



# Higher Education Review (Embedded Colleges) of Nottingham Trent International College

May 2019

## Contents

<b>About this review .....</b>	<b>1</b>
<b>Key findings.....</b>	<b>2</b>
Judgements .....	2
Good practice .....	2
Affirmation of action being taken .....	2
Financial sustainability, management and governance .....	2
<b>About the provider .....</b>	<b>3</b>
<b>Explanation of findings.....</b>	<b>4</b>
1 Judgement: The maintenance of the academic standards of awards offered by the provider and/or on behalf of degree-awarding bodies and/or other awarding organisations.....	4
2 Judgement: The quality of student learning opportunities.....	17
3 Judgement: The quality of the information about learning opportunities .....	35
4 Commentary on the enhancement of student learning opportunities .....	38
<b>Glossary.....</b>	<b>39</b>

## About this review

This is a report of a Higher Education Review (Embedded Colleges) conducted by the Quality Assurance Agency for Higher Education (QAA) at Nottingham Trent International College. The review took place from 21 to 22 May 2019 and was conducted by a team of two reviewers, as follows:

- Ms Gillian Butler
- Professor Denis Wright.

The main purpose of the review was to investigate the higher education provision and to make judgements as to whether or not academic standards and quality meet UK expectations. These expectations are the statements in the [UK Quality Code for Higher Education](#) (the Quality Code)<sup>1</sup> 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 (Embedded Colleges) the QAA review team:

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

A check is also made on the provider's financial sustainability, management and governance (FSMG) with the aim of giving students reasonable confidence that they should not be at risk of being unable to complete their course as a result of financial failure.

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

---

<sup>1</sup> The UK Quality Code for Higher Education is published at: [www.qaa.ac.uk/quality-code](http://www.qaa.ac.uk/quality-code).

<sup>2</sup> QAA website: [www.qaa.ac.uk](http://www.qaa.ac.uk).

<sup>3</sup> Higher Education Review (Embedded Colleges): [www.qaa.ac.uk/reviewing-higher-education/types-of-review/higher-education-review](http://www.qaa.ac.uk/reviewing-higher-education/types-of-review/higher-education-review).

## Key findings

### Judgements

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

- The maintenance of the academic standards of awards offered by the awarding organisations **meets** UK expectations.
- The quality of student learning opportunities is **commended**.
- The quality of the information about learning opportunities **meets** UK expectations.

### Good practice

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

- The comprehensive opportunities and processes which enable all College staff to support student learning experiences (Expectation B3).
- The structure and processes that support the productive relationship between the College and the University enabling students to develop their full potential (Expectation B4).
- The College's multi-faceted approach to engaging the students as partners in the assurance and enhancement of their educational experience (Expectation B5).

### Affirmation of action being taken

The QAA review team **affirms** the following action already being taken to make academic standards secure and/or improve the educational provision offered to students:

- the College's current work to improve the consistency of individual written feedback to students (Expectation B6).

### Financial sustainability, management and governance

The financial sustainability, management and governance check has been satisfactorily completed.

## About the provider

The College is part of Kaplan International Pathways which in turn is part of Kaplan Inc, a subsidiary of Graham Holdings Company. The original mission of Kaplan International Pathways through Kaplan International Colleges (KIC) was to develop a network of international colleges that provide diverse entry and exit points for international students to higher education in the UK. The company's aim is to develop world-leading pathway programmes to meet the needs of international students primarily from outside the European Union.

The key challenge for Kaplan International Pathways is the uncertainty of immigration policy in the UK since 2009. The other challenge is the imminent change in regulation coming into effect from the Office for Students.

The College is an embedded college within Kaplan International UK Ltd, in partnership with Nottingham Trent University and was established in 2005. The College underwent an annual monitoring visit in 2018 and was deemed to be making commendable progress with completing the actions from the 2016 Higher Education Review.

At the time of the review there were 399 students in the College, as many students completed their studies at the end of the Spring 2019 term. For the 2018-19 academic year, there were 610 students studying at the College scheduled to progress to their university programme in 2019-20.

## Explanation of findings

This section explains the review findings in greater detail.

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

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

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

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

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

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

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

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

#### **Findings**

1.1 Kaplan International Pathways UK Ltd (the Provider) offers Foundation Certificate, International Year One and Pre-Master's programmes at Nottingham Trent International College (the College), an embedded college at Nottingham Trent University (the University). The Kaplan Pathways Award is a qualification awarded by the College to students upon successful completion of a credit-bearing programme delivered by the College. Subject to meeting performance requirements, students may progress to degree programmes at the host or other university.

1.2 The Provider is responsible for ensuring the academic standards of programmes. The Provider's Quality Assurance Framework (QAF), which is aligned with the UK Quality Code for Higher Education (Quality Code), sets out the principles by which the standards and quality of programmes are maintained and includes a credit-point framework that corresponds to the credit framework used within UK higher education. The QAF outlines the level at which the different qualifications are awarded and provides links to Subject

Benchmark Statements. The College's Foundation Certificate programmes are aligned with UK Regulated Qualifications Framework (RQF) Level 3; the International Year One programmes with RQF Level 4; and the Pre-Master's programmes with the Common European Framework of Reference for Language (CEFR) CEFR B2. The College's Academic Standards and Quality Manual (ASQM) describes the policies, regulations and procedures that assure programme academic standards.

1.3 The policies and procedures described in the QAF and ASQM for aligning each programme to the qualification framework for the award of credit and to external reference points would enable Expectation A1 to be met.

1.4 The review team tested the operation and effectiveness of these arrangements through scrutiny of a range of documentation relating to academic standards. The review team also held meetings with College staff and with representatives from the Provider and University.

1.5 Programmes and their intended learning outcomes are designed through negotiation between the College and the University. The University approves and signs a Cooperation Agreement, which confirms College programmes and the level at which they are delivered.

1.6 The review team examined programme specifications for current College programmes and for programmes starting from September 2019 and found they comply with the requirements described in the ASQM. The programme specifications describe the course content and structure, with the overall intended learning outcomes and the amount of credit awarded mapped against external credit and qualifications frameworks and, where appropriate, Subject Benchmark Statements. A range of module specifications were also examined; these were found to clearly define the assessed subject-specific learning outcomes and align with the QAF, Grade Descriptors, and, where appropriate, the CEFR for language levels.

1.7 External examiners are required to comment on the appropriateness of module and programme learning outcomes to the qualification level and, where applicable, Subject Benchmark Statements, and on the comparability of academic standards to programmes of a similar level at other institutions. The review team looked at a range of external examiner reports and found that they were fully compliant in their consideration of academic standards.

1.8 The College, Provider and University staff who met the review team were clear about the role of external qualification frameworks and Subject Benchmark Statements in programme development, including the use of programme and module specifications.

1.9 The review team concludes that the College adheres to the Provider's QAF and the policies and procedures described in the ASQM, thereby ensuring programmes are offered at the appropriate standard and level. The Expectation is therefore met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

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

**Findings**

1.10 The Provider has overall responsibility for the management of College programmes. The Academic Planning and Quality Committee (APQC) is responsible for the maintenance of academic standards and quality across colleges in accordance with policies, regulations and procedures set out in the ASQM.

1.11 The Provider's College Executive Management Board (CEMB) is concerned with strategic and operational issues relating to College operations including programmes of study, and receives reports from College Senior Management Teams (SMTs).

1.12 A Joint Academic Advisory Board (JAAB) operates between the University, College and Provider to ensure that programme academic standards and student learning opportunities allow the progression of students to University degree courses. The Joint Strategic Management Board (JSMB), which receives reports from JAAB, is the senior management board for the University and Provider and reviews the performance of the College.

1.13 The Provider's centralised policies, regulations and procedures and the governance structures in place for the College, which provide the academic framework for the award of academic credit and qualifications, would enable Expectation A2.1 to be met.

1.14 To test the Expectation, the review team scrutinised the effectiveness of academic governance arrangements, academic frameworks and procedures through examination of a range of documentation relating to programme development, monitoring and review. The review team also met College staff and staff from the Provider and University.

1.15 The ASQM sets out the assessment regulations and operation of assessment boards, which confirm the achievement of learning outcomes for the award of qualifications.

1.16 The College Director has overall responsibility for the student experience and academic standards of College programmes. The Academic Director is responsible for the delivery of the curriculum; ensuring College staff comply with the quality assurance procedures set out in the ASQM; and operation of Assessment Boards.

1.17 The College Director and Academic Director along with Programme Leaders and the Director of Innovative Student Learning for Kaplan Pathways are members of the JAAB, whose terms of reference include the approval of curriculum changes to programmes and consideration of, and response to, annual programme reports.

1.18 The review team considers that the key role played by JAAB in assuring programme standards and progression of students to degree courses contributes to a feature of good practice in Expectation B3.

1.19 The annual cycle of programme and module monitoring and review is the responsibility of Programme Leaders in conjunction with Programme Committees (PCs). Programme Leaders report to the Academic Director. The Centre for Learning Innovation

and Quality (CLIQ) oversees quality assurance and acts as a 'hub' to ensure a common set of academic standards across the Provider's colleges.

1.20 The review team finds the Provider and College have effective governance structures and procedures, with clear lines of responsibility for the maintenance of standards and the award of academic credit and qualifications, and conclude that the Expectation is met and the associated level of risk is low

**Expectation: Met**  
**Level of risk: Low**



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

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

**Findings**

1.21 Templates for programme and module specifications are produced centrally by the Provider, which enable definitive information to be produced and recorded for each award, including programme structure, content, learning outcomes and assessments. Colleges are responsible for ensuring that all programme documentation is kept up to date and that staff members are informed of any changes made. Templates and guidance are also provided centrally for the completion and provision of student transcripts and certificates.

1.22 The Provider's requirements for definitive records of College programmes, and for the provision of individual student transcripts and certificates, would enable Expectation 2.2 to be met.

1.23 To test the Expectation the review team scrutinised relevant documentation and held meetings with staff from the College and the Provider.

1.24 A programme specification was in place for each programme and the programme and module specifications seen by the review team clearly described the course structure, content and the assessments through which learning outcomes at the appropriate level are demonstrable. Specifications are submitted for academic approval to APQC and a record of approved changes made. The review team found that College staff were familiar with the process of producing programme and module specifications and that there was a version-controlled, programme specification central depository and tracking system in place.

1.25 The ASQM describes the policy on the retention of student work and the procedures for replacement of student records. On successful completion of their programme, College students are issued with their academic transcript and Pathways award certificate. The Guidance for Completing Transcripts and Certificates includes an algorithm for the type of record issued, depending on whether a student passes the Pathways award, achieves a conditional pass, withdraws prior to completion, fails the Pathways Award, or where exemptions apply.

1.26 The review team considers there are robust processes that ensure the production and maintenance of definitive records of College programmes and the provision of individual student records. The review team concludes that the Expectation is met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

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

**Findings**

1.27 The Provider QAF and ASQM set out the process for the design and approval of programmes. The QAF identifies the academic frameworks against which all programmes are mapped. Reference is made to the FHEQ, the RQF and links are provided to the QAA Subject Benchmark Statements.

1.28 The ASQM stipulates that proposals to develop new programmes require approval through the Provider New Product Development and Approvals Group (NPDAG), prior to academic approval. Significant modifications to existing programmes may also require central planning approval from the Business Approval Group for Programme Developments (BAGPD).

1.29 Academic approval by the Provider for new programmes and significant modifications to existing programmes and modules, takes place through the APQC. The APQC has oversight of all academic provision and is responsible for ensuring that decisions are made with due regard to internal and external reference points, including the CEFR and RQF. It ensures the alignment of proposed learning outcomes with grade descriptors and credit values assigned to modules. Academic approval is also required from the partner University via the JAAB, which is the senior advisory board for the College.

1.30 The Provider programme approval procedures ensure that academic standards are set at a level that meets UK threshold standards and are in accordance with relevant academic frameworks and regulations. These procedures address the Expectation and enable it to be met.

1.31 The review team tested the operation of these arrangements by scrutinising the Provider quality documentation, approval documentation, programme specifications, minutes of the JAAB and Programme Committees. The review team also met staff from the College, the Provider and the University.

1.32 The programme specification pro forma explicitly requires reference to the relevant level of the FHEQ, RQF, CEFR and Subject Benchmark Statements. All programme specifications viewed by the review team demonstrated appropriate alignment.

1.33 The review team considered the implementation of the procedures with reference to recent changes that were made to the Foundation Certificate in Computing and International Year One in Computing programmes, in order to enhance the provision and ensure improved alignment with the University programmes. The College Programme Leader for Science, Engineering and Computing used the University programme specification and worked closely with the University link tutor for Computing in order to achieve this. Programme Committee minutes demonstrate due consideration of the proposal and the requirement for the approval of the APQC.

1.34 Additionally, an extensive process of Product Review by the Provider has resulted in some changes to programmes at the College and in the wider network, which will take

effect in September 2019. These proposals have been subject to thorough scrutiny by the pre JAAB scrutiny group prior to consideration by the JAAB.

1.35 The review team concludes that by implementing the procedures set out in the Academic Standards and Quality Manual, and working closely with the partner University through the JAAB, academic standards are set at a level that meets the UK threshold standards and is in accordance with their own academic frameworks and regulations. Therefore, the Expectation has been met and the level of risk is low.

**Expectation: Met**

**Level of risk: Low**

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

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

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

**Findings**

1.36 The principles, policies, procedures and regulations underpinning the assessment of learning outcomes and the award of credit are set out in detail in the Provider QAF and ASQM, along with the roles and responsibilities of academic staff, the responsibilities of assessment boards, marking, moderation and feedback requirements. The ASQM includes the arrangements to be made to ensure the operation of fair and consistent assessment policy for students with protected characteristics.

1.37 Programme and module learning outcomes are devised with reference to the Provider QAF. The programme approval procedures require consideration of the alignment of learning outcomes and assessments with threshold standards. Grade descriptors for each level of programme define what is expected in order to meet the learning outcomes and provide for the calibration of student achievement relative to the threshold standard. Any changes to summative assessments proposed are reviewed and approved by APQC prior to approval by the University at the JAAB.

1.38 The English Language Exit module summative module assessments are developed and managed centrally by the CLIQ Learning Measurement and Evaluation Team.

1.39 The College therefore has appropriate regulations and policies in place to enable the Expectation to be met.

1.40 The review team scrutinised documentation including the Provider quality documentation, minutes of programme committees, minutes of an assessment board, the agenda for external examiner meetings, programme and module specifications and external examiners' reports. The review team also met staff from the Provider, the University and the College.

1.41 Programme specifications ensure that the assessment regime assesses the core module learning outcomes and provides for a range of assessment types. Assessment types and the learning outcomes that they assess are specified in the module specifications. Detailed guidance is provided in the virtual learning environment (VLE) module information, which sets out the marking scheme for each assignment. The College also provides an overview document of all assessments showing the range of assignment types.

1.42 The detailed assessment regulations and guidance are understood and adhered to by staff and students.

1.43 Staff and students also demonstrated a clear understanding of the process for enabling reasonable adjustments to be made when appropriate and were able to provide examples of the effectiveness of the arrangements.

1.44 Minutes from an assessment board and external examiner reports confirm that boards are properly constituted and decisions concerning the award of credit and qualifications are made in accordance with the processes stipulated in the ASQM.

1.45 The review team concludes that students' achievement of relevant learning outcomes is satisfactorily demonstrated through assessment and that UK threshold standards and their own academic standards have been satisfied. The Expectation is met and the associated level of risk is low.

**Expectation: Met**

**Level of risk: Low**

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

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

**Findings**

1.46 Requirements for the monitoring and review of programmes are set out by the Provider in the QAF which makes reference to the threshold standards in the Quality Code and Subject Benchmark Statements.

1.47 Annual monitoring and review of programmes is undertaken by the College to ensure threshold standards are met. It is the responsibility of the Programme Leader to draft an Annual Programme Report (APR). The Programme Committee has responsibility for on-going monitoring and review of the programme and approves the APR, which is received by other Programme Leaders and considered by the College Senior Management Group. The report is then received by JAAB and CLIQ. It is also sent to the external examiner for note. CLIQ uses the College APRs to produce an overview report, which is shared across colleges with senior staff, enabling a comparison of standards across the network.

1.48 The policies and procedures for monitoring and review of programmes set out in the QAF enable the Provider to systematically consider whether UK threshold standards are achieved and to ensure that progression requirements for the University are maintained.

1.49 The review team considered a range of evidence in order to test the implementation of the Quality Framework, including annual programme reports and the accompanying data sets, external examiner reports, the APQC presentation and minutes of relevant meetings including programme committees and JAAB. The review team also met students and staff from the University, the Provider and the College.

1.50 Annual programme reports compiled by the Programme Leaders used the Provider template and were completed to a high standard, drawing on data sets including student exit and academic performance at the University, staff and student module feedback, student satisfaction surveys, student attendance and external examiner reports. The reports analysed the data carefully and identified actions to enhance provision where this was needed. Additionally, a summary report of cross-college themes is compiled by the Academic Director enabling a thematic approach to enhancement across the College.

1.51 External examiners confirm the currency of the programmes and the attainment of threshold standards in accordance with the RQF and CEFR.

1.52 The QAF makes provision for periodic review to be conducted every five years. JAAB has recently agreed a framework for periodic review of the partnership in order to implement a longitudinal process of review of provision. This includes representation of the student voice and the inclusion of an external panel member. A timetable for implementation of the framework is currently under consideration, which will take account of the recent Product Review undertaken by the Provider.

1.53 The review team concludes that the effective implementation of the Provider QAF and strong partnership relationship with the University enable the College to ensure that UK threshold standards are achieved and maintained. The Expectation is met and the associated level of risk is low.

**Expectation: Met**

**Level of risk: Low**

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

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

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

**Findings**

1.54 The Provider Quality Assurance documentation requires the involvement of external advice during the process of programme approval and for significant changes to programmes. This includes External Review Guidelines to enable colleges to ensure that proposals receive an appropriate level of external scrutiny. The degree of independence required is determined by the significance of the proposal for change.

1.55 The role of external examiners is set out in the Provider QAF and ASQM and is identified as an important component of the quality management process. The template for external examiners' reports requires confirmation that the standards set for the programme conform to external reference points and are comparable with the standards of similar programmes offered by other institutions.

1.56 The partner University, through JAAB and link tutor arrangements contribute significant external expertise. The recently agreed process for periodic review of partnership provision also includes a requirement for the inclusion of an external panel member.

1.57 The College has arrangements in place, including the Provider QAF and the partnership with the University that allow the Expectation to be met.

1.58 The team tested the application of the framework by studying regulations, terms of reference of boards, minutes of meetings, a report from an external adviser and external examiners' reports. The review team also met students and staff from the College and the University.

1.59 There is a defined, centralised curriculum development and approval process for all new programmes hence the appointment of external expertise is implemented by the Provider in respect of new programmes. Similarly, one external examiner operating across all the Colleges is appointed to the credit-bearing English Language Exit module.

1.60 External examiners are members of assessment boards and are invited to attend two-day meetings where they can advise on the setting, delivery and achievement of academic standards. External examiner feedback also informs the APRs and is included in the Academic Standards and Quality of Programmes presentation (ASQP) report. Formal responses are made to external examiner reports and included in the College Action Plan.

1.61 The review team concludes that the appropriate procedures for the use of independent external advice at key stages of setting and maintaining academic standards for the College's programmes is implemented effectively. The Expectation is met and the level of risk is low.

**Expectation: Met**  
**Level of risk: Low**



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

1.62 In reaching its judgement about maintaining academic standards, the review team matched its findings against the criteria specified in Annex two of the published handbook.

1.63 All Expectations are met.

1.64 The review team concludes the maintenance of the academic standards of awards offered by the Provider on behalf of degree-awarding bodies **meets** UK expectations.

## 2 Judgement: The quality of student learning opportunities

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

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

#### **Findings**

2.1 The Provider Senior Management Team (SMT) exercises strategic oversight of the design, development and approval of programmes. The terms of reference for the New Product Development and Approvals Group (NPDAG) and Business Approval Group for Programme Developments (BAGPD) specify that any developments are in line with the business objectives of the Provider and sector demands.

2.2 Academic approval is undertaken firstly by the Provider Academic Planning and Quality Committee (APQC) and secondly by the partner University, through the Joint Academic Advisory Board (JAAB).

2.3 The College is responsible for curriculum development, supported by the Centre for Learning Innovation and Quality (CLIQ), which produces the Academic Standards and Quality Manual (ASQM). There is guidance on the process of programme development, including writing learning outcomes. External review is required, with the degree of independence exercised increasing in accordance with the significance of the change being proposed. The role of Programme Committees (PCs) in developing and enhancing the curriculum is defined in their terms of reference.

2.4 The procedures for programme design, development and approval enable the Expectation to be met.

2.5 The review team scrutinised documentation including the Provider ASQM and accompanying guidance, JAAB minutes, Programme Committee minutes, annual programme reports and comments from an external reviewer. The review team also met students, and staff from the College, the University and the Provider.

2.6 Within the College, Programme Leaders in conjunction with staff from the University were able to provide clear examples of the process of making changes to the curriculum. They were familiar with internal and external quality guidance and recognised the value of using information gathered through annual programme reviews to inform enhancements to the curriculum.

2.7 The Product Review referred to in A3.1 also illustrates adherence to the Provider quality processes and exemplifies the effective application of the procedures to enable programme developments initiated by the Provider.

2.8 The review team concludes that the processes for the design, development and approval of programmes are implemented effectively and ensure continuing enhancement of student learning opportunities.

**Expectation: Met**  
**Level of risk: Low**

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

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

**Findings**

2.9 Student recruitment and admissions to the College is the responsibility of the Provider and is managed centrally by a Recruitment and Admissions team and/or through Kaplan Partner Services in Hong Kong, which manages overseas offices, regional staff based overseas and a network of agents.

2.10 The policies and procedures for the admission of students to the College are outlined in the Provider's Admissions Manual and are compliant with UK Home Office visa (UKVI) requirements. All students are tracked from their initial application through to graduation from the College and progression to University. There is regular monitoring and review of admissions policies and procedures in light of any company, legislative or regulatory changes.

2.11 Prospectuses and websites include general academic and specific English language entry requirements. Admissions teams are trained to determine the eligibility of applicants to ensure prospective students meet entry requirements. There are processes in place to deal with non-standard applications, which are considered at College level.

2.12 The admission policies and procedures in place would allow Expectation B2 to be met.

2.13 The review team tested the operation of the admission process to the College by examining relevant documentation, including pre-arrival information provided to students. The review team also met College staff, students and alumni, and representatives from the Provider and the University.

2.14 A range of evidence is used when reviewing applications, including academic transcripts, certified translations and English language certificates. Additional evidence such as CVs and personal statements may be requested. Academic and English language entry requirements reflect the improvements students are required to make to meet university entry requirements. Admission teams make use of resources, such as the UK National Academic Recognition Information Centre, to ensure qualification certificates are genuine and are at the correct level.

2.15 Admissions staff have regular briefings and training to ensure they are up to date with programme information and College and University information. Similar training is also offered to agents. Due diligence is undertaken on the appointment of overseas agents, who are also required to go through an induction process.

2.16 Non-standard applications are forwarded to the Head of College Services who, with the Senior Manager of College Services and the Academic Director, considers the application and any special arrangements, including reasonable adjustments required in relation to a disability. Applicants are made aware that disclosure of such information will enable the requirements for additional support to be assessed. The College may also

contact the University to assess their ability to support the student upon progression. College staff who met the review team had a thorough understanding of the non-standard application process.

2.17 Students and their representative agents are made aware through the prospectus of the expected timeline for fully completed applications to be processed. Students and agents are informed where additional checks are required. Throughout the recruitment and admissions process, timely interactions between students/agents and the Admissions team are achieved through a system of offer letters, acceptance of offers and follow-up procedures. Where fees/deposits are taken during the admission process, there is clear explanation within a student's offer letter as to why these are required.

2.18 Applicants are provided with clear information on how to accept or reject their offer, including how an offer may be deferred. The Admissions team maintain contact with applicants and advise them on their status on the student management system. For example, students on 'Admissions' status are contacted to enquire about the visa application process and if they have planned their travel to the UK.

2.19 Where an offer has to be amended before students commence their studies, they may be offered a range of options. Where a student no longer wishes to study with the Provider or there is no alternative option available, then a refund of any deposit paid will be considered. There is a defined process to deal with the closure of a programme.

2.20 Queries about admissions decisions may be submitted online and there is a process to deal promptly with feedback and any complaints from rejected applicants. The Senior Admissions team monitors each case and reviews the process periodically.

2.21 The College monitors progression and retention rates at a local level and tries to identify reasons why some students do not complete their programme. Performance data for students on College programmes and for alumni on University degree programmes is presented and reviewed in APRs.

2.22 Information is made available to students and parents in the College's Pre-Arrival Guide to help students begin their studies and understand the environment that they will be coming into. There is signposting to additional advice and guidance through pre-arrival information, which alerts students to sources of support within the College. Students are also contacted via social media by the College's Senior College Services Administrator and given pre-arrival information; this enables them to ask any questions they may have prior to Welcome Week.

2.23 Students who met the team spoke positively about admissions processes to the College.

2.24 The review team concludes that the procedures in place for the admission of students adhere to the principles of fairness, are transparent, reliable, valid and inclusive, and enable the selection of students who are able to complete College programmes and progress to the University. The Expectation is therefore met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

### **Quality Code, *Chapter B3: Learning and Teaching***

#### **Findings**

2.25 The Provider's Learning and Teaching Framework (LTF) underpins the College Learning, Teaching and Assessment Strategy (LTAS). The LTF defines the learning environment for Pathways awards and covers five main areas of practice: pedagogy; quality assurance and enhancement; blended learning; student engagement; and professional development. The Provider's Technology Enhanced Learning (TEL) Strategy focuses on the use of technology in learning and teaching to improve student learning opportunities and outcomes and improve the digital literacy of staff and students.

2.26 All College programmes are designed to meet different student needs and include English Language and academic skills modules and subject-specific modules.

2.27 The APQC has overall responsibility for assuring the quality of student learning opportunities for College students. CLIQ is responsible for the management of learning opportunities, including support for curriculum development and effective student learning. In the College, PCs are responsible for the maintenance of the quality of programmes and the promotion and development of student learning opportunities, in accordance with the Provider's quality frameworks and the procedures described in the ASQM. Annual monitoring and review of programmes is undertaken by College PCs. The JAAB assures the quality of learning opportunities on behalf of the University in order to ensure a smooth transition of College students to degree programmes.

2.28 The strategies, procedures and support provided centrally, and in the College, to support learning and teaching would allow the Expectation to be met.

2.29 The review team tested how the quality of student learning opportunities is assured at the College by examining relevant documentation, and in meetings with College staff, students and alumni, and with representatives of the Provider and University.

2.30 Learning and teaching methods include seminars, lectures and tutorials, with a focus on small classes, and are supported by the VLE. The review team heard from College staff how the LTAS had led to a range of developments in learning and teaching. The College LTAS and College Action Plans support the attainment of the Provider's Graduate Attributes, which articulate the skills and qualities that students can expect to have obtained upon successful completion of their College programme.

2.31 Students can access a range of resources, which help to develop Graduate Attributes and enhance language ability. An achievement portfolio helps to provide evidence of student success in achieving Graduate Attributes. Students are encouraged to participate in both formal and non-formal learning opportunities. The College offers a range of non-formal activities aimed at promoting and supporting student learning, social integration, and generic skills and qualities, which include Learning Workshops and activities at the Knowledge Hub.

2.32 Students receive formative and summative feedback on their work. The College aims to provide feedback to students within 10 working days. Students who met the review team had received prompt feedback on their work but referred to variability in the quality of feedback between tutors. The College has recognised the need to improve consistency in the quality of feedback.

2.33 College APRs include summaries of student feedback from module and student experience surveys. The review team found that student feedback on the quality of the teaching and of the learning experience in general is good and scrutiny of action plans indicated effective responses to student feedback. Students who met the review team spoke highly of their learning experience at College and felt their feedback was listened to and acted upon by the College.

2.34 Staff induction, support and continuing professional development (CPD) is the responsibility of the College and is supported by the Provider through CLIQ, who host regular themed webinar sessions. The Cooperation Agreement with the University also enables College staff to access staff development facilities and activities offered by the University.

2.35 There are termly inductions for new staff. Teaching staff are required to attend induction sessions prior to teaching, which are supported by a Tutor Induction page on the VLE. New staff are mentored, with support from other tutors, including tutors at the University. Peer observation of tutor's learning and teaching is monitored by line managers and is linked to annual appraisal.

2.36 Staff have a wide range of opportunities for professional development, including a College weekly themed staff development session and an annual College Best Practice Day. There is a central online CPD resource, 'Sharing Space', for both academic and non-academic staff, and a monthly newsletter is sent to all staff highlighting some of the new content. CLIQ encourages College staff to attend events aimed at improving the student learning experience. The College APRs seen by the review team record a wide variety of staff training activities.

2.37 A key target of the Provider's TEL strategy is developing competence and engagement of College staff with learning technologies. In 2017-18 training initiatives were implemented to encourage staff and student digital literacy and the implementation of TEL, with training materials produced by a TEL Working Group. College tutors are encouraged to adopt active learning and teaching methodologies and have developed approaches to individualised learning that better align with those current at the University. College VLE coordinators, TEL Champions, and Language Coordinators work with CLIQ to ensure consistency and quantity of the provision.

2.38 College staff who met the review team spoke highly about staff induction and CPD available at the College. The review team considers that the comprehensive opportunities and processes, which enable all College staff to support student learning experiences, is **good practice**.

2.39 The review team concludes that the College supports a comprehensive range of learning opportunities that enable students to develop as independent learners and progress to the University. There is systematic monitoring of learning and teaching, and comprehensive and effective staff development opportunities for all College staff to support the student learning experience. The Expectation is therefore met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

**Quality Code, Chapter B4: Enabling Student Development and Achievement**

**Findings**

2.40 A range of policies and procedures facilitates the transition of students to higher education in the UK, and to their chosen University pathway.

2.41 There are systems in place to support students during the enrolment process, which include the opportunity to identify additional student needs. Students receive a pre-arrival guide to help them prepare for their arrival in the UK. Induction programmes during the College's Welcome Week are designed to help students acclimatise and signpost the College and University support services available. Students are provided with further information on living in the UK and life at College and is available via College Services pages on the VLE.

2.42 Service Level Agreements with the University specify the services and resources available to the College. The College Executive Management Board (CEMB) is responsible for the management of student support and learning resources for the Provider.

2.43 The policies and procedures in place, implemented by the College and monitored and reviewed by the Provider and University would enable Expectation B4 to be met.

2.44 The review team tested the Expectation through scrutiny of documentation on central and College-level processes and procedures that support student development and achievement. The review team also held meetings with College staff, students and alumni, and with representatives of the Provider and University.

2.45 Information on student support services, and on programmes and modules, is available to students through the College Services pages on the VLE. Students who met the review team knew how to access information on their course and how to access College and University support services.

2.46 The College ensures provision of computing and library facilities, digital online resources and other facilities such as laboratories, workshops and social learning spaces in the College and through access to University facilities. Digital literacy skills are embedded throughout the curriculum. The Provider monitors and evaluates arrangements and resources to support students through CEMB, which receives College Action Plans and APRs. JAAB also receives and considers APRs. With oversight from the JSMB, JAAB plays a key role in assuring the quality of student learning opportunities on behalf of the University, in order to ensure a smooth transition of students from College programmes to University degree programmes. The review team also learned about the important role played by University Link Tutors, who work with Programme Leaders to ensure the ongoing alignment of College programmes with University degree programmes.

2.47 Foundation Certificate and International Year One students have tutorials within their supervised self-study sessions. Pre-Master's students, in recognition of their need for greater autonomy, have a sign-up tutorial system that is operated by their Study Skills Tutor, attendance at which is very good. Tutorials provide students with an opportunity to review academic progress, identify areas of concern and agree on points of action. Meetings are either one-to-one, or in groups, with the opportunity to make a one-to-one appointment, and usually occur every 1-3 weeks. Students who met the review team spoke positively about their meetings with tutors. The review team also learned about the positive role played by

College alumni at the University, some of whom act as peer learning coaches for current College students.

2.48 Tutors work closely with College Services to ensure students with specific personal or pastoral support needs are identified and appropriate support provided. Following disclosure of a long-term medical condition or other disability, ideally prior to admission, adjustments to learning and teaching, or other support measures can be put in place, including use of assistive technology. An Inclusive Learning Plan is developed for each SEN student, which is shared with the student's tutors. Students who met the review team were aware of what they would need to do to apply for an adjustment to an assessment and of the Exceptional Extenuating Circumstances procedure.

2.49 Students complete Student Experience and Module Surveys, which are summarised in APRs and where applicable feed into College Action Plans. Good levels of student satisfaction were recorded for tutors, learning resources and student support services.

2.50 Through the Knowledge Hub, students can access a full range of evening and weekend sessions led by College tutors. These sessions aim to support students' studies, provide a contact point outside of College hours and encourage students to communicate in English in a social setting.

2.51 The student submission includes very positive comments from College students on tutors, learning resources and the support services available at the College and at the University, where they have widespread access to facilities; these views were confirmed by students who met the review team.

2.52 The review team considers the structures and processes that support the productive relationship between the College and the University enabling students to develop their full potential is **good practice**.

2.53 There are daily student attendance checks produced for teaching teams with regular reports to the College SMT. Attendance reports are included in each APR. Audits of attendance are conducted by the Provider's Compliance team, which reports to CEMB. In addition to meeting UKVI compliance, this process ensures that student progress and wellbeing is monitored, enabling appropriate and timely action taken as required.

2.54 There are weekly assessments on Language modules and mid-term checks on student performance. Progress meetings review student performance data to identify students requiring additional support.

2.55 Students are supported to achieve their study goals. During the programme, for students at risk of not meeting their progression target, the College has a number of measures in place - these include having students select a second choice option and providing counselling from College and University staff. All students who complete the Provider award but do not meet the progression requirements of the partner institution are supported by the Provider's University Placement Service to identify alternative progression routes.

2.56 The review team learned about the introduction by the Provider of a new, bespoke student management system for the College from September 2019 and that there were procedures in place to ensure continuity of student data.



2.57 From the documentation examined, including APRs and Action Plans, and from meetings with staff and students, the review team found there were effective procedures in place to monitor and review student progression within programme pathways and to the partner University.

2.58 The review team concludes that the comprehensive learning resources and support services available due to a productive partnership between the College and University enable students to develop to their academic and professional potential, and that there are effective processes in place for monitoring and review of learning resources and student services. The Expectation is therefore met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

**Quality Code, Chapter B5: Student Engagement**

**Findings**

2.59 The QAF and ASQM set out the principles that underpin the approach to student engagement that the College is required to implement. The College appoints a Lead Student Representative and all programmes have elected student representatives. There is a staff student representative committee chaired by the Senior College Services Administrator. A range of survey methods are used to gather student opinions including pre-arrival questionnaires, module and overall student experience feedback questionnaires and a suggestions box. Students also have regular tutorial meetings with academic staff where they can provide individual feedback.

2.60 These arrangements enable the Expectation to be met.

2.61 The review team tested the operation of these arrangements by scrutinising documentation relating to the arrangements for engaging with students, including information to students, minutes of committees, the results of surveys and meetings where students are present and evidence of the responses to issues raised by students. The review team viewed the student submission and met students and staff from the College.

2.62 Student representatives whom the review team met confirmed that they fully understood their role and had received a handbook which explained their responsibilities to them. All students whom the team met expressed confidence in their ability to raise issues either directly with College staff or through student representatives. Staff and students confirmed the accessibility of staff and the open-door policy adopted by the College.

2.63 Minutes of meetings demonstrate that students are actively engaged in the quality assurance of their programmes through the termly programme committee meetings. Feedback from students is collated in the annual programme reports, which also evidence careful analysis of and responses to issues raised by students.

2.64 The minutes from the student representative meetings with senior managers of the College and the College Action plans afford further evidence of a proactive approach to engaging students in the assurance and enhancement of their educational experience.

2.65 The College communicates the changes made as a result of student feedback, or if change is not possible, reasons for this, through the student representatives and by displaying 'You said, We did' boards in prominent places around the College, to evidence work they have undertaken in response to comments from students.

2.66 The team considers that the multifaceted approach to engaging with students as partners in the assurance and enhancement of their educational experience is **good practice**.

2.67 The College adopts a comprehensive approach to ensuring effective student engagement, individual and collectively, in the assurance and enhancement of their educational experience. The Expectation is met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

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

**Findings**

2.68 The Provider ASQM describes the principles of assessment and sets out the regulations and guidelines for assessment processes, including assessment design and approval, quality assurance, internal and external moderation processes and arrangements for the secure administration of assessment processes. It also specifies the terms of reference for assessment boards and the processes required to ensure that marking and assessment are equitable and that decisions on student progression are appropriate.

2.69 The APQC has the responsibility to review all proposed new assessment types and ensure that they adhere to the principles set out in the ASQM, and in the Provider Assessment Development Guide. It is also responsible for monitoring the currency and coherence of assessment principles, policies, procedures and guidance in the context of relevant internal and external reference points. These include the QAF, the Grade Descriptors, the Learning and Teaching Framework, programme and module specifications, the Assessment Development Guide, as well as the Regulated Qualifications Framework (RQF), the Scottish Credit and Qualifications Framework (SCQF) and the Common European Framework of Reference for Language (CEFR).

2.70 CLIQ is responsible for provision of support, guidance and training to ensure the effective operation of assessment processes.

2.71 There is provision for limited Accredited Prior Learning (APL) for students seeking the recognition of a qualification accepted by their intended partner university, so that they may be exempt from the study of the English Language Exit module. Exempted students can access learning workshops that are focused on language development.

2.72 The regulations, policies, procedures and associated guidance would enable the Expectation to be met.

2.73 The review team tested the operation of these arrangements through scrutiny of relevant documentation, including the ASQM, training materials and guidance, minutes of an assessment board, external examiner reports and assessment information for students. The review team viewed examples of assessment information on the VLE and met students, and staff from the University, the College and the Provider.

2.74 The review team found comprehensive, evidence-based guidance to inform assessment practices, including a good practice guide to the design and marking of assessments to be used as a training resource in the College. Staff were able to demonstrate that they were familiar with the guidance. Assessment information on the VLE confirms that assessment practices provide students with the opportunity to demonstrate the extent to which they have attained the intended learning outcomes.

2.75 Students receive formative and summative feedback on their assignments from their tutors, as well as receiving individual written feedback.

2.76 Marking standardisation training and guidance supports staff interpretation and application of the module-specific marking criteria and marking schemes (derived from the Kaplan Pathways Grade Descriptors). Procedures for marking, moderation and conducting standardisation training are outlined in assessment and standardisation guidance.

2.77 Recently introduced software enables students to submit assignments and receive feedback online, as well as providing for the identification of academic malpractice. CLIQ has produced additional guidance explaining types of academic misconduct and ways in which these should be addressed. The College, supported by the partnership with the University, has successfully improved students' understanding of sound academic practice.

2.78 The College Action Plan addresses the importance of ensuring consistency in the provision of individual written feedback, highlighted by external examiners and students. Training materials have been developed to support staff in providing high quality, consistent feedback online. Staff whom the review team met were fully engaged with the issues and keen to participate in ongoing staff development to develop their use of the new facility to provide feedback online which will facilitate greater consistency. The review team **affirms** the College's current work to improve the consistency of individual written feedback to students.

2.79 Assessment strategies and individual assessment tasks are designed to be as inclusive as possible to ensure every student is provided with an equal opportunity to demonstrate the achievement of learning outcomes. Staff whom the review team met demonstrated their understanding of inclusivity and a thoughtful approach to the provision of reasonable adjustments, which was confirmed by the comments of students met by the team.

2.80 The College fully implements the assessment procedures specified in the Provider policies and regulations. These enable students to demonstrate that they have achieved intended learning outcomes. The Expectation is therefore met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

### **Quality Code, Chapter B7: External Examining**

#### **Findings**

2.81 The Provider Quality Assurance Framework and Academic Standards and Quality Manual set out the enabling framework, policies and procedures to be implemented by colleges in relation to the appointment, roles and responsibilities of external examiners. This makes reference to Expectation B7 of the Quality Code. The detailed arrangements for the appointment of external examiners at the College are specified by the University and College JAAB. A template is provided for external examiners' reports that explicitly asks about the maintenance of threshold academic standards, the assessment process and comparability of academic standards. Provision is made for scrutiny of external examiners' reports within the College, through programme committees, annual programme reports and College action plans process.

2.82 The arrangements in place, including the Provider quality regulations, policies and procedures and the partnership with the University enable the Expectation to be met.

2.83 The review team tested the arrangements by scrutinising a range of documentation including the Provider policies and procedures, external examiners' reports and the responses to them, College Action Plans, assessment board and JAAB minutes and terms of reference. The review team also met students, and staff from the College, the Provider and the University.

2.84 New and replacement external examiners for programmes are proposed by Programme Leaders in accordance with the guidance set out in the Provider ASQM. The University Senior Standards and Quality Officer (SSQO) supporting the College critically reviews the proposals and provides feedback. When the officer is content that they meet both the expectations of the Kaplan Pathways ASQM and the University Quality Handbook, the proposal forms are received by the University External Examiner Appointment Panel (EEAP). The appointments are then formally confirmed by JAAB. Induction of external examiners is undertaken by the University and when they visit the College.

2.85 External examiners are invited to visit the College for an annual meeting that includes the assessment board. They are provided with a range of evidence to enable them to discharge their responsibilities. Where an external examiner is unable to attend the Assessment Board, they are required to confirm in writing their involvement in the assessment process and agreement with the decisions made by the board.

2.86 The team saw the agenda for the annual two-day visit by external examiners, where they are able to consider the learning and teaching resources and review samples of assessed work. All reports seen confirmed the appropriateness of the assessments, the academic standard for each award and comparability with standards in other institutions they are familiar with.

2.87 Reports are submitted annually to the Academic Director with the opportunity to submit a confidential report to the Provider in the event of serious concerns. Reports include opportunities for examiners to reflect on the extent to which recommendations from previous reports have been fulfilled. All the external examiners' reports scrutinised by the team used the Provider template and provide evidence that they were able to discharge their roles effectively. They provided detailed feedback to the programme teams, which was responded to appropriately by the Programme Leader and by the College.

2.88 Staff and students were aware of the role of external examiners and of their reports, which are made available to students via the VLE.

2.89 The review team concludes that the Provider policies and procedures are implemented diligently by the College, in partnership with the University, so ensuring that scrupulous use is made of external examiners. The Expectation is met and the level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

**Quality Code, Chapter B8: Programme Monitoring and Review**

**Findings**

2.90 The Provider QAF sets out the procedures for effective, regular and systematic annual monitoring and review of programmes, to assure and enhance their quality as detailed in Expectation A3.3.

2.91 The Academic Planning and Quality Committee (APQC) exercises strategic oversight of the outcomes of all colleges' programme monitoring and review to ensure consistency in the quality of provision across the network of colleges. Within the College, strategic oversight of the quality of provision is the responsibility of the College Senior Management Team.

2.92 These arrangements allow the Expectation to be met.

2.93 To test that the Expectation is met, the review team explored the effectiveness of the arrangements by examining programme annual monitoring reports and the supporting data sets, external examiner reports, College Action Plans, minutes of a programme committee and JAAB. The team also met students, and staff from the College, the Provider and the University.

2.94 The annual monitoring reports and minutes of a programme committee provided clear evidence that the APR process described in A3.3 is implemented effectively by the College. Students and staff whom the team met understood their role in monitoring and review and considered that issues raised by them are given due consideration, resulting in actions to enhance the programme where appropriate.

2.95 Key recommendations emerging from the APRs are recorded in programme action plans. Cross-college themes emerging from the APRs are identified and collated by the Academic Director and where appropriate taken forward to the College Action Plan. Staff were fully engaged with, and able to provide examples of, action being taken to address identified issues.

2.96 The Academic Standards and Quality of Programmes presentation (ASQP), which is drawn from the APRs, enables the APQC to conduct a systematic review of the appropriateness of learning opportunities across the Provider. Actions arising from this review are then incorporated into College Action Plans.

2.97 Recommendations from the ASQP are taken forward nationally by CLIQ and locally by colleges, as evidenced in the College Action Plan, and are reviewed and updated by colleges on a regular basis. Additionally, the JAAB analyses the APRs and provides a response to the College to ensure the ongoing provision of appropriate learning opportunities.

2.98 There is a defined process to deal with a closure of a course that will impact upon students who have already been made an offer of studying a given programme or who have been admitted to College.

2.99 The College implements the comprehensive Quality Framework to ensure the operation of effective, regular and systematic processes for monitoring and review of provision. The review team concludes that the Expectation is met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**



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

### **Quality Code, Chapter B9: Academic Appeals and Student Complaints**

#### **Findings**

2.100 The ASQM details the principles and processes for student academic appeals and student complaints, which would enable Expectation B9 to be met. To test the operation of the academic appeals and complaints process, the review team scrutinised the information available to students and held meetings with College staff and students.

2.101 Information on the academic appeals and complaints processes is available to students in their programme handbook and in the Assessment Rules and Regulations, both of which are available via the College Services page on the VLE. Students are also made aware of the appeals and complaints processes as part of their Welcome Week induction.

2.102 Students can make an informal or a formal complaint about the delivery and quality of services received from the College, or about the delivery and quality of teaching. The complaints process is as far as possible confidential, with the minimum number of staff involved. Informal complaints can be made to any member of staff, with the expectation of an early resolution. Formal complaints require the student to complete an online Complaint Form. Formal complaints are considered by the Head of College Services and if not resolved they are referred to the College Director. If unresolved to the student's satisfaction, students can request the College Director to appoint a member of staff unconnected to the case to carry out a second, independent investigation. If the student is still dissatisfied, they may put their concerns in writing to the Provider's Director of Colleges, who, after reviewing the evidence, decides whether the outcome was fair and reasonable.

2.103 The Provider introduced a revised complaints process in 2016-17 to ensure that students receive written confirmation when internal complaints procedures have been completed and what independent recourse options are available. On completion, the contents of complaints relating to academic provision is anonymised and forwarded to the PC, which considers if improvements can be made to enhance the student experience as a result. Outcomes of formal complaints are reviewed annually by the College SMT and at CEMB, to assess trends or issues.

2.104 Students must normally submit an academic appeal within three working days of formal receipt of their results from the Assessment Board. Students are advised about the appeal process, including the time limit for an appeal and the allowable grounds for an appeal when they receive their results in person. An Academic Appeals Form is submitted, with any supporting evidence, to the Academic Services Team. In Stage 1 of an appeal, the Programme Leader will normally attempt to offer an informal settlement. Where an informal settlement is not possible and where there are grounds for an appeal to go to Stage 2, an Academic Appeals Panel is convened by the Provider. Students are kept informed throughout the appeal process. All evidence is treated fairly and confidentially. The Provider monitors and evaluates the effectiveness of the academic appeals process annually.

2.105 Students and staff who met the review team had a clear understanding of where to access guidance on the complaints and appeals processes.

2.106 The review team found that the College operates the complaints and appeals processes in an effective manner. The review team therefore concludes that the Expectation is met and the associated level of risk is low.

**Expectation: Met**

**Level of risk: Low**

## The quality of student learning opportunities: Summary of findings

2.107 In reaching its judgement about maintaining academic standards, the review team matched its findings against the criteria specified in Annex two of the published handbook.

2.108 All Expectations are met. There are three good practices relating to opportunities staff receive to support student learning, the productive relationship between the College and University and the involvement of students as partners in the quality assurance and enhancement processes. There is one affirmation relating to the current work to improve the consistency of individual written feedback to students.

2.109 The review team concludes that the quality of student learning opportunities at the College is **commendable**.

### **3 Judgement: The quality of the information about learning opportunities**

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

#### **Quality Code, Part C: Information about Higher Education Provision**

##### **Findings**

3.1 The Provider's Public Information Policy covers the production of the prospectus and the provision of other information for students, including the website, with a nine-stage process for producing and signing off information contained in the prospectus. Public information on programmes is managed centrally by the Provider's Content and Marketing team, who work in liaison with Admissions, CLIQ, Compliance, Legal, Accommodation, colleges and partner universities. Translations of public information from English into other languages are based on previously checked and approved English content and are approved by a staff member who is a native speaker of the target language.

3.2 Formal agreements between the Provider and the University setting out the arrangements for delivering higher education through the College include the use of the University trademarks, and require all information given to students to be approved by the University. Policies and processes in place require that the partner university formally signs off published material at College and Provider level.

3.3 During prospectus production, relevant stakeholders are involved in checking the accuracy and completeness of the information, and the final version of the prospectus requires sign-off by the College Director, the Provider's Managing Director or Director of Colleges and the university partner. Similar processes are in place for approval of college and university-specific information.

3.4 The College prospectus and website content is produced and designed in consultation with the University. Student feedback is solicited on the prospectuses and the websites via a Provider post-arrival survey.

3.5 The processes in place for producing information on College programmes and ensuring it is accurate and accessible would enable Expectation C to be met.

3.6 To test the Expectation the review team scrutinised relevant documentation, including information available to students in hardcopy, on the website and VLE. The review team also met staff from the College, Provider and University, current students and alumni.

3.7 Prospectuses and webpages specific to the College or University reflect the brand elements of the University. The Cooperation Agreement covers approval processes for the use of the University's brand and logo in the Provider's International Pathways material. Each prospectus and relevant web sections are written and designed in close consultation with the partner university, using a joint logo where applicable, as well as content and design agreed with the University.

3.8 Staff concerned with recruitment and admissions, together with agents, receive frequent update training to ensure they provide applicants with accurate information.

3.9 College social media channels are maintained by trained College staff and monitored and audited by the central Content and Marketing team who also maintain

Provider Pathways accounts across the main social platforms. The Provider's in-house video team conducts a regular review of partner universities' YouTube accounts to obtain their latest promotional videos.

3.10 Pre-arrival guides for students are produced by the Content and Marketing team in liaison with the College, who check all information prior to publication. Programme handbooks produced by the College and approved by the PC are made available to students on the VLE. Guidance on informing students of changes to programmes is provided. A student handbook provides students with information on living in the UK and life at the College and is available on the VLE.

3.11 The College is responsible for ensuring that all information on its programmes is kept up to date. It was confirmed to the review team that there is annual process for checking the currency and accuracy of information, including module and programme specifications.

3.12 The students and alumni who met the review team were satisfied with the amount and accuracy of information provided to them before and during the application and admissions process, on arrival and during their studies at the College, including on the VLE.

3.13 The review team found that the Provider and University maintain oversight of the information provided by the College and that the College has effective processes to ensure that the information provided to students and other stakeholders is fit for purpose, accessible and trustworthy. The review team therefore concludes that the Expectation is met and the associated level of risk is low.

**Expectation: Met**  
**Level of risk: Low**

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

3.14 In reaching its judgement, the review team matched its findings against the criteria specified in Annex two of the published handbook.

3.15 The Expectation in this judgement area is met.

3.16 The review team concludes that the quality of the information produced by the College/Provider about its provision **meets** UK expectations.

## 4 Commentary on the enhancement of student learning opportunities

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

### Findings

4.1 While there is a centralised strategic approach to enhancement led by the Provider Senior Management Team (SMT), the ASQM provides for a College-centric approach to quality assurance and enhancement within a centralised framework, resulting in a combination of centralised and College-level initiatives to enhance the quality of student learning experiences.

4.2 The College implements the strategic approach to enhancement through its management structure and programme committees. Data is collected from students, as identified in B5, from staff and from other stakeholders including external examiners. It is analysed by the programme committee, which is required to produce an annual programme report that includes an enhancement plan for ongoing improvements to the programme. Students thus have a central role in the cycle of enhancement through the survey data they provide and through the programme committees.

4.3 The annual programme reports inform the College action plans, which include priorities for enhancement across the College. The APRs are also received and analysed by CLIQ, which produces an annual ASQP report containing a thematic analysis of issues identified across the colleges. It identifies priorities for enhancement to be led by the Provider, to enhance provision within the colleges as well as developing resources for staff to use. The College Action Plans provide evidence of a systematic approach to enhancement, including staff development, which is supported by CLIQ. The College Action Plan has a section for each action to record the evaluation and impact of progress made.

4.4 In summary, robust information is generated within the College that implements systems devised by the Provider. Management and Committee structures ensure that this is analysed locally and centrally and that action is taken to enhance provision. The continuing cycles of data collection, monitoring and review measure the extent to which enhancement activity has achieved its intended aims.

## Glossary

This glossary is a quick-reference guide to terms that may be used in this report.

User-friendly explanations of a wide range of terms can be found in a longer glossary on the QAA website: [www.qaa.ac.uk/glossary](http://www.qaa.ac.uk/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.

### Awarding organisation

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

### Blended learning

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

### Credit(s)

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

### Degree-awarding body

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

### Distance learning

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

### Dual award or double award

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

### e-learning

See technology enhanced or enabled learning.

### Enhancement

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



### **Expectations**

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

### **Flexible and distributed learning**

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

### **Framework**

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

### **Framework for higher education qualifications**

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

### **Good practice**

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

### **Learning opportunities**

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

### **Learning outcomes**

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

### **Multiple awards**

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

### **Operational definition**

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

### **Programme (of study)**

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

### **Programme specifications**

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

### **Quality Code**

Short term for the UK Quality Code for Higher Education, which is the UK-wide set of **reference points** for higher education providers (agreed through consultation with the

higher education community, and published by QAA), which states the **Expectations** that all providers are required to meet.

**Reference points**

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

**Self-evaluation document**

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

**Subject Benchmark Statement**

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

**Technology enhanced or enabled learning (or e-learning)**

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

**Threshold academic standard**

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

**Virtual learning environment (VLE)**

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

**Widening participation**

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

QAA2437 - R10448 - Aug 19

© The Quality Assurance Agency for Higher Education 2019  
Southgate House, Southgate Street, Gloucester GL1 1UB  
Registered charity numbers 1062746 and SC037786

Tel: 01452 557050  
Website: [www.qaa.ac.uk](http://www.qaa.ac.uk)