THEMATIC REVIEW 2015-2018

May 2019
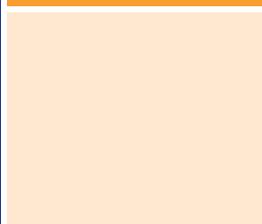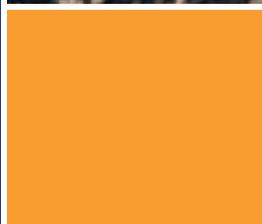
FOREWORD FROM DOMINIC SCOTT OBE, CHAIR OF THE BAC COUNCIL

The BAC's mission is to provide respected and rigorous inspection-based accreditation to enhance the standards and quality of independent further and higher education and training institutions.

As part of that mission, we have recently undertaken our first comprehensive thematic review of our Independent Higher Education (IHE) scheme, which we invite you to read to see what wider lessons can be learned.

There has not previously been an in-depth review of the IHE scheme, primarily because of the small number of inspections – 59 to date – that have been undertaken under the IHE scheme. We felt, however, that it was timely to conduct this review after the IHE scheme was updated in 2018 in order to give the BAC a benchmark to compare against in future reviews. It is our intention to conduct these thematic reviews periodically, and to disseminate the results among our various stakeholders.

The review has identified trends within the inspection reports, including areas that require improvements (e.g. do not meet BAC standards), and those of considerable strength or good practice. We expect that the results of the review will be utilised <u>internally</u> as we consider what additional support BAC can provide in areas where institutions have frequently been unable to demonstrate compliance; and <u>externally</u> to provide a useful indication to the wider higher education sector of how institutions can demonstrate good practice, as well as potential areas for improvement.

We will, therefore, analyse the results of the review, and consider how and where further research or resources would be best positioned to better support our accredited institutions; to this end, we would welcome comments from such bodies, or from the wide range of stakeholders with whom we work or who have interests in quality issues.

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SECTION 1: EXECUTIVE SUMMARY

The British Accreditation Council (BAC) is an independent external quality agency established in 1984 that aims to provide respected and rigorous inspection-based accreditation to enhance the standards and quality of independent further and higher education and training providers.

There are now hundreds of BAC-accredited colleges both in the UK and internationally that offer a wealth of academic programmes, including vocational and professional qualifications, foundation courses for university entry, and externally validated degree courses.

As well as providing clear guidance to prospective students, BAC accreditation encourages continued improvement in the general standards and quality of independent education institutions. BAC is not a membership organisation, and maintains an objective distance from institutions to preserve the value of accreditation. It is nevertheless dedicated to helping colleges in their efforts to continually improve.

BAC operates a range of accreditation schemes:

- College scheme
- Independent Higher Education scheme
- International Centre scheme
- International English Language Provider scheme
- Online, Distance and Blended Learning scheme
- Short Course Provider scheme

This review is related to the IHE scheme only.

Purpose of the thematic review

BAC commissioned via public tender a thematic analysis of reports of its IHE accreditation scheme. The analysis examined 63 reports of inspections conducted at 36 institutions over a three-year period (2015-18), 41 reports of international Higher Education (HE) inspections and 22 reports of UK HE inspections were analysed.

The purpose of the thematic review is to learn from experience and share that learning. In particular, the remit for the review is to:

- highlight good practice that has been identified in the inspection process;
- identify common themes or areas for improvement arising from the challenges or weaknesses that are identified, such as where standards are partially met;
- select one or more of the emergent themes for more detailed analysis and attention;
- provide holistic feedback and information to stakeholders[1] on the above; and
- contribute to knowledge about the IHE sector.

Using the inspection areas, key indicators, and reports as an evidence base, this report details the findings of the review.

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[1] See below for information about stakeholders with a direct or indirect interest in this matter.

Scope of the review

This is the first thematic review to be undertaken for BAC, and the author decided to focus on a maximum of two inspection areas. An initial quantitative analysis of partially met standards from all inspection areas revealed three clear contenders: General Academic Management and Administration; Teaching Learning and Assessment; and Quality Management Assurance and Enhancement. Following an analysis of strengths and recommendations, it was decided to focus on themes arising in the **General Academic Management and Administration** and **Quality Management Assurance and Enhancement** inspection areas.

Stakeholders with an interest in the review

The following stakeholders are identified as having an interest in the outcomes of the review, and in this report:

- BAC Trustees, the Accreditation Committee, the management and staff team, and the wider inspectorate;
- BAC-accredited institutions, particularly their Trustees, Boards of Directors, and senior managers;
- learners and staff at BAC-accredited institutions;
- organisations that may aspire to BAC accreditation;
- other accrediting and quality representative bodies or agencies with direct or indirect interest in the IHE sector, whether in the UK or internationally. For example, in the UK, the Quality Assurance Agency, the Council of Validating Universities (CVU) and individual validating universities, the UUK, Guild HE, and professional or regulatory bodies such as the Office for Students (OfS); and equivalent organisations and agencies outside the UK such as the European Association for Quality Assurance in Higher Education (ENQA); and
- those who fund or financially support learners or institutions such as employers, parents, government departments, or student loan companies.

The inspection process

The BAC's IHE scheme has been in operation for less than five years. It is a voluntary scheme to which institutions apply if they are seeking accreditation as a mark of distinction. The professional inspectorate, trained by the BAC, is drawn from across the UK higher education sector. For more details on the process and criteria, see the IHE scheme document.

Inspectors employ a common report template to make recommendations to the BAC through its Accreditation Committee. It is the Accreditation Committee that makes all decisions with regard to accreditation.

There are six inspection areas:

Governance, Strategy and Financial Management (GSFM)

General Academic Management and Administration (GAMA)

Teaching, Learning and Assessment (TLA)

Premises, Facilities and Learning Resources (PFLR)

Student Support, Guidance and Progression (SSGP)

Quality Management Assurance and Enhancement[2] (QMAE)

Each inspection area has a number of explicit standards that institutions are required to meet to gain or maintain accreditation. Each standard has a set of key indicators that inspectors are required to consider to determine whether a standard is met, not met, or partially met. Where any key indicator is not confirmed, the standard is judged to have been partially met.

Reports offer inspectors the opportunity to identify 'strengths' in certain inspection areas. Inspectors also make 'recommendations for improvement.'

Summary of key findings

1. The outcome of the initial quantitative analysis and discussion with the BAC confirmed that the focus of the review will be the themes emerging in the inspection areas **General Academic Management and Administration** and **Quality Management Assurance and Enhancement**.

2. Within these two inspection areas, there is little substantive difference between international and UK institutions in the broad themes that emerge as good practice or areas for improvement, although there are some differences in emphasis and specifics.

3. The **headline commendations for good practice** are:
    *   the employment of high-quality, experienced, and qualified staff;
    *   institutional support for staff;
    *   institutional culture and values characterised by good communication and robust management information systems and processes;
    *   an embedded and robust quality assurance culture that includes externality and systematic monitoring, evaluation, and action planning for enhancement; and
    *   investment in infrastructure, including technology and governance.

4. The overarching **headline challenge or area for improvement** is **governance**. This arises from the frequency with which the following repeated actions and recommendations occur in the sample:
    *   the need to systematise, formalise, document, and publish policies, processes, and procedures;
    *   the need to introduce, formalise, or implement more consistently institutional arrangements for reviewing and supporting staff;
    *   improve and systematise the capture and evaluations of data and other information to facilitate more reliable, data-driven management decision-making, as well as quality assurance and enhancement;
    *   formalise and systematise quality arrangements (including the introduction of key performance indicators [KPI]) to improve action planning, accountability, transparency, and loop-closing; and

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[2] Across the period covered by this thematic review, there were three different versions of the IHE scheme and, therefore, report templates; there were separate schemes for international and UK IHE, while an updated and amended scheme and template were introduced in 2018. Inspection areas have remained the same, although there were some small changes to their titles; for example, before 2018, the GAMA did not have the word 'General' in its title. This report adopts current usage. Where the numbering of standards and/or key indicators has changed across these versions, this has been mapped into one version to facilitate a robust analysis.

- improve clarity about lines of responsibility, and accessibility and reliability of information.

5. The umbrella issue of understanding, implementing, and valuing investment in good governance is seen to underpin both the good practice and the themes that have been identified for improvement.

6. The conclusion of the report offers suggestions for areas of further work to support institutions to improve their governance, including identifying and sharing good practice.

7. The inspection reports provide a reliable basis for analysis, giving confidence that inspection areas, standards, and key indicators are understood and applied in consistent and coherent ways by the inspectorate. The conclusion of the report contains a suggestion to explore what further value might be gained from this resource.

SECTION 2: REPORT ON THE THEMATIC REVIEW

2.1 Methodology and identification of themes

The evidence base for this desk-based review is all the published inspection reports over the period in question (2015-18), including every kind of inspection:

Full inspections

Reaccreditation

Interim/spot checks

A total of 63 published reports yielded a comprehensive evidence base for an initial quantitative analysis.

A quantitative analysis was undertaken to discover whether there were any clear front-runners in terms of inspection areas. The key indicators that led to 'partially met' judgements were logged and analysed for all inspection areas. All the inspection reports provided by the BAC and deemed within the scope of this review were read and analysed. A few reports identified as anomalous and potentially skewing the analysis were removed from the sample, consolidating the evidence base to 59 reports:

37 international HE inspection reports of 22 institutions

22 UK HE inspection reports of 13 institutions

Of the **37 international reports**, eight are full inspection, eleven are reaccreditation, and 18 represent interim or supplementary inspections.

Of the **22 UK reports,** two are full inspection, ten are reaccreditation, and ten interim or supplementary inspections.

The total number of standards is 27. Inspection areas have a variable number of standards, while standards have a variable number of key indicators. The total number of key indicators across all standards is 165, and the distribution of standards and key indicators in each inspection area is as follows:

GSFM – three standards with 12 key indicators (1.1-3.2)

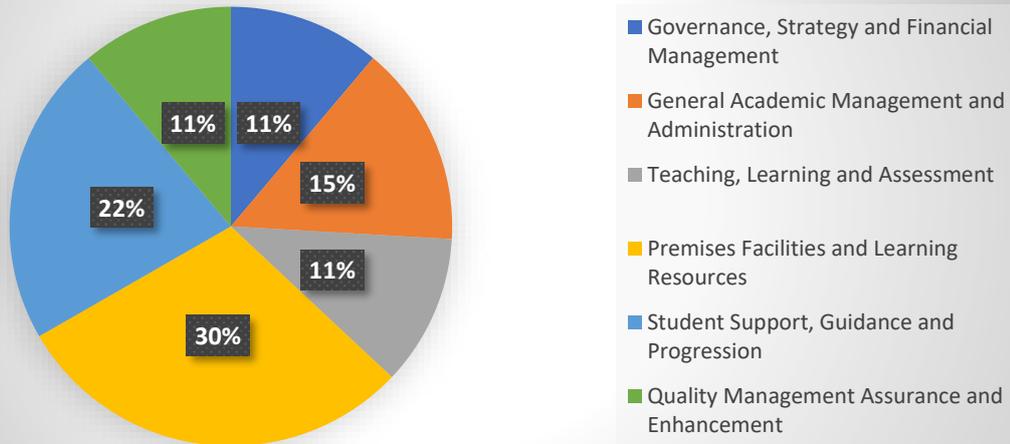GAMA – four standards with 33 key indicators (4.1 – 7.8)

TLA – three standards with 28 key indicators (8.1 – 10.5)

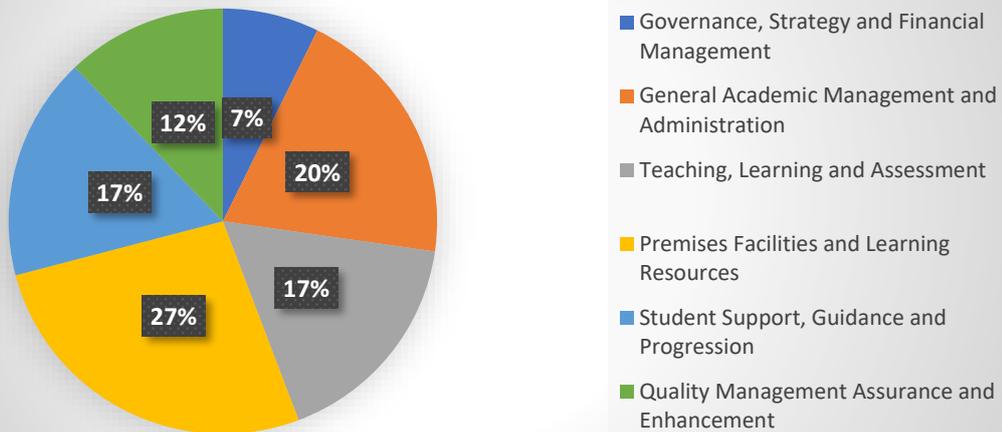SSGP – eight standards with 44 key indicators (11.1 – 18.5)

PFLR – six standards with 28 key indicators (19.1 – 24.3)

QMAE – three standards with 20 key indicators (25.1 – 27.6)

Figure 1. Number of standards in each inspection area

Legend:
- Governance, Strategy and Financial Management
- General Academic Management and Administration
- Teaching, Learning and Assessment
- Premises Facilities and Learning Resources
- Student Support, Guidance and Progression
- Quality Management Assurance and Enhancement

Values: 11%, 11%, 15%, 11%, 30%, 22%

Figure 2. Number of key indicators by inspection area

Legend:
- Governance, Strategy and Financial Management
- General Academic Management and Administration
- Teaching, Learning and Assessment
- Premises Facilities and Learning Resources
- Student Support, Guidance and Progression
- Quality Management Assurance and Enhancement

Values: 7%, 12%, 20%, 17%, 27%, 17%

The strengths identified in reports, generally under inspection areas, were logged and analysed. Recommendations for improvements are not always recorded under inspection areas, so judgement was used to categorise them as such. This was straightforward in most cases.

A quantitative analysis was performed of the UK and international inspections separately, and also aggregated to achieve an overview. Following a discussion of the quantitative analysis with the BAC, it was agreed to focus the review on identifying the good practice and common themes arising in the GAMA and QMAE inspection areas.

The second stage of the review involved a qualitative analysis of the common themes and issues in strengths, action points, and recommendations specific to GAMA and QMAE. The evidence base was refined to remove anomalies that skewed results, take account of the impact of changes over time to the report template, and make the necessary adjustments to validate the indicative results.
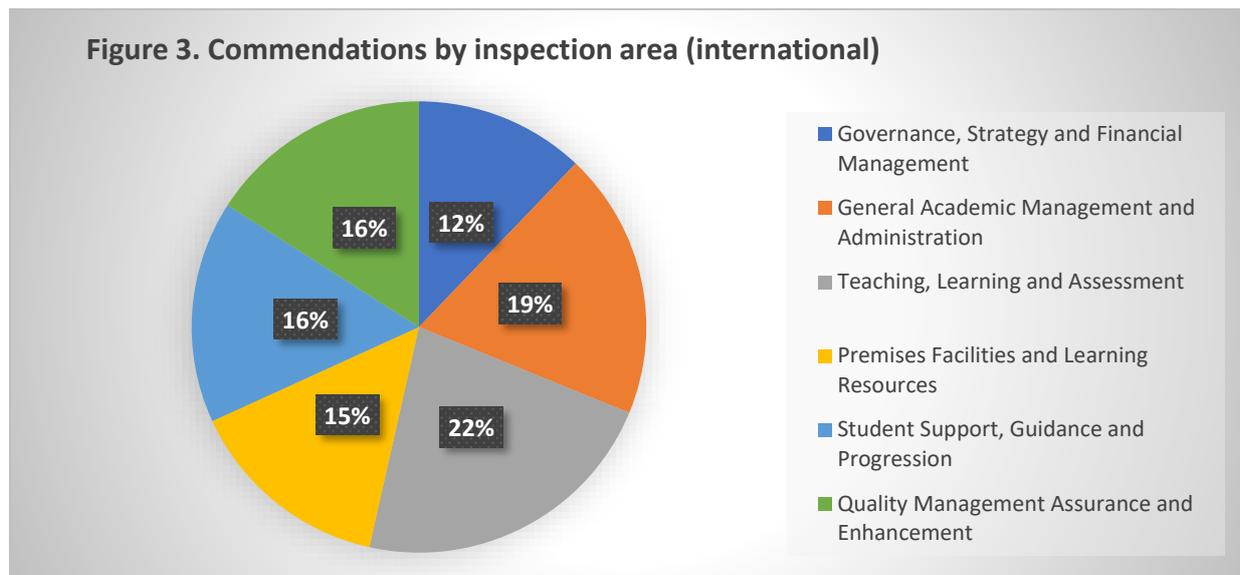
The report uses the terminology of inspection reports, while a template report is provided for information in **Appendix 1**. Direct quotations from inspectors' comments are included throughout in italics. Institutions and inspectors are anonymised.

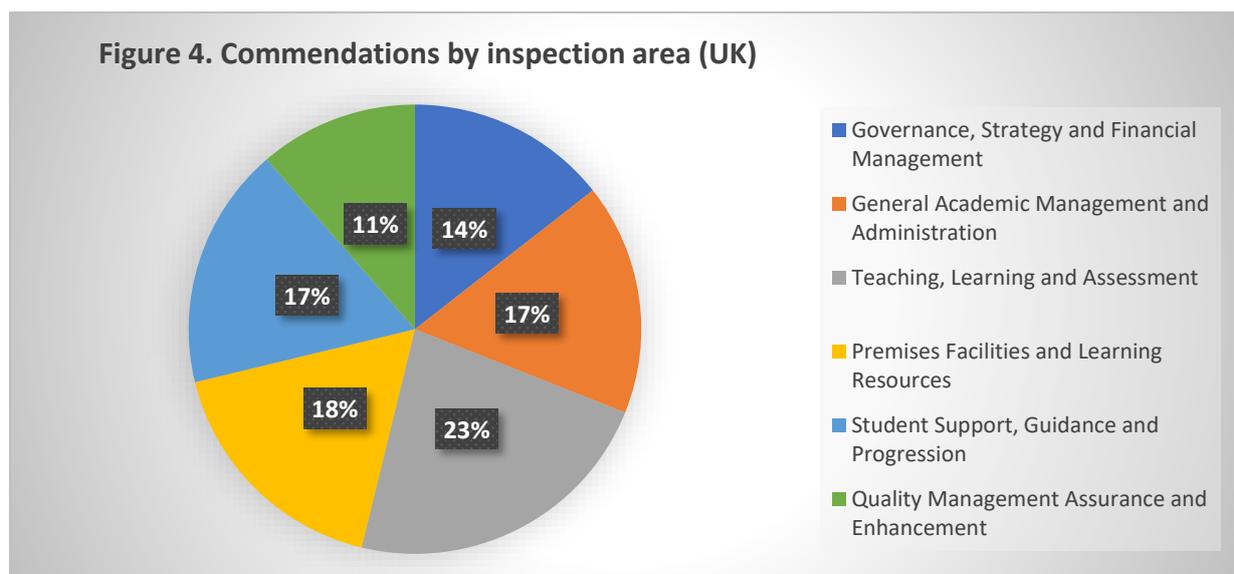## 2.2 Analysis of strengths and identification of good practice

Inspectors are invited to identify institutional strengths in each inspection area. In the 59[3] reports reviewed, there are a total of approximately 281 commendations indicating strengths. It is appropriate that the BAC inspection process recognises and commends good practice, and in the majority of reports, these are clearly identified under an inspection area, with only a few exceptions requiring judgement in allocating them.

In the 37 reports of international inspections, there are a total of approximately 149 commendations indicating strengths.

For international inspections, the distribution of commendations is as follows:

Figure 3. Commendations by inspection area (international)

- Governance, Strategy and Financial Management — 12%
- General Academic Management and Administration — 19%
- Teaching, Learning and Assessment — 22%
- Premises Facilities and Learning Resources — 15%
- Student Support, Guidance and Progression — 16%
- Quality Management Assurance and Enhancement — 16%

In the 22 reports of UK inspections, there are a total of 132 strengths identified. The distribution of commendations across inspection areas is as follows:

Figure 4. Commendations by inspection area (UK)

- Governance, Strategy and Financial Management — 14%
- General Academic Management and Administration — 17%
- Teaching, Learning and Assessment — 23%
- Premises Facilities and Learning Resources — 18%
- Student Support, Guidance and Progression — 17%
- Quality Management Assurance and Enhancement — 11%

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[3] Following discussions with the BAC, it was agreed to remove from analysis four inspection reports for one institution because they disproportionally impacted the overall results.

2.2.1 Strengths: General Academic Management and Administration

Across the UK and international inspections, institutions received 52 of the 281 commendations (18.5%) under the **General Academic Management and Administration** inspection area.

An analysis of the commendations that arise under the GAMA inspection area shows no substantive difference in themes between UK and international institutions. The areas of good practice inspectors most frequently identify are, broadly:

- The quality of staff;
- Institutional support for staff;
- Institutional culture and values characterised by good communications, robust management information systems, and processes; and
- Investment in infrastructure, including technology and governance.

Commendations include praise for institutions for their recruitment, induction, and support for high-quality and appropriately experienced staff. We learn of '*lecturers who have industry experience enhancing the teaching delivered*,' and elsewhere, that a '*team of well qualified professional artists ensure that [the] curriculum and its delivery are of high quality and industry standard*.' Institutions are commended for '*experienced management at both director and executive levels*'; for employing '*well qualified managerial and administrative staff,*' and '*capable and efficient administrative staff who supply strong support to students and staff*'; and for being '*well-managed by appropriately qualified and experienced staff.*'

Institutions are commended for their commitment to staff induction, and for oversight and continuing professional development (CPD) for staff. Commendations demonstrate strong support for the value of peer observation of teaching, which is regarded as '*effective and contributes to teaching improvements.*'

Equity and transparency in access to financial support for development opportunities is singled out for praise. For example, '*all staff*' have opportunities '*to take … courses with the fees waived, which provides equality of opportunity across the workforce.*' We also hear of '*extensive provision of continual professional development for staff which supports the provision and contributes to the up-skilling of the work force more widely*'; and of '*active support of … staff to engage in external conferences and to acquire further qualifications to enhance their research, subject knowledge and pedagogy*'; as well as '*support for academic staff leading to a continuously augmented internationally recognised research profile.*' Elsewhere, there is praise for '*the tracking of scholarship … and the encouragement of research and scholarship through … Teaching and Learning and Postgraduate Studies Committees.*'

Wider issues of institutional culture, such as good internal communications (supported by technology), are singled out for commendation. Reports touch on 'e*xcellent communications between staff and students*'; '*regular formal and informal meetings*' ensuring '*good communications across the institution*'; and '*well-established and effective communication arrangements at all levels across the Institution.*' Good communications foster 'd*evelopment of a strong collegiate atmosphere.*'

Consistency, clarity and quality of information, and robust infrastructure in terms of management information systems are also features of good practice highlighted in the commendations. For example, '*well-documented policies and procedures,*' '*comprehensive and clear*' documentation, '*first class record keeping systems and procedures,*' and '*clear*

and effective' reporting systems are all cited as examples of good practice. Clarity about roles and responsibilities is also regarded as commendable.

Effectiveness and efficiency in administration and management are aligned with the extent to which institutions have embedded good governance and appropriate management information systems. This being so, we learn of the importance of '*rigorous academic management through the committee system and effective oversight by [the] Academic Board*'; while '*efficient administrative management is well supported by effective management information systems*'; and elsewhere, there is praise for '*bespoke information technology based systems to assist in the planning and administration of courses and classes.*'

Joined-up approaches to the deployment of technology are commended too. For example, '*integration of the student administration system (SAM) with the virtual learning and course management system enables both the administration and teaching and learning functions to operate from the same consistent data and provide reports for senior management review*'; while elsewhere, an '*interactive information online system*' is commended for '*enabling all stakeholders to access information relating to the institutions' programmes, administration and activities is particularly beneficial to students, staff, and senior management.*' The relationship between good data, effective and efficient monitoring, and Quality Assurance and Enhancement is implicit, and the authors mention commendable '*close monitoring of progress, with defined action plans,*' as well as '*first class monitoring and data collection systems in place.*'

2.2.2 Strengths: Quality Management Assurance and Enhancement

Across all inspections, of the 281 commendations, 32 (or 11%) appear under the **Quality Management Assurance and Enhancement** inspection area. This is a relatively small proportion, suggesting that this is an area where institutions would benefit from sharing good practice, targeted support, and development. The areas most frequently identified as good practice are, broadly:

- institutional culture and values characterised by good communications, robust management information systems and processes;
- embedded and robust quality assurance culture that includes externality and systematic monitoring, evaluation and action planning for enhancement; and
- investment in infrastructure, including technology and governance.

There are frequent comments in reports that identify '*a good working relationship*' with a Validating University as a positive influence on the development of a quality culture in an institution. Reports also suggest that this is most effective when institutions do not simply abdicate responsibility and ownership of their own quality arrangements, but rather engage with their validating partners to build their own capacities.

Some of the same characteristics that are commended in the GAMA inspection area re-appear in QMAE, and again, there is no substantive difference between UK and international inspections in the themes cited as good practice. Open and effective communication is again cited as contributing to effective management, in this case of quality; we hear of '*open, effective and multi-dimensional communication … which contributes to effective quality management and enhancement,*' and of '*open communication channels, which enable the Institution to meet its aims of providing teaching and learning in an environment that is exciting, current and driven by quality practices*.'

Again, the added value of a professional and experienced staff team who possess shared values and commitment to quality is highlighted as a strength. For example, a report states that '*an effective*

Quality Department with functional staff responsibilities will facilitate cross-institution monitoring and quality assurance,' while the recruitment of '*highly qualified academic staff who are active researchers*' is seen as a mark of commitment to quality.

At the level of senior appointments in institutions, recognition in roles and responsibilities for Quality is seen as 'exemplary'; and elsewhere, '*a detailed reporting structure on quality management throughout the hierarchy of the Institution*' is commended. An institution's strengths in its quality management is seen as closely aligned with its effectiveness as a higher education institution. For example, we find that '*well-developed Quality Assurance policies, procedures and reports with oversight by senior management effectively inform and enhance the strategic management of the Institution.*' Similarly, a '*commitment to self-examination and external evaluation to identify strengths and weaknesses, monitor follow-up action and share good practice*' is celebrated as good practice.

The markers of an embedded quality culture in an institution – as expressed in these commendations – can be summarised as:

- clear evidence of routine and systematic monitoring and evaluation, leading to quality enhancement via effective planned action (which is itself monitored);
- well-documented and -understood policies, processes, and procedures that are operationalised in a transparent way;
- externality; and
- routine and systematic collection and evaluation of feedback from stakeholders.

Institutions are praised for '*proactive and close monitoring, which enables effective action to be taken to address problems and to improve the provision*' and for '*a robust annual review process.*' In addition, there are commendations for '*extensive monitoring and reviewing of all aspects of the …provision, internally and externally, supported by very clear and detailed documentation*'; and for '*careful tracking of actions from review processes.*' Repeatedly, being open to externality in quality processes is commended; for example, '*the concept of including external academic membership on the Institution's Academic Board ensures that external scrutiny is appropriately focused on the Institution's academic governance.*' Elsewhere, an institution is commended for working '*closely with its validating partners and is receptive to external comment,*' while '*positive external examiners' reports*' are seen as indicators of quality assurance arrangements that are functioning well. Another very common area attracting positive comment is where inspectors find good two-way feedback between an institution and its stakeholders. Evidence of '*regular, clear and systematic stakeholder feedback … of both internal and external stakeholders … which is rigorously analysed and evaluated*' receives recognition and praise. The extent to which feedback '*informs quality assurance and quality enhancement procedures*' or is '*used effectively to inform enhancement*' and is '*transparently responded to through an appropriate communication system*' is again commended.

The establishment and maintenance of an embedded quality culture in an institution is often (whether implicitly or explicitly) related to its governance arrangements in reports. In terms of accountability to internal and external stakeholders including Boards of Directors, Trustees, and sources of student funding, they consider it fundamental to receive assurance that an institution is competent and effective in QMAE. Good governance offers the means for an institution to set, share, and maintain its values, and to give assurance to all stakeholders about the probity and integrity of the learning experience and qualifications it offers.

This report will go on to explore this over-arching theme in relation to the analysis of required actions, whereby standards are judged to be partially met, and the recommendations for improvement. Since strengths are identified under inspection areas, it is perhaps unsurprising to find

that the challenges faced by institutions seeking to meet standards in these two inspections areas are the flip side of the strengths of those that do meet the standards.

## 2.3 Analysis of themes emerging as challenges or requiring improvement

The evidence base for identifying the emergent themes in the two selected inspection areas (GAMA and QMAE) is:

- the key indicators that were judged to be not present, and resulted in a judgement of 'partially met';
- actions required to address partially met standards; and
- the recommendations for improvement that are specified in reports.

The following chart shows the number of partially met judgements per inspection area for both international and UK inspections.

**Figure 5. Percentage of partially met judgements per inspection area**
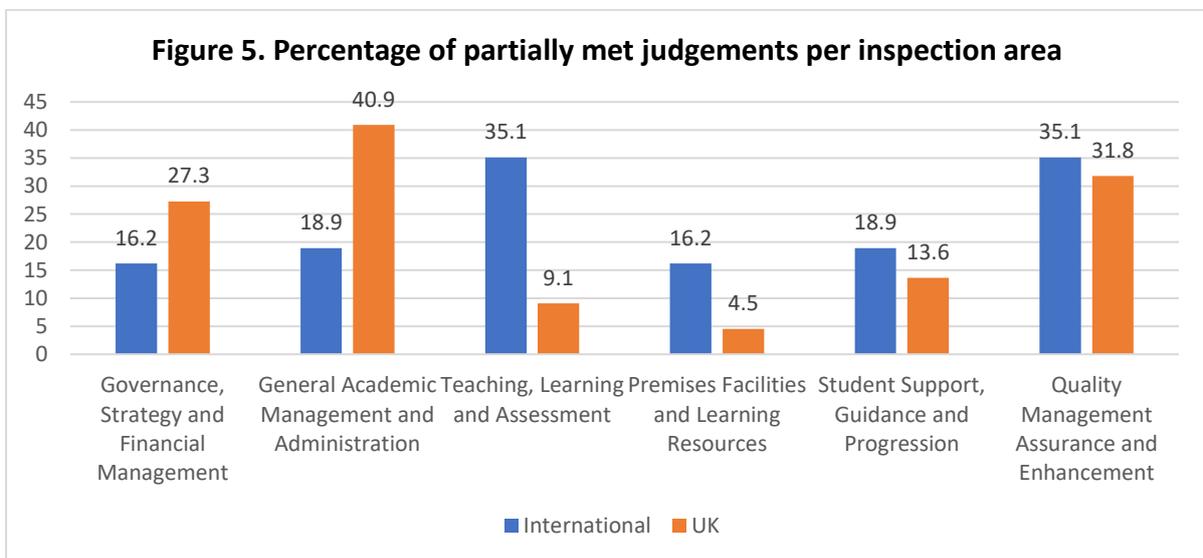
In the 37 reports of international inspections and 22 UK equivalents, a total of 291 recommendations have been logged in reports to support improvements.


Figure 6. Number of recommendations
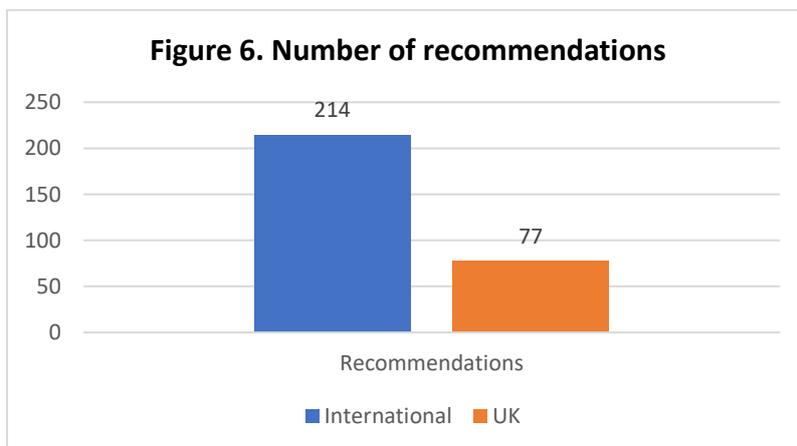
Recommendations are not always recorded under inspection areas, so judgement was used when allocating them to an inspection area. Occasionally, where the wording of a recommendation suggests it could be placed under two different inspection areas, it has been counted twice (once

under each relevant inspection area). On the whole, however, it was not difficult to allocate a recommendation to one specific inspection area.

Figure 7. Percentage of recommendations per inspection area
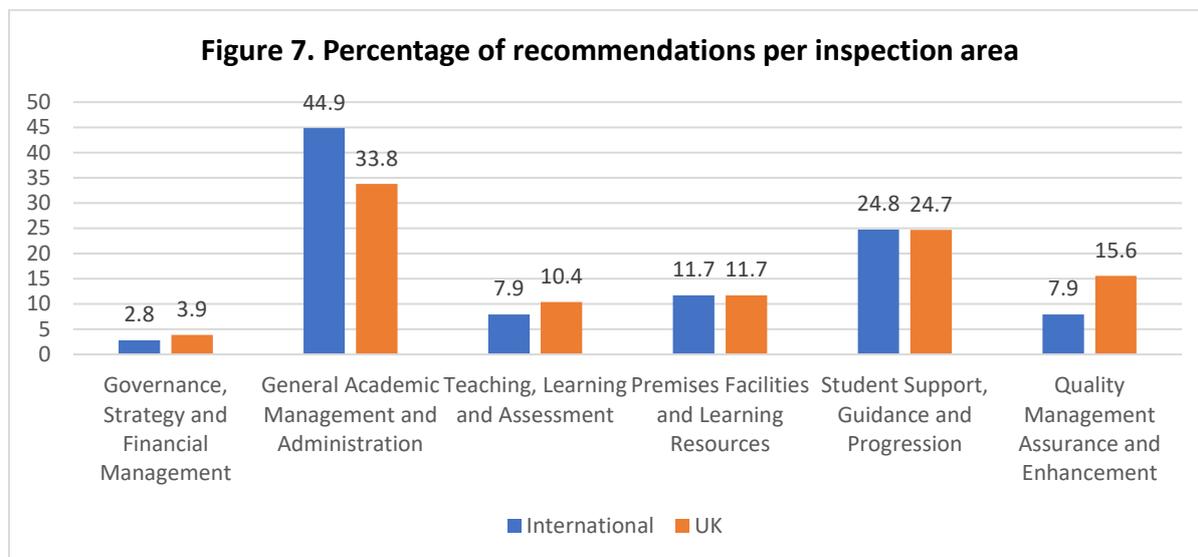
2.3.1 General Academic Management and Administration

There are seven instances of partially met judgements for GAMA in reports from international inspections, and nine from UK inspections.

Figure 8. Percentage of partially met judgements for GAMA by location
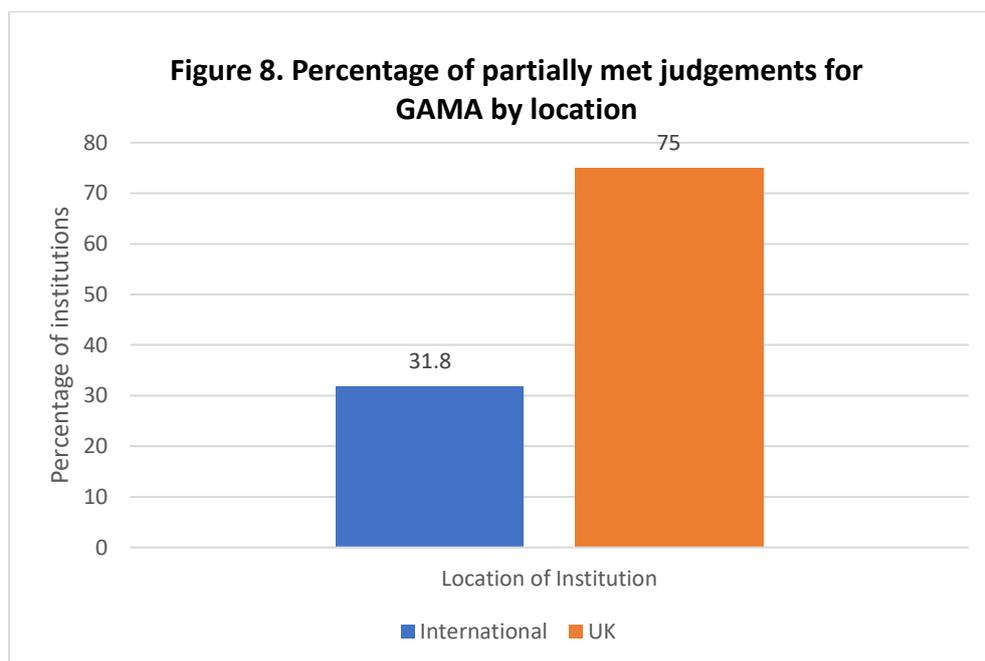
The proportional increase in incidence of GAMA actions arising from UK inspections is striking. As Figures 7 shows, recommendations that fall under the GAMA inspection area account for 42% of all recommendations, and 45% of those recorded in international inspection reports. This suggests that while threshold standards are met, inspectors also find cause to direct the attention of institutions outside the UK to this area.

Standard 4 in GAMA – '***The institution is effectively managed***' – possesses 56% of the instances of key indicators requiring action in this inspection area (see Figure 5). Across both UK and international inspections, there are two broad themes in which the actions required in reports for

this inspection area can be placed:

- the need to formalise, document, and publish policies, processes, and procedures; and
- The need to introduce, formalise, or implement more consistently institutional arrangements for reviewing and supporting staff.

There is some overlap between these two broad themes, but the recurrence of actions referring to 'formal appraisal,' 'classroom observation,' CPD, and support for research indicates that it should be regarded as a discrete theme.

Given that some BAC-accredited higher education institutions are of a relatively modest size in terms of student and staff numbers and range of HE provision, it is perhaps understandable that informal arrangements are regarded by the institutions as effective and preferable. As one report puts it:

> *Most decision making is conducted through informal discussion, which given the low student numbers and the low turnover of staff, is largely effective.*

> *While the small size of [X] does not warrant an extensive committee structure, there is a need for a formal and transparent reporting mechanism and structure that is not reliant on the actions of a few key staff. For example, it is not possible to trace how student and staff comments find their way through the University structure to inform decision-making.*

However, there are risks inherent in informality, and it is these risks that BAC standards and requirements can mitigate. Aside from operational business risks such as an over-reliance on individuals who possess knowledge of how things are done, the development of more formal documented and published policies and procedures are indicators of the transparency and consistency that are characteristic of good governance.

The need to formalise, document, and publish policies, processes, and procedures

In comments in reports and the action required to address partially meet Standard 4, we find regular reference to an absence of '*comprehensive policies and procedures for staff and student conduct*' and '*of documented administrative policies and procedures to support current practice.*' As is suggested here, it is sometimes clear that inspectors find evidence of good custom and practice in terms of policy and process, but often, this is not formalised and documented. Actions, therefore, often centre on requiring *'formal written policy,'* and in some cases, institutions are required to 'develop and publish' policies that do not exist. Social media, discrimination and abusive behaviour, and equality and diversity policies are examples of this.

In many cases, comments are explicitly framed to draw attention to the benefits of better governance and its relationship to good management in the HE context. Institutions are found to have:

> *defined but mainly undocumented management structures, which have worked well to date. … However, responsibilities are not, in a minority of cases, formally delineated. … this method of operating … is … unsustainable as the Institution grows.*

Inspectors' comments highlight the potential contribution that fully meeting BAC standards for GAMA can have for sustainability and efficiency, as an institution grows. This supports the view of BAC accreditation as a developmental tool for institutions (see the conclusions and areas for further development in Section 3 of this report).

As noted in Section 2.2 above on good practice, systematic, well-documented, and formalised arrangements are recognised as a mark of good governance and good management practice. Conversely, institutions receive partially met judgements when, for example, '*there are no formal terms of reference for the committees or boards*,' or they are required to '*formalise the reporting structure including purpose, terms of reference, membership, process and reporting lines for each committee or meeting*.'

Action planning is an area that receives attention in terms of both required actions and recommendations, with institutions asked to '*formalise and document … reporting, action planning and review processes … to allow a more proactive approach to operational management and improvement planning*.' Deficiencies with action planning recur as a theme in the QMAE inspection area, as considered in Section 2.3 below. In Section 3, suggestions are provided as to how the BAC might share good practice and support institutions to better understand the value of action-planning.

One of the challenges already identified in terms of documenting and publishing is the need for version control and for updating in a systematic and routine way. Institutions are required to '*ensure that all information, internal and external, is up-to-date and accurate*.' This includes regular references to out-of-date information on websites, leading to requirements for '*procedures for ensuring the accuracy and currency of publicity material*.'

The need to introduce, formalise, or implement consistently institutional arrangements for reviewing and supporting staff.

Recognition of institutional support for staff is one of the areas of good practice that receives commendation in some institutions, as discussed in Section 2.2 above. However, across reports, there are many examples of inspectors being unable to find sufficient evidence that institutions are meeting BAC expectations in this regard. Once again, it is notable how often informal or inconsistent application of arrangements is mentioned, and that institutions are required to 'formalise' arrangements for mentoring, peer observation and, time and again, staff appraisal. The following quotes from reports are typical of many:

> *There is no annual performance review scheme in place. However, the current arrangements enable informal discussions to take place.*

> *There is no formal appraisal process in place and classroom observations are not undertaken.*

> *A suitable performance review system, involving a scheduled recorded conversation, must be introduced.*

> *Existing informal staff appraisal and development procedures should be extended to include a measure of recording to further increase transparency and as a means of identifying and formally disseminating good teaching practice across the College*

> *Academic staff are monitored through a process of peer teaching observations, after which they are able to discuss their progress and aspirations with a senior member of staff. These discussions are not formally recorded.*

Equity and fairness are two of the areas that BAC standards can help safeguard, and reports show that applying equity and fairness to institutional support for staff development, scholarship, or research is a potential risk area in this respect for institutions. Actions and recommendations focus on establishing '*a more formal system for staff to apply for support to develop their skills'* or '*to seek support for their continued academic development*.'

From the frequency and nature of comments and actions required on staff appraisal, this is a topic where the BAC could consider sharing good practice and offering developmental support to institutions. See Section 3 below for further information.

2.3 Quality Management Assurance and Enhancement

There are 13 instances of partially met judgements for QMAE in reports of international inspections, and seven from UK inspections. A total of 12 of the 22 institutions represented in the sample of 37 international inspections and seven of the eight UK institutions that are in the sample of 22 UK inspections received partially met judgements. It is possible that the relative size, scale, and range of HE provision is a factor in the difference here; BAC-accredited institutions outside the UK tend to have larger numbers of students and HE programmes, while those in the UK are relatively smaller scale. It may, therefore, be more challenging to implement infrastructure and resources to support the BAC's QMAE expectations.

Figure 9. Percentage of partially met judgements for QMAE by location
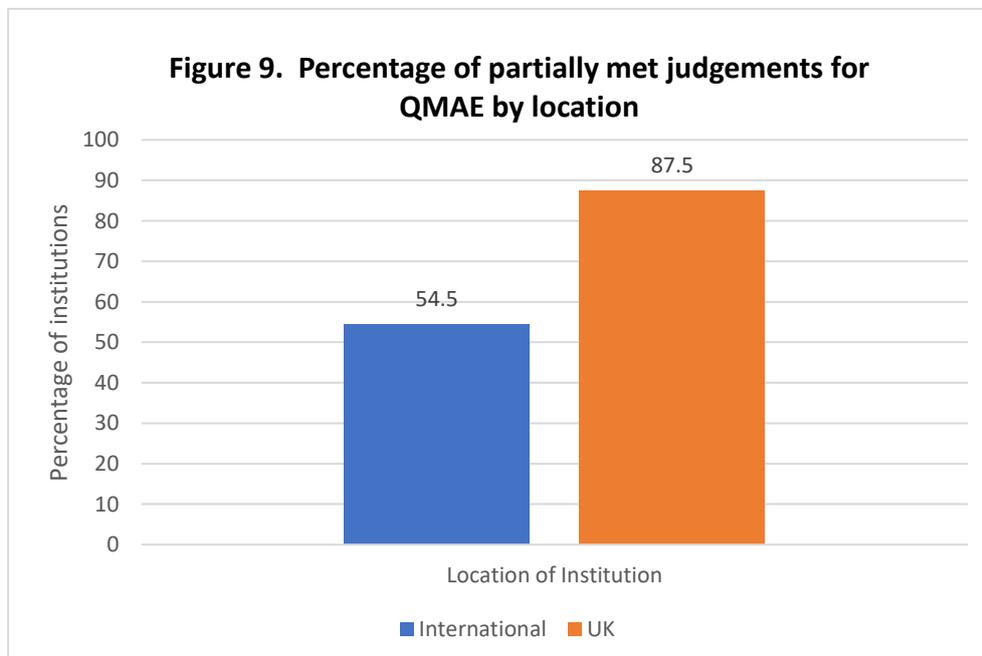
Key indicators under Standard 25 in the QMAE inspection area has the highest incidence of action required. A total of 15 of the 23 instances (65%) under QMAE occur under this standard: *'The institution has effective systems to review its own standards and assess its own performance*.'

Key indicator 25.6 – 'All programmes are subject to annual review and to full revalidation every five years' – has the highest incidence (x 5 or 33%, including x 2 high priority). It is notable that these five are all in the context of international inspections, and appear to arise where the institution has its own awarding powers. Where an institution has one or more HE programmes offered in partnership with a UK university for a UK award, which have formal validation and periodic review requirements, this is contrasted with the programmes the institution is providing for its own awards, where no such requirements are in place. For example, one report requires implementation of '*a periodic review process for all programmes not validated by X.*'

Themes that emerged in the actions required to address partially met judgements in QMAE are consistent with – and in some cases very similar to – those identified above for GAMA:

- the need to formalise, document, and publish policies, processes, and procedures. This includes formalising and systematising quality arrangements to improve action-planning, accountability, transparency, and loop-closing;
- improve and systematise the capture and evaluation of data and information necessary for quality management to facilitate more reliable, data-driven QA and management decision-making. This includes concerns raised about institutional overview of quality; those related to KPIs; and stakeholder engagement and feedback; and
- improving clarity about lines of responsibility, and the accessibility and reliability of information.

The many references to staff appraisals and peer observation of teaching in Section 2.3 occur in the context of teaching quality, and so are not discussed further here.

The umbrella issue of understanding, implementing, and valuing investment in good governance can be seen to underpin both the good practice recognised in Section 2.2, and the themes that have been identified for improvement.

In this inspection area, the relationship to matters of governance arises from an overarching need to formalise and systematise quality arrangements to improve accountability, transparency, and loop-closing. There are related issues of clarity about lines of responsibility, accessibility of information and, as with GAMA, capturing information/ data, and evaluating it in more formal and more holistic ways.

In terms of specific quality processes, those that attract regular comment are action planning; the identification and use of KPIs; periodic review; and feedback mechanisms, including external examiners.

There are regular actions required to encourage institutions to conduct a systematic annual institutional overview of the quality of their provision. The relationship between quality management and enhancement and the quality of management decision-making is, more broadly, a feature of the actions required in the QMAE inspection area. For example, an institution is reminded that clear evidence of a systematic overview at the institutional level '*of reports from all parts of its operation, and where strategic decisions are subsequently taken for enhancement, using action plans*' is expected.

Again, consistency and transparency – key tenets of good governance – are invoked as amongst the benefits to be achieved in addressing deficiencies. Occasionally, the link with governance is very explicit:

> *no evidence was seen of a reporting procedure, which provides a full overview of the University's performance, producing information which was then considered on an annual basis by the senior bodies … and by the Board of Trustees.*

Another requires '*information on the overall review of institutional performance*' to be '*available to the Board of Trustees, for consideration on a periodic and systematic basis.*'

There are many examples in reports requiring action on '*flow charts to demonstrate clearly to all stakeholders the processes and where responsibilities and accountabilities*'; '*to formally document … policies and procedures for academic quality management*'; and '*produce a comprehensive … quality handbook containing all the relevant quality … and the committee structure.*' These issues are clearly associated with governance.

Often, the link with governance is implicit, rather than explicit. While there is an inspection area (GSM) that includes governance, it may be helpful for the BAC to consider more explicit referencing of governance across inspection areas and in reports (see Section 3 below).

Improved understanding and implementation of appropriate governance would assist institutions in addressing a range of issues commonly raised under QMAE. For example, a report notes there is '*scope for greater transparency in how action plans are reviewed and communicated through the organisation,*' and goes on to say that '*The absence of a clear reporting structure, with explicit reporting lines, renders the process more opaque than is necessary.*' Another report insists that '*the lines of responsibility for the management and use of information*' be clarified, documented, and shared. These are examples of a more nuanced link between BAC requirements and institutional governance.

In Section 3 below, some suggestions are provided as to how the BAC might support institutions to better understand and implement effective governance that is proportionate to their size and fit for purpose.

The collection and evaluation of appropriate data to inform quality assurance and enhancement is also the subject of actions and recommendations. Across the HE sector, there is an expectation that 21st-century quality assurance and enhancement is data-driven and evidence-based, and the comments in reports reflect this expectation. Reports '*strongly encourage*' development towards '*the use of data in informing … management decisions, using … management information systems to … full potential and embedding this in its wider practice. For instance, in course evaluation.*'

Related to this are actions requiring institutions to identify and broaden the application of KPIs in their quality management and enhancement. For example, we read that '*Key performance indicators … are specified in terms of achievement rates, which are course specific. This represents a limited focus for KPIs*; while reports also offer suggestions to assist institutions: '*for example, given the Institution's commitment to providing access to higher education, it would be appropriate to have related KPIs against which the Institution could gauge its performance.*'

Reports encourage institutions to avoid the tendency to silo their QA processes for individual programmes, and to seek opportunities to, for example, '*identify key performance indicators to monitor and evaluate student outcomes and utilise these within its overall monitoring processes,*' as well as '*articulate a set of specific performance indicators to cover all the provision and enable year-on-year comparisons and analysis.*'

Stakeholder engagement and externality are two separate but related common themes. As seen in Section 2.2, good practice is celebrated, where an inspection finds openness to external scrutiny and two-way stakeholder communications. Where this is seen as deficient, institutions are enjoined to '*engage systematically with the wider community*' and '*ensure … full benefit of the input of employers and industry*.'

There are regular actions or recommendations focused on gathering feedback and intelligence from stakeholders, and on informing stakeholders – including external examiners – about what has happened in response to the feedback they have given. Once again, the emphasis is on systematising and formalising arrangements. Institutions are encouraged to '*develop the process of collecting and collating of feedback to ensure that no opportunities are lost to enhance the provision*,' and '*to use the outcomes of the information management system to capture more systematically the views of staff and students, and to ensure it brings all the data together in one area*.' Comments in reports suggest that when there is no systematic approach present in this regard, there are missed opportunities to identify and share good practice within an institution.

Reports also require '*that stakeholders are systematically informed of the action taken in response to their feedback*'; that '*formal procedures*' be established '*to report back to students on actions taken in relation to issues raised by their representatives*'; or that '*check that responses are always made to external examiner reports*.'

There is encouragement for institutions to use more effectively the resources they have in the form of external examiners. For example, they are asked to '*consider including the actions arising from … external examiners' comments in the centrally maintained action plan*,' or to take account of '*action plans linked to external examiner reports … including identified good practice elements … to … encourage enhancement*.' Another is reminded to include '*within its annual monitoring process, a requirement for evaluation of student and staff feedback, feedback from external assessors, action planning and the setting of targets*.'

In some cases, the inspection process has found inconsistent or incomplete application of an institution's external examining or moderation arrangements. Once again, a significant cause is documentation and communication, and thus we find an institution asked '*to articulate its requirements with regard to the modules which require external examination, its criteria for the appointment of external examiners, the size of assessment samples for external moderation and the permitted length of service of external examiners*,' and to '*ensure that external moderation is in place for final assessment in all its degree-level programmes*.'

2.4 Concluding remarks

Good governance is recognised by external quality agencies and regulators around the world as integral to good higher education.

In the UK context, the new regulatory requirements of the Office for Students – for example, conditions of registration – place significant emphasis on governance. For international providers, those seeking UK HE partners would be well-served by the enhanced understanding of UK expectations that the BAC requirements convey. In both the UK and international contexts, the BAC's requirements encourage applicants to build their own institutional capacity and development to meet those expectations.

Equity and natural justice for students, staff, and other stakeholders are supported by the transparency and consistency that are marks of good governance. From the perspective of Trustees, shareholders, or Boards of Directors of HEIs, the BAC requirements considered here might be regarded as supportive of risk management in a number of areas. For example:

- in minimising the resources required to manage appeals or complaints from staff or students and avoid litigation;
- providing a systematic and objective approach to staff management and development; and
- creating a systematic information base that can be interrogated and reviewed in multiple ways as an aid to accountability.

Much of the good practice identified in Section 2.2 above flows from good governance.

There are many benefits to be derived from good governance, but the costs must be acknowledged too. When BAC inspectors or other external bodies interrogate an organisation's governance, they ask necessary questions such as:

- how does the governing body, whether it is a Board of Trustees or Board of Directors, know that academic quality and standards (for which it is accountable) meet HE expectations?
- where does responsibility rest for agreeing and implementing academic policies and processes? And, is there a clear distinction between the arrangements for making academic and business decisions?; and
- how does the institution and its stakeholders know that it works?

To be effective, policies and procedures must be known and followed, requiring dissemination, induction, and monitoring for compliance. Institutions are required to agree, develop, and fully operationalise functioning – and therefore effective – governance. Documenting governance is not enough in itself, but is nevertheless necessary and fundamental; documents must be accessible and current, requiring publication and 'servicing' in terms of updating. Higher education institutions are not homogeneous, and the BAC constituency is a distinctive and diverse group. Governance arrangements and the formalising of policies, procedures, and processes should be fit for purpose and proportionate for each institution. BAC inspections are sensitive to diversity, without compromising its standards.

Once embedded and functioning effectively, the benchmark of good governance will be improved operational consistency and efficiency. Less tangible but as important is the contribution of governance to the HE culture in an institution; shared values and a shared understanding about academic standards, rigour and transparency, and the integrity of academic decision-making are all fundamental to HE. The question may not be 'can we afford good governance?' but rather 'can we afford *not* to invest in good governance?'

SECTION 3: CONCLUSION AND FUTURE CONSIDERATIONS

This review has found that BAC reports offer a consistent and coherent evidence base for thematic reviews. The use of standard report templates, together with the clarity offered by the standards-based and numbered key indicators methodology for inspections, provide useful tools for quantitative analyses, and make the identification of emergent themes relatively straightforward. Qualitative analyses – looking across an entire sample of reports – are potentially more challenging because it could be argued that a high level of consistency and standardisation (not unreasonably) imposes its own limitations on the range of possible themes. However, this is balanced by inspectors' commentary and the 'recommendations for improvement' sections.

It has not been part of this review's remit to consider or comment on the BAC inspection process as such; however, it may be appropriate to include some observations. It is notable, for example, that taken together, the reports provide clear evidence that a BAC inspection is a powerful agent for change and enhancement in accredited institutions. By working through reports of different inspections over time in a single institution, one sees that requirements for action and recommendations for improvement are systematically followed through, from one inspection to the next. Typically, where an action has not been completed, its priority is raised. Recommendations are also tracked, and the evidence in reports is that institutions' responses to them are considered and thoughtful. Overwhelmingly, the evidence from reports suggests significant institutional change and improvement over time, making a strong case for the quality-enhancement benefits of BAC accreditation. Perhaps the voluntary nature of BAC accreditation ensures that the self-selecting institutions are already open and responsive to external scrutiny as a vehicle for institutional development.

Also notable is that where an institution receives few or no partially met judgements, this is often balanced in reports by a larger number of recommendations than usual. For example, two reaccreditation reports where all standards are fully met contain 14 and 17 recommendations, respectively. This suggests that even institutions that meet all the standards can continue to benefit from BAC inspections as an aspect of quality enhancement.

The review has identified common themes emerging as good practice and as challenges in the General Academic Management and Administration and Quality Management Assurance and Enhancement inspection areas. It proposes that the common thread – both for good practice and for challenges – is in the broad area of governance, and this thematic review suggests that there are some specific areas where institutions might benefit from additional support and guidance. These are:

1. **Greater understanding and implementation of effective governance, proportionate to institutions' size and fit for purpose.** This might include:
   - more specific highlighting of governance throughout the inspection process and inspection areas;
   - directing institutions to advice and guidance on good governance;
   - the provision of workshops or seminars to explore appropriate models of governance for a diverse sector; and
   - sharing good practice.

2. **Guidance and advice with some of the other challenges identified in this review.** For example:
    - sharing good practice;
    - action planning; and
    - effective appraisals of staff, and arrangements for classroom observations.

3. **BAC undertaking thematic review of other inspection areas in the future.**

This review has shown that inspection reports provide a reliable and consistent evidence base. They are a valuable resource to the BAC, individual institutions, and the wider constituency of stakeholders identified in Section 1. On the basis of the quantitative analysis already undertaken for this review, further qualitative analyses of the same evidence base for the Teaching Learning and Assessment, Student Recruitment Support and Guidance, and Governance Strategy and Management inspection areas would also yield themes.

4. **The BAC could consider how to more systematically capture, evaluate, and report the enhancements that are brought about through its inspections.**

This would constitute a helpful record at the level of individual institutions, and through periodic collation and reporting, offer a potentially valuable overview of impact, in terms of systematic improvements in the independent higher education sector. It could also potentially function as a resource for identifying and sharing good practice within the BAC community of inspectors and institutions, and more widely in the sector.

APPENDIX 1: INDEPENDENT HIGHER EDUCATION SCHEME

(FULL INSPECTION REPORT)

BRITISH ACCREDITATION COUNCIL INSPECTION REPORT

Independent Higher Education (IHE) Full Inspection

INSTITUTION:

ADDRESS:

HEAD OF INSTITUTION:

DATE OF INSPECTION:

ACCREDITATION STATUS AT INSPECTION:

DECISION ON ACCREDITATION:

○ Accreditation awarded for the full four-year period.

○ Probation accreditation.

○ Decision on accreditation deferred.

○ Award of accreditation refused.

Date:

1. Background to the institution

2. Brief description of the current provision

3. Inspection process

PART B - JUDGEMENT AND EVIDENCE

The following judgements and comments are based upon evidence seen by the inspector(s) during the inspection and from documentation provided by the institution.

INSPECTION AREA - GOVERNANCE, STRATEGY AND FINANCIAL MANAGEMENT

1.   **The institution is effectively and responsibly governed**

1.1	The organisational structure, including the role and extent of authority of any owners, directors or governing body, is clearly defined, documented and understood by stakeholders.	○ Yes ○ No
1.2	The head of the institution, directors and other relevant persons are suitably qualified and experienced, understand their specific responsibilities and are effective in carrying them out.	○ Yes ○ No
1.3	Policies, procedures and systems linking governance and management are well documented and effectively disseminated across the institution.	○ Yes ○ No
1.4	The institution engages in appropriate risk management planning, which is administered and monitored by named individuals.	○ Yes ○ No
1.5	The governing body conducts regular risk assessment exercises in all areas of the institution's provision.	○ Yes ○ No
1.6	All relationships with other educational institutions and organisations are defined formally and are fully transparent, with institutions compliant with partner or parent institutions' requirements, where applicable.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments   *• Hold the 'Alt' key & press the '7' key to insert a bullet point*

2.   **The institution has a clear and achievable strategy**

2.1	The institution has a clear strategy for the development of its higher education provision which is supported by appropriate financial management.	○ Yes ○ No
2.2	There is provision for stakeholder input to inform the strategic direction of the institution.	○ Yes ○ No
2.3	The strategy is well communicated to all stakeholders within and outside the institution.	○ Yes ○ No
2.4	The governing body and senior management conduct a regular and systematic review of their own and the institution's overall performance and measure this performance against strategic targets.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

3. **Financial management is open, honest and effective**

3.1	The institution conducts its financial matters transparently and with appropriate probity.	○ Yes ○ No
3.2	The institution's finances are subject to regular independent external audit.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

INSPECTION AREA - ACADEMIC MANAGEMENT AND ADMINISTRATION

4. **The institution is effectively managed**

4.1	The management structure is clearly defined, documented and understood by all stakeholders including governors, management, staff and students.	○ Yes ○ No
4.2	The head of the institution and other senior managers are suitably qualified and experienced, understand their specific responsibilities and are effective in carrying them out.	○ Yes ○ No
4.3	There are clear channels of communication between management, the governing body, staff, students and other stakeholders.	○ Yes ○ No
4.4	There are clearly delineated responsibilities and reporting arrangements at institutional, faculty, departmental, programme and course levels. This should include provision for academic leadership at programme and individual course level.	○ Yes ○ No
4.5	There is an effective committee structure with appropriate reporting lines which informs management decision-making and provides feedback to stakeholders.	○ Yes ○ No
4.6	Committees and other meetings have clear and appropriate terms of reference, are scheduled to meet regularly and are minuted accurately.	○ Yes ○ No
4.7	There is a set of comprehensive policies, regulations and procedures for staff and student conduct.	○ Yes ○ No
4.8	Management ensures that all information, internal and external, including publicity material, is accurate and fit-for-purpose.	○ Yes ○ No
4.9	A policy exists and is administered effectively regarding collection of and refund of student fees.	○ Yes ○ No
4.10	Management compiles reports at least annually presenting the results of the institution's reviews and incorporating action plans. Reports include analysis of year-on-year student satisfaction, retention and achievement, staff performance (including research and other forms of scholarship) and a review of resourcing issues.	○ Yes ○ No
4.11	Action plans are implemented and reviewed regularly, with outcomes reported to management and subsequently to the governing body.	○ Yes ○ No
4.12	Management monitors and reviews academic and administrative staff performance through a clearly documented and transparent appraisal system.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

5. Academic management is effective

5.1	There are appropriate procedures for the proposal, design and validation of programmes of study which take cognisance of the mission of the institution, national imperatives, market demand and resource issues and reflect international norms.	○ Yes ○ No
5.2	Management ensures that the stated curricula are delivered as presented in the prospectus and other related documentation, and that requirements from professional or other relevant bodies are met.	○ Yes ○ No
5.3	There are regular scheduled and minuted meetings of academic staff to review academic programmes.	○ Yes ○ No
5.4	There is an appropriate policy and effective procedures exist for the acquisition of academic resources to support programmes.	○ Yes ○ No
5.5	Appraisal of academic staff includes regular classroom observation which is used for the dissemination of good practice.	○ Yes ○ No
5.6	Academic staff are supported in their continuing professional development and enabled to develop further pedagogic techniques to enhance the learning of students.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

6. The institution is effectively administered

6.1	Administrators are suitably qualified and experienced and understand their specific responsibilities and duties.	○ Yes ○ No
6.2	The size of the administrative team is sufficient to ensure the effective day-to-day running of the institution.	○ Yes ○ No
6.3	The administrative support available to the management is clearly defined, documented and understood and appropriately focused to support its activities.	○ Yes ○ No
6.4	Policies, procedures and systems are well documented and disseminated effectively across the institution.	○ Yes ○ No
6.5	Data collection and collation systems are effective and accurate.	○ Yes ○ No
6.6	Classes are timetabled and rooms allocated appropriately for the courses offered.	○ Yes ○ No
6.7	Comprehensive administrative records are organised and stored efficiently, easily accessed and used effectively.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

7. The institution employs appropriately qualified and experienced managerial and administrative staff

7.1	There are appropriate policies and effective procedures for the recruitment and continuing employment of suitably qualified and experienced staff.	○ Yes ○ No
7.2	There are effective procedures for the induction of all staff.	○ Yes ○ No
7.3	There is a transparent and well-documented appraisal system for all staff.	○ Yes ○ No
7.4	There are clear and appropriate job specifications for all staff.	○ Yes ○ No
7.5	All staff are treated fairly and according to a published equality and diversity policy.	○ Yes ○ No
7.6	The institution has a clear policy regarding the handling of legal issues relating to the employment of staff.	○ Yes ○ No
7.7	Staff have access to a complaints and appeals procedure.	○ Yes ○ No
7.8	Opportunities are provided for the continuing professional development of administrative and managerial staff.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

INSPECTION AREA - TEACHING, LEARNING AND ASSESSMENT

8. **Academic staff are appropriately qualified and effective in facilitating student learning**

8.1	Academic staff are appropriately qualified in terms of subject knowledge, pedagogic and communicative skills, and experienced for the courses to which they are allocated.	○ Yes ○ No
8.2	The programmes and their constituent courses are delivered and assessed in ways that enable students to succeed by developing the knowledge and skills which will be required for final examinations or assessments.	○ Yes ○ No
8.3	Learning outcomes for all programmes are articulated and are publicly available.	○ Yes ○ No
8.4	Academic staff are effective in recognising individual learning needs and preferred learning styles and adapting their delivery to meet these.	○ Yes ○ No
8.5	Academic staff ensure the active participation of all students in class activities.	○ Yes ○ No
8.6	Academic staff use a mixture of large and small group and individual activities, to encourage and support students' learning.	○ Yes ○ No
8.7	Academic staff supply students with access to any additional learning materials as appropriate to support student learning.	○ Yes ○ No
8.8	Academic staff produce schemes of work and detailed lesson plans and lodge these with the administration.	○ Yes ○ No
8.9	Academic staff draw upon current research in their teaching.	○ Yes ○ No
8.10	Students are encouraged and enabled to develop independent learning skills.	○ Yes ○ No
8.11	Where appropriate, students are given the opportunity to obtain relevant workplace experience.	○ Yes ○ No ○ NA
8.12	Students have access to teaching staff outside teaching and learning sessions.	○ Yes ○ No
8.13	The institution provides students and academic staff with access to appropriate resources and materials for study and encourages and supports their use of these.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

9.	**Assessment is fair, well-organised and appropriate for the level and nature of the courses, and students receive timely and supportive feedback on their work**	
9.1	Students are provided with an assessment schedule in which required coursework and revision periods are detailed in advance with clear submission dates.	○ Yes ○ No
9.2	Assessment strategies are relevant to the content and nature of the courses and focused on measuring students' achievement of the intended learning outcomes.	○ Yes ○ No
9.3	Assessment tasks are clearly written, indicating what students need to do to achieve stipulated levels of achievement.	○ Yes ○ No
9.4	Students receive detailed and supportive oral and written feedback on their assessments and overall performance and progress, which are effectively monitored.	○ Yes ○ No
9.5	There are secure and efficient procedures for the administration of examinations and other means of assessment.	○ Yes ○ No
9.6	The institution takes appropriate steps to identify and discourage cheating, including plagiarism and other misdemeanours, and to penalise offenders.	○ Yes ○ No
9.7	There are clear policies and procedures for students to claim mitigating circumstances and to appeal against marks awarded.	○ Yes ○ No
9.8	There are effective procedures for internal and external moderation at pre- and post-assessment stages.	○ Yes ○ No
9.9	The institution makes student records and transcripts available to its students in a timely manner.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

10.	**The institution encourages and supports its staff to undertake research and other forms of scholarship and to engage in other professional activities**	
10.1	Academic staff are encouraged and supported to undertake research in relevant fields and to publish their findings.	○ Yes ○ No
10.2	Academic staff contracts require academic staff to engage in research and/or scholarship relevant to their teaching and other duties.	○ Yes ○ No
10.3	The institution encourages and supports staff to obtain additional qualifications.	○ Yes ○ No
10.4	There is a fair and transparent procedure for staff to seek financial support for their research and other professional development activities.	○ Yes ○ No
10.5	The institution provides time for staff to meet regularly to share and discuss current research activities and, if appropriate, invites external speakers.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

INSPECTION AREA - STUDENT RECRUITMENT, SUPPORT, GUIDANCE AND PROGRESSION

11. **Publicity material, both printed and electronic, gives a comprehensive, up-to-date and accurate description of the institution and its curriculum**

11.1 Text and images provide an accurate depiction of the institution's location, premises, facilities and the range and nature of resources and services offered.　　○ Yes　○ No

11.2 Information on the programmes available is comprehensive, accurate and up-to-date.　　○ Yes　○ No

11.3 There are effective procedures to update information on a regular basis.　　○ Yes　○ No

11.4 Students are informed of the status of the qualifications offered, including the awarding body and level of award.　　○ Yes　○ No

11.5 Students are given some indication of the type of careers graduates may follow and any professional body exemptions that may be available.　　○ Yes　○ No

11.6 Students are informed of the full cost of all programmes, including costs of assessments and any required materials.　　○ Yes　○ No

11.7 Students are informed as to the necessary English language requirements for entry on to programmes.　　○ Yes　○ No

11.8 The institution has a clear policy on the accreditation of prior learning and prior experiential learning which is brought to the attention of prospective students.　　○ Yes　○ No

This standard is judged to be:　　○ Met　　○ Partially Met　　○ Not Met

Comments

12. **The institution takes reasonable care to recruit and enrol suitable students for its courses**

12.1 Entry requirements for each programme are set at an appropriate level and clearly stated in the programme descriptions seen by prospective students.　　○ Yes　○ No

12.2 A formal application process ensures that students meet the entry requirements and any claimed qualifications are verified.　　○ Yes　○ No

12.3 Prospective students are properly briefed on the nature and requirements of the programme(s) in which they are interested and provided with advice on choosing their programme.　　○ Yes　○ No

12.4 All application enquiries are responded to promptly and appropriately.　　○ Yes　○ No

12.5 Any recruitment agents are properly selected, briefed, monitored and evaluated.　　○ Yes　○ No　○ NA

12.6 Students receive a proper initial assessment, which includes language ability, to confirm their capability to complete the programmes on which they are enrolling.　　○ Yes　○ No

12.7 Students with special needs are identified so that appropriate support can be provided.　　○ Yes　○ No

12.8 Entry on the basis of accreditation of prior learning and prior experiential learning is subject to a rigorous process and is clearly documented.　　○ Yes　○ No

This standard is judged to be:　　○ Met　　○ Partially Met　　○ Not Met

Comments

13. **Students receive pastoral support appropriate to their age, background and circumstances**

13.1	There is at least one named staff member responsible for student welfare who is suitably trained, accessible to all students and available to provide advice and counselling.	◯ Yes ◯ No
13.2	Students receive an appropriate induction and information on the pastoral support available to them.	◯ Yes ◯ No
13.3	Students are issued with a contact number for out-ofhours and emergency telephone support.	◯ Yes ◯ No
13.4	The institution has policies to avoid discrimination and a published procedure for dealing with any abusive behaviour.	◯ Yes ◯ No
13.5	There are effective systems to communicate with students out of class hours.	◯ Yes ◯ No

This standard is judged to be: ◯ Met   ◯ Partially Met   ◯ Not Met

Comments

14. **Students receive appropriate guidance**

14.1	Students are given an induction to the institution, their programme of study and guidance on the use of facilities such as the library and IT.	◯ Yes ◯ No
14.2	Additional support or advice on alternative programmes is provided to students who are judged not to be making sufficient progress to succeed.	◯ Yes ◯ No
14.3	Students have access to a fair complaints procedure of which they are informed in writing at the start of the course and offered guidance in submitting a complaint.	◯ Yes ◯ No
14.4	Students have access to careers advice and guidance, including progression to further study, from a designated and suitably qualified and experienced member of staff.	◯ Yes ◯ No
14.5	Students have access to careers information including prospectuses for further study.	◯ Yes ◯ No

This standard is judged to be: ◯ Met   ◯ Partially Met   ◯ Not Met   ◯ NA

Comments

15. **Student progress is measured and recorded regularly on the basis of adequate and explicit data and effective remedial action taken where necessary**

15.1	Assessment outcomes are monitored to enable the identification of students who are not making satisfactory progress and there is prompt intervention where appropriate.	○ Yes ○ No	
15.2	There is a clear and published policy on required student attendance and punctuality, with effective procedures and systems to enforce it.	○ Yes ○ No	
15.3	Accurate and secure records of attendance and punctuality at each session are kept for all students, collated centrally and reviewed at least weekly.	○ Yes ○ No	
15.4	Student absences are followed up promptly and appropriate action taken.	○ Yes ○ No	
15.5	Students are each allocated a personal tutor who is responsible for the regular review of students' progress.	○ Yes ○ No	

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met   ○ NA

Comments

16. **International students are provided with specific advice and assistance**

16.1	Before their arrival, international students receive appropriate advice on travelling to and living in the country or location.	○ Yes ○ No	
16.2	On arrival, international students receive an appropriate induction in issues specific to the local area.	○ Yes ○ No	
16.3	Information and advice specific to international students continue to be available throughout their time at the institution.	○ Yes ○ No	
16.4	Provision of support takes into account cultural and religious considerations. Where possible, students have access to speakers of their own first language.	○ Yes ○ No	

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met   ○ NA

Comments

17. **Where residential accommodation is offered, it is fit-for-purpose, well maintained and appropriately supervised**

17.1	Any residential accommodation is clean, safe and of a standard which is adequate for the needs of students.	○ Yes ○ No	
17.2	Any residential accommodation is open to inspection by the appropriate authorities.	○ Yes ○ No ○ NA	
17.3	A level of supervision is provided appropriate to the needs of students.	○ Yes ○ No	
17.4	Students are provided with advice on suitable private accommodation.	○ Yes ○ No	

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met   ○ NA

Comments

18. **The institution provides an appropriate social programme for students and information on activities in the locality**

18.1	Students are provided with appropriate information on opportunities for participation at events and other leisure activities which may be of interest.	○ Yes ○ No
18.2	The social programme is responsive to the needs and wishes of students.	○ Yes ○ No
18.3	Any activities within the social programme have been chosen with consideration of their affordability by the majority of students.	○ Yes ○ No
18.4	Any activities organised by the institution are supervised by a responsible representative with suitable qualifications and experience.	○ Yes ○ No
18.5	Students are encouraged to develop and participate in extra-mural activities.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met

Comments

INSPECTION AREA - PREMISES, FACILITIES AND LEARNING RESOURCES

19. **The institution has secure possession of and access to its premises**

19.1	The institution has secure tenure on its premises.	○ Yes ○ No
19.2	The institution has the legal right to use these premises for the delivery of higher education.	○ Yes ○ No
19.3	Where required, the institution has access to suitable external premises for academic or non-academic purposes of a temporary or occasional nature.	○ Yes ○ No ○ NA

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met   ○ NA

Comments

20. **The premises provide a safe, secure and clean environment for students and staff**

20.1	Access to the premises is appropriately restricted and secured.	○ Yes ○ No
20.2	The premises are maintained in an adequate state of repair, decoration and cleanliness.	○ Yes ○ No
20.3	There are specific safety rules in areas of particular hazard (e.g. science laboratories) which are brought to the attention of students, staff and visitors.	○ Yes ○ No ○ NA
20.4	General guidance on health and safety is made available to students, staff and visitors.	○ Yes ○ No
20.5	There is adequate signage inside and outside the premises and notice boards for the display of general information.	○ Yes ○ No
20.6	There is adequate circulation space for the number of students and staff accommodated, and a suitable area in which to receive visitors.	○ Yes ○ No
20.7	There are toilet and hand-washing facilities of an appropriate number and acceptable level of cleanliness.	○ Yes ○ No
20.8	There is adequate air conditioning, heating and ventilation in all rooms.	○ Yes ○ No

This standard is judged to be:　○ Met　　○ Partially Met　　○ Not Met

Comments

21. **Classroom and other learning areas are appropriate for the programmes offered**

21.1	Classrooms and other learning areas provide adequate accommodation in size and number for the classes (e.g. lectures, seminars, tutorials) allocated to them.	○ Yes ○ No
21.2	Classrooms and any specialised learning areas (e.g. laboratories, clinics, workshops, studios) are equipped to a level which allows for the effective delivery of each programme.	○ Yes ○ No
21.3	There are facilities suitable for conducting assessments such as examinations.	○ Yes ○ No

This standard is judged to be:　○ Met　　○ Partially Met　　○ Not Met　　○ NA

Comments

22. **There are appropriate additional facilities for students and staff**

22.1 Students have access to sufficient space and suitable facilities for private individual study and group work.	○ Yes ○ No
22.2 Academic staff have access to sufficient personal space for preparing lessons, marking work and consultations with students.	○ Yes ○ No
22.3 Students and staff have access to space and facilities suitable for relaxation and the consumption of food and drink where appropriate.	○ Yes ○ No
22.4 Students and staff have access to secure storage for personal possessions where appropriate.	○ Yes ○ No
22.5 There are individual offices or rooms in which academic staff and senior management can hold private meetings and a room of sufficient size to hold staff meetings.	○ Yes ○ No
22.5 Administrative offices are adequate in size and suitably resourced for the effective administration of the institution.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met   ○ NA

Comments

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23. **The library is appropriately stocked and provides a fit-for-purpose learning resource for the student body**

23.1 The library is adequately staffed with appropriately qualified and experienced staff.	○ Yes ○ No
23.2 The library has sufficient space for student independent study and group working.	○ Yes ○ No
23.3 There is sufficient provision of learning materials including books, journals and periodicals and online materials.	○ Yes ○ No
23.4 There is a well-organised lending policy.	○ Yes ○ No
23.5 There are clear, systematic and effective means of ensuring the adequacy and currency of library stock to reflect staff and student needs.	○ Yes ○ No
23.6 Library opening times are sufficient to encourage and support student independent learning.	○ Yes ○ No

This standard is judged to be: ○ Met   ○ Partially Met   ○ Not Met   ○ NA

Comments

24. **The information technology resources are well managed and provide a fit-for-purpose learning resource for the student body**

24.1 There are sufficient computers of the necessary specification to meet student and staff needs. ○ Yes ○ No

24.2 There is provision of appropriate, up-to-date, software which reflects the needs of the programmes. ○ Yes ○ No

24.3 There is an effective means of ensuring the renewal of hardware and software to ensure efficiency and currency. ○ Yes ○ No

This standard is judged to be: ○ Met ○ Partially Met ○ Not Met

Comments

INSPECTION AREA - QUALITY MANAGEMENT, ASSURANCE AND ENHANCEMENT

25. **The institution has effective systems to review its own standards and assess its own performance**

25.1 The institution undertakes regular and systematic monitoring of its operations. ○ Yes ○ No

25.2 The institution conducts periodic reviews of all aspects of its performance against clearly specified and appropriate performance indicators. ○ Yes ○ No

25.3 The nominated leader for each course produces an end of-session (semester or year) report which includes measures of student satisfaction, completion rates and achievement levels. ○ Yes ○ No

25.4 The nominated programme leader, drawing upon reports from its constituent courses, produces an annual programme report which includes analysis of year-on-year results on student satisfaction, achievement levels, completion rates and progression to further study or employment. ○ Yes ○ No

25.5 Reports, which present the results of the institution's reviews, evaluate its performance and incorporate action plans, are compiled at least annually. These are considered by senior management and the board of trustees and, where appropriate, shared with all stakeholders. ○ Yes ○ No

25.6 All programmes are subject to annual review and to full revalidation every five years. ○ Yes ○ No

25.7 Annual review and revalidation of programmes involve external assessors. ○ Yes ○ No

25.8 All quality management policies and procedures are clearly documented, for example in a quality manual or similar, and brought to the attention of staff and, where appropriate, students and other stakeholders. ○ Yes ○ No

25.9 Particular attention is paid to the quality of the student learning experience and to ensuring there is fair treatment of all students. ○ Yes ○ No

This standard is judged to be: ○ Met ○ Partially Met ○ Not Met

Comments

26. **The institution regularly obtains and records feedback from students and other stakeholders and takes appropriate action where necessary**

26.1 Views of all stakeholders, including academic staff and students, partner institutions and employers, are canvassed and recorded regularly through various means, including face-to-face meetings, feedback questionnaires and, where appropriate, formal student representation. ○ Yes ○ No

26.2 The views of stakeholders are considered objectively, evaluated thoroughly and, where necessary, appropriate action is taken. ○ Yes ○ No

26.3 There are effective means of responding to stakeholders' opinions and keeping them informed of any actions taken and reasons for no action being taken, through formal feedback mechanisms. ○ Yes ○ No

26.4 Key performance indicators will include analysis of student outcomes in terms of the current year and year-on-year performance and any significant variations in student achievement between different programme components. ○ Yes ○ No

26.5 The institution engages with the wider community, such as employers and its alumni, in a formal and systematic manner in order to obtain feedback on the relevance of its provision and to identify areas for development. ○ Yes ○ No

This standard is judged to be: ○ Met ○ Partially Met ○ Not Met

Comments

27. **The institution has a strong commitment to, and procedures that facilitate, continuing enhancement of its provision**

27.1 All stakeholders are invited and encouraged to make suggestions for enhancement. ○ Yes ○ No

27.2 In their annual appraisal, all staff are required to identify where they have facilitated enhancement and to identify further areas requiring enhancement. ○ Yes ○ No

27.3 End-of session course and annual programme reports should include enhancements made and identify further areas requiring enhancement. ○ Yes ○ No

27.4 Action plans are implemented and reviewed regularly within the institution's committee structure. ○ Yes ○ No

27.5 Staff professional development needs are identified through appraisal and other means, and measures taken to support staff to address these. ○ Yes ○ No

27.6 The institution has formal mechanisms to monitor the information it provides internally and externally and to make any enhancements deemed necessary. ○ Yes ○ No

This standard is judged to be: ○ Met ○ Partially Met ○ Not Met

Comments

COMPLIANCE WITH STATUTORY REQUIREMENTS

Declaration of compliance has been signed and dated. ○ Yes ○ No

PART C - SUMMARY OF STRENGTHS AND ACTION POINTS

Numbering of action points aligns with that of the minimum standards

GOVERNANCE, STRATEGY AND FINANCIAL MANAGEMENT

Institution's strengths   *• Hold the 'Alt' key & press the '7' key to insert a bullet point*

Actions required	Priority H/M/L				
	○ High	Medium	Low	Add Row	Delete Row

ACADEMIC MANAGEMENT AND ADMINISTRATION

Institution's strengths

Actions required	Priority H/M/L				
	○ High	Medium	Low	Add Row	Delete Row

TEACHING, LEARNING AND ASSESSMENT

Institution's strengths

Actions required	Priority H/M/L				
	○ High	Medium	Low	Add Row	Delete Row

STUDENT RECRUITMENT, SUPPORT, GUIDANCE AND PROGRESSION

Institution's strengths

Actions required	Priority H/M/L				
	○ High	Medium	Low	Add Row	Delete Row

PREMISES, FACILITIES AND LEARNING RESOURCES

Institution's strengths

Actions required	Priority H/M/L				
	○ High	Medium	Low	Add Row	Delete Row

QUALITY MANAGEMENT, ASSURANCE AND ENHANCEMENT

Institution's strengths

Actions required	Priority H/M/L				
	○ High	Medium	Low	Add Row	Delete Row

RECOMMENDED AREAS FOR IMPROVEMENT (to be reviewed at the next inspection)

COMPLIANCE WITH STATUTORY REQUIREMENTS

BIOGRAPHY OF THE REPORT WRITER

Dr. Kate Clarke's career has included a number of senior management roles at the University of Hertfordshire and The Open University, together with leadership roles in national and international quality assurance, accreditation, and partnerships. She has also served as Chief Executive of a vocational awarding body.

As Director of The Open University's Validation Services for 12 years, Kate gained a wide knowledge and direct experience of accrediting HE providers of all shapes and sizes. These included consortia, employer-led providers, mixed economy (FE/HE) colleges, specialist institutions, and large transnational institutions. As a member of the OU's senior team, Kate was involved at policy and strategy levels across the UK. She served as Chair of the Council of Validating Universities (CVU) and participated in QAA reviews and working groups, as well as contributing to the work of the British Council and to international organisations such as INQAAHE, EADTU, and UNESCO. She was formerly a member of BAC's Accreditation Committee and a Trustee.

In 2014 Kate set up Higher Education Partnerships and Quality (HEPAQ). HEPAQ provides independent consultancy on all aspects of Quality management and on partnerships. Peer review processes and Governance are significant areas of work. Clients include external quality and government agencies round the world, as well as in the UK, and HE institutions of all sizes, including independent HE colleges. She continues to participate in accreditation, institutional review and validation panels.