

Higher Education Review (Plus) of Centre for Homeopathic Education

May 2014

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About this review

This is a report of a Higher Education Review (Plus) conducted by the Quality Assurance Agency for Higher Education (QAA) at the Centre for Homeopathic Education. The review took place from 7 to 9 May 2014 and was conducted by a team of three reviewers, as follows:

- Professor Hastings McKenzie
- Mr Nabeel Zaidi
- Miss India-Chloe Woof (student reviewer).

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

In Higher Education Review the QAA review team:

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

A summary of the findings can be found in the section starting on page 2. [Explanations of the findings](#) are given in numbered paragraphs in the section starting on page 5.

In reviewing the Centre for Homeopathic Education the review team has also considered a theme selected for particular focus across higher education in England and Northern Ireland. The [themes](#) for the academic year 2013-14 are Student Involvement in Quality Assurance and Enhancement and Student Employability,² and the provider is required to select, in consultation with student representatives, one of these themes to be explored through the review process.

The QAA website gives more information [about QAA](#) and its mission.³ A dedicated section explains the method for [Higher Education Review \(Plus\)](#).⁴ For an explanation of terms see the [glossary](#) at the end of this report.

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

² Higher Education Review themes: www.qaa.ac.uk/publications/information-and-guidance/publication?PubID=106.

³ QAA website: www.qaa.ac.uk/about-us.

⁴ Higher Education Review (Plus): www.qaa.ac.uk/en/ReviewsAndReports/Pages/Educational-Oversight.aspx

Amended judgement June 2015

Introduction

In May 2014, the Centre for Homeopathic Education underwent a Higher Education Review (Plus), which resulted in 'meets UK expectations' judgements for the maintenance of threshold academic standards of the awards offered on behalf of degree-awarding bodies at the Centre; information about higher education provision produced by the Centre; and the enhancement of learning opportunities at the Centre. The Centre also received a judgement of 'requires improvement to meet UK expectations' for the quality of learning opportunities.

Unsatisfactory judgements are subject to a formal follow-up by QAA, which involves the monitoring of an action plan produced by the Centre in response to the report findings.

The Centre published an action plan in October 2014 describing how it intended to address the recommendations, affirmations and good practice identified in the review.

The follow-up process included dialogue with the Review Manager and culminated in a partial re-review in February 2015. During the one-day review visit, the review team met senior staff, tutors, students and representatives from the awarding body to discuss progress and triangulate the additional evidence submitted over the preceding months.

The re-review confirmed that the recommendations relating to the quality of learning opportunities at the Centre had been successfully addressed and the good practice appropriately disseminated. Other actions against recommendations, affirmations and good practice identified in the original report had been completed on schedule and contributed to the progress against the quality of learning opportunities at the Centre.

QAA Board decision and amended judgement

The review team concluded that the Centre had made sufficient progress to recommend that the judgement be amended. The QAA Board accepted the team's recommendation and the judgement is now formally amended. The College's judgements are now as follows.

- The maintenance of threshold academic standards of the awards offered on behalf of its degree-awarding body **meets** UK expectations.
- The quality of student learning opportunities **meets** UK expectations.
- The quality of the information produced about its provision **meets** UK expectations.
- The enhancement of student learning opportunities at the Centre **meets** UK expectations.

Findings from the follow-up process

The team found that the Centre had made progress against the recommendations, affirmations and good practice as follows.

Recommendation - Expectations B2 and C

The Centre has a clear process for student admissions. It has a formal policy, which is available to prospective students on the website. The newly developed policy refers to accreditation of prior experiential learning (APEL) and accreditation of prior certificated learning (APCL) and both processes are now clearly outlined. Recruitment, selection and admissions activity is undertaken by nominated staff, and the Centre is considering further developing the process to include an admissions panel.

Recommendation - Expectations B9 and C

The Centre has introduced and published on its website effective academic appeal and complaints policies for students, provided related guidance on an online video channel and consistently embedded these processes at senior management, curriculum and administrative levels. The academic appeals and complaints policies were informed by the outcome of a student consultation undertaken in October 2014, during student representative training, and approved by the Academic Quality Committee in December 2014. The review team was satisfied that robust steps had been taken to implement effective academic appeal and complaints policies and procedures.

Recommendation - Expectation B6

The Centre has adopted a robust approach to ensuring that assessment feedback is provided to students within an explicitly defined time frame. Detailed assessment calendars have been introduced to schedule expected return dates for assessments together with feedback. Monitoring processes are in place to track assessment submission and feedback to students. Although the new assessment feedback system has yet to go through a full academic cycle, the review team is satisfied that the necessary systems are in place, that the administrative team understands the operational requirements and complexities involved in ensuring the system's efficient operation, and that there is appropriate oversight to assure its effectiveness.

Recommendation - Expectation B8

The Centre has implemented an effective deliberative structure that ensures timely monitoring of its higher education provision and related action plans. The recently formed Academic Quality Committee (AQC) provides a structure to secure oversight of the Centre's provision. The Committee's terms of reference and frequency of meetings underpin a deliberative approach. This is evidenced by the minutes of the meetings, which identify actions. However, while actions are allocated to particular individuals, there is no indication of a time frame within which they are to be carried out or followed up.

Affirmation - Expectation B3

An informal peer teaching review scheme was introduced in 2013-14 and this has further developed with the introduction of peer review with an experienced external peer reviewer from December 2014.

Affirmation - Expectations A6 and B6

There are detailed marking grids for almost all assessments and the Centre holds marker's meetings during which the development of these grids is discussed, including how key indicators in marking helps to ensure consistency.

Affirmation - Expectations A6 and B6

The Centre has made good progress in the further implementation of the double-marking system. This has included the development of an assessment tracker for both full-time and part-time students.

Good practice - Expectation B4

The Centre has continued its programme of graduate circles, maintained its strong relationship with employers and continued disseminating employment opportunities to students.

Good practice - Expectation B6

Comprehensive assessment feedback to students has been sustained and best practice disseminated.

Key findings

QAA's judgements about the Centre for Homeopathic Education

The QAA review team formed the following judgements about the higher education provision at the Centre for Homeopathic Education.

- The maintenance of the threshold academic standards of awards offered on behalf of its degree-awarding body **meets** UK expectations.
- The quality of student learning opportunities **requires improvement to meet** UK expectations.
- The quality of the information produced about its provision **meets** UK expectations.
- The enhancement of student learning opportunities **meets** UK expectations.

Good practice

The QAA review team identified the following features of **good practice** at the Centre for Homeopathic Education.

- The involvement of alumni and employers in enabling students to develop professional potential (Expectation B4).
- The comprehensiveness of feedback to students on all forms of assessment (Expectation B6).

Recommendations

The QAA review team makes the following **recommendations** to the Centre for Homeopathic Education.

By November 2014:

- develop, implement and make accessible to prospective students a formal admissions policy or procedure (Expectations B2 and C)
- develop, implement and make accessible to students formal procedures for handling students' complaints and academic appeals (Expectations B9 and C).

By February 2015:

- identify and adhere to an explicit deadline or timeframe for the provision of feedback to students on assessed work, which allows students sufficient time to reflect on their performance before their next summative assessments (Expectation B6)
- develop a deliberative structure that is capable of supporting a more effective approach to monitoring its higher education provision (Expectation B8).

Affirmation of action being taken

The QAA review team **affirms** the following actions that the Centre for Homeopathic Education is already taking to make academic standards secure and/or improve the educational provision offered to its students.

- The introduction and continuing development of peer observation of teaching (Expectation B3).

- The actions being taken to ensure a consistent approach to the formulation of grade descriptors in marking grids (Expectations A6 and B6).
- The introduction of double marking for all assessed work (Expectations A6 and B6).

Theme: Student Employability

This theme was determined in consultation between the Centre for Homeopathic Education and its students. As the Centre emphasises the development of homeopathic practitioners, it was a theme that informed the review on many occasions.

Preparation for employment is embedded in the BSc (Hons) Homeopathy degree programme provided by the Centre and includes modules where students gain professional practice experience with the support of a paid supervisor. In addition they follow a module requiring them to develop a business plan. Consequently, students have the potential to graduate with a client base already secured.

Through the Society of Homeopaths, graduates of the Centre can register with the Alliance of Registered Homeopaths and the Homeopathic Medical Association. This enables graduates of the Centre to commence professional practice, which many do on a self-employed basis.

The Centre has developed and maintains close relationships with significant employers in the sector who regularly recruit their graduates. Likewise, the links with alumni are well established and include 'Graduate Gatherings' along with a process to provide continuing support to graduates in practice both from alumni and the Centre.

Further explanation of the key findings can be found in the [Higher Education Review \(Plus\) handbook](#) available on the QAA website.

About the Centre for Homeopathic Education

The Centre for Homeopathic Education (the Centre) is the largest homeopathy college in the UK providing higher education and training for prospective homeopathic practitioners. It currently offers students a full and part-time BSc (Hons) Homeopathy programme through its awarding body, Middlesex University (the University). The programme was validated by the University in 2004 and revalidated in 2009. The first cohort of students graduated in 2008.

At the time of the review visit, there were 161 registered students; 71 full-time and 90 part-time. Of these, 149 students were studying the degree programme and 12 were studying the Licentiate. Nearly all students at the Centre are over 21 years of age.

The Centre's mission is to facilitate and encourage the development of student homeopaths into autonomous lifelong learners, as well as confident and competent homeopathic practitioners who are able to practise successfully in their community.

In 2010 the Centre was inspected by the British Accreditation Council (BAC) and achieved its accreditation. Since this BAC inspection, the Centre has experienced several changes including a change of management in June 2013.

The Centre aims to strengthen its position by ensuring student recruitment and expanding beyond the UK. A Centre for Homeopathic Education was established in New York in 2009 and a partnership with a homeopathic college in Budapest was established in 2012. Each international centre has its own distinct management.

A key challenge identified by the Centre is updating and managing changes in processes and procedures to support its strategic plans. These plans include investment in information technology systems to modernise the Centre's processes, improve public information, facilitate student recruitment and provide a virtual learning environment for students, graduates and staff.

The Centre has a relationship with a single awarding body, Middlesex University. This arose from discussions between the two institutions in 2000. At the time, the Centre was delivering an accredited Licentiate Diploma course. It was from this contact that a BSc (Hons) in Homeopathy was validated in 2004 with both part and full-time modes. The programme was reapproved in 2009 and a further approval event is scheduled for 2015. The Centre is responsible for delivering the award while the University sets and maintains academic standards.

Explanation of the findings about the Centre for Homeopathic Education

This section explains the review findings in more detail.

Terms that may be unfamiliar to some readers have been included in a [brief glossary](#) at the end of this report. A fuller [glossary of terms](#) is available on the QAA website, and formal definitions of certain terms may be found in the handbook for the [review method](#), also on the QAA website.

1 Judgement: Maintenance of the threshold academic standards of awards

Expectation (A1): Each qualification (including those awarded through arrangements with other delivery organisations or support providers) is allocated to the appropriate level in *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*.

Quality Code, Chapter A1: The national level

Findings

1.1 The relationship between the University and the Centre started in 2000 when the University approached the Centre to suggest establishing a bachelor's degree in homeopathy. At the time, the Centre was delivering an accredited Licentiate Diploma course. This contact culminated in 2004 with the approval of a BSc (Hons) in Homeopathy in both part and full-time modes. This award was reapproved in 2009 and is due for a further reapproval in 2015. The Centre is responsible for delivering the award while the University sets and maintains academic standards.

1.2 The degree was developed from the Centre's established Licentiate Diploma course which operates in accordance with the expectations of the Complementary and Natural Healthcare National Occupation Standards (CNHNOS). CNHNOS's framework is the benchmark for UK-based homeopathy courses, setting the national standards expected of homeopathic practice in the UK. During development, the degree was positioned against the FHEQ and designed with consideration of the suggested framework for the education of homeopaths as developed by the Society of Homeopaths (SoH). The award is the only bachelor's degree in homeopathy in the UK and is fully accredited by the SoH. The Centre receives annual visits from the SoH and the most recent formal review took place in February 2013. The team tested the application of this process by scrutinising a range of evidence including the review report and recent external examiner reports.

1.3 Evidence available to the review team demonstrated that the degree was allocated to the appropriate level in the FHEQ. In particular, this was evidenced by the degree validation documentation and external examiner reports. Although the Licentiate Diploma was the original basis for the degree, it has been developed into a distinct award with academic rigour and demands that are not present in the diploma, in particular its emphasis on research and a study of homeopathy from an academic perspective. Students who had studied the Licentiate and progressed to the degree were likewise able to comment upon on the distinction between the diploma and the bachelor's degree.

1.4 The team concludes that the BSc (Hons) in Homeopathy is allocated to the appropriate level in the FHEQ and as such the Expectation is met and the risk is low.

Expectation: Met
Level of risk: Low

Expectation (A2): All higher education programmes of study take account of relevant subject and qualification benchmark statements.

Quality Code, Chapter A2: The subject and qualification level

Findings

1.5 There is no applicable subject benchmark statement for the award and the Centre provides the only SoH-accredited BSc (Hons) in Homeopathy currently active in the UK. The approach taken by the Centre to meet this Expectation was to use the SoH's framework during development of the degree, with consideration of the FHEQ to appropriately place the award at level 6. The review team considered this approach capable of meeting the Expectation given that reference was made to the appropriate professional bodies' framework.

1.6 The team tested this approach by referring to the Programme Handbook and programme specification and through questions raised in meetings with staff. The team discovered that the Centre had taken careful consideration of the FHEQ and the embedded research theme including a Research Methods module at level 5 and a Proposition Module at level 6 to give the award an academic underpinning that clearly differentiates it from the predominantly practice-based Licentiate Diploma. The programme was also accredited for a further five years by the SoH in February 2013 and it is considered in the report that the Centre 'could be regarded as a flagship institution within the profession'.

1.7 The review team concludes that the BSc (Hons) in Homeopathy takes into account relevant professional body benchmarks and is appropriately positioned against the FHEQ. As such, the Expectation is met and the risk is low.

Expectation: Met
Level of risk: Low

Expectation (A3): Higher education providers make available definitive information on the aims, intended learning outcomes and expected learner achievements for a programme of study.

Quality Code, Chapter A3: The programme level

Findings

1.8 The awarding body sets and maintains the award's standards and provides a programme specification that the Centre makes available to students in the Programme Handbook. The Handbook provides comprehensive information for students including the programme's aims, intended learning outcomes and expected learner achievements.

1.9 The programme is subject to the awarding body's annual monitoring process and this is compiled by the Centre's Link Tutor with support from the Link Tutor from the awarding body. Day-to-day aspects of programme delivery are managed by the Centre, informed by student feedback and teaching and learning considerations. However, formal modifications to the design of the programme between periodic approvals are uncommon and the review team were provided with no evidence of any modifications since the last review.

1.10 The bachelor's degree is the preferred route for the intake of new students. Most students opt to enrol on the degree, which has the accredited Licentiate awarded in parallel, rather than opting to join the Licentiate Diploma course. There is some limited student movement between the two programmes. When this involves transition from the Licentiate course to the degree programme, the accreditation of prior learning/accreditation of prior experiential learning (APL/APEL) process is used by the Centre as appropriate. The review team tested the application of this process by questioning staff about the APL/APEL process and student mobility between the practice-based Licentiate Diploma and the BSc award. Centre staff reported that the BSc was now the preferred entry route and the 2012-13 report from the external examiner provided further evidence of this ambition.

1.11 The Centre's website advertises a 12-month direct-entry top-up award to practising homeopathy students with Licentiate Diplomas awarded from SoH-accredited institutions. During a meeting with Centre staff, it became evident that although this was advertised as a top-up award, it did not have a distinct and documented identity outside of its parent award. As such, each applicant was required to undergo APL/APEL of their Licentiate qualification and demonstrate that they were insured to practise professionally prior to enrolment. In addition, the website gave misleading information that the top-up was 120 credits at level 6 when in reality it was 30 credits at level 5 and 90 credits at level 6. Consequently, the team did not consider the top-up award to constitute a separate programme of study to the bachelor's degree. The Centre may wish to consider how the top-up degree could be formalised as an award that could be readily accessed through an advanced standing arrangement for Licentiate-qualified practising applicants.

1.12 The Centre makes available definitive information on the aims, intended learning outcomes and expected learner achievements of their BSc (Hons) Homeopathy programme and the team find that the Expectation is met and the risk is low.

Expectation: Met
Level of risk: Low

Expectation (A4): Higher education providers have in place effective processes to approve and periodically review the validity and relevance of programmes.

Quality Code, Chapter A4: Approval and review

Findings

1.13 The Centre's approach to meeting this Expectation is to ensure that they adhere to the awarding body's processes of approval and review. Prior to 2013, the bachelor's degree part and full-time delivery modes had separate programme leaders but after a change in the Centre's management arrangements both now operate under a single programme leader. The Centre's Link Tutor liaises with the programme leader and module tutors and ensures adherence to the awarding body's annual monitoring and periodic review processes for the single BSc (Hons) programme. The review team scrutinised the review reports to test this assertion and noted that the reports follow the awarding body's intended format. The team also learned that the consolidation of programme leadership was a beneficial change as it had resulted in an increasingly symbiotic relationship between the two routes that had previously operated with a certain amount of autonomy. The team determined that provided the Centre followed the processes of approval and review as laid down by the awarding body, then it was capable of meeting the Expectation.

1.14 The team tested the efficacy of the review process by scrutinising the annual monitoring reports (AMR) in the evidence base. An AMR is produced annually by the Centre's Link Tutor in consultation with module leaders and the awarding body's Link Tutor. It follows the awarding body's template and contains a significant amount of award-related management information. The team discovered that there was no direct evidence of the Centre proactively using the AMR action plan in the year and reflecting upon progress. In addition, while the reports were informative, there was limited analysis and reflective commentary on the data presented and this data is not routinely used when constructing the AMR action plan. An indicator of this was survey information regarding significant student dissatisfaction with the Centre's learning resources. Over 90 per cent of students in the 2012-13 end-of-year survey disagreed that learning resources were accessible, available and appropriate, and this concern had been registered for at least two years. Despite this, no substantive plans to address the concern were evident either in the report or from staff when questioned in a meeting.

1.15 The review team also questioned the approach taken regarding external examiner reports and learned that the reports are received by the Centre from the awarding body and the examiner is sent a formal response coordinated by the Link Tutor. However, the review team discovered that comments from the external examiner demonstrate that the Centre can lack responsiveness to issues raised. As an example, it took two years of external examiner comments regarding the absence of double marking and an assignment moderation process before any progress was made.

1.16 The prime method by which the Centre is able to deliberate upon academically related matters and the learning experience is their Board of Studies which is convened in accordance with the requirements of the awarding body. The team learned that these boards sat a minimum of twice per year. The minutes from these meetings indicated that their main consideration was student feedback on programme-related matters. Evidence provided by the Centre demonstrated that there was a disparity between the intended operation of these boards as intended by the awarding body and the practice at the Centre. As such, AMR reports and external examiner reports should have been routinely considered at the Centre's Board of Studies but there was no clear evidence of this practice. When questioned, staff did explain that the Board of Studies was evolving to more routinely consider these reports.

The need to establish an Academic Board and an associated quality committee to oversee quality and awarding body compliance was discussed in a February 2013 staff meeting but no subsequent action was evident to the review team.

1.17 The review team concludes that the Centre follows the awarding body's processes of programme approval and periodic review and the team considers the Expectation is met and that the risk is low.

Expectation: Met
Level of risk: Low

Expectation (A5): Higher education providers ensure independent and external participation in the management of threshold academic standards.

Quality Code, Chapter A5: Externality

Findings

1.18 The Centre's approach to meeting this Expectation is to ensure that they appropriately follow the awarding body's processes for the appointment of external examiners and external participants in review. The team reviewed evidence and questioned staff regarding the processes of appointment. The team was advised that the awarding body appoints an external examiner for the programme based upon recommendations from the Centre and discovered that it retains its authority in this regard and rejects candidates that do not meet the required criteria. The Centre also makes recommendations for external participation in programme review and revalidation. The review team concluded that the appointment of external expertise in quality assurance processes is thus transparent and appropriate.

1.19 The Centre collaborates effectively with its awarding body to ensure independent and external participation in the management of threshold academic standards and the team considers that the Expectation is met and that the risk is low.

Expectation: Met
Level of risk: Low

Expectation (A6): Higher education providers ensure the assessment of students is robust, valid and reliable and that the award of qualifications and credit are based on the achievement of the intended learning outcomes.

Quality Code, Chapter A6: Assessment of achievement of learning outcomes

Findings

1.20 The BSc (Hons) Homeopathy is delivered as validated provision of the awarding body and, in accordance with the Memorandum of Cooperation, the Centre has devolved responsibility for the assessment of students.

1.21 The Centre has a well established system for managing assessments. Students are given an assessment calendar that provides key dates in the assessment process for each module. Due to the mobility of academic staff, assignments are submitted in hard copy. The Centre's administrative office tracks the progress of all assessments after submission, distributing them by mail for marking and moderation.

1.22 The 2012-13 external examiner report, the most recent made available to the team, observed that internal moderation and double marking had not been introduced despite the matter being raised for at least two consecutive years. At the time of the visit, a system of moderation had been introduced that incorporated the sampling of varying standards of student work. These samples were then double marked and sent to the external examiner for moderation although it was unclear from the assessment calendar provided how external moderation fitted into the schedule as no allowance for external moderation was included in the assessment calendar. Reviewers heard from staff that the mailing of work for moderation had increased the administrative burden and created a process that could not routinely return coursework to students within the awarding body's expectation of four weeks. On occasion this meant that students did not receive feedback on an assignment until after the planned resubmission date.

1.23 The review team tested the application of the moderation process by scrutinising the expectations of the awarding body and through meetings with staff. The awarding body's regulations permit varying programme moderation policies across its provision provided the policy is laid down in the Programme Handbook. The team discovered that the latest Programme Handbook contains the new moderation policy and students were aware that moderation was now in operation. This new process was well received by lecturers who viewed it as an opportunity to reflect upon the varying assessment methods employed by colleagues and as such it was seen as a positive development. The team also learned that subsequent to a trial, double marking would be introduced across all modules. The Centre was also working on a more uniform implementation of marking grids and ran a recent development day for staff that had been well received by those attending. Although the comprehensive use of an internal assessment process was not yet embedded, the assessment process undertaken was rigorous and fair, and a moderation policy was published in accordance with the awarding body's requirements. The external examiner was also content that standards were appropriate and comparable to other higher education programmes operating at this level.

1.24 The sessional lecturers have long-established employment with the Centre and were roundly praised by students for their expertise and standard of knowledge. Recently, the Centre committed to providing feedback in typewritten form and all students now receive comprehensive feedback on the assessed work, including examinations. The thoughtful marking and extensive feedback provided was noted as good practice by the external examiner in her 2012-13 report.

1.25 Assessment boards are chaired by the awarding body and are operated fairly and consistently. Student results are clearly and accurately recorded. Module leaders now attend assessment boards. This has only become practice within the last year and was positively commented upon by the external examiner.

1.26 The Centre operates an auditable APL/APEL process in accordance with the awarding body's policy. All prospective students meet with the programme leader during the admissions process. Their suitability for the programme is determined against the admissions criteria and possible exemptions of credit are discussed. APL/APEL documentation is then completed that includes appropriate evidence provided by the student which is then sent to the awarding body for consideration. Upon receiving notification regarding the APL/APEL claim, a formal offer of admission is made. The review team tested the application of this APL/APEL process by scrutinising direct evidence made available to the team and through the questioning of staff in meetings. The team discovered that the Centre has a good understanding of the awarding body's APL/APEL process and as such it takes care to ensure that any recommendations made to the awarding body are appropriate and defensible.

1.27 The team considers the establishment of the moderation process and the attempts to establish double marking more uniformly to be valid developments. The team therefore **affirms** the Centre's introduction of double marking for all assessed work.

1.28 Assessment was supported through the use of grade descriptors in marking grids. The introduction of these marking grids was welcomed by both module leaders and students as they supported consistency and transparency in assessment. However, their implementation was not consistent across modules as while some marking grids were clear regarding the evidence required to achieve the stated grade, others were less specific in specifically qualifying, for example, the difference between work that was good and work that was excellent. The team hence **affirms** the actions being taken to ensure a consistent approach to the formulation of grade descriptors in marking grids.

1.29 The team concludes that the mechanisms to maintain the standard of student assessment are robust and reliable and that credit is awarded based on achievement of the intended learning outcomes. The Expectation is met and the risk is low.

Expectation: Met
Level of risk: Low

Maintenance of the threshold academic standards of awards: Summary of findings

1.30 To reach judgements about academic standards, the review team matched its findings against criteria for this section in Annex 2 of the relevant handbook.

1.31 There are six Expectations in this area and all are met. For each, the level of risk is low.

1.32 The team concludes that the BSc (Hons) Homeopathy programme is allocated to the appropriate level in the FHEQ and takes into account relevant professional body benchmarks. In addition, the Centre makes available definitive information on the aims, intended learning outcomes and expected learner achievements of the programme. However, the review team found that the Centre's website gave some misleading information.

1.33 In addition, the team commented on how at times the Centre can lack responsiveness to issues raised by external examiners and some disparity between the operation of the Board of Studies from that intended by the awarding body.

1.34 There are two affirmations for this area and both relate to Expectation A6. They recognise the actions being taken to ensure a consistent approach to the formulation of grade descriptors in marking grids and the introduction of double marking for all assessed work. The review team also refer to these affirmations under Expectation B6.

1.35 The review team concludes that the maintenance of the threshold academic standards of awards at the Centre **meets** UK expectations.

2 Judgement: Quality of student learning opportunities

Expectation (B1): Higher education providers have effective processes for the design and approval of programmes.

Quality Code, Chapter B1: Programme design and approval

Findings

2.1 The Centre designs the BSc (Hons) in Homeopathy, based on the SoH's core content, and is further guided by the University in aligning the programme to meet the threshold standard required for a BSc (Hons). The University has sole responsibility for approval of the programme during initial validation and subsequent review and revalidation. The Centre liaises with SoH to ensure that the programme continues to reflect developments in requirements for the homeopathic profession and liaises with the University to ensure that the programme remains aligned to its academic quality expectations. The Centre involves students, graduates and staff in the validation and subsequent revalidation processes for the programme.

2.2 The review team examined documentation relating to the design and approval of programmes, including the SoH course framework, core criteria, Application for Recognised Course Status (ARCS) five-year review, the Memorandum of Cooperation, the University's review report and the validated Programme Handbook. The team met with the Centre Principal, Centre staff and students, alumni and employers.

2.3 The SoH comments favourably on the programme design, including its alignment to the content of homeopathic education, the effective integration of clinical training in the programme and the appropriate balance achieved between theoretical, experiential and clinical learning. Employers and alumni are positive about how the programme meets their expectation of homeopathic education and how it prepares students to become effective homeopathic practitioners, whether on an employed or self-employed basis.

2.4 The team concludes that the Centre meets the Expectation and that the risk is low. Furthermore, there is evidence that the programme design supports the theme of student employability.

Expectation: Met
Level of risk: Low

Expectation (B2): Policies and procedures used to admit students are clear, fair, explicit and consistently applied.

Quality Code, Chapter B2: Admissions

Findings

2.5 The Centre does not have a formal policy on admissions criteria for students, although entry criteria are listed on the website. In addition, there is no formal system in place to ensure consistency within the admissions process which is informally assured through the Principal who has sole responsibility for interviewing prospective students. The Centre does not differentiate between APEL, accreditation of prior certificated learning (APCL) and APL and currently does not have a clear policy underpinning non-standard entry.

2.6 The Centre's current processes do not meet the Expectation in Chapter B2, as there are no clear policies in place to underpin the admissions process, and no formal mechanisms to ensure consistency within this process.

2.7 The review team tested the provider's approach to admissions in meetings with staff and students involved in the process, asking students about their experiences during the admissions process including those admitted via an APEL process. The team also reviewed the information on the Centre's website and the documentation provided by the Centre relating to admissions, including its admissions mapping and completed APEL forms. Students receive information about the Centre and the programme in advance of starting their course, and attend a 'taster day' at the Centre between the application and interview stages of the admissions process.

2.8 The Principal, Operational Director and Senior Administrator are all involved in the recruitment of students, and the Principal interviews all prospective students. There is no formal process or clear guidelines for the admissions process, which may result in a lack of consistency. There is also no formal process in place for complaints and appeals in relation to the admissions process. The Centre recognises that the entry requirements and process should be clarified and formally documented.

2.9 Admissions requirements outlined on the Centre's website also state 'If you don't have formal qualifications, we encourage you to apply as most of our students have sufficient previous work and life experience to cover our entry requirements'. Desirable qualities are outlined for prospective students without formal qualifications, and these are assessed by the Principal as part of the interview process. However, it is not clear how these qualities are applied consistently. There is no clear policy for accrediting prior learning; however, the process followed is formally documented and appears to be consistently implemented. This process can be confusing for students. In advance of starting the course, students receive an information pack following the offer of a place, which they find useful and accurate preparation for their time at the Centre. Information for students is transparent, particularly regarding the extra costs relating to supervision and insurance.

2.10 The students the team met were not sure about the entry criteria required to study at the Centre, and explained that the main part of the admissions process was the interview. Students admitted via the APEL process described the experience as confusing and unclear. Staff also acknowledged that the Centre is aware of the need to formalise and document the admissions policy to ensure consistency and fairness of the process.

2.11 In summary, the team found that the Centre does not meet the Expectation. While there is evidence of procedures in place that operate effectively, there is a lack of

underpinning policies regarding entry criteria and accreditation of prior learning. There is also no appeals and complaints process relating to the admissions process. It is therefore not clear how consistency and fairness is ensured for prospective students without the required standard entry qualifications, and how the Centre judges fairly and consistently whether they have the 'qualities' required to begin the course. The level of risk is moderate as over time, insufficient attention has been given by the Centre to ensuring the policies and procedures used to admit students are clear, fair and consistently applied, leading to shortcomings in the procedures and confusion among students as to how they are applied.

2.12 The team **recommends** that the Centre develop, implement and make accessible to prospective students a formal admissions policy, which takes account of the sound practice set out under Expectation B2 and Part C.

Expectation: Not met

Level of risk: Moderate

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

Quality Code, *Chapter B3: Learning and teaching*

Findings

2.13 The Centre does not have a learning and teaching strategy and takes guidance from the University's strategy. The Centre works with a range of stakeholders, including staff, students, alumni, external representatives and employers, to ensure the continued effectiveness of its approach to learning and teaching. The Centre endeavours to offer students the opportunity to engage in reflective practice through offering timely assessment feedback within four weeks of submission.

2.14 Students are offered a range of academic and pastoral support which underpins their learning experience, and the Centre has an Academic Support Officer which the students find helpful.

2.15 The Centre meets the Expectation as detailed in *Chapter B3: Learning and teaching*, as students are offered a range of support and also have a range of informal and formal channels through which to give feedback on their experience at the Centre.

2.16 The review team tested the Centre's approach to reviewing and enhancing learning and teaching through meetings with Centre management, module leaders, employers, alumni and students. The team also reviewed documentation relating to the range of support provided to students by the Centre, and the formal processes for students to give feedback on their experiences.

2.17 The Centre provides students with a range of learning and teaching support and information on how they can access these is included in the Programme Handbook. To ensure the continued effectiveness of its approach to learning and teaching, the Centre uses a range of information sources. These include staff feedback on lectures at the end of each teaching weekend, and student feedback which is gained through both formal (Boards of Studies, end-of-year feedback forms) and informal channels. The Centre has plans to introduce end-of-weekend feedback forms in the near future. The Centre also collects ongoing student data for the Principal's one-to-one meetings with students, but does not use this throughout the year to inform teaching. The Centre also introduced an informal peer teaching review scheme in 2013-14, which will be formally implemented during the 2014-15 academic year.

2.18 Students expressed concern regarding the lack of timely assessment feedback, particularly for those on the part-time course. This impacts on students' opportunities to further their academic abilities through reflection on feedback. However, despite issues with its timeliness, students found the assessment feedback they received detailed and helpful. Students appreciated the move to typewritten feedback and felt able to discuss feedback with staff, and to express their views on the quality of feedback received.

2.19 Overall, the team found that the Centre's approach to articulating and reviewing the provision of learning and teaching met the Expectation and **affirms** the introduction and continuing development of peer observation of teaching. The level of risk is low.

However, the lack of timely feedback negatively influences students' opportunity to reflect on and learn from assessment outcomes.

Expectation: Met

Level of risk: Low

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

Quality Code, Chapter B4: Enabling student development and achievement

Findings

2.20 The Centre provides students with a range of support and resources to enable their development and achievement. Students are provided with library access, and offered study skills support to develop relevant study skills. Feedback on the resources and support provided to students is collected through end-of-year feedback forms, and student representatives attending Board of Studies meetings. The Centre also informs students of opportunities which may further enable their development and achievement through the distribution of a regular e-newsletter. In the past, the Centre has not made external examiner reports available to students, but has plans to circulate copies to all students in the future.

2.21 The Centre's provision and review of resources meet the Expectation and reflect the Indicators of sound practice therein, as they provide students with a range of resources and support which are reviewed annually.

2.22 The team reviewed student feedback on resources, followed this up during meetings with students, and discussed changes to resource access with staff and recent graduates.

2.23 The Centre provides students access to online journals and also to the Complementary and Alternative Medicine Library (CAMLIS) library, which includes a reading room and online portal. While students find this a rich resource, its accessibility is exceptionally limited due to restricted opening times. This is of particular concern to the part-time students. Students are offered support to develop their understanding of referencing and plagiarism through introductory lectures at level 4, and an optional study skills day which takes place at the beginning of the year and costs £30.

2.24 Students are offered excellent opportunities to prepare for professional practice. This includes employment opportunities at Homeopathic Pharmacies, the Homeopathic Research Institute and Society of Homeopaths, clinics of experienced homeopaths, and the opportunity to create a business plan in their final year. The e-newsletter, which is circulated regularly by the Centre, provides students with details of Centre developments and also of external events, employment opportunities and internal events including alumni gatherings. The Centre maintains close contact with its alumni, and uses this resource to support current students' development. The Centre involves alumni in its conferences, offers an informal alumni mentoring scheme for current students, and also involves alumni in clinical supervision and teaching. Students see the involvement of alumni as a rich resource which supports their professional development.

2.25 The review team identified as **good practice** the involvement of alumni and employers in enabling students to develop their professional potential.

2.26 Overall, the team found that the Centre meets the Expectation and the level of risk is low. However, there is a lack of effectiveness and equity regarding access to learning resources, which impacts disproportionately on part-time students.

Expectation: Met
Level of risk: Low

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

Quality Code, Chapter B5: Student engagement

Findings

2.27 The Centre provides students with a limited range of opportunities to engage in the quality assurance and enhancement of their programmes. Students attend Board of Studies' meetings, which is their only formal committee at the Centre. There is currently no formal training for student representatives.

2.28 The Centre's current practice and mechanisms for student engagement are aligned to *Chapter B5: Student engagement* of the Quality Code, as students are involved in the only formal committee at the Centre, and are also able to feed back through a range of informal and formal channels.

2.29 The review team explored opportunities for engagement in meetings with two groups of students and examined the Centre's approach to listening to students in meetings with management and staff and reviewed Board of Studies minutes.

2.30 Students whom the review team met confirmed the range of formal and informal systems available to them for giving feedback to the Centre, and gave several examples of the Centre responding to their contributions, for example adapting the programme to offer research modules at level 4 in preparation for a research project at level 5. However, it is clear from the Board of Studies minutes and meetings with students that the Centre does not always act on student concerns, and certain issues have been raised continually with no resolution. Issues include access to library resources. Despite these concerns, the alumni whom the team met clearly articulated several changes which had been made as a direct result of feedback from past and present students. There is also currently no formal training for student engagement or representation; however, the Centre is planning to develop training for student representatives in liaison with the University, which has recently reviewed its student voice provision and approach to training.

2.31 Students meet with the Centre Principal annually on a one-to-one basis, and find this an excellent opportunity to offer their views on their experiences at the Centre. Boards of Studies are the only formal route through which students are engaged in quality structures at the Centre. The Board of Studies is a forum for student feedback but does not consistently make reference to quality processes and procedures or institutional planning. This approach results in a focus on programme-level issues and leads to limited student input at an institutional level. The Centre has plans to formalise its structures and introduce an Academic Board Committee, which may give students further opportunities to input into institutional-level decisions.

2.32 Overall, the review team concludes that the operation of the Centre's mechanisms for student engagement met the Expectation. The student representative system is effective; however, due to the scope of the Board of Studies' remit, student input at an institutional level is limited. The risk in this area is, however, low, as students have strong engagement at programme level.

Expectation: Met
Level of risk: Low

Expectation (B6): Higher education providers ensure that students have appropriate opportunities to show they have achieved the intended learning outcomes for the award of a qualification or credit.

Quality Code, Chapter B6: Assessment of students and accreditation of prior learning

Findings

2.33 The Memorandum of Cooperation between the University and the Centre identifies the University as having overall responsibility for the BSc (Hons) in Homeopathy, while the Centre is responsible for assessing students' work in line with University guidance. Assignment briefs incorporate a range of assessment methods and are issued to students together with marking grids. Marking grids were introduced in May 2013 following a markers' workshop event.

2.34 Students' work is internally assessed and moderated before being externally moderated by the University. Students are required to receive written feedback on marked work within four weeks. The University's Assessment Board includes representatives from the Centre. Where the Centre admits students to the programme with 'advanced standing' - that is, direct entry to a particular year of study - and exempts students from completing particular modules, the Centre is expected to complete APCL or APEL procedures in line with the University's requirements contained in its Accreditation Handbook. Completed APCL or APEL documentation is then submitted for approval to the University's Collaborative Programme Accreditation Board.

2.35 The review team examined a range of documents relating to assessment, including validation documents, external examiner reports, a programme specification, the Programme Handbook, two module handbooks, marking grids, an assessment calendar, the internal moderation policy, sample completed APEL forms, a sample of internally and externally moderated student work and the job description for the Academic Support Officer. Meetings were held with Centre and University staff, full and part-time students, alumni, and employers.

2.36 Students receive comprehensive feedback on all forms of assessment. The external examiner notes as a strength 'the careful and thoughtful marking and the extensive feedback given to individual students', and team meetings with Centre support staff provide evidence of one-to-one support to students on the feedback they receive on their work. This was confirmed in meetings with full and part-time students. The sample of internally and externally moderated student work provides evidence of assessors giving students detailed summative and formative feedback and constructive critique. The review team identified as **good practice** the comprehensiveness of feedback to students on all forms of assessment.

2.37 Feedback on student assessed work, particularly for part-time students, can be late. Although students are scheduled to receive written feedback on marked work in four weeks, meetings with support staff indicated that this is not always logistically possible, especially for part-time students who attend monthly. Commenting on their experience of the timing of feedback on their work, some part-time students noted significant delays. The review team **recommends** that the Centre identify and adhere to an explicit deadline or timeframe for the provision of feedback to students on assessed work, which allows students sufficient time to reflect on their performance before their next summative assessments.

2.38 Marking grid grade descriptors complement the assessment process, but lack consistency. The introduction and use of marking grids is welcomed by module leaders, who view them as improving consistency, and students, who consider them to improve

transparency in assessments. However, the marking grid grade descriptors are not uniformly clear or sufficiently detailed across modules, with some modules making excessive use of judgement terms, such as 'Excellent' and 'Good', without qualifying these further. Other modules provide clear examples of the evidence needed to achieve the stated grade. The review team **affirms** the actions the Centre is taking to ensure a consistent approach to the formulation of grade descriptors in marking grids. See also Expectation A6.

2.39 Double marking of assessments is limited to a sample of students' work. The Centre double marks a sample of assessed work, which tends to be 15 per cent of assessments. The module leaders note that this includes second marking where the second marker is not aware of the mark given by the first marker. The module leaders welcome the introduction of double marking as it provides a form of peer review. The review team **affirms** the actions being taken by the Centre to introduce double marking for all assessed work (see Expectations A6 and B6).

2.40 Meetings with support staff demonstrate a lack of clarity on the application of APEL and APCL, although examples of APEL completed by the Centre are appropriately documented and signed off by the Principal.

2.41 The team concludes that the Centre meets the Expectation and that the risk is moderate. The risk is considered to be moderate since delays in feedback can adversely impact on the quality of learning opportunities, with some students noting that the delays were significant. In addition, the move towards a consistent approach to formulating grade descriptors and marking grids and the introduction of double marking should lead to a robust assessment process, but until this system is fully embedded, it continues to present a risk.

Expectation: Met
Level of risk: Moderate

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

Quality Code, Chapter B7: External examining

Findings

2.42 The Centre nominates external examiners and passes its nominations to the University, which defines the scope of the external examiner role and is responsible for appointing, training and terminating the contracts of external examiners. The Centre cooperates with external examiners by providing them with information necessary to discharge their role, including copies of the Programme Handbook, assessments, marking criteria and a sample of students' work, and invites them to attend meetings of the Board of Studies. The external examiner role is clearly defined by the University, and two external examiners are allocated to the Centre who visit annually and view and report on a sample of students' work. The Centre provides a response to external examiner reports, outlining what actions, if any, it is taking based on recommendations contained in the reports. These reports and responses are included in its annual monitoring report.

2.43 The review team considered documents relating to the work of external examiners, including an external examiner appointment letter, a sample of external examiner reports, the Centre's response to these reports, annual monitoring reports and minutes from Board of Studies meetings. Meetings were held with Centre and University staff and Centre full-time and part-time students.

2.44 The Centre is responsive to recommendations made by external examiners, although not always in a timely manner; this is evident from the external examiner report for 2012-13, which notes that some recommendations remain outstanding from the previous year's visit. The lack of a deliberative structures and follow-up activity noted under Expectations A4 and B8 may explain some of the delays in responding to recommendations. Meetings with Centre and University staff demonstrate that they have a clear understanding of the external examiner role and the actions being undertaken to implement their recommendations.

2.45 Minutes from the latest Board of Studies meeting indicate that an external examiner report has been circulated to students. When the team met with a sample of full and part-time students, they were not aware of the role of the Centre's external examiner or the existence of a report.

2.46 The team concludes that the Centre meets the Expectation and that the risk is low.

Expectation: Met
Level of risk: Low

Expectation (B8): Higher education providers have effective procedures in place to routinely monitor and periodically review programmes.

Quality Code, Chapter B8: Programme monitoring and review

Findings

2.47 The Centre is subject to the University's annual monitoring and periodic review process, under which the Centre is required to complete and submit an annual monitoring report, respond to external examiner reports and operate a Board of Studies. The production of the annual monitoring review is undertaken informally through verbal communication, emails and meetings between the Programme Leader and Module Leaders. The review considers student feedback, the Academic Officer Report, internal moderation feedback and external examiner feedback.

2.48 During the review, the team examined Centre documents, including the Memorandum of Cooperation, the Programme Handbook, annual monitoring reports, minutes of Board of Studies meetings, external examiner reports, the Academic Officer Report and student feedback. Meetings were held with Centre and University staff and alumni.

2.49 The Centre fully engages with annual monitoring and periodic review of its programme. However, the annual monitoring process lacks a localised deliberative structure that is able to capture and act upon information provided by the annual monitoring report and external examiners in a timely manner. The meeting with alumni amplifies the informal nature of the Centre's responsiveness to student feedback over the years, but highlights that improvements have taken place when issues have been raised by students, notwithstanding the informal arrangement. During the meeting, alumni reflected on issues that had been raised while they were students at the Centre. More recent alumni noted the resolution of those issues during their time at the Centre. Meetings with Centre staff confirm that feedback from external examiners and students informs the annual monitoring report, where actions are scheduled, but there is no recording and tracking of actions taken between annual monitoring reports. Reporting on actions is limited to those formally recorded in the subsequent year's annual monitoring report. This can result in a delayed response to certain actions, including recommendations made by external examiners. The review team **recommends** that by February 2015 the Centre develop a deliberative structure that is capable of supporting a more effective approach to monitoring its higher education provision.

2.50 The team concludes that the Centre meets the Expectation and that the risk is moderate. The team considered the risk to be moderate since the absence of a deliberative approach to monitoring can delay the Centre in identifying and acting upon actions and recommendations.

Expectation: Met
Level of risk: Moderate

Expectation (B9): Higher education providers have fair, effective and timely procedures for handling students' complaints and academic appeals.

Quality Code, Chapter B9: Academic complaints and student appeals

Findings

2.51 The Centre's Programme Handbook outlines the appeals and complaints process. This refers to the external appeals and complaints process operated by the University. To complain to the University, students must first exhaust the internal complaints procedure operated by the Centre. In the case of an appeal against a grade, the student is referred to the Academic Support Officer. If the matter is not resolved, it progresses to the Operational Director and the Centre's Link Tutor. In the case of a complaint, it is referred to the Student Support Officer.

2.52 The internal student complaints procedure outlines informal and formal stages. A complaint is dealt with informally by the Module Leader and Programme Leader in the first instance. If it is not resolved at this stage, it is referred to the second informal stage, where it is dealt with by the Programme Leader and University Link Tutor. It can then progress to the Dean of School and through to appeal to the Centre Executive or a nominee. The Centre notes that it receives very few appeals about grades; where these are received, they are resolved informally through meetings with the Academic Support Officer, Programme Leader and Operational Director. No formal records are kept of appeals or complaints.

2.53 The team examined a range of appeals and complaints-related documentation, including the Programme Handbook, the Centre's student complaints procedures, the University's student complaints procedures, a written response from the Centre about recording of appeals and complaints and a blank appeal form. Meetings were held with Centre staff and students.

2.54 The Centre relies on informal resolution of student appeals and complaints and there is no system to record either. Meetings with students and Centre staff confirm their awareness and understanding of this approach. In the absence of a formal mechanism for recording and tracking, the Centre is unable to provide assurance that students are treated consistently when submitting appeals and complaints. Further, it is not clear how students can demonstrate that they have exhausted the Centre's appeals and complaints procedure to progress them to the University. The review team **recommends** that the Centre develop, implement and make accessible to students formal procedures for handling students' complaints and academic appeals (Expectation B9 and Part C).

2.55 The team concludes that the Centre has not met the Expectation and that the risk is moderate due to the absence of a formal complaints and appeals procedure.

Expectation: Not met

Level of risk: Moderate

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

Quality Code, *Chapter B10: Managing higher education provision with others*

Findings

2.56 The Centre has established links with a number of external stakeholders who inform or enhance the BSc (Hons) in Homeopathy. These include employers within the homeopathy sector, who provide opportunities for graduate employment and work-based learning during the programme. Student employability is an underpinning attribute of this programme, as is evident from the student employability theme in this report. Other stakeholders include the Royal London Homeopathic Hospital for Integrated Medicine (RLHIM) which provides an online portal and a reading room where students can access the Complementary and Alternative Medicine Library and Information Service (CAMLIS). In addition, the Centre actively engages with the SoH's core content when designing its programme.

2.57 The team explored, tested and overall commented favourably on these links in the context of Expectations B1, B3, B4 and B6, the student employability theme and enhancement of learning opportunities. Consequently, the team concluded the Expectation is met and the risk is low.

Expectation: Met
Level of risk: Low

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

Quality Code, *Chapter B11: Research degrees*

Findings

2.58 The Centre does not offer research degrees, therefore this Expectation is not applicable.

Quality of student learning opportunities: Summary of findings

2.59 In reaching its judgements about the quality of learning opportunities, the review team matched its findings against the criteria in Annex 2 of the relevant handbook.

2.60 Of the 10 applicable Expectations in this area, eight are met and two are not met. In the two Expectations not met, the review team judge the level of risk to be moderate. In addition there are two Expectations which the team consider are met but carry moderate risks. Thus, most applicable Expectations have been met and there are some moderate risks which, without action, could lead to serious problems over time.

2.61 There are four recommendations in this area. Two relate to the Expectations that are not met, and both of these reflect insufficient emphasis or priority given to assuring quality in the Centre's planning processes (more specifically, to the specification of formal procedures for admissions and complaints and appeals). The other two recommendations, about feedback to students and monitoring, also, in the review team's view, reflect insufficient emphasis being given to assuring the quality of learning opportunities, which the team notes tends to support a judgement of 'requires improvement'.

2.62 There are two features of good practice, involving the comprehensives of feedback to students and the involvement of alumni and employers in enabling students to develop, and three affirmations touching on peer observation of teaching, the formulation of grade descriptors and double marking.

2.63 Overall, the review team concludes that the quality of student learning opportunities at the Centre **requires improvement to meet** UK expectations.

3 Judgement: Quality of the information produced about its provision

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

Quality Code, Part C: Information about higher education provision

Findings

3.1 The Centre uses a range of communication channels to disseminate information about its higher education provision. These include public-facing channels for prospective and existing students, including the Centre's website and open days. The Centre's website includes information about the Centre's origins, location and approach to study, programme-related information, programme fees and financing options, contact details, a staff list, a promotional video including student testimonials, scheduled open days, the University's logo and a strapline stating that it is working in partnership with the University.

3.2 During open days, attendees are provided with programme dates and fees, introductory lectures on homeopathy and an opportunity to meet with existing students, graduates and staff. Internal information for current students includes programme-related information through a secure section of the website, the Programme Handbook, module handbooks, book lists, a clinical handbook, a supervision pack, monthly bulletins, a newsletter, assignment briefs and marking grids.

3.3 The overarching responsibility for and oversight of information about higher education provision is with the Centre Principal, who signs off information prior to its publication. The Head of Communications is responsible for ensuring information is fit for purpose, and day-to-day management of information is undertaken by administrative staff and the Head of Operations.

3.4 The review team tested the channels of information available, including published information available on the public-facing website, the secure section of the website, the programme-related publications and the student submission. Meetings were held with the Centre Principal, Centre staff and students.

3.5 Prospective and current students are provided with a wide range of detailed information relating to higher education at the Centre. Meetings with students confirmed their awareness of programme-related information and highlighted their engagement with marking grids issued with assignment briefs. The student submission indicates that many students lacked an awareness of the complaints process or how to make a complaint. During meetings with students, they demonstrated an awareness of informal processes. The Centre does not publish a formal procedure to make appeals or complaints. This is considered in more detail under Expectation B9.

3.6 Admissions information is also provided on the Centre's website. The Centre does not publish a formal admissions policy or procedure; this is considered in more detail under Expectation B2. The website outlines the qualifications expected of applicants and encourages mature applicants without formal qualifications, but with sufficient previous work and life experience to make an application. No information is provided on how mature applicants' previous work and life experiences will be considered as part of the application. Entry criteria for the BSc (Hons) in Homeopathy 'direct-entry top-up' are clearly stated. No information is provided about the University's APCL or APEL processes. The team met

students who had experienced the APEL process and this revealed a lack of clarity in its application. The review team identified some minor errors and omissions on the website relating to programme information and funding options. The Centre supplied examples of how the published information is managed and checked by administrative staff and the Head of Operations. This is mainly by internal communication, such as email.

3.7 The team concludes that the Centre has met the Expectation and that the risk is moderate. The main risk posed by the absence of formal admissions, appeals and complaints policies and procedures has been considered by the team under Expectations B2 and B9. Their absence contributes to the moderate risk rating given to Expectation C as it reduces the students' awareness of and ability to access and use these processes.

Expectation: Met

Level of risk: Moderate

Quality of the information produced about its provision: Summary of findings

3.8 In reaching its judgement on the quality of the information produced about higher education provision, the review team matched its findings against the criteria in Annex 2 of the relevant handbook.

3.9 The overarching responsibility for dissemination of information about the higher education programme is with the Centre's Principal. The Head of Communications ensures information is fit for purpose, and day-to-day management is undertaken by administrative staff and the Head of Operations.

3.10 The review team could not locate a published formal procedure for students to make appeals or complaints, and in meetings with the team students' awareness was limited to informal processes. (This is considered in more detail under Expectation B9.) Similarly, the admissions information provided on the Centre's website outlines the qualifications expected of applicants but does not include a formal policy or procedure. (This is considered in more detail under Expectation B2.)

3.11 In addition, the review team identified some minor errors and omissions on the website.

3.12 The review team concludes that the quality of the information produced about higher education provision at the Centre **meets** UK expectations.

4 Judgement: Enhancement of student learning opportunities

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

Findings

4.1 The Centre has developed enhancement activities which derive from an institutional commitment and ethos to furthering learning opportunities for students. These include the strong alumni relations, support for students who have graduated and the support given to undergraduates by the Academic Support Officer.

4.2 In theory, the Centre meets the Expectations set out in Part B of the Quality Code, as it has undertaken a range of initiatives which are designed to enhance student learning opportunities.

4.3 The review team discussed the Centre's approach to enhancement with staff and students, and reviewed relevant documentation relating to enhancement initiatives. This included meetings with students, staff, alumni and employers.

4.4 The Centre maintains close contact with its alumni, and uses this resource to support current students' development. It involves alumni in informal mentoring, support for current students, clinical supervision and teaching. They also make a full and positive input to formal and well attended 'Graduate Gatherings' and the involvement of graduates in conferences held in the sector.

4.5 In addition, the e-newsletter, which is circulated regularly by the Centre, provides students with details of Centre developments and also of external events, employment opportunities and internal events, including alumni gatherings.

4.6 The contribution of alumni and employers is extensive and coordinated and is highly valued by students. They see their involvement as a rich resource which supports their professional development.

4.7 The strength of these relationships enables the Centre's graduates to gain employment in the homeopathic sector. Employers, alumni and students were all very positive about the benefits of this association with the Centre. As is reported in the theme of Student Employability on page 35, the team considers the involvement of alumni and employers in enabling students to develop professional potential to be **good practice**.

4.8 In addition, the Centre provides an enhanced level of support to students during their programme through the roles of the Academic Support Officer and the Student Support Officer. The two members of staff work together to ensure students have access to both academic and pastoral support during their time at the Centre.

4.9 Support is also continued post-graduation, as graduates are encouraged to maintain contact with the Centre, and are offered continual support as they begin their professional practice outside the Centre.

4.10 In summary, the Centre's enhancement provision meets UK expectations and the level of risk is low, as it has a range of initiatives designed to further student learning opportunities, which are planned and implemented at an institutional level. These examples clearly demonstrate the Centre's commitment to enhancing their provision for students.

Expectation: Met
Level of risk: Low

Enhancement of student learning opportunities: Summary of findings

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

4.12 The review team found that the Centre has an ethos that systematically institutes a range of initiatives to enhance student learning opportunities; in particular, the involvement of alumni who, among other things, provide informal mentoring for current students and the Graduate Gatherings. This is **good practice**.

4.13 In addition, the Centre provides an enhanced level of support for students during their programme through the Academic Support Officer.

4.14 In conclusion, the review team found that the enhancement of student learning opportunities at the Centre **meets** UK expectations.

5 Commentary on the Theme: Student Employability

Findings

5.1 The Centre's programme is fully accredited by SoH and graduates are able to register with the Alliance of Registered Homeopaths and the Homeopathic Medical Association. Details are provided in the Programme Handbook. As such, they are fully qualified to enter practice post-graduation and the Centre recognises that most of their students will become self-employed.

5.2 Students are required to be professionally insured after progression or entry to level 5 of the programme and they also need to engage the services of a paid, experienced supervisor to enable them to gain professional practice experience. This enables students to take on clients prior to graduation. The employability theme then develops at level 6 where students are required to develop a meaningful business plan for the Clinical Training & Practitioner Development module. It must include marketing plans and build in CPD. There is hence the potential for a student to graduate with an active client base and a coherent business plan, fostering employment prospects and encouraging entrepreneurship.

5.3 There are opportunities for students to gain employment within larger homeopathic businesses including pharmacies, and the team met with employers during the visit who sought out the Centre's graduates to engage with and spoke highly of their quality and employability. The strong alumni relations the Centre has with employers and the sector at large are supported through the hosting of formalised and well attended Graduate Gatherings which bring alumni and students together, along with conferences hosted for students and the sector.

5.4 The Centre's graduates can engage in a wide range of activities related to homeopathy and there is no typical business model. Some of the graduates also remain in other full-time work and practice homeopathy as an additional activity. As such, the continued support they receive from the Centre is highly valued. Employers, alumni and students all spoke positively of a meaningful and ongoing association with the Centre. This had a beneficial influence on student progression, achievement and employability. Several staff are nationally and internationally respected practitioners and they provide valued advice and guidance and assist in the creation of an environment in which students feel well supported by the Centre and its alumni before and long after graduation.

5.5 The team considers the involvement of alumni and employers in enabling students to develop their professional potential to be **good practice**.

Glossary

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

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

User-friendly explanations of a wide range of terms can be found in the longer **Glossary** on the QAA website: www.qaa.ac.uk/about-us/glossary.

Academic standards

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

Award

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

Blended learning

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

Credit(s)

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

Degree-awarding body

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

Distance learning

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

Dual award or double award

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

e-learning

See **technology enhanced or enabled learning**.

Enhancement

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

Expectations

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

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

Framework

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

Framework for higher education qualifications

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

Good practice

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

Learning opportunities

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

Learning outcomes

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

Multiple awards

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

Operational definition

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

Programme (of study)

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

Programme specifications

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

Public information

Information that is freely available to the public (sometimes referred to as being 'in the public domain').

Quality Code

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

Reference points

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

Subject benchmark statement

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

Technology enhanced or enabled learning (or e-learning)

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

Threshold academic standard

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

Virtual learning environment (VLE)

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

Widening participation

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

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