



Le Cordon Bleu Limited

Review for Educational Oversight
by the Quality Assurance Agency
for Higher Education

October 2013

Key findings about Le Cordon Bleu Limited

As a result of its Review for Educational Oversight carried out in October 2013, the QAA review team (the team) considers that there can be **confidence** in how the provider manages its stated responsibilities for the standards of the programmes it offers on behalf of NCFE.

The team also considers that there can be **confidence** in how the provider manages its stated responsibilities for the quality and enhancement of the learning opportunities it offers on behalf of this awarding organisation.

The team considers that reliance **can** be placed on the information that the provider produces for its intended audiences about the learning opportunities it offers.

Recommendations

The team has also identified a number of **recommendations** for the enhancement of the higher education provision.

The team considers that it is **advisable** for the provider to:

- complete the mapping of its policies and procedures for the management of academic standards against the UK Quality Code for Higher Education (paragraph 1.9)
- issue a contract letter to all external taste testers and verifiers and ensure that they are fully trained for their respective roles (paragraph 1.11)
- review the approach to externality in the approval and examining of programmes (paragraph 1.12)
- ensure that all staff and students are kept up to date and aware of the restrictions of copyright legislation to ensure good practice relating to plagiarism and referencing conventions (paragraph 2.9)
- further develop and adhere to its procedures for maintaining the accuracy of information available on the virtual learning environment and in publicity material (paragraph 3.2).

The team considers that it would be **desirable** for the provider to:

- regularly review the effectiveness of the new committee structure (paragraph 1.6)
- ensure the enhancement of learning opportunities (paragraph 2.5)
- regularly review assessment criteria and feed back to students to ensure clarity and consistency (paragraph 2.6)
- implement the planned review of the student tutorial system (paragraph 2.11)
- improve the careers, advice and guidance service offered to students (paragraph 2.12)
- include target dates for implementation in reports from the Student Representative Group and develop its approach to student representation on committees (paragraph 2.13)
- a more formal approach to identifying and prioritising staff development is developed (paragraph 2.14)
- further develop the virtual learning environment as a learning and teaching resource (paragraph 2.18).

About this report

This report presents the findings of the [Review for Educational Oversight](#)¹ (REO) conducted by [QAA](#) at Le Cordon Bleu (the Institute), which is a privately funded provider of higher education. The purpose of the review is to provide public information about how the provider discharges its stated responsibilities for the management and delivery of academic standards and the quality of learning opportunities available to students. The review applies to programmes of study that the provider delivers on behalf of NCFE. The review was carried out by Ms Erika Beumer, Professor Chris Gale, Ms Ann Hill and Mr Alan Soutter (Coordinator).

The review team conducted the review in agreement with the provider and in accordance with the [Review for Educational Oversight: Handbook](#).² Evidence in support of the review included a range of documentation supplied by the provider and its awarding organisation and meetings with staff and students.

The review team also considered the provider's use of the relevant external reference points:

- the UK Quality Code for Higher Education
- National Occupational Standards
- NCFE Quality Statements and performance criteria linked to the Qualifications and Credit Framework.

Please note that if you are unfamiliar with any of the terms used in this report you can find them in the [Glossary](#).

Le Cordon Bleu Limited London is part of Le Cordon Bleu group which has institutes in 20 countries and 46 locations worldwide. It offers vocational higher education courses under an Investing in Quality Licence from NCFE. The Institute moved to new premises in Bloomsbury Square in January 2012. These offer professional modern kitchens and new classroom facilities.

At the time of the review, the provider offered the following higher education programmes, listed beneath their awarding organisation:

NCFE (all are non-regulated awards)

- Level 4 Cuisine Diploma (Superior Cuisine)
- Level 4 Patisserie Diploma (Superior Patisserie)
- Level 4 Le Grand Diplôme
- Level 5 Professional Diploma in Entrepreneurial Hospitality Management

The Professional Diploma in Entrepreneurial Hospitality Management was originally registered with NCFE as the Professional Diploma in Culinary and Hospitality Management, but was later changed to the Professional Diploma in Entrepreneurial Hospitality Management. In order to enable the students registered on the programme to graduate with the original title, it was changed back in August 2013 and the two students received the Professional Diploma in Culinary and Hospitality Management in September 2013. All documents submitted to the team used the title Professional Diploma in Entrepreneurial Hospitality Management.

¹ www.qaa.ac.uk/educational-oversight

² www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/REO-designated-providers-handbook-13.aspx

The provider's stated responsibilities

Under its Investing in Quality Licence with NCFE, the Institute retains responsibility for all quality assurance matters except for monitoring and review which are shared responsibilities.

Recent developments

The Institute introduced a new Professional Diploma in Entrepreneurial Hospitality Management in 2013 but have decided to withdraw it due to poor recruitment. It is intended to introduce a new Diploma in Culinary Business Management from January 2014.

Students' contribution to the review

Students studying on higher education programmes at the provider were invited to present a submission to the review team. A student submission was coordinated by a small group of students following analysis of a questionnaire. During the visit some students met the review team and engaged in useful discussion.

Detailed findings about Le Cordon Bleu

1 Academic standards

How effectively does the Institute fulfil its responsibilities for the management of academic standards?

1.1 There has been little effective progress in the management of academic standards since the review report in 2012 and the 2013 annual monitoring visit. The Institute has failed to take prompt and appropriate action to remedy the recommendations in the 2012 review and 2013 annual monitoring reports. Some of the policies referred to in that report have still to be fully articulated. However, a new management structure has recently been put in place and there has now been progress on the development of the Institute's policies, although it is too soon to measure the effectiveness of this new structure. There is still work to do to ensure that the Institute's policies to support academic standards are approved and fully implemented.

1.2 The management of academic standards is the responsibility of the Institute under the terms of its NCFE Investing in Quality (IIQ) licence for non-regulated awards. Since the previous REO review in February 2012 and the subsequent annual monitoring visit in February 2013, the management structure has changed. The role of Head of Institute has been discontinued and has been replaced with a tripartite management structure comprising the Director of Culinary Arts, Financial Controller and the Director of Sales and Marketing.

1.3 Following previous advisable recommendations to fully implement policies on internal and external moderation and to further develop external scrutiny arrangements, progress has been slow. The Institute has taken steps to develop the policies on assessment and programme approval, but these are not fully articulated or implemented. For example, the policy on programme approval omits the procedure for the withdrawal of programmes and the timetable for programme approval is not clear in relation to the authority and methodology for approval. The policy on internal moderation has not been updated and is two years out of date. The Higher Education Course Review Policy and Procedures has not been articulated.

1.4 The Institute has a deliberative committee structure which has recently been revised. Academic standards are the responsibility of the Academic Governance Committee which meets quarterly at the end of each assessment period. It considers external examiners' reports, the review of academic provision, student surveys and the promotion of enhancement of the Institute's provision and of the student experience. The Curriculum Committee meets annually and recommends to Academic Governance Committee changes to courses and programmes to ensure that learning content is appropriate to the needs of students and industry. There are separate Academic Boards and Boards of Study for both level 4 and level 5 programmes. The Academic Boards make decisions on the results of assessments and hear appeals. The Boards of Study are responsible for ensuring that assessments are properly designed and valid and that the assessment processes are fair and equitable. The establishment of the Industry Consultation Committee referred to in the 2013 annual monitoring report has not yet happened.

1.5 Each programme level has an Academic Director who has responsibility for the day-to-day management of academic standards and the coordination of quality assurance issues. They are supported by the new role of Academic Development and Compliance Manager. The Academic Directors report to the Director of Culinary Arts.

1.6 The new Committee structure has not yet been fully embedded and it is too soon to measure its impact. However, the Institute may wish to re-examine the terms of reference of the committees to ensure that the approval routes through the Committee hierarchy are clear and the constitution is adhered to. For example, there is evidence of an academic committee having been chaired by an individual contrary to the constitution. There is also reference in the course documentation to an academic committee which does not exist. It is **desirable** that the Institute regularly reviews the effectiveness of its new committee structure.

How effectively does the Institute make use of external reference points to manage academic standards?

1.7 The Institute is assessed biannually through a monitoring visit by the NCFE. This ensures that the Institute's academic and organisational activities are reviewed against the NCFE quality precepts through a continuous approach aimed at leading to consistency in outcomes. Recent monitoring reports have been positive and are discussed by the Academic Governance Committee.

1.8 The Institute maps its learning outcomes against the National Occupational Standards and the Qualifications and Credit Framework subject level descriptors to benchmark its courses and programmes.

1.9 The Institute's engagement with the UK Quality Code for Higher Education (the Quality Code) is not fully embedded, although there is some evidence that the Institute has taken into account some sections of the Quality Code. It is **advisable** that the Institute completes the mapping of its policies and procedures for academic standards against the Quality Code.

How does the Institute use external moderation, verification or examining to assure academic standards?

1.10 Under the terms of the NCFE licence, the Institute is responsible for all matters of assessment and examination including the appointment of external examiners and external verifiers.

1.11 There has been progress in the development of the external scrutiny of assessments. The Guide to Managing Quality has been updated to include descriptions of the role of the external examiner and the external verifier. This update was approved in September 2013 just prior to the review. The Institute has a number of external examiners who are industry professionals, who take part in practical examinations at level 4, and taste test student work. They may offer opinions but the marking is undertaken by the internal examiners. The external verifier undertakes the role of moderator of examination procedures at level 4 and level 5 and samples 10 per cent of scripts to ensure that marking is fair and consistent. Several of the external examiners have not yet been issued with a contract setting out their responsibilities and others had only been issued in September. The recently approved Assessments Policy and Procedures for students applies only to level 4 students while the Assessment Policy for Higher Education applies only to level 5 students. It is **advisable** that the Institute takes account of the provisions of the Quality Code, *Chapter B7: External examining* and issues a contract letter to all external taste testers and verifiers and ensures that they are fully trained for their respective roles.

1.12 There is evidence that the Institute consults externally on the design and development of new courses and programmes. However, this is currently limited to the now withdrawn level 5 programme. In order to ensure impartial external scrutiny of programmes it

is **advisable** that the Institute reviews the approach to externality in the approval and examining of programmes.

The review team has **confidence** in the provider's management of its responsibilities for the standards of the programmes it offers on behalf of its awarding organisation.

2 Quality of learning opportunities

How effectively does the Institute fulfil its responsibilities for managing and enhancing the quality of learning opportunities?

2.1 Responsibility for the management of the quality of learning opportunities is the same as for academic standards (see paragraphs 1.1 - 1.6).

2.2 There is little evidence that there is a systematic and structured approach to the management and enhancement of learning opportunities. For example, the terms of reference of committees other than those for the Academic Governance Committee do not sufficiently recognise the requirement to enhance and improve quality. This should be embedded at all levels in the committee hierarchy. The Institute has relied on its biannual visit from NCFE in monitoring programmes rather than developing an in-house holistic approach which draws upon, and is informed by, key indicators such as assessment outcomes, external examiner reports and student feedback. The terms of reference of the committees should ensure that the monitoring, review and enhancement of academic programmes is embedded in all appropriate committees with due regard to the Quality Code, *Chapter B3: Learning and teaching*.

How effectively does the Institute make use of external reference points to manage and enhance learning opportunities?

2.3 The principal external reference point for the management of learning opportunities is the NCFE quality statements. The Institute and the awarding organisation share responsibility for the monitoring and quality review of higher education.

2.4 Reports from external examiners and verifiers provide feedback on skills and competencies needed in the catering industry, but the mechanism for taking account of such reports and how they inform the enhancement of learning opportunities is not fully developed.

How does the Institute assure itself that the quality of teaching and learning is being maintained and enhanced?

2.5 The Institute has recently approved a draft Teaching and Learning Policy and a draft Teaching and Learning Strategy. The Teaching and Learning Policy comprises a statement of responsibilities and the Teaching and Learning Strategy articulates the Institute's learning and teaching principles. There is limited content in terms of processes, mechanisms and timescales which support the quality improvement of learning opportunities. At present, there is no mechanism to evaluate the effectiveness of the Teaching and Learning Strategy. The Institute may wish to formulate an action plan which articulates measurable outcomes based on the Teaching and Learning Strategy so that current arrangements are formalised and enhanced. It is **desirable** that the Institute ensures the enhancement of learning opportunities.

2.6 There is a range of teaching and learning methods such as the use of learning technologies and e-learning. The virtual learning environment (VLE) is underdeveloped. Students commented favourably on the quality of teaching and speak highly of the talented teaching chefs and their knowledge. However, students were concerned that marking and grading regimes were not sufficiently clear and they were also concerned about changes to assessment criteria and assessment feedback. For example, a decision was taken by the level 5 Board of Studies to change the weightings for assessment in the summer term after teaching had commenced on the course. Students receive timely feedback on their assignments but the quality of feedback is variable. In response to the recommendations of the annual monitoring visit, team leadership skills are now subject to both formative and summative assessment. It is **desirable** that the assessment criteria and the feedback to students are regularly reviewed to ensure clarity and consistency.

2.7 There are effective staff recruitment policies and processes. New staff are provided with a useful and comprehensive induction pack and are allocated a staff mentor. The Institute has committed to appoint more academically qualified staff and this has occurred. Where level 4 teachers do not hold appropriate teaching qualifications, they are supported to obtain a teaching qualification in further education. The teaching staff have an impressive range of skills, knowledge and vocational experience.

How does the Institute assure itself that students are supported effectively?

2.8 Student support at the Institute is the responsibility of the Principal. Students are enrolled in accordance with the Institute's admissions policy which clearly outlines the admissions process. Students confirmed that student support is effective, that they felt personally supported and that staff are responsive to their needs. Students are provided with a comprehensive handbook of academic and administrative policies. This comprises helpful information relating to policies and processes, such as recognition of prior learning, examination procedures, marking criteria, how to make a complaint and the appeals process.

2.9 There is confusing information provided to students regarding copyright in relation to plagiarism and entitlement to copy from original materials for assignments. Both staff and students demonstrated a varying degree of understanding regarding the provisions of copyright legislation. It is **advisable** that all staff and students are kept up to date and aware of the restrictions of copyright legislation.

2.10 Students are also provided with a useful induction handbook which provides information relating to the Institute teaching staff, and policies on, for example, tutorials and equal opportunities. It also contains other relevant information relating to codes of conduct, health and safety and helpful advice related to living in London. Students are aware of the appeals and complaints process.

2.11 All students are allocated a chef mentor for tutorial support. Meetings are recorded to monitor student progress and this is individually reviewed at least once per term. Students confirm that action is followed up consistently. There are formal timetabled processes for academic and pastoral tutorials; however, students say that they do not have enough time in tutorials and there is not a session before examinations. The recommendation contained in the 2012 review report regarding the three month evaluation of the tutorial system has still not taken place. It is **desirable** that the planned review of the student tutorial system is implemented.

2.12 The Institute provides a monthly drop-in careers advice. Students are dissatisfied with the arrangements and are concerned about the availability and lack of careers advice,

internships, work placements and progression opportunities. It is **desirable** that the careers advice and guidance service be improved.

2.13 The Institute employs a variety of mechanisms to elicit student views, including student surveys, student focus groups and student surveys. However, students are not represented on the Institute's committees. The Student Representative Group comprises both students and employees and provides an important aspect of the Institute's commitment to quality assurance. Feedback of action taken is forwarded to students via email. Actions arising from the Student Representative Group meetings have been implemented although they do not include implementation target dates. It is also unclear how such actions feed into the Institute's quality assurance processes. It is **desirable** that target dates for implementation of action points are included in the reports from the Student Representative Group and the approach to student representation on committees be developed.

How effectively does the Institute develop its staff in order to improve student learning opportunities?

2.14 The Institute has produced a draft Staff Development Strategy, although it is not yet clear how this will be operationalised. There is no formal mechanism for the identification or prioritisation of staff development needs or entitlement, although continuing professional updating does take place and individual needs are identified through annual staff appraisal and peer observation. Staff development activities are recorded but systems for managing, evaluating and measuring the impact of activities or for the sharing or dissemination of good practice are not in place. It is **desirable** that a more formal approach to identifying and prioritising staff development is developed.

2.15 There is a formal process for the peer observation of the Institute's teaching staff for the monitoring of the quality of teaching and learning. However, there is no organisational policy or mandatory training for peer observation. Neither is there the development of specific criteria against which performance is measured. All staff are subject to teaching observation and this, together with student feedback, informs performance appraisal and professional development. It is unclear how the outcome of peer observation informs the Institute's learning and teaching strategy.

How effectively does the Institute ensure that learning resources are accessible to students and sufficient to enable them to achieve the intended learning outcomes?

2.16 The Institute has a small library which is open, for a limited period each day, to students for borrowing books. Although the current provision is small, a budget has recently been agreed to expand the provision by 200 books. Student feedback on the library is obtained by means of a web survey and a suggestion box. Following student feedback, the library borrowing sessions have increased from once to twice per day. The students report that they do not make much use of the library as the course materials are sufficient for them to pass the course and much reference material is available online.

2.17 The library also houses a number of computer work stations which have full internet access. The current provision is adequate. There are currently no printing facilities but this is being addressed.

2.18 The VLE has only been used for the level 5 programme, which is now discontinued, and contained only limited information on courses. It has not been further developed since the 2012 review or the 2013 annual monitoring visits, although it is intended that it will be

extended to other programmes. It is **desirable** that the VLE be further developed as a learning and teaching resource.

The review team has **confidence** that the provider is fulfilling its responsibilities for managing and enhancing the quality of the intended learning opportunities it provides for students.

3 Information about learning opportunities

How effectively does the Institute communicate information about learning opportunities to students and other stakeholders?

3.1 The principal method of the communication of information about learning opportunities is through the Institute's website. In addition the Institute publishes an attractive prospectus and a range of student and staff handbooks which include comprehensive information on the curriculum and assessments together with Institute policies and procedures.

How effective are the Institute's arrangements for assuring that information about learning opportunities is fit for purpose, accessible and trustworthy?

3.2 The Institute is responsible for all publicity materials but consults with NCFE, as required by the terms of its licence, on the content of its brochure. The brochure provides specific information on course content, fees, accreditations, admissions policy and procedures, terms and conditions and uniforms. Despite the confirmation of the content check by NCFE, the brochure contains inaccuracies which could be potentially misleading to students by implying that the non-regulated courses are part of the Qualification and Credit Framework. Similarly, the brochure refers to the Institute's programmes being accredited by the Quality Assurance Agency. Academic staff can upload their own materials to the VLE. There is no management system in place to check that the information is accurate and does not breach copyright legislation. It is **advisable** that the Institute further develops and adheres to its procedure for maintaining the accuracy of information available on the VLE and in publicity material.

3.3 The Institute website is currently managed by the Director of Sales and Marketing, although a Web Marketing Executive is soon to take up post and will have day-to-day responsibility. Technical support is provided remotely, as needed, from institutions in the same group in Ottawa and Luxembourg. Agreed changes to local course content are updated online by the Sales and Marketing team. There is a policy for web version control.

3.4 The Institute has a presence on various social media platforms. These are monitored for content on a weekly basis although alerts as to when postings are made allows for intervention as necessary. Currently, this is undertaken by members of the Sales and Marketing team and will pass specifically to the Web Marketing Executive when in post.

The team concludes that reliance **can** be placed on the information that the provider produces for its intended audiences about the learning opportunities it offers.

Action plan³

Le Cordon Bleu action plan relating to the Review for Educational Oversight of October 2013						
Advisable	Intended outcomes	Actions to be taken to achieve intended outcomes	Target date(s)	Action by	Reported to	Evaluation (process or evidence)
The team considers that it is advisable for the Institute to:						
<ul style="list-style-type: none"> complete the mapping of its policies and procedures for the management of academic standards against the UK Quality Code for Higher Education (paragraph 1.9) 	The Institute's policies and procedures for academic standards are mapped to the Quality Code	<p>Map existing Institute policies and procedures to the expectations of the Quality Code</p> <p>Identify policy areas for development</p> <p>Communicate the Quality Code to all the team through group workshops</p> <p>Complete mapping of policies and procedures</p>	<p>June 2014</p> <p>June 2014</p>	<p>Academic Team to coordinate</p> <p>Academic Director has overall responsibility</p>	Academic Governance Committee	Minutes of Academic Governance Committee meetings

³ The Institute has been required to develop this action plan to follow up on good practice and address any recommendations arising from the review. QAA monitors progress against the action plan, in conjunction with the Institute's awarding organisation.

<ul style="list-style-type: none"> • issue a contract letter to all external taste testers and verifiers and ensure that they are fully trained for their respective roles (paragraph 1.11) 	<p>The Institute uses only contracted external assessors</p> <p>External assessors are fully trained for the role</p>	<p>Contract letters are issued to all invited external assessors</p> <p>A briefing document for external assessors will be produced with a one-to-one briefing</p>	<p>January 2014</p> <p>January 2014</p>	<p>Academic Director/ Academic Development and Compliance Manager</p>	<p>Academic Governance Committee</p>	<p>Signed contracts</p> <p>Briefing documents</p>
<ul style="list-style-type: none"> • review the approach to externality in the approval and examining of programmes (paragraph 1.12) 	<p>Greater clarity in externality arrangements, mapped against the Quality Code</p>	<p>Review externality arrangements and the use of documentation to support the process, mapped against the Quality Code</p> <p>Implement changes</p>	<p>March 2014</p> <p>June 2014</p>	<p>Academic team</p>	<p>Academic Governance Committee</p>	<p>Academic Governance Committee will review externality arrangements on a annual basis</p>
<ul style="list-style-type: none"> • ensure that all staff and students are kept up to date and aware of the restrictions of copyright legislation to ensure good practice relating to plagiarism and referencing conventions (paragraph 2.9) 	<p>Information for staff and students includes accurate information regarding copyright</p>	<p>Amend Staff Induction manual</p> <p>Review copyright statements in student documentation</p> <p>Ensure the information is adequately communicated to staff</p> <p>Notices to be displayed in appropriate locations</p>	<p>March 2014</p> <p>March 2014</p> <p>March 2014</p>	<p>Resource Centre Administrator and Academic team</p>	<p>Academic Director</p>	<p>Amended documentation</p>

<ul style="list-style-type: none"> further develop and adhere to its procedures for maintaining the accuracy of information available on the virtual learning environment and publicity material (paragraph 3.2) 	Procedures regarding the accuracy of publicly available information are improved	Revise and develop existing policies and procedures for publicly available information	June 2014	Academic Director Sales and Marketing Director has sign-off	Reported to Academic Governance Committee	Policies and procedures will be reviewed annually
Desirable	Intended outcomes	Actions to be taken to achieve intended outcomes	Target date/s	Action by	Reported to	Evaluation (process or evidence)
The team considers that it is desirable for the provider to:						
<ul style="list-style-type: none"> regularly review the effectiveness of the new committee structure (paragraph 1.6) 	Committee structure to be reviewed and mapped against the Quality Code	Review effectiveness of existing arrangements - produce proposal for discussion at Academic Governance Committee Academic Governance Committee approves changes for implementation	June 2014 June 2014	Academic team Academic Governance Committee	Academic Governance Committee Le Cordon Bleu international; Chief Executive Officer	The effectiveness of the changes to the committee structure will be reviewed on an annual basis

<ul style="list-style-type: none"> ensure the enhancement of learning opportunities (paragraph 2.5) 	<p>Revised policies and procedures for the enhancement of learning opportunities are in place</p>	<p>Review existing arrangements for enhancing academic quality</p>	<p>June 2014</p>	<p>Academic team</p>	<p>Academic Governance Committee</p>	<p>Student Representative Group Meetings Student Focus Groups</p>
<ul style="list-style-type: none"> regularly review assessment criteria and feed back to students to ensure clarity and consistency (paragraph 2.6) 	<p>Assessment criteria are reviewed regularly and mapped against the Quality Code</p> <p>Feedback to students is more consistent</p>	<p>Termly meetings continue to review and amend assessments as appropriate</p> <p>Documentation to be produced to evidence this process</p> <p>Teaching team to be advised on consistent implementation of student feedback</p> <p>Student focus groups to review the quality of feedback</p>	<p>Ongoing</p> <p>December 2013</p> <p>March 2014</p> <p>June 2014</p>	<p>Academic team</p> <p>Academic Director</p> <p>Student Liaison Executives to facilitate focus groups</p>	<p>Academic Governance Committee</p>	<p>Student Focus groups</p> <p>Student Representative Group Meetings</p>
<ul style="list-style-type: none"> implement the planned review of the student tutorial system (paragraph 2.11) 	<p>Review of tutorial system will take place regularly</p>	<p>The review is to be added to the agenda of the post-tutorial academic meeting</p> <p>Notify teaching team of changes</p>	<p>January 2014 - ongoing</p>	<p>Academic team</p>	<p>Academic Governance Committee</p>	<p>Student Focus Groups</p> <p>Completed tutorial forms</p>

<ul style="list-style-type: none"> improve the careers, advice and guidance service which is offered to students (paragraph 2.12) 	Careers advice and guidance provision is enhanced	<p>Introduce a termly careers event</p> <p>Career Education and Guidance Bureau Meetings to take place weekly rather than monthly</p>	<p>March 2014</p> <p>March 2014</p>	<p>Marketing team</p> <p>Academic team</p>	Academic Governance Committee	<p>Student Focus Groups</p> <p>Student Representative Group Meetings</p>
<ul style="list-style-type: none"> include target dates for implementation in reports from the Student Representative Group and develop its approach to student representation on committees (paragraph 2.13) 	Students are informed of target dates	Include target dates for actions arising from Student Representative Group meetings	December 2013	Student Liaison Executives	Academic Director	Student Representative Group Action plans
<ul style="list-style-type: none"> a more formal approach to identifying and prioritising staff development is developed (paragraph 2.14) 	Staff development is more formalised and mapped against the Quality Code	<p>Review staff development policy</p> <p>Develop into strategic staff development plan</p>	<p>March 2014</p> <p>June 2014</p>	Academic team	Culinary Arts Director	Staff development records

<ul style="list-style-type: none"> Further develop the virtual learning environment as a learning and teaching resource (paragraph 2.18) 	<p>The use of learning technologies is developed further</p>	<p>Review the use of learning technologies</p>	<p>March 2014</p>	<p>Academic team</p>	<p>Academic Governance Committee</p>	<p>Feedback from students/ teaching team</p>
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About QAA

QAA is the Quality Assurance Agency for Higher Education. QAA's mission is to safeguard standards and improve the quality of UK higher education.

QAA's aims are to:

- meet students' needs and be valued by them
- safeguard standards in an increasingly diverse UK and international context
- drive improvements in UK higher education
- improve public understanding of higher education standards and quality.

QAA conducts reviews of higher education institutions and publishes reports on the findings. QAA also publishes a range of guidance documents to help safeguard standards and improve quality.

More information about the work of QAA is available at: www.qaa.ac.uk.

More detail about Review for Educational Oversight can be found at: www.qaa.ac.uk/educational-oversight.

Glossary

This glossary explains terms used in this report. You can find a fuller glossary at: www.qaa.ac.uk/aboutus/glossary. Formal definitions of key terms can be found in the [Review for Educational Oversight: Handbook](#).⁴

academic quality A comprehensive term referring to how, and how well, higher education providers manage teaching and learning opportunities to help students progress and succeed.

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

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).

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

designated body An organisation that has been formally appointed or recognised to perform a particular function. QAA has been recognised by UKBA as a designated body for the purpose of providing educational oversight.

differentiated judgements In a Review for Educational Oversight, separate judgements respectively for the provision validated by separate awarding bodies.

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 QAA's review processes.

external examiner An independent expert appointed by an institution to comment on student achievement in relation to established academic standards and to look at approaches to assessment.

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*.

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 review processes.

highly trusted sponsor An organisation that the UK Government trusts to admit migrant students from overseas, according to Tier 4 of the UK Border Agency's points-based

⁴ www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/REO-designated-providers-handbook-13.aspx

immigration system. Higher education providers wishing to obtain this status must undergo a successful review by QAA.

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.

operational definition A formal definition of a term, which establishes 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.

provider (s) (of higher education) Organisations that deliver higher education. In the UK they may be a degree-awarding body or another organisation that offers programmes of higher education on behalf of degree-awarding bodies or awarding organisations. In the context of Review for Specific Course Designation the term means an independent Institute.

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

quality See **academic quality**.

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. Internal reference points may be used by providers for purposes of self-regulation; external ones are used and accepted throughout the higher education community for the checking of standards and quality.

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.

threshold academic standards 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 for higher education qualifications** and **subject benchmark statements**. See also **academic standards**.

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

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