BRITISH ACCREDITATION COUNCIL INSPECTION REPORT

SUPPLEMENTARY INSPECTION
CHANGE OF MANAGEMENT/STAFFING
(College)

INSTITUTION: The Fire Service College

ADDRESS: London Road
Moreton-in-Marsh
Gloucestershire
GL56 0RH

HEAD OF INSTITUTION: Mr Dominik Wellmann

ACCREDITATION STATUS: Accredited

DATE OF INSPECTION: 20 October 2020

ACCREDITATION COMMITTEE DECISION AND DATE: Continued accreditation, 28 January 2021
PART A – INTRODUCTION

1. **Background to the institution**

The Fire Service College (FSC/the Institution) was established in 1974. At that time, FSC operated within the Department for Communities and Local Government. In February 2013, it became a limited company owned by Capita PLC. It now functions as part of Capita Learning and offers a wide range of courses specialising in fire and emergency response training.

The Institution is located in Moreton-in-Marsh in Gloucestershire. Its 300-acre site includes an incident ground where different scenarios are replicated to provide emergency services professionals with real-life training situations to develop their skills and techniques within a safe environment.

FSC’s vision is to build the world’s best resilience training organisation. It aims to deliver and ensure common and consistent standards of leadership, and command and technical training in the United Kingdom (UK) fire and rescue service, emergency services and other safety-critical organisations worldwide.

FSC receives strategic support and direction, as well as financial investment, from Capita. The Managing Director (MD) of the Institution reports to the MD of Capita Learning. FCS’s senior leadership team consists of the MD, who is supported by four other directors. These are the Finance Director, Operations and International Director, Sales Director, and Learning Director. The Institution works with a range of awarding bodies, partners and national forums, including the National Operational Effectiveness Working Group and the Command and Control Working Group, to ensure that firefighters and other emergency responders are equipped with the appropriate skills and receive training in the latest techniques and procedures.

Since the previous inspection, various changes have taken place. These include the appointment of a new MD and a restructuring as part of the development of Capita Learning. This wider restructuring in Capita has had minimal impact on the Institution, where responsibilities remain the same as previously.

Changes, for example in the use of the premises and incident ground, have also been implemented to ensure the Institution remains compliant with current regulations.

2. **Brief description of the current provision**

The Institution offers a large selection of courses focusing on fire and emergency response training. Courses include Fire Behaviour Training, Fire Safety, Heavy Vehicle Rescue and Breathing Apparatus Training. They vary in length, from short courses that last for half a day to 15 days, to bespoke provision for international students mainly from the Middle East of up to two years’ duration, and a Firefighter Level 3 Apprenticeship.

Courses range from Levels 3–7 on the Regulated Qualifications Framework (RQA). The majority of courses are accredited by awarding bodies such as Skills for Justice, the Institution of Fire Engineers (IFE) and the International Organisation for Industrial Emergency Services Management and Fire Hazard Management (JOIFF). Where bespoke courses are provided for students from the Middle East, these can be delivered in Arabic, with simultaneous interpretation.

At the time of the inspection, ten courses were running as face-to-face courses at the Institution. There were 124 students present, with the vast majority being male. All are over the age of 18 years. The majority of students are from the UK, with a minority being from the Middle East. A further 1,333 students, both full- and part time, were attending courses at clients’ venues or through distance learning.

Courses are either advertised courses, which have predetermined starting dates several times a year, or bespoke provision at times agreed with client organisations.

3. **Inspection process**
The inspection was undertaken remotely by one inspector over half a day. The inspector scrutinised documentation and had video calls with management and staff. During the inspection, the staff cooperated fully with the inspector.

4. **Background to the supplementary inspection**

The supplementary inspection came about as a new MD had been appointed in September 2020 following the resignation of the previous MD.

5. **Inspection history**

<table>
<thead>
<tr>
<th>Inspection type</th>
<th>Date</th>
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<tbody>
<tr>
<td>Full Accreditation</td>
<td>30-31 March 2009</td>
</tr>
<tr>
<td>Interim</td>
<td>16 June 2010</td>
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<tr>
<td>Re-accreditation</td>
<td>8-9 October 2013</td>
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<tr>
<td>Interim</td>
<td>17 June 2015</td>
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<tr>
<td>Re-accreditation</td>
<td>13-14 March 2017</td>
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<tr>
<td>Interim</td>
<td>5 June 2019</td>
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**PART B – JUDGEMENTS AND EVIDENCE**

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

1. **Compliance with BAC accreditation requirements**

1.1 Management, Staffing and Administration (full inspection)

The numbers below refer to the standards as presented in the college scheme document and main full inspection report.

<table>
<thead>
<tr>
<th>Part</th>
<th>Standard</th>
<th>Compliance</th>
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</thead>
<tbody>
<tr>
<td>1.1</td>
<td>The institution is effectively managed</td>
<td>☒ Yes ☐ No</td>
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<tr>
<td>1.2</td>
<td>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.</td>
<td>☒ Yes ☐ No</td>
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<tr>
<td>1.3</td>
<td>There are clear channels of communication between the management and staff.</td>
<td>☒ Yes ☐ No</td>
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This standard is judged to be:  ☒ Met ☐ Partially Met ☐ Not Met

**Comments**

The management structure of the Institution and its relationship with Capita are clearly defined and understood by staff.

The transition to the newly appointed MD has been well managed and the new MD brings wide experience and knowledge to the post. The new MD and other senior managers are suitably qualified and experienced, with both sector-specific, and management experience. These responsibilities are well understood by staff. This results in a very well-run organisation.

Clear and effective channels of communication exist in all parts of the Institution. Formal management meetings are scheduled a year in advance. Meetings between management and staff occur regularly. Consequently, all staff are effectively kept up to date.

2. **The administration of the institution is effective**

2.1 Administrators are suitably qualified or experienced and understand their specific responsibilities and duties. ☒ Yes ☐ No

2.2 The size of the administrative team is sufficient to ensure the effective day-to-day running of the institution. ☒ Yes ☐ No

2.3 The administrative support available to the management is clearly defined, documented and understood. ☒ Yes ☐ No

2.4 Policies, procedures and systems are well documented and effectively disseminated across the institution. ☒ Yes ☐ No

2.5 Data collection and collation systems are effective. ☒ Yes ☐ No

This standard is judged to be:  ☒ Met ☐ Partially Met ☐ Not Met

**Comments**

Administrators are suitably experienced and understand their specific duties, allowing for the effective running of the Institution. This was confirmed in meetings with staff.

The size of the administrative team is sufficient to support the effective running of the Institution. The Operations Director and Scheduling and Planning Manager have oversight of the administrative function, which is clearly defined.
The administrative support that is available to management is effective in maintaining the high standards of the provision.

Policies and procedures are extremely well documented and effectively disseminated to staff and students through the intranet and handbooks. They are regularly reviewed for their relevance and currency. As a result, the staff and supporting systems are effectively maintained up to date.

Data collection and collation systems are highly effective in supporting the running of the provision. For example, the feedback from the monthly delegate feedback sheet is automatically collated, allowing for meaningful data to be collected. The system also produces this data in graph form, allowing for easy understanding of monthly trends.

3. **The institution employs appropriate managerial and administrative staff**

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   3.1 | There are appropriate policies and effective procedures for the recruitment and continuing employment of suitably qualified and experienced staff. | ☒ Yes ☐ No |
   3.2 | Experience and qualifications claimed are verified before employment. | ☒ Yes ☐ No |
   3.3 | There is an effective system for regularly reviewing the performance of staff. | ☒ Yes ☐ No |

   **This standard is judged to be:** ☒ Met ☐ Partially Met ☐ Not Met

   **Comments**

   The Human Resources (HR) team provides appropriate policies and procedures for the recruitment and employment of suitable staff. This supports the maintenance of high standards.

   Experience and qualifications are appropriately verified before employment by the HR staff.

   Full-time staff all have annual performance reviews, at which time training needs are established and goals are set. The progress towards meeting goals is monitored by managers through the year and new goals are set if established goals have been met.

   For the training staff, the performance reviews include lesson observations. As a result, the high standards of the provision are continuously maintained and improved.

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

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   4.1 | 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 |
   4.2 | Information on the courses available is comprehensive, accurate and up to date. | ☒ Yes ☐ No |

   **This standard is judged to be:** ☒ Met ☐ Partially Met ☐ Not Met

   **Comments**

   The prospectus provides detailed information about the courses on offer. The Institution’s location, premises, facilities and resources, and the services offered are accurately depicted. Consequently, prospective clients and students are able to make informed decisions about courses.

   The information provided on the courses gives an overview of each course and who should attend it. Course descriptions include information on the awarding body, assessment and potential applications. Dates and prices for each course are given. As a result of this comprehensive information, clients and students are well briefed on different elements of each course.

5. **The institution takes reasonable care to recruit and enroll suitable students for its courses**

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   5.1 | Entry requirements for each course are set at an appropriate level and clearly stated in the course descriptions seen by prospective students. | ☒ Yes ☐ No |
5.2 A formal application process ensures that students meet the entry requirements and any claimed qualifications are verified. ☒ Yes ☐ No

5.3 Students are properly briefed on the nature and requirements of the courses for which they apply, and all application enquiries responded to promptly and appropriately. ☒ Yes ☐ No

5.4 Any overseas recruitment agents are properly selected, briefed, monitored and evaluated. ☐ Yes ☐ No ☒ NA

5.5 Students receive a proper initial assessment which includes language ability to confirm their capability to complete the courses on which they are enrolling. ☒ Yes ☐ No ☐ NA

**This standard is judged to be:** ☒ Met ☐ Partially Met ☐ Not Met

**Comments**

Course descriptions clearly specify for whom the course is suitable. This is helpful in supporting informed decision-making.

Applications are made online. Applicants are registered through their employers, who know whether the course is suitable for their employee. If necessary, an interview takes place remotely with an appropriate staff member, to ensure the suitability of the applicant. Bespoke courses are tailored to meet the needs of the client and their employees.

Detailed information is made available on each course, so clients are fully aware of what the courses cover and whether a course is likely to meet their expectations. The automated enquiry system logs enquiries and directs them to an appropriate person, allowing for prompt responses to be made.

A small number of bespoke courses are not delivered in English, but are translated simultaneously, so making the course accessible to students whose first language is not English.

Initial assessment is sufficient to support students to complete their course successfully.

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6. **There is an appropriate policy on student attendance and effective procedures and systems to enforce it**

6.1 There is an appropriate, clear and published policy on student attendance and punctuality. ☒ Yes ☐ No

6.2 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

6.3 Student absences are followed up promptly and appropriate action taken. ☒ Yes ☐ No

**This standard is judged to be:** ☒ Met ☐ Partially Met ☐ Not Met

**Comments**

The attendance requirements for individual courses are clearly documented in course materials. The students are made aware of these requirements at the start of the course and are expected to be punctual and arrive on time for the start of the course.

An attendance sheet is completed in the morning and the afternoon of each course and reviewed centrally to ensure that expected attendance rates are met.

If there are any absences, these are followed up promptly by staff to ensure that opportunities for success on the courses are optimised for the students.

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7. **The institution regularly obtains and records feedback from students and other stakeholders and takes appropriate action where necessary**
7.1 The institution has effective mechanisms for obtaining feedback from students and other stakeholders (such as staff, partner institutions and employers) on all aspects of the institution’s provision, including formal student representation where appropriate. ☒ Yes ☐ No

7.2 Feedback is obtained, recorded and analysed on a regular basis. ☒ Yes ☐ No

7.3 The feedback is reviewed by management and action is taken where necessary. ☒ Yes ☐ No

7.4 There is a mechanism for reporting on the institution’s response to the feedback to the student body. ☐ Yes ☒ No

**This standard is judged to be:** ☒ Met ☐ Partially Met ☐ Not Met

**Comments**

Regular formal feedback gained from students and staff allows the Institution to understand their views on all aspects of the provision. The feedback from students includes their views on the courses, as well as other aspects of the Institution.

This feedback is recorded and analysed in detail by those staff who are focused on quality improvement. Data from the feedback is collated and month-on-month comparisons allow for a full understanding of trends over time. This system is effective in clearly indicating the Institution’s strengths and areas for development.

The feedback is reviewed by managers on a monthly basis and action is taken where necessary to support improvement. However, whilst there is effective action taken in relation to feedback from students, this is not formalized in action plans to ensure a consistency in quality developments.

7.4 A mechanism for reporting the Institution’s response to student feedback is not in place.

8. **The institution has effective systems to review its own standards and assess its own performance with a view to continuing improvement**

8.1 There are effective systems for monitoring and periodically reviewing all aspects of the institution’s performance. ☒ Yes ☐ No

8.2 Reports are compiled at least annually which present the results of the institution’s reviews and incorporate action plans. Reports include analysis of year-on-year results on student satisfaction, retention, achievement, examination results and completion rates. ☒ Yes ☐ No

8.3 Action plans are implemented and regularly reviewed, with outcomes reported to the management. ☒ Yes ☐ No

**This standard is judged to be:** ☒ Met ☐ Partially Met ☐ Not Met

**Comments**

A programme of internal audits to review policies, procedures and processes is in place to enable efficiencies and improvements to be made. All aspects of the Institution’s performance are effectively monitored and reviewed in monthly review meetings. These include course reviews and management reviews.

The monthly and internal audits feed into an annual audit programme where the different areas of the provision are reviewed as part of the quality management system reporting overview. This supports ongoing success in the Institution.

Action plans based on information from audits are in place and are clear. These are reviewed and outcomes are reported to management. This successfully promotes quality improvements.

1.2 **Compliance Declaration**
Declaration of compliance has been signed and dated.  ☒ Yes  ☐ No
PART C – SUMMARY OF ACTION POINTS

ACTIONS REQUIRED

| 7.4 A mechanism for reporting the Institution’s response to student feedback must be put in place to support a clearer understanding of actions taken in response to feedback. | ☐ High ☒ Medium ☐ Low |

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

It is recommended that formal action-planning is introduced in connection with the results of feedback to allow management to keep track of actions in order to support consistent quality developments in the provision.

COMPLIANCE WITH STATUTORY REQUIREMENTS – FURTHER COMMENTS, IF APPLICABLE