Manager will ensure that the findings are backed by adequate and identifiable evidence, and that the review reports provide information in a succinct and readily accessible form. To this end, QAA will retain editorial responsibility for the final reports and will moderate reports to promote consistency.
The reports will be written as concisely as possible, while including enough detail to be of maximum use to the provider and embedded colleges. The reports will contain an executive summary to explain the findings to a lay audience.

The structure of the reports will follow the structure recommended for the provider’s self-evaluation document and the student submission. Production of reports will be coordinated by the lead QAA Review Manager.

Where a draft report contains judgements of ‘commended’ or ‘meets UK expectations’, the report will be finalised and published three weeks later (that is, within 13 working weeks of the final team meeting). You will be notified of publication. When you have engaged successfully with QAA, through achieving a positive outcome in all judgement areas, you will be provided with the relevant information to enable you to use the relevant QAA Review Graphic.

**Action planning and sign-off**

After the reports have been published, the provider and each embedded college will be expected to provide an action plan, signed off by the respective head of the provider or embedded college, responding to the recommendations and affirmations, and giving any plans to capitalise on the identified good practice. These should either be produced jointly with student representatives, or representatives should be able to post their own commentary on the action plans. The QAA Review Manager will have discussed this process with you at the preparatory meeting. The action plans (and commentaries, if produced) should be posted to the respective public websites of the provider and embedded colleges within one academic term or semester of the review reports being published. A link to the report page on QAA’s website should also be provided. The provider and embedded colleges will be expected to update the action plans annually, again in conjunction with student representatives where possible, until actions have been completed, and post the updated plans to their websites.

The action plan describes how the provider and/or embedded college intend to take forward the reviewers’ findings. The effectiveness of the action taken will form part of the evidence base for any future review activity, including the annual monitoring return and any annual monitoring visits. The plans will also constitute a published record of the provider’s commitment to developing its provision in embedded colleges. A sample action plan can be found in Annex 8.

If, without good reason, you do not provide action plans within the required timescale, or if you fail to engage seriously with review recommendations, you may be referred for investigation under QAA’s Concerns Scheme. Future review and monitoring teams will take into account the progress made on the actions from the previous review.

**Process for unsatisfactory judgements**

The judgements ‘requires improvement to meet UK expectations’ and ‘does not meet UK expectations’ are considered to be unsatisfactory. Where a second draft report (that is, the version of the report produced in light of the provider’s comments on the first draft) contains unsatisfactory judgements in any of the judgement areas, we will not publish that report but rather send it back to allow you to consider whether you wish to appeal the judgements. Any appeal should be made within one month of dispatch of the second draft report, and should be based on that second draft. An appeal based on a first draft report will not be considered. **QAA will not publish a report, meet a third party request for**

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8 A successful engagement for a provider under Higher Education Review (Embedded Colleges), in terms of eligibility for the QAA Review Graphic, would be a judgement of **commended** or **meets UK expectations**.
disclosure of the report, or consider an action plan while an appeal is pending or is under consideration. This may result in the publication of all reports for the network being delayed until the appeal process is completed. Please refer to the procedure on appeals for further information. A timeline for a review resulting in one or more unsatisfactory judgements is given below.

<table>
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<td>Final team meeting of the review period +2 weeks</td>
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<tr>
<td>+10 weeks</td>
<td>• Provider and lead student representatives give factual corrections (incorporating any comments from embedded colleges and awarding bodies/organisations)</td>
</tr>
<tr>
<td>+13 weeks</td>
<td>• QAA sends second draft to provider and lead student representatives (copied to embedded colleges and awarding bodies/organisations as relevant)</td>
</tr>
<tr>
<td>Approximately +17 weeks</td>
<td>• Deadline for provider to appeal the judgements</td>
</tr>
</tbody>
</table>

94 Where an unsatisfactory judgement is not appealed, the review reports will be published one week after the appeal deadline and you will be notified of publication. Where an appeal against an unsatisfactory judgement is unsuccessful, the reports will be published one week after the end of the appeal process and you will be notified of publication. Upon publication of your report, you will receive confirmation that you will not be eligible to use the QAA Review Graphic and will be asked to remove it from all your communications materials.

95 Where a report is published containing an unsatisfactory judgement, the provider should consult the most recent Tier 4 Sponsor Guidance, published by UK Visas and Immigration, to determine the implications of unsatisfactory judgements for maintaining a Tier 4 Sponsor licence.

Complaints and appeals

96 QAA has formal processes for receiving complaints and appeals. Details of these processes are available on the QAA website.⁹

Annual monitoring

97 Following the review, the provider and embedded college(s) will be subject to annual monitoring. An annual return and monitoring visit are an integral part of the overall review process. They serve as a short check on the continuing management of academic standards; the management and enhancement of the quality of learning opportunities; and

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⁹ Concerns, available at: [www.qaa.ac.uk/concerns](http://www.qaa.ac.uk/concerns).
the information the provider and embedded colleges publish about the academic provision. The annual return will be an opportunity to reflect upon developments made in the management of academic standards and quality by the provider and its embedded colleges since the previous review or monitoring visit, and for QAA to note any matters that will be of particular interest to the team that conducts the next full review.

98 The monitoring process has a developmental aspect in that it will also serve to support providers and embedded colleges in working with the Quality Code. The Quality Code provides a shared starting point for setting, describing and assuring the academic standards of higher education awards and programmes and the quality of the learning opportunities.

99 Significant material changes in circumstances, or complaints or concerns raised about the provider or one of its embedded colleges, may trigger a single embedded college review at one or more of the colleges, or a review of the provider, instead of a monitoring visit. Further details on the annual monitoring process are available on the QAA website.

**Review of new embedded colleges**

100 New embedded colleges added to a provider's network will be reviewed at the same time as the scheduled annual monitoring engagement for the provider. The review of the new embedded college will follow the standard pattern of preparatory meeting, first team meeting, review visit and report of outcomes. The first team meeting will decide whether a separate visit to the provider is required, or whether that can be incorporated within the review visit to the new embedded college.
Part 5: Keeping the method under review

101 Higher Education Review (Embedded Colleges) is organised on a rolling basis rather than a fixed cycle, with the possibility of changes to the process being introduced at any point, given sufficient justification and warning. A rolling process is intended to allow greater flexibility in the review process and enable changes to be made to the review method in a timely way, rather than waiting for all providers to be reviewed.

102 There are three kinds of possible changes: operational, minor and major.

103 Operational changes are those which have no substantive bearing on the provider’s experience of the operation or outcome of the review process. They would include, for example, a decision to change the medium of published reports or to alter the system the reviewers use to communicate with one another.

104 Minor changes denote changes to the design and/or operation of the method but not to the principles underpinning it. They may include:

- changes to the guidance on the duration of review visits
- broadening opportunities for stakeholders to provide input to the review team.

105 Major changes would include:

- changes to the number and/or content of the judgements or some other fundamental amendment to the scope of the review
- changes to the interval between reviews.

106 Changes may be made by QAA at any time without reference to any other body. Minor changes will be agreed by the Director of Quality Assurance at QAA. Major changes may be reported to and agreed by the QAA Executive Group and/or the QAA Board. Minor and major changes will be reported to the QAA Alternative Provider Liaison Forum.

107 Changes will be communicated to providers and review teams, and the date from which the change will be in operation will be made clear. It is envisaged that no operational or minor change will affect a review that has already started. For this purpose, the start of the review will be deemed to be 18 weeks before the review period (the timing of the preparatory meeting). A minor change would affect all other reviews yet to be carried out.

108 A major change would be introduced in time for the beginning of a tranche of reviews in order to distinguish easily the point at which different versions of the method became operational. This will also provide time to brief providers adequately and, where necessary, provide refresher training or briefing for review team members.

109 Alongside any changes to the method, QAA updates the Quality Code regularly to take account of the changing nature of higher education. QAA will publish a new version of this handbook annually to ensure the method keeps abreast of any changes to the Quality Code and other key reference points.
Annex 1: Definitions of key terms

What do we mean by academic standards?

Part A: Setting and Maintaining Academic Standards of the Quality Code includes a statement on academic standards which has been adapted for embedded colleges as follows:

Public confidence in academic standards requires public understanding of the achievements represented by higher education qualifications and how the standards are secured. Part A of the Quality Code explains how academic standards are set and maintained for higher education qualifications in the UK. The frameworks, statements and guidance concerned with academic standards constitute formal components of Part A which explains how these components relate to each other and how collectively they provide an integrated context for setting and maintaining academic standards in higher education. Part A sets out what is expected of degree-awarding bodies in setting, delivering and maintaining the academic standards of the awards that they make. Where embedded college providers offer their own awards, Part A may be used as guidance on the principles for setting academic standards, along with other relevant qualifications frameworks such as the Qualifications and Credit Framework [now the Regulated Qualifications Framework]. Delivery organisations, such as embedded colleges, working with degree-awarding bodies and providers do not carry the same responsibilities for academic standards but need to understand how academic standards are set and maintained in UK higher education. The specific role as an embedded college in relation to academic standards is set out in the formal agreement with its degree-awarding body (See further Chapter B10: Managing Higher Education Provision with Others) and the requirements placed on it by the provider.

Threshold academic standards are the minimum acceptable level of achievement that a student has to demonstrate to be eligible for an academic award.

Academic standards are the standards that individual degree-awarding bodies or awarding organisations (or the provider in cases where the provider offers its own awards) set and maintain for the award of their academic credit or qualifications. These may exceed the threshold academic standards.

Threshold academic standards define the minimum standards which degree-awarding bodies, awarding organisations or providers must use to make the award of qualifications at a particular level of the relevant framework (for instance, equivalent to Level 3 of the Regulated Qualifications Framework or Level 4 of The Framework for Higher Education Qualifications in England, Wales and Northern Ireland (FHEQ). Threshold academic standards are distinct from the standards of performance that a student needs to demonstrate to achieve a particular classification of a qualification (for example, the award of Merit or Distinction). These standards of performance are the academic standards for which individual degree-awarding bodies, awarding organisations or providers are responsible as described further in Chapter A2 of the Quality Code.

Individual degree-awarding bodies, awarding organisations or providers are responsible for ensuring that UK threshold academic standards are met in their awards by aligning programme learning outcomes with the relevant qualification descriptors in the national frameworks for qualifications. They are also responsible for defining their own academic standards by setting the pass marks and determining the grading/marking schemes and any criteria for classification of qualifications that differentiate between levels of student
achievement above and below the threshold academic standards. The primary focus of Part A is on how UK threshold academic standards are set and maintained.

Chapter A1 now formally incorporates, and places in an explanatory context, the following QAA publications as constituent components of this Part of the Quality Code:

- the UK national frameworks for higher education qualifications (The Framework for Higher Education Qualifications in England, Wales and Northern Ireland and The Framework for Qualifications of Higher Education Institutions in Scotland), that set out the different qualification levels and national expectations of standards of achievement
- the UK national frameworks for qualifications below Level 4 of the FHEQ (The Regulated Qualifications Framework for England and Northern Ireland (RQF), the Credit and Qualifications Framework for Wales (QCFW), the Scottish Credit and Qualifications Framework (SCQF)
- guidance on qualification characteristics
- the Foundation Degree Qualification Benchmark
- The Higher Education Credit Framework for England: Guidance on Academic Credit Arrangements in Higher Education in England
- Subject Benchmark Statements which set out the nature and characteristics of degrees (generally bachelor's with honours) and the outcomes graduates are expected to achieve in specific subject areas.

Professional, statutory and regulatory bodies (PSRBs) are organisations that set the standards for, and regulate the standards of entry into, particular professions. Professional qualifications (as distinct from academic qualifications) are determined by PSRBs and they may stipulate academic requirements which must be met in order for an academic programme to be recognised as leading to, or providing exemption from part of, a professional qualification. Where degree-awarding bodies or embedded colleges choose to offer programmes which lead to, or provide exemption from, specific professional qualifications, the requirements of the relevant PSRB will influence the design of academic programmes, but the responsibility for the academic standards remains with the degree-awarding body or awarding organisation which is awarding the academic qualification. Where PSRB accreditation is associated with programmes, review teams will explore how accreditation requirements are taken into account in the setting and maintaining of standards and the quality assurance of programmes. Review teams will also explore how accurately information about accredited status is conveyed to students.

Responsibilities of degree-awarding bodies

Degree-awarding bodies work with providers and embedded colleges that do not have degree awarding powers to deliver provision which leads to the award of a higher education qualification or academic credit of the degree-awarding body. Where this happens, degree-awarding bodies are responsible for setting the academic standards and are responsible for maintaining those academic standards regardless of where the learning opportunities are delivered or who provides them. Embedded colleges that work with degree-awarding bodies or awarding organisations are responsible for delivering modules or programmes of study and maintaining the academic standards of the degree-awarding body. The operational implementation of certain functions related to academic standards (for example, assessment) may be delegated to these embedded colleges which are then accountable to the degree-awarding body for discharging them appropriately and for operating in accordance with the academic frameworks and regulations approved by the relevant degree-awarding body (see Chapter A2 and Chapter A3). In some instances, the degree-awarding body may have approved separate academic frameworks and/or regulations for an individual embedded college. In these circumstances, the embedded college is responsible for
Higher Education Review (Embedded Colleges): A handbook for providers

contributing to the review of regulations and recommending changes for approval by the degree-awarding body.

A degree-awarding body's responsibility for the academic standards of all credit and qualifications awarded in its name is never delegated. Degree-awarding bodies are responsible for defining and recording, in a written agreement for each specific arrangement, the specific functions delegated to embedded college and provider and the individual and shared roles, responsibilities and obligations of each party. All embedded colleges and providers that work with a degree-awarding body are required to engage with the Quality Code and to meet the relevant Expectations.

**What do we mean by academic quality?**

Part B of the Quality Code sets out the Expectations about assuring and enhancing academic quality that all providers and embedded colleges are required to meet.

**Academic quality** is defined in the *UK Quality Code for Higher Education: General Introduction* as follows:

> Academic quality is concerned with how well the learning opportunities made available to students enable them to achieve their award. It is about making sure that appropriate and effective teaching, support, assessment and learning resources are provided for them. In order to achieve a higher education award, students participate in the learning opportunities made available to them by their provider/embedded college. A provider/embedded college should be capable of guaranteeing the quality of the opportunities it provides, but it cannot guarantee how any particular student will experience those opportunities. By ensuring that its policies, structures and processes for the management of learning opportunities are implemented effectively, a provider/embedded college also ensures the effectiveness of its outcomes.

**What do we mean by enhancement?**

**Enhancement** is defined by QAA for the purposes of review in England and Northern Ireland as: “taking deliberate steps at provider level to improve the quality of learning opportunities”. This definition means that enhancement is more than a collection of examples of good practice that might be found across a provider. It is about a provider being aware that it has a responsibility to improve the quality of learning opportunities across the network, and to have policies, structures and processes in place to make sure it can do so. It means that the willingness to consider enhancement stems from a high-level awareness of the need for improvement and is embedded throughout the provider.

**What do we mean by good practice?**

A feature of good practice is a process or way of working that, in the view of a QAA review team, makes a particularly positive contribution to the following judgement areas: the provider’s/embedded colleges’ assurance of its academic standards, the quality and/or enhancement of the learning opportunities provided for students, and the quality of the information produced about higher education provision.
What do we mean by information about higher education provision?

The Quality Code, Part C: Information about Higher Education Provision sets out the Expectation that all providers and embedded colleges are required to meet concerning information about the learning opportunities offered: ‘Higher education providers produce information for their intended audiences about the learning opportunities they offer that is fit for purpose, accessible and trustworthy.’ This information is for the public at large, prospective students, current students, students who have completed their studies, and those with responsibility for academic standards and quality.

In England providers are also encouraged to publish wider information on:

- institutional context
- aspects of courses and awards, such as prospectuses, programme guides, course and module descriptors
- quality and standards of programmes.

What is an affirmation?

An affirmation is recognition of an action that is already taking place in a provider or embedded college to improve a recognised weakness or inadequacy in the following judgement areas: the assurance of academic standards, the quality and/or enhancement of the learning opportunities provided for students, and the quality of the information produced about higher education provision.

What is a recommendation?

Review teams make recommendations where they agree that a provider or embedded college should consider changing a process or a procedure in order to: safeguard academic standards; assure the quality of, or take deliberate steps to enhance, the learning opportunities provided for students; or to ensure that the information produced for their intended audiences is fit for purpose, accessible and trustworthy.
Annex 2: Format and wording of judgements

There are four judgements in Higher Education Review (Embedded Colleges), reflecting the three parts of the Quality Code (Part A: Setting and Maintaining Academic Standards; Part B: Assuring and Enhancing Academic Quality; and Part C: Information about Higher Education Provision) and the embedding of enhancement throughout the Quality Code.

The wording of the judgements about providers is as follows:

1. The setting and/or maintenance of the academic standards of awards offered by itself and/or on behalf of degree-awarding bodies and/or other awarding organisations...
2. The quality of student learning opportunities...
3. The quality of the information produced about its provision...
4. The enhancement of student learning opportunities...

The wording of the judgements about embedded colleges is as follows:

1. The maintenance of the academic standards of awards offered by the provider and/or on behalf of degree-awarding bodies and/or other awarding organisations...
2. The quality of student learning opportunities...
3. The quality of the information about student learning opportunities...

The judgement on academic standards has three possible grades: meets UK expectations, requires improvement to meet UK expectations and does not meet UK expectations. The judgements on learning opportunities, information and enhancement have four possible grades: is commended, meets UK expectations, requires improvement to meet UK expectations and does not meet UK expectations. Review judgements may be differentiated so that different judgements may apply, for example, to the provision associated with different degree-awarding bodies or other awarding organisations.

The criteria that review teams will use to come to these judgements are set out below. These criteria are cumulative, which means that most criteria within a particular section should be fulfilled in order to support the relevant judgement.
<table>
<thead>
<tr>
<th>...is or are commended</th>
<th>...meet(s) UK expectations</th>
<th>...require(s) improvement to meet UK expectations</th>
<th>...do(es) not meet UK expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>All applicable Expectations have been met.</td>
<td>All, or nearly all, applicable Expectations have been met.</td>
<td>Most applicable Expectations have been met.</td>
<td>Several applicable Expectations have not been met or there are major gaps in one or more of the applicable Expectations.</td>
</tr>
<tr>
<td>Expectations not met do not, individually or collectively, present any serious risks to the management of this area.</td>
<td>Expectations not met do not present any serious risks. Some moderate risks may exist which, without action, could lead to serious problems over time with the management of this area.</td>
<td>Expectations not met present serious risk(s), individually or collectively, to the management of this area, and limited controls are in place to mitigate the risk. Consequences of inaction in some areas may be severe.</td>
<td></td>
</tr>
</tbody>
</table>

- There are examples of good practice in this area and no recommendations for improvement.
- The provider/embedded college has plans to enhance this area further.
- Student engagement in the management of this area is widespread and supported.
- Managing the needs of students is a clear focus of the provider's/embedded college's strategies and policies in this area.

Any recommendations may relate, for example, to:

- minor omissions or oversights
- a need to amend or update details in documentation, where the amendment will not require or result in major structural, operational or procedural change
- completion of activity that is already underway in a small number of areas that will allow the provider/embedded college to meet the Expectations more fully.

Any recommendations may relate, for example, to:

- weakness in the operation of part of the provider's/embedded college's governance structure (as it relates to quality assurance) or lack of clarity about responsibilities
- insufficient emphasis or priority given to assuring standards or quality in the provider's/embedded college's planning processes
- quality assurance procedures which, while broadly adequate, have some shortcomings in terms of the rigour with which they are applied
- problems which are confined to a small part of the provision.

Any recommendations may relate, for example, to:

- ineffective operation of parts of the provider's/embedded college's governance structure
- significant gaps in policy, structures or procedures relating to the provider's/embedded college's quality assurance
- breaches by the provider/embedded college of its own quality assurance management procedures.
<table>
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<th>…is or are commended</th>
<th>…meet(s) UK expectations</th>
<th>…require(s) improvement to meet UK expectations</th>
<th>…do(es) not meet UK expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>The need for action has been acknowledged by the provider/embedded college in its review documentation or during the review, and it has provided clear evidence of appropriate action being taken within a reasonable timescale.</td>
<td>Plans that the provider/embedded college presents for addressing identified problems before or at the review are under-developed or not fully embedded in the provider's/embedded college's operational planning.</td>
<td>Plans for addressing identified problems that the provider/embedded college may present before or at the review are not adequate to rectify the problems, or there is very little or no evidence of progress.</td>
<td></td>
</tr>
<tr>
<td>There is evidence that the provider/embedded college is fully aware of its responsibilities for assuring quality: previous responses to external review activities provide confidence that areas of weakness will be addressed promptly and professionally.</td>
<td>The provider's/embedded college's priorities or recent actions suggest that it may not be fully aware of the significance of certain issues. However, previous responses to external review activities suggest that it will take the required actions and provide evidence of action, as requested.</td>
<td>The provider/embedded college has not recognised that it has major problems, or has not planned significant action to address problems it has identified.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>The provider/embedded college has limited understanding of the responsibilities associated with one or more key areas of the Expectations, or may not be fully in control of all parts of the organisation.</td>
<td>The provider/embedded college has repeatedly or persistently failed to take appropriate action in response to external review activities.</td>
</tr>
</tbody>
</table>

When teams make their judgements, they will take into account whether the Expectations of the Quality Code have been met. Where the provider/embedded college offer programmes equivalent to Level 3 of the Regulated Qualifications Framework, applicable Expectations should be considered in the context of the relevant qualifications framework.
To assist teams in deciding whether Expectations have been met, the table below presents each Expectation alongside headings which refer to the Indicators of sound practice in the relevant Chapter of the Quality Code. Neither the headings nor the Indicators of sound practice themselves are intended to operate as checklists and reviewers will not use them in this way. Reviewers will appreciate that the precise details of how an Expectation is being addressed will vary and, where applicable, according to providers’/embedded colleges’ agreements with their degree-awarding bodies or other awarding organisations. **Not all Expectations apply (or apply fully) to all providers and embedded colleges, which is why the judgement criteria above refer to ‘applicable Expectations’**.

The different parts of the Quality Code are interconnected and so reviewers, in arriving at their judgements, will consider the Quality Code as a whole. For example, **Chapters B1, B6, B7 and B8 all have important things to say about setting and maintaining academic standards**. Therefore, evidence gathered by reviewers under these headings may influence their judgement on academic standards.

QAA updates the Quality Code regularly to take account of the changing nature of higher education. As the Quality Code changes, so will the Expectations and Indicators of sound practice and this will be reflected in the table below. Where a Chapter or Part of the Quality Code is revised (other than minor amendments), providers/embedded colleges have a stated period of time in which to make any necessary changes to their regulations, policies or practices to ensure they meet the relevant Expectation, and before the revised Chapter is used as the basis for review.
## 1 Setting and maintaining academic standards

<table>
<thead>
<tr>
<th>Expectations</th>
<th>Quality Code Chapter headings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expectation A1 - UK and European reference points for academic standards</strong></td>
<td>• National qualifications frameworks for higher education</td>
</tr>
<tr>
<td>Quality Code - Chapter A1</td>
<td>• Guidance on qualification characteristics</td>
</tr>
<tr>
<td>In order to secure threshold academic standards, degree-awarding bodies:</td>
<td>• National credit frameworks for higher education</td>
</tr>
<tr>
<td>a) ensure that the requirements of <em>The Framework for Higher Education Qualifications of UK Degree-Awarding Bodies</em> are met by:</td>
<td>• Subject Benchmark Statements</td>
</tr>
<tr>
<td>• positioning their qualifications at the appropriate level of the relevant framework for higher education qualifications</td>
<td></td>
</tr>
<tr>
<td>• ensuring that programme learning outcomes align with the relevant qualification descriptor in the relevant framework for higher education qualifications</td>
<td></td>
</tr>
<tr>
<td>• naming qualifications in accordance with the titling conventions specified in the frameworks for higher education qualifications</td>
<td></td>
</tr>
<tr>
<td>• awarding qualifications to mark the achievement of positively defined programme learning outcomes</td>
<td></td>
</tr>
<tr>
<td>b) consider and take account of QAA’s guidance on qualification characteristics</td>
<td></td>
</tr>
<tr>
<td>c) where they award UK credit, assign credit values and design programmes that align with the specifications of the relevant national credit framework</td>
<td></td>
</tr>
<tr>
<td>d) consider and take account of relevant Subject Benchmark Statements.</td>
<td></td>
</tr>
</tbody>
</table>
| Expectation A2.1 - Academic governance arrangements and degree-awarding bodies’ academic frameworks and regulations | Master's Degree Characteristics
www.qaa.ac.uk/publications/information-and-guidance/publication?PubID=2977

**Higher Education Credit Framework for England:** Guideline on Academic Credit Arrangements in Higher Education in England (2008)
www.qaa.ac.uk/publications/information-and-guidance/publication?PubID=2730

Subject Benchmark Statements
www.qaa.ac.uk/assuring-standards-and-quality/the-quality-code/subject-benchmark-statements

- Academic governance arrangements
- Academic frameworks
- Academic or assessment regulations

| Expectation A2.2 - Definitive records of individual programmes and qualifications | Quality Code - Chapter A2

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

In order to secure their academic standards, degree-awarding bodies establish transparent and comprehensive academic frameworks and regulations to govern how they award academic credit and qualifications.
<table>
<thead>
<tr>
<th>Expectation A3.1 - Design and approval of modules, programmes and qualifications</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality Code - Chapter A3</td>
<td></td>
</tr>
<tr>
<td>Degree-awarding bodies establish and consistently implement processes for the approval of taught programmes and research degrees that ensure that academic standards are set at a level which meets the UK threshold standard for the qualification and are in accordance with their own academic frameworks and regulations.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expectation A3.2 - Assessment of learning outcomes</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality Code - Chapter A3</td>
<td></td>
</tr>
<tr>
<td>Degree-awarding bodies ensure that credit and qualifications are awarded only where:</td>
<td></td>
</tr>
<tr>
<td>1. the achievement of relevant learning outcomes (module learning outcomes in the case of credit and programme outcomes in the case of qualifications) has been demonstrated through assessment</td>
<td></td>
</tr>
<tr>
<td>2. both the UK threshold standards and their own academic standards have been satisfied.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Expectation A3.3 - Monitoring and review of alignment with UK threshold academic standards and degree-awarding bodies' own standards</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality Code - Chapter A3</td>
<td></td>
</tr>
<tr>
<td>Degree-awarding bodies ensure that processes for the monitoring and review of programmes are implemented which explicitly address whether the UK threshold academic standards are achieved and whether the academic standards required by the individual degree-awarding body are being maintained.</td>
<td></td>
</tr>
</tbody>
</table>
### Expectation A3.4 - Externality

**Quality Code - Chapter A3**

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

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

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## 2 Assuring and enhancing academic quality

<table>
<thead>
<tr>
<th>Expectations</th>
<th>Quality Code Chapter headings</th>
</tr>
</thead>
</table>
| **Expectation B1 - Programme design, development and approval**  
Quality Code - Chapter B1 |  
Higher education providers, in discharging their responsibilities for setting and maintaining academic standards and assuring and enhancing the quality of learning opportunities, operate effective processes for the design, development and approval of programmes. |  
- The purpose and nature of programme design, development and approval  
- Processes for programme design, development and approval  
- Involvement in programme design, development and approval |
| **Expectation B2 - Recruitment, selection and admission**  
Quality Code - Chapter B2 |  
Recruitment, selection and admission policies and procedures adhere to the principles of fair admission. They are transparent, reliable, valid, inclusive and underpinned by appropriate organisational structures and processes. They support higher education providers in the selection of students who are able to complete their programme. |  
- The basis for effective recruitment, selection and admission  
- Stages of the recruitment, selection and admission process |
<table>
<thead>
<tr>
<th>Expectation B3 - Learning and teaching</th>
<th>Quality Code - Chapter B3</th>
</tr>
</thead>
</table>
| Higher education providers, working with their staff, students and other stakeholders, articulate and systematically review and enhance the provision of learning opportunities and teaching practices, so that every student is enabled to develop as an independent learner, study their chosen subject(s) in depth and enhance their capacity for analytical, critical and creative thinking. | The basis for effective learning and teaching  
  The learning environment  
  Student engagement in learning |

<table>
<thead>
<tr>
<th>Expectation B4 - Enabling student development and achievement</th>
<th>Quality Code - Chapter B4</th>
</tr>
</thead>
</table>
| Higher education providers have in place, monitor and evaluate arrangements and resources which enable students to develop their academic, personal and professional potential. | Strategic approaches  
  Student transitions  
  Facilitating development and achievement |

<table>
<thead>
<tr>
<th>Expectation B5 - Student engagement</th>
<th>Quality Code - Chapter B5</th>
</tr>
</thead>
</table>
| Higher education providers take deliberate steps to engage all students, individually and collectively, as partners in the assurance and enhancement of their educational experience. | Defining student engagement  
  The environment  
  Representational structures  
  Training and ongoing support  
  Informed conversations  
  Valuing the student contribution  
  Monitoring, review and continuous improvement |

<table>
<thead>
<tr>
<th>Expectation B6 - Assessment of students and the recognition of prior learning</th>
<th>Quality Code - Chapter B6</th>
</tr>
</thead>
</table>
| Higher education providers operate equitable, valid and reliable processes of assessment, including for the recognition of prior learning, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought. | The basis for effective assessment  
  Developing assessment literacy  
  Designing assessment  
  Conducting assessment  
  Marking and moderation  
  Examination boards and assessment panels  
  Enhancement of assessment processes |
### Expectation B7 - External examining

**Quality Code - Chapter B7**

Higher education providers make scrupulous use of external examiners.

- Defining the role of the external examiner
- The nomination and appointment of external examiners
- Carrying out the role of external examiner
- Recognition of the work of external examiners/external verifiers
- External examiners/external verifiers' reports
- Serious concerns

### Expectation B8 - Programme monitoring and review

**Quality Code - Chapter B8**

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

- The purpose and nature of programme monitoring and programme review
- Processes for programme monitoring and programme review
- Involvement in programme monitoring and review

### Expectation B9 - Academic appeals and student complaints

**Quality Code - Chapter B9**

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

- The basis of effective appeals and complaints processes
- Information, advice and guidance
- Internal procedures: design and implementation
- Action, monitoring and enhancement

Please note that Expectations B10 and B11 have been removed as they are not applicable to embedded college provision.
3  Information about higher education provision

<table>
<thead>
<tr>
<th>Expectation</th>
<th>Quality Code Chapter headings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expectation C</strong></td>
<td>• Information for the public about the higher education provider</td>
</tr>
<tr>
<td>Quality Code - Part C</td>
<td>• Information for prospective students</td>
</tr>
<tr>
<td></td>
<td>• Information for current students</td>
</tr>
<tr>
<td></td>
<td>• Information for students on completion of their studies</td>
</tr>
<tr>
<td>Higher education providers produce information for their intended audiences about the learning opportunities they offer that is fit for purpose, accessible and trustworthy.</td>
<td>• Information for those with responsibility for maintaining standards and assuring quality</td>
</tr>
</tbody>
</table>

4  Enhancement

<table>
<thead>
<tr>
<th>Expectation</th>
<th>Headings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expectation</strong></td>
<td>• Strategic approach to enhancement of student learning opportunities</td>
</tr>
<tr>
<td>Deliberate steps are being taken at provider level to improve the quality of students’ learning opportunities.</td>
<td>• Integration of enhancement initiatives in a systematic and planned manner at provider level</td>
</tr>
<tr>
<td>Embedded in Quality Code - Part B: Assuring and Enhancing Academic Quality</td>
<td>• Ethos which expects and encourages enhancement of student learning opportunities</td>
</tr>
<tr>
<td></td>
<td>• Identification, support and dissemination of good practice</td>
</tr>
<tr>
<td></td>
<td>• Use of quality assurance procedures to identify opportunities for enhancement</td>
</tr>
</tbody>
</table>
Annex 3: Evidence base for Higher Education Review (Embedded Colleges), including the self-evaluation document

The evidence base for Higher Education Review (Embedded Colleges) is a combination of information collected by QAA, information given by the provider and embedded colleges - including the self-evaluation document, and information provided by students. This annex deals with the first two of these; information from students is covered in Annex 5.

Information collected by QAA

We will compile as much of the evidence base as we can on the provider and embedded colleges from sources available directly to us. This information will vary from provider to provider and may include:

- the most recent QAA review reports about the provider and embedded colleges
- the most recent published professional, statutory and regulatory body (PSRB) reports about the provider and the embedded colleges (if applicable)
- the most recent reports of other quality assurance bodies, including international organisations, about the provider and embedded colleges

Self-evaluation document

The self-evaluation document (SED) has three main functions:

- to give the review team an overview of the provider, including its track record in managing quality and standards, and details of the respective relationships between the provider, the embedded colleges and the degree-awarding bodies or awarding organisations, and of the external reference points (other than the Quality Code) that you are required to consider
- to describe to the review team the provider’s and embedded colleges' approach to assuring the academic standards and quality of that provision
- to explain to the review team how the provider and each embedded college know that the approach is effective in meeting the Expectations of the Quality Code (and other external reference points, where applicable), and how it could be further improved.

Thus, the SED has both descriptive and evaluative purposes.

You should submit a single SED at provider level outlining the above. The most useful format for the SED is under the four judgement headings for the review. You might also wish to bear in mind the Expectations that form the basis of each judgement in organising your SED. The SED should include a clearly distinct section for each embedded college (e.g. a separate annex for each), noting any variations in the arrangements for managing academic standards and the quality of learning opportunities between embedded colleges, and providing a college-specific commentary and evidence to support the approach outlined in the main body of the SED. Further guidance is given below.

It is vital that the SED identifies the evidence that illustrates or substantiates the narrative. It is not the responsibility of the review team to seek out this evidence. The selection of evidence is at your discretion and we would encourage you to be discerning in that selection, limiting the evidence to that which is clearly germane to the SED. It is quite acceptable - indeed it is to be expected - that you will reference the same key pieces of evidence in several different parts of the SED. The review team will, however, find it difficult to complete the review without access to the following sets of information. You may, therefore, find it easiest to reference this information from the SED, rather than provide it separately later on in the process.
• Agreements with degree-awarding bodies and/or awarding organisations, where applicable.
• Reports of the processes through which the provider and the partner degree awarding bodies approved the embedded college relationships and arrangements for the management of academic standards and quality of learning opportunities.
• The provider’s policy, procedures and guidance on quality assurance and enhancement (this may be in the form of a manual or code of practice) and those of the embedded colleges.
• A diagram of the structure of the main bodies (deliberative and management) which are responsible for the assurance of quality and standards. This should indicate both central and local bodies (that is, provider and embedded college arrangements).
• Minutes of quality assurance bodies for the two academic years prior to the review at provider and embedded college level.
• Annual overview reports (for example, on external examining or annual monitoring) where these have a bearing on the assurance of quality and standards for the two years prior to the review.
• The most recent annual and periodic review reports, together with the report of the most recent programme or provision approval.

How the self-evaluation document is used

The SED is used throughout the review process. During the desk-based analysis it is part of the information base which helps to determine the duration of the review visits. The reviewers will be looking for indications that providers and embedded colleges:

• systematically monitor and reflect on the effectiveness of engagement with the Quality Code
• use management information and comparisons against previous performance and national and international benchmarks for monitoring and self-reflection, where available and applicable
• include students in monitoring and self-reflection (and other stakeholders where relevant)
• use monitoring and self-reflection in the identification of strengths and areas for improvement, and subsequently to changes in procedures or practices.

Reviewers will also expect the SED to consider the effectiveness of the provider’s and embedded colleges’ pedagogical approaches in ensuring that the combined input of teaching staff and students enables students to achieve the learning outcomes of their programmes.

Where the SED indicates that the provider and embedded college is capable of, and systematically engaged in, this process of self-reflection and evaluation, the reviewers are likely to have a higher level of confidence in it, and thus to agree on a shorter review visit, notwithstanding what other sources of evidence may indicate.

The SED continues to be used by the reviewers during the review period, both as an information source and a way of navigating the supporting evidence.
Suggested structure of the self-evaluation document

Section 1: Brief description

- Mission.
- Major changes since the last QAA review.
- Key challenges the provider faces.
- Strategic aims or priorities.
- Implications of changes, challenges and strategic aims for safeguarding academic standards and the quality of students’ learning opportunities.
- Details of the external reference points, other than the Quality Code, which the provider is required to consider (for example, the requirements of PSRBs and qualification frameworks other than the FHEQ, such as the Regulated Qualifications Framework, the Scottish Qualifications and Credit Framework, the Credit and Qualifications Framework for Wales, and the European Qualifications Framework).
- Where applicable, details of the provider’s and embedded colleges’ responsibilities for its higher education provision to each other and to the awarding bodies and/or organisations.

The final bullet point is particularly important. Given that reviews are concerned with the way in which providers and embedded colleges discharge their responsibilities, it is difficult to overstate the importance of giving the review team a clear understanding of what those responsibilities are.

This description should be underpinned by:

- the submission of a completed ‘Responsibilities checklist’ for each embedded college to outline the responsibilities between the provider, the embedded college and the partnership with a degree-awarding body or awarding organisation (see Annex 7)
- the provision of the underlying agreements with degree-awarding bodies or awarding organisations, which should reflect the Expectation in Chapter B10: Managing Higher Education Provision with Others of the Quality Code regarding the existence of agreements setting out the rights and obligations of all parties.

Section 2: Your track record in managing quality and standards

Briefly describe your track record in managing quality and standards by reference to the outcomes of previous external review activities and your responses to those activities. Describe how the recommendations from the last QAA review (where applicable) have been addressed, and how good practice identified has been built on. Refer to any action plans that have been produced as a result of review.

Although the outcomes of previous review activities are likely to be part of the information QAA will collect, it is still worth referencing these outcomes as evidence in this section of the SED in case QAA cannot access them.

Section 3: Setting and maintaining academic standards

The Expectations of Part A of the Quality Code apply in this area. You should comment on each Expectation separately (where applicable, within the context of your agreements, including those with degree-awarding bodies and other awarding organisations). Please see Annex 2 for a list of the Expectations in this judgement area.

You should reference the evidence that you use to assure yourself that these Expectations are being met and that you are managing the area effectively, as well as any relevant
benchmarked datasets. The evidence for this section should include a representative sample of the reports of external examiners/verifiers (if applicable), programme approvals and periodic reviews, as well as the response to those reports, where applicable.

More information about what might be relevant to consider as you present your evidence is given in Annex 2.

**Section 4: Assuring and enhancing academic quality**

The Expectations of Part B of the Quality Code apply in this area. You should comment on each Expectation separately (where applicable, within the context of your agreements, including those with degree-awarding bodies or awarding organisations). Please see Annex 2 for a list of the Expectations in this judgement area.

You should reference the evidence that your organisation uses to assure itself that these Expectations are being met and that you are managing the area effectively, as well as any relevant benchmarked datasets.

More information about what it might be relevant to consider as you present your evidence is given in Annex 2.

**Section 5: The quality of information about the higher education provision offered**

The Expectation of Part C: Information about Higher Education Provision of the Quality Code applies in this area. Please see Annex 2 for the full text of this Expectation.

You should reference the evidence that your organisation uses to assure itself that the Expectation is being met and that you are managing the area effectively, as well as any relevant benchmarked datasets.

More information about what it might be relevant to consider as you present your evidence is given in Annex 2.

**Section 6: Enhancement of students' learning opportunities**

The basis for the judgement in this area is the review team's assessment of whether and how deliberate steps are being taken at provider level to improve the quality of students' learning opportunities.

You should reference the evidence that your organisation uses to assure itself that this Expectation is being met and that you are managing the area effectively, as well as any relevant benchmarked data sets.

**Indicators of sound practice**

In commenting on each expectation under Sections 3 – 6, please note that the indicators of sound practice are not intended to be used as a checklist. There is therefore no need to structure your SEDs according to the indicators, as providers may meet the Expectations in different ways.

More information about what it might be relevant to consider as you present your evidence is given in Annex 2.
Annexes for embedded colleges

This part includes a separate annex for each embedded college providing a college-specific commentary on, and evidence to support, the approach outlined in the main body of the SED, including the core elements and theme. The annexes should note any variations in the arrangements for managing academic standards and the quality of learning opportunities between embedded colleges.

Technical requirements for the SED and supporting evidence

You will need to upload your SED and the accompanying evidence 12 weeks before the start of the review period. The precise date for doing this will be explained at a QAA briefing and/or by your QAA Review Manager at the preparatory meeting. We will also explain by letter how the SED and supporting evidence should be uploaded. The key technical points you will need to consider as you put the SED and supporting evidence together are as follows.

- Please supply your SED and supporting evidence in a coherent structure (that is, all files together, with no subfolders or zipped files) with documents clearly labelled numerically, beginning 001, 002, and so on.
- File names must only use alphanumeric characters (a-z and 0-9) and the dash (-).
- The underscore (_), full stops, spaces and any other punctuation marks or symbols will not upload successfully and, therefore, must be avoided.
- QAA’s systems cannot accept shortcut files (also known as .lnk and .url files). Any temporary files beginning with a tilde (~) should not be uploaded, and you do not need to upload administrative files such as thumbs.db and .DS_Store.

If you need technical assistance with uploading files, please contact your QAA Review Support Administrator or the QAA Service Desk on 01452 557123, or email helpdesk@qaa.ac.uk. Please note that the Service Desk operates from Monday to Friday between 9.00 and 17.00.

Other information given by the provider

The review team has three main opportunities to ask for additional evidence from the provider: before the First Team Meeting; between the First Team Meeting and the review period; and at the review visits. Further details are provided in Part 3 of this handbook.

The types and amount of additional information requested by the review team will vary from review to review and according to several factors including the size of the provision under review and the issues which the review team considers to arise from the SED and student submissions.

In some cases review teams may wish to see a sample of student work. Review teams will only ask for samples of student work when this is the most appropriate evidence to follow up an issue, or if it is the only form of evidence which will answer a particular concern. If an embedded college is not in a position to provide assessed student work (for example, because records retention policies mean that work has been destroyed or returned to students) then the team will explore the issue using other evidence. It is likely that the team will explain the issue and ask: ‘Given that this issue could arise at any time in the academic year, what evidence would you use to investigate it, if you do not have records of student work?’ The team would then explore that evidence instead. Such explorations could involve meeting boards of examiners, having contact with external examiners, or meeting students involved.

If a team considered that the provider or embedded college could not furnish evidence (of whatever kind) that it has processes to effectively deal with such concerns, then that in itself could lead to an unsatisfactory judgement.
Whether you need to provide assessed student work and/or evaluations (or, indeed, arrange contacts with external examiners, graduates or employers) will be confirmed after the First Team Meeting. The QAA Review Manager will let you know the sample of programmes from which you should assemble it. Normally the sample would be up to four programmes. For each programme you should normally expect to be asked to provide a sample of the work of the most recently assessed cohort that includes:

- a range of levels and years of study, where relevant
- a range of modules, units or courses
- a representative range of attainment/marks
- a range of assessment methods (for example, continuous assessments/coursework; practical/laboratory work and projects; videotapes and artefacts; and examination scripts, essays and dissertations).

Marking and feedback sheets, and assessment criteria should accompany the samples. The point of looking at student work is to see that the policies and procedures which the institution owns centrally are followed in practice at the local level. Review teams will not be repeating the role of the examiner.

The QAA Review Manager will discuss with you the precise amount and kind of assessed work that the team needs to see.
Annex 4: The role of the facilitator

The provider is invited to appoint a provider facilitator to support the review. The role of the provider facilitator is intended to improve the flow of information between the team and the provider/embedded colleges. It is envisaged that the provider facilitator will be a member of the provider’s staff, normally the senior quality assurance contact.

The role of the provider facilitator is to:

- act as the primary contact for the QAA Review Manager during the preparations for the review
- act as the primary contact for the review team during the review period
- provide advice and guidance to the team on the SED and any supporting documentation
- provide advice and guidance to the team on the provider's and embedded colleges' structures, policies, priorities and procedures
- keep an updated list of evidence to be presented to the review team throughout the review, to be confirmed by the QAA Review Manager
- ensure that the provider and embedded colleges have a good understanding of the matters raised by the review team, thus contributing to the effectiveness of the review, and to the subsequent enhancement of quality and standards within the provider
- work with the lead student representatives, where appointed, to ensure that the student representative body is informed of, and understands, the progress of the review
- work with the lead student representatives to facilitate the sharing of data between the provider, embedded college and the student body in order that the student submissions may be well informed and evidenced.
- meet the review team at the team’s request during the review visits in order to provide further guidance on sources of information and clarification of matters relating to the provider's or embedded colleges' structures, policies, priorities and procedures

Where the provider facilitator is unable to be present at a review visit to an embedded college, a local facilitator may be appointed to provide advice and guidance to the team during the visit.

The facilitator will not be present for the review team’s private meetings. However, the facilitator will have the opportunity for regular meetings, which will provide opportunities for both the team and the provider or embedded college to seek further clarification outside of the formal meetings. This is intended to improve communications between the provider/embedded college and the team during the review and enable a better understanding of the team’s lines of enquiry.

The facilitator is permitted to observe any of the other meetings that the team has apart from those with students. Where the facilitator is observing, they should not participate in discussion unless invited to do so by the review team.

The facilitator should develop a working relationship with the lead student representatives. It is anticipated that the lead student representatives will be involved in the oversight and possibly the preparation of the student submission, and with selecting students to meet the review team during the review visits.

In some providers, it may be appropriate for the facilitator to support the lead student representatives to help ensure that the student representative body is fully aware of the review process, its purpose and the students’ role within it. Where appropriate, and in agreement with the lead student representatives, the facilitator might also provide guidance and support to student representatives when preparing the student submission and for meetings with the review team.
Appointment and briefing

The person appointed as facilitator must possess:

- a good working knowledge of the provider's and embedded colleges' systems and procedures, and an appreciation of quality and standards matters
- knowledge and understanding of Higher Education Review (Embedded Colleges)
- the ability to communicate clearly, build relationships and maintain confidentiality
- the ability to provide objective guidance and advice to the review team.

Protocols

Throughout the review, the role of the facilitator is to help the review team come to a clear and accurate understanding of the structures, policies, priorities and procedures of the provider and embedded college. The role requires the facilitator to observe objectively, to communicate clearly with the team where requested, and to establish effective relationships with the QAA Review Manager and the lead student representatives. The facilitator should not act as an advocate for the provider or embedded college. However, the facilitator may legitimately:

- bring additional information to the attention of the team
- seek to correct factual inaccuracy
- assist the provider and embedded college in understanding matters raised by the team.

It is for the review team to decide how best to use the information provided by the facilitator. The facilitator is not a member of the team and will not make judgements about the provision.

The facilitator is required to observe the same conventions of confidentiality as members of the review team. In particular, the confidentiality of written material produced by team members must be respected, and no information gained may be used in a manner that allows individuals to be identified. However, providing appropriate confidentiality is observed, the facilitator may make notes on discussions with the team and report back to other staff, in order to ensure that the provider and embedded college has a good understanding of the matters raised by the team at this stage in the process. This can contribute to the effectiveness of the review, and to the subsequent enhancement of quality and standards within the provider/embedded college.

The facilitator does not have access to QAA's electronic communication system for review teams.

The review team has the right to ask the facilitator to disengage from the review process at any time, if it considers that there are conflicts of interest, or that the facilitator's presence will inhibit discussions.
Annex 5: Student engagement with Higher Education Review (Embedded Colleges)

Students are one of the main beneficiaries of Higher Education Review (Embedded Colleges) and are, therefore, central to the process of review. In every review there are many opportunities for students to inform and contribute to the review team’s activities, as follows.

The lead student representative

The role of the lead student representative (LSR) is designed to allow student representatives from embedded colleges to play a central part in the organisation of the review. The LSR will normally oversee the production of the student submission for the embedded college. If possible, we would like the LSR to work with the provider or college to select the students that the review team will meet. We know that it might not be possible to designate an LSR for each college.

It is up to the student representative body to decide who should take on the role of the LSR. We recognise that this might be a challenge in itself, but suggest that the LSR might be an appropriate member of a student representative body, a student drawn from the embedded college’s established procedures for course representation, or a recent graduate that has progressed on to the partner higher education institution. Where there is no student representative body in existence, we would suggest that providers seek volunteers from within the student body to fulfil this role. The LSR cannot hold a staff position.

We know that not all embedded colleges are resourced to be able to provide the level of engagement required of the LSR, so we will be flexible about the amount of time that the LSR should provide. It would be quite acceptable if the LSR represented a job-share or team effort, as long as it was clear who QAA should communicate with.

In all cases, we would expect the embedded college and provider to provide as much operational and logistical support to the LSR as is feasible in undertaking their role and, in particular, to ensure that any relevant information or data held by the provider and embedded college is shared with the LSR to ensure that the student submission is well informed and evidence based.

The LSR should normally be responsible for:

- organising or overseeing the writing of the student submission for the embedded college
- helping the review team to select students to meet on review visits.

In addition, LSRs may also be involved by:

- receiving copies of key correspondence from QAA advising the review team during the review visit, on request
- attending the final review meeting on a visit to an embedded college
- liaising internally with the facilitator to ensure smooth communication between the student body and the embedded college/provider
- disseminating information about the review to the student body at the embedded college
- giving the students' comments on the draft review report
- coordinating the students' input into the action plan.

The LSR is permitted to observe any of the meetings that the team has with students at his/her embedded college. This is entirely voluntary and there is no expectation that the LSR should attend. The LSR should not participate in the team’s discussions with students unless invited...
to do so by the review team. The LSR is not permitted to attend the meetings that the team has with staff during the review visit, other than the final clarification meeting.

**Student submission**

The function of the student submission is to help the review team understand what it is like to be a student at that embedded college, and how students’ views are considered in the decision-making and quality assurance processes. Where the student submission indicates significant problems in the embedded college's or provider's assurance of standards and quality, this may lead the review team to spend longer on the visits than they would do if the submission suggests the provider and embedded college are managing responsibilities effectively. The student submission is, therefore, an extremely important piece of evidence.

**Format, length and content**

The student submission may take a variety of forms, for example video, interviews, focus group presentations, podcast, or a written submission. The submission should be concise and should provide an explanation of the sources of evidence that informed its comments and conclusions.

The student submission must include a statement of how it has been compiled, its authorship, and the extent to which its contents have been shared with and endorsed by other students at the embedded college.

The review team will welcome a student submission that tries to represent the views of as wide a student constituency as possible. Students are encouraged to make use of existing information, such as results from internal student surveys and recorded outcomes of meetings with staff and students, rather than conducting surveys especially for the student submission.

Students are also encouraged to investigate and make use of national datasets that provide robust and comparable information about the provider and embedded college when putting together the student submission.

When gathering evidence for and structuring the student submission, it will be helpful to take account of the advice given to providers for constructing the self-evaluation document (see Annex 3).

The student submission might particularly wish to focus on students' views on:

- how effectively the provider and embedded college sets and maintains the academic standards of its awards (or maintains the academic standards of the awards set by its degree-awarding bodies or other awarding organisations)
- how effectively the provider and embedded college manages the quality of students' learning opportunities
- how effectively the provider and embedded college manages the quality of the information it provides about the higher education it offers
- the provider's/embedded college's plans to enhance the quality of students' learning opportunities.

Review teams will also be interested to know students' views on the effectiveness of the pedagogical approaches in ensuring that the combined input of teaching staff and students enables students to achieve the learning outcomes of their programmes.

The student submission should not name, or discuss the competence of, individual members of staff. It should not discuss personal grievances. It should also seek to avoid including comments from individual students who may not be well placed to speak as representatives of a wider group.
More information and guidance about producing the student submission will be published on QAA’s website.

**Submission delivery date**

The student submission should be posted to the QAA secure electronic site 12 weeks before the start of the review period. QAA will confirm the precise date in correspondence with the LSR.

**Sharing the student submission with the provider and embedded college**

Given that the student submission is such an important input into the review process, in the interests of transparency and fairness it must be shared with the provider and relevant embedded college - at the latest when it is uploaded to the secure electronic site.

**Other ways for students to make their views known**

QAA is committed to enabling students to contribute to its review processes. The principal vehicles for students to inform this process are the student submission and the LSR. However, it may not be possible in all embedded colleges to identify an LSR and/or for the students to make a student submission. In these circumstances, we may need to consider an alternative way of allowing students to contribute their views directly to the review team using an online tool.

The online tool will include clear guidance and information about the function and parameters of the review and what kinds of comments can and cannot be considered. A common template for comments will be developed in order to help structure direct student input. Students’ comments will be guaranteed as anonymous. Personal grievances or comments regarding named members of staff will not be considered. Review teams will only consider any comments made through this facility where they provide evidence, or indicate that there may be evidence, regarding the provider’s or embedded college’s effectiveness in meeting the Expectations in the Quality Code. Indications of good practice will be given the same consideration as indications of potential problems.

If the online tool is required to be used, we will expect providers to inform all their students at an embedded college about its availability using a standard message developed by QAA. Any comments from students using this tool must be received by the beginning of the desk-based analysis (that is, 12 weeks before the start of the review period) to allow the review team to give them proper consideration. Therefore, any decision to activate the tool should be made during, or as soon as possible after, the preparatory meeting at the latest.

**Continuity**

Higher Education Review (Embedded Colleges) occurs over a period of several months. It is likely that both the provider, embedded college and students will have been preparing well before the start of the review, and will continue to be involved in action planning afterwards. QAA expects providers to ensure that students are fully informed and involved in the process throughout.

Once the review is over, QAA will invite the LSR to provide comments on the factual accuracy of the draft report for the embedded college.

The provider and embedded college are both required to produce an action plan to respond to the review’s findings. It is expected that the student representative body will have input in the drawing up of the action plans, and the annual updates to the plans. There will also be an opportunity for students to contribute to the follow-up of the action plans that QAA will carry out.
Annex 6: Appointment, training and management of reviewers

Higher Education Review (Embedded Colleges) is carried out by teams of peer reviewers. Peers are staff with senior-level expertise in the management and/or delivery of higher education provision, or students with experience in representing students’ interests. They are appointed by QAA according to the selection criteria below. There are no other restrictions on what types of staff or students may become reviewers.

The credibility of review depends in large measure upon the currency of the knowledge and experience of review teams. QAA's preference, therefore, is for staff and student reviewers to be employed by higher education institutions (HEIs) or enrolled on a programme of study, respectively. We also know, however, that currency of knowledge and experience is not lost as soon as employment or study comes to an end. Thus, QAA allows students to continue as reviewers for a limited time after they have left higher education, and will also consider self-nominations from former staff who can demonstrate a continuing engagement with academic standards and quality. More specific details are given below.

Reviewers are identified either from nominations by HEIs or self-nominations, as follows.

- **Staff reviewers** currently working for a HEI must be nominated by their employer, as an indication of the employer's willingness to support the reviewer's commitment to the review process. We will not accept self-nominations from staff who are employed by a HEI.
- **Former staff** may nominate themselves for consideration. To be eligible for consideration, and in addition to meeting the selection criteria set out below, former staff must demonstrate a continuing and meaningful engagement with the assurance of academic standards and quality beyond any involvement they may have with QAA. This engagement could be manifest in a consultancy role or a voluntary post, such as membership of a relevant governing body.
- **Student reviewers** may be nominated by a HEI or by a recognised students' union or equivalent, or nominate themselves. Student reviewers must be enrolled on a higher education programme or be a sabbatical officer of a recognised Students' Union at the time of nomination. Student reviewers may continue as reviewers for up to two academic years after they finish their studies or term as a sabbatical officer. Student reviewers cannot hold a senior staff position.

**Selection criteria**

The essential criteria for staff reviewers are as follows:

- experience in managing and assuring academic standards and the quality of higher education provision in a senior academic or professional support capacity at organisational and/or faculty or school level
- good oral and written communication skills
- the ability to work with electronic and/or web-based communication systems effectively
- the ability to work effectively as part of a team
- the ability to adhere to agreed protocols, procedures and deadlines.
The desirable criteria for staff reviewers are:

- experience of participating as a chair, panel member, assessor or equivalent in the periodic review process of their own and/or other institutions
- experience of assessing the achievements of students on higher education programmes at their own institution and/or other institutions (for example as an external examiner).

The essential selection criteria for student reviewers are as follows:

- experience of participating, as a representative of students' interests, in contributing to the management of academic standards and/or quality
- general awareness of the diversity of the higher education sector and of the arrangements for quality assurance and enhancement
- good oral and written communication skills
- the ability to work with electronic and/or web-based communication systems effectively
- the ability to work effectively as part of a team
- the ability to adhere to agreed protocols, procedures and deadlines.

It will be noted that the last four essential criteria are common to both staff and student reviewers.

In making our selection from those nominated, we try to make sure that a wide range of different HEIs are represented in the pool of reviewers, and that the pool reflects - in aggregate - sectoral, discipline, geographical, gender and ethnic balances.

Successful nominees are inducted and trained by QAA so that they are familiar with the aims, objectives and procedures of the review process, and their own role. Nominees are only appointed as reviewers once they have completed their training to the satisfaction of QAA.

**Contract management**

Reviewers are appointed on the basis that they agree to undertake, if requested, two reviews per academic year. The appointment will be reviewed after two years, but may be extended beyond this period by mutual agreement and subject to satisfactory performance.

At the end of each review, we ask reviewers to complete a standard evaluation form. The form invites feedback on the respondent's own performance and that of the other reviewers.

The QAA Review Manager coordinating the review also provides feedback on each reviewer.

We share the feedback generated with reviewers at regular intervals, to allow them to understand, and reflect on, the views of their peers. The feedback is anonymous; those receiving the feedback cannot see who has provided it.

Reviewers with particularly good feedback are invited to provide further information for use in training or dissemination to other reviewers. Reviewers with weaker feedback may be offered additional support and/or released from the reviewer pool, depending on the nature of the feedback and its prevalence.
Annex 7: Responsibilities checklist

One copy of this checklist should be completed for each awarding body/organisation that the provider delivers awards on behalf of, and sent to QAA as part of the evidence base for the self-evaluation document.

Provider:
Awarding body/organisation:
Embedded College(s):
Programme(s):

Please identify management responsibilities (or responsibilities for implementation within partnership agreements) using the checklist below. Where the provider is fully responsible (implementation is fully devolved) please mark the provider column; where the embedded college is fully responsible, mark the embedded college column; where the awarding body/organisation has full responsibility, mark the awarding body/organisation column. Please add an additional column for each awarding body/organisation; where responsibility is shared, mark the shared column. Where responsibility is devolved to the provider or shared please give details and documentary reference(s) that show how this is managed or implemented.

<table>
<thead>
<tr>
<th>Area</th>
<th>Provider</th>
<th>Embedded college</th>
<th>Awarding body/org</th>
<th>Shared</th>
<th>Details and documentary reference(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme development and approval</td>
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<tr>
<td>Modifications to programmes</td>
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<td>Setting assessments</td>
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<td>First marking of student work</td>
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<td>Moderation or second marking of student work</td>
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<td>Giving feedback to students on their work</td>
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<td>Student recruitment</td>
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<td>Student admissions</td>
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<td>Selection or approval of teaching staff</td>
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<td>Learning resources (including library resources)</td>
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<td>Student engagement</td>
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<tr>
<td>Responding to external examiner reports</td>
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<td>Annual monitoring</td>
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<td>Periodic review</td>
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<td>Student complaints</td>
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<td>Student appeals</td>
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<tr>
<td>Production of definitive programme information</td>
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<tr>
<td>(such as programme specifications)</td>
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<tr>
<td>Enhancement</td>
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</tbody>
</table>
Annex 8: A guidance note on the application of Part A: Setting and Maintaining Academic Standards to higher education providers without degree awarding powers

Responsibilities of non degree-awarding bodies

Degree-awarding bodies often work with other providers and embedded colleges that do not have degree awarding powers to deliver provision which leads to the award of a higher education qualification or academic credit of the degree-awarding body.

Where this happens, degree-awarding bodies are responsible for setting the academic standards and are responsible for maintaining those academic standards regardless of where the learning opportunities are delivered or who provides them. Embedded colleges that work with degree-awarding bodies are responsible for delivering modules or programmes of study and maintaining the academic standards of the degree-awarding body.

The operational implementation of certain functions related to academic standards (for example, assessment) may be delegated to these embedded colleges which are then accountable to the degree-awarding body for discharging them appropriately and for operating in accordance with the academic frameworks and regulations approved by the relevant degree-awarding body (see Chapter A2 and Chapter A3). In some instances, the degree-awarding body may have approved separate academic frameworks and/or regulations for an individual embedded colleges. In these circumstances, the embedded college is responsible for contributing to the review of regulations and recommending changes for approval by the degree-awarding body.

A degree-awarding body’s responsibility for the academic standards of all credit and qualifications awarded in its name is never delegated. Degree-awarding bodies are responsible for defining and recording, in a written agreement for each specific arrangement, the specific functions delegated to an embedded college and provider and the individual and shared roles, responsibilities and obligations of each party. All embedded colleges and providers that work with a degree-awarding body are required to engage with the Quality Code and to meet the relevant Expectations.

This extract from Part A prompts a series of questions which non-degree-awarding bodies could use to reflect on their responsibilities for helping to set and maintain academic standards:

- What degree-awarding bodies and/or other awarding bodies are you working with?
- What modules or programmes of study are you delivering for each of these?
- What is your understanding of the responsibilities that the college and the provider have been allocated by each degree-awarding body for helping to set and/or maintain the academic standards of their awards?
- What is your understanding of the responsibilities of the degree-awarding body in setting and maintaining academic standards?
- Which internal and external reference points are relevant to setting and maintaining the academic standards of the provision you are delivering? What use do you make of these reference points?
- In what ways are you involved in recruitment, selection and admissions of students? In programme design, development and approval? In assessment of students? In engaging with external experts including external examiners? In programme monitoring and review? How do these activities contribute to helping to set and maintain academic standards?
- How do you ensure that your staff understand and carry out their responsibilities for helping to set and/or maintain academic standards?
• How do you engage with the academic framework and regulations of each degree-awarding body? If you are working with multiple bodies and/or if you have a regulatory framework of your own, how do you manage differences in what is required?
• What arrangements are in place for you to report back to the degree-awarding bodies and/or other awarding bodies on how effectively you have carried out your responsibilities? How well are these arrangements working at your end?
• What gives you confidence in the academic standards of the provision you deliver?
Annex 9: The application of the enhancement expectation

This guidance about the enhancement expectation is intended to clarify what providers should comment on in their self-evaluation document.

The expectation in Annex 2 of Higher Education Review: A Handbook for Providers defines enhancement as: 'Deliberate steps are being taken at provider level to improve the quality of students' learning opportunities'. This definition suggests a particular approach which links strategy and initiative. This approach can be illustrated by a model in which:

- robust information is systematically generated by students, external examiners and other stakeholders. This information is not necessarily reflective of a deficit in the quality of provision, but is as part of routine quality assurance procedures designed to enable useful feedback.
- this information is systematically considered at provider level as part of the oversight of higher education
- this consideration identifies good practice and opportunities for further improvement. It informs the development of initiatives at strategic level
- these initiatives result in actions that positively impact on the quality of student learning opportunities.

In this way, the model describes an ethos where quality assurance generates information for quality enhancement to take place, and where enhancement is a routine part of the way that higher education is managed.

The process described in this model touches on other pertinent aspects of the collection, monitoring and use of information. For instance, it relies on:

- comprehensive student and stakeholder involvement to generate robust information
- effective strategic oversight of higher education at provider level to provide a framework for actions, to consider information and inform enhancement initiatives
- dynamic learning and teaching practice to incorporate enhancement initiatives
- comprehensive and accurate evaluation procedures
- systematic monitoring of the process to ensure continued fitness for purpose.
This model of effective enhancement and its impact on other expectations is illustrated in the diagram below.

![Diagram showing the process of enhancing student learning opportunities](image)

This articulation of the enhancement process prompts a series of questions which providers could use to highlight the way in which they might meet the expectation in the self-evaluation document, in supporting evidence and in meetings with the team.

- How do you collect information from students and other stakeholders to inform strategic improvements in the quality of students’ learning experiences?
- How do you ensure that this information is fit for purpose?
- How do you analyse this information?
- How do you make sure that this analysis happens at an appropriate strategic level?
- How does this analysis lead to initiatives at provider level which further improve the quality of students' learning experiences?
- How do you measure the effectiveness of these initiatives?
- How do you monitor the enhancement procedure?
Annex 10: Guidance on producing an action plan

Background

Following the Higher Education Review, each provider and embedded college is required to produce an action plan in response to the conclusions of its respective report. The action plans are intended to support the provider and college in the continuing development of its higher education provision by describing how it intends to take the findings of the Higher Education Review forward. Through its publication, the action plan constitutes a public commitment to take forward the findings of Higher Education Review, and so will promote greater confidence among students and other external stakeholders about the quality assurance of higher education at the provider and college.

The action plans should be produced jointly with student representatives wherever possible, or representatives should be able to post their own commentary on the action plans. It should be signed off by the head of the provider or college and be published on the respective provider and college websites. A link to the report page on QAA's website should also be provided. Each provider and college will be expected to update their action plan annually, again in conjunction with student representatives, until all actions have been completed, and post the updated plans to its website.

We do not specify a template for the action plans because we recognise that each provider and college will have its own way of planning after the review, however, an example is provided below.

Before completing the action plan template, it might be useful to consider beginning with the end in mind. What would success look like? What will be different as a result of the actions taken?

![Diagram](image)

**Figure 1: Completing the action plan**

For example:

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Success indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop and embed a robust system for programme design and approval (B1)</td>
<td>Effective processes are in place to approve and periodically review the validity and relevance of programmes. All programmes are approved and validated prior to students beginning their course of study.</td>
</tr>
</tbody>
</table>

Actions can then be developed that will lead to the success indicators.
The template

The column headings in the action plan template are:

**Column 1: Good practice, affirmations and recommendations**
This column should repeat precisely the wording of the good practice, affirmations and recommendations identified in the Key Findings section of the report.

**Column 2: Actions to be taken**
The provider should state how it proposes to address each of the recommendations, affirmations and good practice in this column. Actions should be ‘SMART’ (specific, measurable, achievable, realistic and time-bound).

Examples:

<table>
<thead>
<tr>
<th>1 Recommendations</th>
<th>2 Actions to be taken to meet success indicators</th>
<th>Success indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop and embed a robust system for programme design and approval (B1)</td>
<td>In consultation with Academic Board, Senior Management Team and awarding bodies develop new system for programme design and approval.</td>
<td>Effective processes are in place to approve and periodically review the validity and relevance of programmes.</td>
</tr>
<tr>
<td></td>
<td>Ensure all programmes are approved before students are enrolled. No new programmes to run without validation.</td>
<td>All programmes are approved and validated prior to students beginning their course of study.</td>
</tr>
<tr>
<td>Introduce a more reliable method for the systematic collection of data on student retention, academic standing and achievement (B8)</td>
<td>Develop and implement new system of data compilation and analysis. Reflection on data during annual monitoring process (at annual monitoring validation panels) informs strategic and operational management decisions. Annual data returns produced and shared with college staff. Includes section on previous year’s actions and responses to actions.</td>
<td>Coherent, comprehensive and accurate student data on retention, academic standing and achievement. Annual monitoring process systematically takes due account of relevant data. Student retention 85% or higher.</td>
</tr>
</tbody>
</table>

**Column 3: Date for completion (see Action plan example)**
The provider should specify dates for when the actions proposed in the previous column will be completed within the timescale specified by the review team. The more specific the action, the easier it will be to set a realistic target date. Ensure there is a specific target date for each milestone or subsidiary action. Avoid using ‘ongoing’, as it cannot be measured.
For example:

- 17 September 20XX
- 4 January 20XX, 8 February 20XX, 8 March 20XX
- second week of every term starting January 20XX

**Column 4: Action by (see Action plan example)**
State the role or job title of the specific person or committee who is responsible for carrying out the action and who is to be accountable for this. Do not include individuals' names.

**Column 5: Success indicators (see Action plan example)**
The provider should identify how it will know - and how it will demonstrate - that a recommendation or affirmation has been successfully addressed, or feature of good practice appropriately disseminated. If there is a specific action and a clear date for completion, it will be easier to identify suitable success indicators. The provider's responsibilities to its awarding bodies/organisations should be considered when developing the success indicators.

It may be helpful to consider the following questions.

- What will be different as a result of the action(s) taken?
- What will success look like?
- How can success be measured?

**Column 6: Progress (see Action plan example)**
This column should be updated after each internal review of progress. Regular updating should assist with preparations for any future monitoring or review. Examples of evidence in support of progress made may include:

- external verifier reports
- end of term course feedback
- quarterly academic board meeting minutes
- student learning journals
- teaching and learning policy and completed teaching observation reports
- annual monitoring reports.

**Some final points for consideration**

- Do the actions provide a sufficient framework for the provider to move forward in a structured and timely way?
- Can progress be monitored and evaluated?
- Does the action plan show someone external to the provider what evidence could be used to confirm that the actions have been achieved and their effectiveness evaluated?
### Action plan example

<table>
<thead>
<tr>
<th>1 Findings</th>
<th>2 Actions to be taken</th>
<th>3 Date for completion</th>
<th>4 Action by</th>
<th>5 Success indicators</th>
<th>6 Progress (add date of review)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Good practice</strong></td>
<td></td>
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<td></td>
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<td></td>
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<tr>
<td>List features of good practice</td>
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<tr>
<td><strong>Affirmation</strong></td>
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<td>List affirmations</td>
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<td><strong>Recommendations</strong></td>
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<td>• develop and embed a robust system for programme design and approval (B1)</td>
<td>In consultation with Academic Board, Senior Management Team and awarding bodies, develop new system for programme design and approval.</td>
<td>September 20XX</td>
<td>SMT/Academic Board</td>
<td>Effective processes are in place to approve and periodically review the validity and relevance of programmes.</td>
<td>A draft procedure for programme design and approval has been produced by Senior Management Team and will be submitted to Academic Board in June 20XX</td>
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<td>Ensure all programmes are approved before students are enrolled. No new programmes to run without validation.</td>
<td>September 20XX</td>
<td>Heads of Department/Academic Board</td>
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</table>
- Introduce a more reliable method for the systematic collection of data on student retention, academic standing and achievement (B8).

<table>
<thead>
<tr>
<th>Develop and implement new system of data compilation and analysis.</th>
<th>October 20XX to be implemented by Dec 20XX</th>
<th>Director of Studies and Information Services Manager</th>
<th>Coherent, comprehensive and accurate student data on retention, academic standing and achievement.</th>
</tr>
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<tbody>
<tr>
<td>Review of data during annual monitoring process (at annual monitoring validation panels) informs strategic and operational management decisions.</td>
<td>From January 20XX, third month of each term</td>
<td>Heads of School</td>
<td>Annual monitoring process systematically takes due account of relevant data.</td>
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<td>Annual data returns produced and shared with college staff.</td>
<td>Annually from August 20XX</td>
<td>Senior Management Team</td>
<td>Student retention at 85% or higher.</td>
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<td>Includes section on previous year's actions and responses to actions.</td>
<td>Annually from September 20XX</td>
<td>Director of Studies</td>
<td>Information Services Manager has developed new process, to be discussed at SMT in April 20XX</td>
</tr>
</tbody>
</table>

Director of Studies has revised annual data returns to include section on previous year’s actions and responses.