

INDEPENDENT HIGHER EDUCATION SCHEME DOCUMENT



BRITISH ACCREDITATION COUNCIL

RAISING STANDARDS IN THE
GLOBAL EDUCATION MARKET

Contents

1. Introduction	3
2. Eligibility for accreditation	3
3. Accreditation process	4
4. Accreditation cycle	4
5. Inspection process	4
6. Programmes and awards	5
7. Accreditation fees	5
8. Accreditation statements and marks	5
9. Contacting BAC	6
10. Accreditation standards	6
11. Further information on meeting the standards	14
Appendix A – Glossary	16
Appendix B – Care of under 18s and vulnerable adults	18
Appendix C – ESG mapping to the BAC standards	20

This document must be read in conjunction with the Accreditation Handbook

1. Introduction

BAC accreditation is a voluntary quality assurance scheme for independent providers of further and higher education and vocational training courses.

The Independent Higher Education (IHE) accreditation scheme is designed for those institutions that deliver full degree programmes. This scheme covers both institutions based in the UK (IHEI-UK) and internationally (IHEI-International).

The inspection standards and key indicators are intended to be specific to the delivery of higher education, in part informed by the UK's Quality Assurance Agency for Higher Education (QAA), the European Association for Quality Assurance in Higher Education's (ENQA) European Standards and Guidelines (ESG 2015), and the responsibilities of partner organisations set out in the [Handbook for the Quality Management of Collaborative Provision](#) developed by the Council of Validating Universities.



Further information on how the IHE scheme standards align with the ESG 2015 can be found in Appendix C.

The revised edition of the IHE accreditation scheme standards has been informed by the contribution from the Higher Education Focus Group. BAC acknowledges the work of the group and offers thanks to its members.

2. Eligibility for accreditation

2.1 General requirements for institutions applying for accreditation as independent HE providers

- The institution is able to provide evidence of its financial stability.
- Effective control of the institution is the responsibility of an accountable management.
- The institution is led by a proprietor or designated principal/director, who must have clear contractual responsibilities for the running of the institution and for the quality of its work.
- There are no grounds for believing the proprietor, principal/director or any other senior manager to be unfit to have responsibility for the institution (e.g. an assessment of any previous position held at another institution known to BAC, in particular any institution that consistently failed to meet BAC's standards or that failed to repay debts owed to BAC).
- The institution has provided a relevant education programme for a minimum period of two years. Exceptionally, BAC may accept an application from an institution that has been operating for less than two years, although this would normally only be available to an institution that is part of a larger organisation that itself meets the requirement.
- Accreditation relates only to a specific institution and may not be used in relation to larger organisations unless all branches have been awarded accreditation. BAC reserves the right to decide whether it is more appropriate for organisations to seek accreditation in total or in respect of their separate parts.
- Accreditation by BAC does not remove the obligations of accredited institutions to comply with relevant local statutory and regulatory requirements.
- Any contractual agreements between BAC and an accredited institution, or any disputes arising out of the award, refusal, or withdrawal of accreditation by BAC, shall be subject to English law.
- BAC's evaluation of the institution will not assess the role of the awarding body itself and will not include, for instance, an assessment of the curriculum, the assessment procedures used in determining the final grades awarded, or the quality management procedures used by the awarding body.
- In the course of the inspection, programmes that are ancillary to the main education programmes (such as language support or the development of study and research skills) will also be evaluated.

2.2 UK institutions

The IHEI-UK accreditation scheme is available to any private institution that is wholly or predominantly offering full degree programmes at the level of higher education, normally in partnership with a university, and that offers its students a range of resources appropriate to those studying at the level of higher education.

2.3 International institutions

Any independent educational institution operating outside the UK that is eligible to apply for accreditation as an IHE institution **must** be able to demonstrate that it holds national or federal approval or a licence to operate wherever it does so.

2.3.1 If the institution awards its own degree programmes, the institution must be able to demonstrate that degree programmes are recognised and externally quality assured by either:

- the national accrediting authority of the country in which the institution is operating; or
- an international programme accrediting organisation that is listed by European Quality Assurance Register (EQAR) or recognised by the United States (US) Department of Education.

2.3.2 If the institution has its degree programmes awarded on behalf of another organisation this must be through a formal collaborative partnership with either:

- a United Kingdom (UK) Higher Education institution (HEI) with degree-awarding powers. The HEI must be a Recognised Body as defined by the Department of Education and the list found at www.gov.uk/check-a-university-is-officially-recognised/recognised-bodies; or
- a Royal Chartered Body recognised as such within the UK; or
- a university whose programmes are recognised by their national accrediting authority or an international programme accrediting organisation listed by EQAR or recognised by the US Department of Education.

2.3.3 If the institution is in common ownership with a BAC-accredited higher education institution operating in the UK, this will meet BAC eligibility requirements, although the institution must still be registered and have a licence to operate in the country in which it is operating.

The final decision on the eligibility of an institution seeking international HE accreditation rests with BAC. If the institution does not meet any of the eligibility requirements stated above but would

still like to pursue international accreditation, please see the details of the BAC International Centre scheme or contact BAC to discuss your situation.

3. Accreditation process

Accreditation is based on an inspection of the full range of an institution's current provision and will also require evidence that the management is capable of maintaining acceptable standards during the period of accreditation and operating within the requirements of relevant local legislation.

Prospective institutions undergo a first level of scrutiny by BAC staff at the application review stage and then are required to undergo a rigorous inspection.

The full inspection assesses the institution and its provision against BAC's minimum standards. The full inspection report is then considered by the Accreditation Committee that decides to award, defer, or refuse accreditation.

4. Accreditation cycle

Accreditation for the IHE scheme is valid for four years. Accredited institutions are notified six months before the end of the accreditation period so that an inspection can be arranged and the institutional report can be presented to the Accreditation Committee for consideration of re-accreditation before the accreditation period ends.

5. Inspection process

A full inspection is arranged following successful completion of the first stage of the application process. An inspection team with appropriate experience for the institution being inspected is formed and normally consists of three members: a lead inspector, a team inspector, and a student inspector. It is usual practice for the inspection to take at least two days, but the days allocated and the number of inspectors will reflect the breadth and size of the institution's provision. With newly-accredited institutions, an interim inspection is organised in the first year

of accreditation. For accredited institutions, an interim inspection is organised in the middle of the four-year accreditation cycle.

Institutions are required to complete and submit a self-evaluation report assessing their quality assurance mechanisms against specific criteria based on the standards contained in Section 11 prior to the inspection being conducted.

5.1 Inspection areas

A full inspection covers the following seven inspection areas:

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

5.2 Minimum standards

The minimum standards for IHE accreditation are set out in Section 11. Details of the documents that will need to be supplied and reviewed during the inspection are listed at the end of the relevant inspection area. The staff members whom the inspectors will want to hold meetings with will be confirmed during the inspection planning stage and/or during the inspection.

5.3 Legal and regulatory compliance

All new applicants and those applying for reaccreditation are required to sign a declaration stating that the institution complies with all relevant statutory requirements in force in the country of operation, in connection with such matters as health and safety, safeguarding, employment law, copyright, disability provision, equal opportunities, planning consent, data protection, and public liability. It is the institution's responsibility and the personal responsibility of the head of the institution to ensure that all requirements are met. BAC inspectors will not inspect the above areas but will note any observed breach of regulations. BAC requires that all accredited institutions comply fully with all statutory requirements, and evidence of noncompliance will provide the Accreditation Committee with grounds for refusal of accreditation.

6. Programmes and awards

BAC does not validate or accredit programmes or qualifications. BAC's policy is that institutions should offer courses leading to approved external awards granted by recognised awarding and degree-awarding bodies. Further details on the award of degrees can be found in the Accreditation Handbook.

7. Accreditation fees

Annual accreditation fees based on the number of full-time equivalent (FTE) students are due in September of each year. The exact fee payable depends on the number of students enrolled at the institution over the previous year. Accurate enrolment figures must be supplied to BAC once a year on request. If such figures are not supplied by the deadline given, the full maximum accreditation fees will be charged. Failure to pay the annual accreditation fees by the given deadline on the invoice will result in suspension and the possible withdrawal of accreditation.

8. Accreditation statements and marks

Institutions that have been awarded accreditation may use the statement of accreditation in their promotional materials, subject to certain conditions.

Acceptable forms of the statement are:

- "accredited by the British Accreditation Council for Independent Further and Higher Education as an Independent Higher Education Institution"
- "accredited by the British Accreditation Council as an Independent Higher Education Institution"
- "accredited by BAC as an Independent Higher Education Institution"
- "BAC-accredited as an Independent Higher Education Institution".

Once accredited, institutions may use the BAC accreditation mark of the Independent Higher Education Institution accreditation scheme in their promotional materials, subject to certain conditions. The standard accreditation mark features the BAC logo, colour-coded to the specific accreditation scheme, and the word 'accredited'.

9. Contacting BAC

Further guidance and details of the generic requirements and responsibilities for BAC-accredited institutions can be found in the Accreditation Handbook.

Please contact info@the-bac.org for further information.

10. Accreditation standards

Inspection area – governance, strategy and financial management

1. The institution is effectively and responsibly governed

- 1.1 The organisational structure is clearly defined, documented and understood by all stakeholders, including the role and extent of authority of any owners, trustees, advisers or governing body.
- 1.2 Those responsible for governance understand the institution's strengths and weaknesses and provide support and hold senior managers accountable for improving the quality of learning.
- 1.3 Appropriate measures are in place to protect the integrity of academic freedom.
- 1.4 The link between governance and management is clearly articulated and documented.
- 1.5 Internal stakeholders develop and implement policy through appropriate structures and processes while involving external stakeholders.
- 1.6 The institution has a written risk management strategy, that includes financial planning and is effectively implemented, and regularly reviewed and updated.
- 1.7 The institution has the necessary formal and transparent agreements in place with its educational partners.
- 1.8 The institution has effective communication channels between all stakeholders.

2. The institution has a clear and achievable strategy

- 2.1 There is an appropriate strategy that includes the quality of the student experience and supporting plans for institutional development.

- 2.2 There is provision for stakeholder input, including governors, management, staff and students, to inform the strategic direction of the institution.
- 2.3 The strategy is effectively communicated to all relevant stakeholders.

3. Financial management is open, honest and effective

- 3.1 The institution conducts its financial matters professionally, transparently and with appropriate probity.
- 3.2 The institution's finances are subject to regular independent external audits.

Examples of documentation required

- The strategy/development plan including strategic targets.
- List of committees/boards together with their terms of reference and membership.
- Minutes of relevant committee and/or board meetings.
- Minutes of staff meetings.
- Detailed job descriptions of administrative, academic and pastoral support staff.
- Up-to-date signed contracts/agreements of employment for all staff.
- Self-employment contracts/agreements for all self-employed staff.
- Documentation on risk planning and completed risk assessments.
- Documentation explaining the link between governance and management.
- Financial planning documentation.
- Performance data maintained by the institution, for example, examination pass rates/stakeholder feedback scores/attendance rates.
- Documentation relating to policies and procedures for informing stakeholders of the response made to their feedback.
- Key policies underpinning the running of the institution, for example, relating to staff recruitment, staff performance monitoring and staff development, quality assurance, assessment, and student welfare etc.
- Staff personnel files and records.
- General management and administrative policies, procedures, and systems.
- Policies to protect the data of participants and staff.
- Annual performance reviews against key performance indicators and strategic targets at institution/department/course and programme levels.

Inspection area – general and academic management and administration

4. The institution is effectively managed

- 4.1 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.
- 4.2 There is an appropriate and effective committee structure with appropriate reporting lines to inform management decision making.
- 4.3 Committees have clear and appropriate terms of reference and meet regularly. The meetings are accurately recorded with clear action planning.

5. The institution is administered effectively

- 5.1 The size of the administrative team is sufficient to ensure the effective day-to-day running of the institution.
- 5.2 Administrative procedures and systems are well documented and disseminated effectively across the institution, and they are accurate and fit for purpose.
- 5.3 Classes are timetabled and rooms allocated appropriately for the courses offered.
- 5.4 Data collection and collation systems are well documented, accurate and effectively disseminated.
- 5.5 Students' records are sufficient, accurately maintained and up to date.
- 5.6 Staff records are sufficient, accurately maintained and up to date.
- 5.7 The institution has a robust security system and policies in place to protect the data of its students and staff.
- 5.8 The institution has processes, through which it verifies that the student who registers on the programme is the same student who participates and completes and receives the credit.
- 5.9 There are secure and efficient procedures for the administration of examinations and other means of assessment.
- 5.10 There are effective procedures for internal and external moderation at pre- and post-assessment stages.

- 5.11 The institution makes student records and transcripts available to its students in a timely manner.
- 5.12 There is a policy for the collection of and refund of students' fees that is implemented effectively.

6. The institution employs and continues to support appropriately qualified and experienced staff

- 6.1 There are appropriate policies and effective procedures for the recruitment and continuing employment of suitably qualified and experienced staff.
- 6.2 All staff, including teaching staff, are suitably qualified and experienced and understand their specific responsibilities.
- 6.3 There are clear and appropriate job specifications for all staff.
- 6.4 There are effective procedures for the induction of all staff.
- 6.5 The institution is fully committed to the fair treatment of staff in line with a published equality and diversity policy.
- 6.6 Staff have access to an appropriate grievances and appeals procedure.
- 6.7 Management monitors and reviews the performance of all staff through a clearly documented and transparent appraisal system that includes regular classroom observations of teaching staff.
- 6.8 The professional development needs of all staff are identified, and measures are taken to support staff to address these and gain additional qualifications, where relevant.

7. Academic management is effective

- 7.1 There are effective procedures for the proposal, design and validation of programmes of study, that take account of the mission of the institution, feedback from students and involve external input as appropriate.
- 7.2 Intended learning outcomes for all programmes are clearly articulated, are understood by students and are publicly available.
- 7.3 There are regularly scheduled and recorded meetings of academic staff where academic programmes are reviewed.
- 7.4 There is an appropriate policy and effective procedures for the acquisition of academic resources to support programmes.

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

- 8.1 Entry requirements for each programme are set at an appropriate level and are clearly stated in the programme descriptions that are made available to prospective students.
- 8.2 A formal application process ensures that any claimed qualifications and language competency requirements are checked and verified.
- 8.3 All students' application enquiries are responded to promptly and appropriately.
- 8.4 Students are provided with sufficient information to enable them to make a judgement on the suitability of the courses and their delivery methods and can discuss any concerns before registration.
- 8.5 There are effective processes in place to confirm that students meet published entry requirements and have the capability to complete the programmes for which they are enrolling.
- 8.6 The institution has a clear policy on the accreditation of prior learning and prior experiential learning that is brought to the attention of prospective students.
- 8.7 Any recruitment agents are properly selected, briefed, monitored and evaluated.

9. The institution encourages and supports its staff to undertake research and other forms of scholarship and to engage in other professional activities

- 9.1 The institution encourages academic staff to undertake and engage with relevant research and/or scholarship that informs their teaching and to publish their findings, where appropriate.
- 9.2 There is a fair and transparent procedure for staff to seek financial support for their research.
- 9.3 The institution provides time for staff to meet regularly to share and discuss current research activities and, if appropriate, invites external speakers.

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

- 10.1 Text and images provide an accurate depiction of the institution's location, premises, facilities and the range and nature of resources and services offered.

- 10.2 Information on the programmes available, their assessment and progression is comprehensive, accurate, readily accessible and up to date.
- 10.3 There are effective procedures to update information on a regular basis to ensure its relevance and accuracy.
- 10.4 The information provided ensures students are well informed of the status of the qualifications offered, including the awarding body and level of award.
- 10.5 Students are informed of the full cost of all programmes, including the costs of assessments, activities and required materials.

Examples of documentation required

- Detailed Curricula Vitae (CVs) for all staff including all academic/teaching staff to include evidence of academic and teaching qualifications.
- Staff appraisal procedures and completed documentation.
- Evidence of continuing professional development/training opportunities and individual development logs.
- Completed student application forms and any learner contracts.
- Briefing materials for agents.
- Detailed up-to-date list of programmes available.
- A detailed timetable of the courses/classes taking place at the time of the inspection.
- Whole course/academic year plans/schemes of work.
- Module/course descriptions.
- Students' academic appeals and grievance procedures.
- Agreements with awarding bodies.
- Evidence of monitoring of teaching/tutoring staff, including completed classroom observation records.
- Copies of external examiners' reports for the previous three years for each academic programme, or from the start date if the course has not been available for that time.
- Student files with details of registration, enrolment, attendance, and qualifications.
- Policy on accreditation of prior learning, including experiential learning for prospective students.
- Samples of administration correspondence with students.
- Policies to prevent cheating and plagiarism.
- Policies and procedures for the acquisition of teaching/training and learning resources and examples of learning resources including online resources.
- Policies and procedures to encourage and support staff, including financial support where possible, to undertake research and other forms of scholarship.
- A published staff equality and diversity policy.

Inspection area – teaching, learning and assessment

11. Academic staff are effective in facilitating student learning and engagement

- 11.1 Lecturers have the necessary pedagogic and communication skills to teach the course content and level of course to which they are allocated.
- 11.2 The allocation of teaching staff to courses provides a consistent learning experience.
- 11.3 The programmes and their constituent courses are delivered and assessed in ways that enable students to succeed by developing the knowledge and skills that will be required for final assessments.
- 11.4 Teaching sessions are appropriately informed by module descriptors and relate to defined intended learning outcomes.
- 11.5 Academic staff are effective in recognising individual learning needs and adapting their approach to meet the needs of all students.
- 11.6 Academic staff use effective learning activities to encourage the active participation of all students and to support their learning.
- 11.7 The institution has appropriate methods in place to encourage and measure student engagement.
- 11.8 Students are encouraged and enabled to develop independent learning skills.
- 11.9 Students and academic staff have access to appropriate learning and study materials as well as other resources, and the institution encourages and supports their use.

12. Assessment is fair and appropriate for the level and nature of the courses, and students receive timely and supportive feedback on their work

- 12.1 Students are provided with an assessment schedule in which required assessments and revision periods are detailed in advance with clear submission deadlines.
- 12.2 Assessment strategies are relevant to the content and nature of the courses and are focused on measuring students' achievements of the intended learning outcomes.
- 12.3 Assessment tasks are clearly written, indicating what students need to do to meet stipulated levels of achievement.

- 12.4 Students receive detailed and supportive feedback on their assessments and overall performance and progress, which are effectively monitored.
- 12.5 The institution takes appropriate steps to identify and discourage academic malpractice, including plagiarism, and other misdemeanours, and to penalise offenders.
- 12.6 There are clear policies and procedures for students to claim mitigating circumstances.
- 12.7 There are clear policies and procedures for students to appeal against marks awarded.

13. Student materials are appropriate to the medium of delivery and are effective

- 13.1 Course materials are designed for a specific and clearly stated level of study.
- 13.2 Course materials are appropriately presented and sufficiently comprehensive to enable students to achieve the programmes' objectives.
- 13.3 Course materials are accurate, reflect current knowledge and practice and are regularly reviewed and revised.
- 13.4 Programme designers make effective use of appropriate teaching aids and learning resources.

Examples of documentation required

- A list of students on site on the day(s) of the inspection, broken down by level of English competence (where relevant), gender, age, country of origin, programme, and start date.
- Completed lesson/lecture plans.
- Sample placement/initial tests, including completed documentation.
- Samples of marked students' work with feedback to the student records of student progress.
- Summaries of results/grades awarded for the previous three years for each academic programme, or from the start date, if the courses have not been available for that time.
- Documents relating to external moderation.
- Assessment procedures/schedule of assessments / samples of assessment methods / assessment tools / statement of intended learning outcomes.

Inspection area – student support, guidance and progression

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

- 14.1 There are appropriate staff members responsible for student welfare who are accessible to all students and available to provide advice and guidance.
- 14.2 Students are given a suitable induction to the institution, their programme of study and guidance on the use of facilities.
- 14.3 Students receive appropriate information on the pastoral and emergency support available, and referral to external specialists, as required, in connection with students' mental health and well-being.
- 14.4 The institution has suitable policies, procedures and practices in place to ensure the fair treatment of students and to avoid discrimination, bullying and harassment.
- 14.5 There are effective systems to communicate with students outside of class hours.
- 14.6 Effective safeguarding arrangements are in place and are regularly reviewed to keep all students safe.
- 14.7 Effective arrangements are in place to protect students from the risks associated with radicalisation and extremism.

15. Students receive appropriate academic support and guidance

- 15.1 Students have appropriate access to teaching staff outside of teaching and learning sessions.
- 15.2 Students have access to appropriate support to enable the regular review of their academic progress.
- 15.3 Assessment outcomes are monitored to enable the identification of students who are not making satisfactory progress and prompt intervention is made, where appropriate.
- 15.4 Students have access to appropriate advice and guidance on careers and further study.
- 15.5 The institution has a fair complaints procedure that includes an appropriate external adjudicator, and students are informed of how to submit a complaint.
- 15.6 Students are advised of BAC's complaints procedure.

- 15.7 Students receive appropriate advice, guidance and support to develop their study skills at the appropriate level.
- 15.8 Students with special educational needs and disabilities (SEND) are identified and appropriate support is provided to meet their needs.

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 their chosen country of study.
- 16.2 On arrival, international students receive an appropriate induction on issues specific to the local area.
- 16.3 Information and advice that is specific to international students continues to be available throughout their time at the institution.
- 16.4 Provision of support takes into account cultural and religious considerations.

17. Student attendance is measured and recorded regularly, and effective remedial action taken where appropriate

- 17.1 There is an appropriate, clear and published policy on required student attendance and punctuality.
- 17.2 Accurate and secure records of attendance and punctuality, at each session, are kept for all students.
- 17.3 Data on attendance and punctuality are collated centrally and reviewed regularly, and absences followed up promptly.

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

- 18.1 Any residential accommodation is clean, safe and of a standard that is adequate for the needs of students.
- 18.2 Any residential accommodation where students under the age of 18 are accommodated is open to inspection by the appropriate authorities, where applicable.
- 18.3 A level of supervision is provided that is appropriate to the needs of students.
- 18.4 Students are provided with advice on suitable private accommodation.

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

- 19.1 Students are provided with appropriate information about opportunities for participation in social events and other leisure activities that may be of interest.
- 19.2 The social programme is responsive to the needs and wishes of students, and activities have been chosen with consideration of their affordability for the majority of students.
- 19.3 Any activities organised by the institution are supervised by a responsible representative with suitable qualifications and/or experience.
- 19.4 Students are encouraged to develop and participate in co-curricular and extramural and programme-related activities, including online activities where students study remotely to encourage peer interaction and a good digital experience.

Examples of documentation required

- Induction packs for home and international students, including information on the pastoral and emergency support available and details of external specialists in mental health and well-being, staff, including academic and teaching staff, induction programmes.
- Initial guidance documents for students.
- Evidence of attendance monitoring, including class registers for each course/programme.
- Complaints policy and procedure documentation including reference to BAC's complaints procedure if relevant.
- Policy documents related to discrimination, bullying, and abusive behaviour, including cyberbullying.
- An e-policy that covers students' on-site use of social media and devices such as mobile telephones, tablets and cameras.
- Students' social programme.
- Careers advice and guidance documentation.
- Safeguarding policy.
- Background checks for staff, for example, the Disclosure and Barring Service in the UK.
- Records of staff training in safeguarding.
- See safeguarding checklist for further documentation.
- Documents related to residential accommodation.
- Information for students relating to qualifications and awarding bodies

Inspection area – premises, facilities and learning resources

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

- 20.1 The institution has secure tenure on its premises.
- 20.2 The institution has the legal right to use its premises for the delivery of higher education.
- 20.3 Where required, the institution has access to suitable external premises for academic or non-academic purposes of a temporary or occasional nature.

21. The premises provide a safe, secure, clean and accessible environment for students and staff

- 21.1 Access to the premises is appropriately restricted and secured.
- 21.2 The premises are suitably accessible for those with specific needs.
- 21.3 The premises are maintained in an adequate state of repair, decoration and cleanliness.
- 21.4 There are specific safety rules in areas of particular hazard that are brought to the attention of students, staff and visitors.
- 21.5 General guidance on health and safety is made available to students, staff and visitors.
- 21.6 There is adequate signage inside and outside the premises, and general information is displayed effectively.
- 21.7 There is adequate circulation space for the number of students and staff accommodated and a suitable area in which to receive visitors.
- 21.8 There are toilets and hand-washing facilities of an appropriate number and acceptable level of cleanliness.
- 21.9 There is adequate heating and ventilation in all rooms.

22. Classrooms and other learning areas are appropriate for the programmes offered

- 22.1 Classrooms and other learning areas provide adequate accommodation in size and number for the types of classes allocated to them.

- 22.2 Classrooms and any specialised learning areas are equipped to a level that allows for the effective delivery of each programme.
- 22.3 There are physical and digital facilities suitable for conducting assessments such as examinations.

23. There are appropriate additional facilities for students and staff

- 23.1 Students have access to sufficient space and suitable facilities for private individual study and group work.
- 23.2 Academic staff have access to sufficient space for preparing lessons, marking work and consultations with students.
- 23.3 Students and staff have access to space and facilities suitable for relaxation and the consumption of food and drink, where appropriate.
- 23.4 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.
- 23.5 Administrative offices are adequate in size and suitably resourced for the effective administration of the institution.

24. Library, learning and information services provides a fit for purpose learning resources for students

- 24.1 There are clear, systematic and effective means of ensuring the adequacy and currency of physical and digital library resources to reflect staff and student needs.
- 24.2 There is an effective process and procedure for managing the lending of library resources.
- 24.3 Library, learning and information services are adequately staffed with appropriately qualified and experienced staff.
- 24.4 Access to library and information services resources are sufficient to encourage and support students' independent learning.

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

- 25.1 There is appropriate technological access and sufficient connectivity to enable students to study flexibly.

- 25.2 Virtual learning environments and virtual classrooms are reliable, fit for purpose and meet the needs of students.
- 25.3 There is an effective means of ensuring the renewal of hardware and software to ensure efficiency and currency.
- 25.4 The institution has access to the services of an experienced Information Technology (IT) technician who can ensure that systems are operative at all times and provide support to students, academic staff, and students and staff working remotely.

Examples of documentation required

- Floor plan of each site being inspected.
- Health and safety guidance for students, staff, and visitors.
- Information relating to the number, specification, location, and accessibility of computing and related IT resources.
- A guide to the library and IT facilities.
- Catalogue of library stock

Inspection area – quality management, assurance and enhancement

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

- 26.1 The views of all stakeholders are canvassed and recorded regularly, considered objectively, analysed and evaluated thoroughly, and appropriate action is taken to improve the student learning experience, where necessary.
- 26.2 Student feedback is obtained through appropriate formal student representation mechanisms.
- 26.3 The institution has appropriate formal feedback mechanisms to inform all stakeholders of any action taken as a result of their views.

27. The institution has effective internal and external quality assurance systems to review its own standards and assess its own performance

- 27.1 All internal and external quality management policies and procedures are clearly documented and are brought to the attention of staff and, where appropriate, students and other stakeholders, to appropriately inform the institution's strategic management.

- 27.2 The institution undertakes regular and systematic monitoring of its operations and reviews all aspects of its performance against key performance indicators.
- 27.3 The institution has effective processes in place to encourage student engagement in the course development and review process.
- 27.4 Management compiles regular reports that present the results of the institution's reviews and incorporate action plans.
- 27.5 The nominated staff member produces an end-of-session, end-of-semester or end-of-year course report that includes measures of student satisfaction, completion rates and achievement levels.
- 27.6 The nominated programme leader, drawing upon reports from its constituent courses, produces an annual programme report, which may include analysis of year-on-year results on student satisfaction, completion rates, achievement levels and progression to further study or employment, if available.
- 27.7 Institutional systems ensure the effective consideration of programme reports and that appropriate actions are incorporated into action planning.

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

- 28.1 The governing body and senior management conduct a regular and systematic review of their own performance that is reviewed regularly through the institution's committee structure.
- 28.2 Good practice is effectively identified and disseminated across the institution.
- 28.3 The governing body and senior management ensure the enhancement of provision is measured against relevant performance indicators and strategic targets.
- 28.4 Action plans for enhancement are implemented and reviewed regularly within the institution's committee structure.

Examples of documentation required

- Internal and external quality assurance documentation, including copies of any policies used as a means of quality management, annual reports and action plans, including those for enhancement.
- Programme re-validation reports.
- Samples and summaries of any learner and other stakeholder feedback, including completed feedback questionnaires.
- Policies and procedures to encourage student engagement in the course development and review process.
- Copies of annual reports to the awarding bodies for the previous three years for each academic programme, or from start date if the courses have not been available for that time.
- Copies of audits and academic reviews carried out by or on behalf of the awarding bodies or partnership institutions.
- Responses made as a result of external audits.
- End-of-session, end-of-semester or end-of-year course report that includes measures of student satisfaction, completion rates and achievement levels.
- Annual programme report, which may include analysis of year-on-year results on student satisfaction, completion rates, achievement levels, and progression to further study or employment if available.
- Action plans for dealing with stakeholder feedback.

Inspection area – online, distance and blended learning (if applicable)

29. The institution has suitable staff to ensure the successful delivery of online and distance learning

- 29.1 Staff have an understanding of the specific requirements of online, distance and blended learning.
- 29.2 Academic staff receive effective training and support to ensure the successful delivery of online and distance learning that meets the needs and interests of students.
- 29.3 Staff ensure students are made aware of the necessary level of digital literacy required to follow the stated programmes.
- 29.4 Students receive appropriate guidance and support to ensure they are able to study effectively through online and distance learning.

Examples of documentation required

- Instructions and suggestions for students on how to study and how to use the online tutorial materials.

11. Further information on meeting the inspection areas

How to include externality in quality assurance

The involvement of external peers in quality assurance arrangements is a distinctive feature of the British approach. In the UK, it is a commonplace requirement that at the institutional, course, and programme level, providers of higher education engage external peers to contribute to their quality assurance processes. Externality contributes to each institution's internal arrangements in a number of ways, such as:

- Creating shared understanding and consensus across the higher education sector about curriculum areas and qualifications, providing assurance of comparability for stakeholders;
- Ensuring that the development of curricula and subject areas is informed by best practice and is up-to-date;
- Providing some necessary checks and balances to support key quality processes, such as programme approval, monitoring, and review, assessment of the student, and providing assurance of standards, equity, and fairness for stakeholders.

This guidance note has been produced to assist institutions to demonstrate externality to BAC. It is aimed at institutions who may be unfamiliar with UK custom and practice. While BAC will not require externality to take exactly the same form as is common in the UK, in order to achieve BAC accreditation, an applicant institution will be required to demonstrate that it has, or plans to have, fit-for-purpose arrangements in place for externality. For example, documentation will be required to evidence the following BAC key indicators:

- **5.12** There are effective procedures for internal and external moderation at pre- and post-assessment stages.
- **26.1** The views of all stakeholders are canvassed and recorded regularly, considered objectively, and analysed and evaluated thoroughly, and, where necessary, appropriate action is taken.
- **27.11** Review and revalidation of programmes on a regular basis involves external assessors as appropriate.

Ensuring that your institution and the provision that it offers benefit from external input allows you to demonstrate to your stakeholders that the quality of your provision is not wholly self-referencing

but is subject to scrutiny from appropriately qualified individuals from outside the institution. It helps the institution to have confidence that its provision will support learners in meeting the required standards for each qualification so that graduates and employers have confidence in it. It also allows the institution to benefit from good practice within the sector and in the employment market. Externality therefore also contributes to quality enhancement and quality improvement.

When designing programmes, having formalised external review is beneficial and standard practice in the UK. External review is one of the ways in which an institution benchmarks its academic provision, learning experience, and outcomes against expectations and standards for comparable qualifications. It is not consultancy but part of an institution's quality assurance process.

Nevertheless, it can also be developmental, as an external reviewer can provide recommendations on how to strengthen provision as well as act as a 'critical friend'.

Ways to demonstrate externality

- If your institution has a **franchise** or **validation agreement** with a UK university, then, as part of their quality assurance mechanisms, they are likely to conduct regular academic reviews of your provision. You could include copies of their reports as part of your evidence.
- If your awarding body or government has a requirement for **external examiners** to be used, then you will be able to use the external examiners' reports to demonstrate this.
- If your institution has any provision **accredited by a Professional, Statutory, or Regulatory Body**, then they may have provided you with a formal report at the time of accreditation and further documentation on the reaccreditation/continued accreditation. This could also include the minutes from the regular meetings that will be held. This is further documentation that you could utilise to demonstrate your externality.
- External reviews could be demonstrated by **peer reviews** from colleagues at other institutions and **employer or stakeholder groups** focused on specific aspects of your provision. You would need to ensure that the reviewers or group members had the appropriate qualifications and subject knowledge to undertake reviews.
- If your institution is required to have **accreditation from your national accreditation agency**, then the report or documentation provided from them could be another way of demonstrating externality.

External peer input into an institution's quality assurance arrangements should not be seen as an alternative to rigorous application of internal processes and practices. It is important to look for external people who can add value without seeking to impose their own views or opinions.

Committee and meeting recording

All institutions will hold regular meetings. As part of their internal structures, it is expected that there will be formal committees, which may relate to academic matters, forums with attendance from both students and staff, and staff meetings. These meetings will be at a variety of levels, from university senior management to departmental staff meetings. For a meeting to be effective, it is important to ensure that the meeting is recorded accurately. If a meeting has an agenda that is circulated in advance, then the meeting record should reflect the agenda items. The record should be accurate, provide a brief summary of the topic of discussion, and include agreed actions that reflect the outcomes of the meeting.

This guidance note has been produced to outline the key information that should be included in a formal record of a meeting to assist institutions when considering what BAC inspectors would expect to see. For example, documentation will be required to evidence the BAC key indicator below:

- 4.4 Committees have clear and appropriate terms of reference and meet regularly. The meetings are accurately recorded with clear action planning.

Information required:

Organisation of the meeting

- Title of meeting (e.g. Student and Staff Committee)
- Date and time of meeting
- Chair (meeting lead)
- Attendees: (full names)
- Minute taker: (full name)

Description of the meeting

- Agenda items or allocated topic number
- Brief overview of discussion
- Actions agreed (if required):
- List the action that needs to be taken
- Name of responsible person
- Date action must be complete
- Date of next meeting
- Status of document (draft/final, etc.)

Appendix A – Glossary

Definitions and/or explanations of key terms in the BAC standards document

Academic freedom – the freedom of teachers and students to teach, study and pursue knowledge and research without unreasonable interference or restriction from law, institutional regulations or public pressure.

Accreditation of Prior Learning (APL) or Accreditation of Prior Experiential Learning (APEL) – a general term used for the award of credit on the basis of demonstrated learning that has occurred at some time in the past. This learning may have come about as the result of a course, self-directed study or experience, either at work or in leisure pursuits.

Active participation – the active and engaged involvement of students, such as proactive contributions, thoughtful interactions and enthusiastic participation, rather than passive observation or mere presence.

Appraisal – a meeting in which an employee discusses his or her progress, aims and needs, including for training and development, at work with his or her manager or employer. This should operate regularly, often on an annual basis.

Assessment – a generic term for processes that measure students' learning, skills and understanding.

Cyberbullying – the use of electronic communication to bully a person, defined as making use of behaviour that is repeated and intended to hurt someone and often aimed at certain groups, for example because of race, religion, gender or sexual orientation, typically by sending messages of an intimidating or threatening nature.

Enhancement – the process by which provision, processes, and policies are improved to have a positive impact on the learning experiences of students. This is commonly achieved through internal mechanisms that an institution puts in place to continually review and improve practice.

External adjudicator – an external organisation or person(s) who is/are appointed to act independently of individual institutions in order to respond to student complaints if the student has completed the complaints and appeals processes of their institution and is not satisfied with the outcome. Typically, an external adjudicator will have the power to make binding decisions that must be upheld by institutions.

Extremism – holding extreme political or religious views that may deny rights to any group or individual. Extremism can refer to a range of views, for example, racism, homophobia, right-wing ideology and any religious extremism.

Feedback – this could be academic feedback following assessment and could be formal (written) or informal (tutorials and oral) feedback. Feedback is also obtained from different stakeholder groups. This could be in the format of end-of-programme questionnaires or surveys from the students, internal committees with student and staff representation or employer groups where the relevance of the provision to meet local or national requirements is discussed.

Governance – the system and processes through which the institution is managed, directed and controlled. It encompasses the structure, policies and decision-making mechanisms that guide the institution's operations and strategic direction. For example, a governing body, board of trustees or council responsible for setting overall objectives, ensuring legal and regulatory compliance, appointing key personnel, such as the principal, and overseeing financial and academic matters.

Homestay – an arrangement where students live with local host families while studying. The host families normally provide accommodation, meals and a supportive environment.

Independent learning – in addition to the contact hours with academic staff, students will be expected to undertake independent learning. Independent learning places increased educational responsibility on the student for the achievement of objectives and for the value of their goals. This can be facilitated through the provision of Virtual Learning Environments (VLEs) and by ensuring that sufficient resources are made available to students to study independently.

Intended learning outcomes – an intended learning outcome describes in detail what students should know or be able to do on completion of a learning programme or part thereof. It may relate to knowledge, understanding and skills that the student did not have before undertaking the programme.

Key performance indicators – key performance indicator (KPI) is a performance measurement that helps an institution understand how it is performing, typically from the course level up to an institutional overview. KPIs allow an institution to assess how well its mission and goals have been achieved and to assess what it does well and what it could develop and/or improve in the future. Examples of KPIs include how many students progress to the next academic year, how many students complete the full degree programme and continue to employment as well as surveys measuring student satisfaction.

Mitigating circumstances – mitigating circumstances are any serious circumstances beyond the control of the student that may have adversely affected their academic performance. This could include medical conditions and personal and domestic circumstances.

Moderation – the process by which the institution ensures that there is consistency in marking at module level for examinations and assignments, and that it conforms to institution-wide grade and mark descriptors.

External moderation – a moderation process carried out by someone other than a member of staff of the institution. In the UK, an external examiner would typically be part of the external moderation process ensuring consistency in marks.

Internal moderation – the process of ensuring that assessment criteria are applied consistently by markers and that there is a shared understanding of the academic standards that students are expected to achieve. Examples include taking a sample of the modules or second-marking all assessments.

Pastoral support – a service that gives help and support to students as well as providing information, advice and guidance about activities outside the standard academic teaching.

Plagiarism, including academic malpractice – the act of using someone else's ideas, words, or work without giving proper credit or acknowledgment and presenting it as original work.

Performance review – an internal review of how well the institution has achieved its mission and goals, through which the institution assesses what it does well and what it could develop and/or improve in the future.

Probity (in relation to financial management) – the institution always follows principles of honesty, integrity and ethical behaviour when dealing with financial matters, ensuring that all financial decisions and actions are undertaken with complete openness and full responsibility.

Provision – the courses or programmes of study offered by the educational institution.

Publicly available information – information that is available publicly, i.e. to people who are external to the institution, for example by means of an institution's website or published reports.

Radicalisation – the process of an individual or a group of people adopting extreme political, religious or social doctrine or ideas.

Risk management – the process of identifying, assessing and mitigating potential risks or uncertainties that could impact an organisation's strategy and objectives.

Safeguarding – a term used in the United Kingdom and the Republic of Ireland to denote measures to protect the health, well-being and safety of children, who are defined as people under the age of 18, and vulnerable adults.

Special Educational Needs and Disabilities (SEND) – this typically refers to any special educational needs and disabilities that a student may have that have been identified by the institution as requiring specific support to be put in place to assist the student in completing their studies. An example of the support might be to provide additional time to complete written assessments for students who are diagnosed as being dyslexic.

Stakeholders – this typically refers to groups who are invested in the welfare and success of an institution and its students.

Internal stakeholders – internal stakeholders include current students, faculty and academic staff, the administrative support staff and advisory boards or committees such as the governors or trustees.

External stakeholders – external stakeholders would typically be the local community, employers of graduates, potential students or applicants and governments or funding bodies.

Students' destinations – the various paths and outcomes that students pursue after completing their studies, such as higher education, vocational training, employment or other opportunities.

Student engagement – students influence the content, materials and pace of teaching. The student is placed at the centre of the learning process. Students may lead learning activities, discuss topics that interest them and engage in learning experiences outside the classroom, such as internships or online classes. Institutions will define how they encourage engagement in the learning process and must be able to assess its effectiveness.

Student outcomes – this can refer to either the individual or student cohort outcomes with reference to the intended goals of a course or programme of study or the actual academic achievements of the students. They are often benchmarked against key performance indicators set by the institution.

Validation arrangements – validation is where a university with degree-awarding powers awards degrees taught at another institution. This would typically be a further education or alternative provider that does not have their own degree-awarding powers. This should be a formal written arrangement with the terms of the agreement clearly defined. It should list the date that the agreement was signed and have an end date. The arrangement is expected to identify what provisions are in place if either party chooses to terminate the agreement, so it should include a ‘teaching out’ arrangement to ensure that students are able to complete their studies.

Virtual Learning Environments (VLEs) – a VLE is an electronic depository of the information that students will be learning throughout their programmes. For example, a typical VLE in the UK would contain lecture presentations, teaching materials, links to further information, and a discussion forum. The VLE is populated by the institution’s staff and is essential for high-quality online or distance learning provision.

Written statement of its mission and goals – most organisations have a published mission and/or vision statement that sets out the key aims and aspirations of the organisation. This provides a focus for the institution and its future development.

Appendix B – Care of under 18s and vulnerable adults

BAC does not generally inspect compliance with legal and statutory requirements. However, given the importance of Safeguarding in educational contexts and the fact that we have a duty of care to ensure that such institutions are fully compliant with all safeguarding requirements, we are obliged to inspect this aspect of the provision. All organisations will still be asked to sign the Declaration of Compliance with Legal and Statutory Requirements, which also covers safeguarding. Key definitions Children: In accordance with the Children Act 1989 and 2004, a child is any person who has not yet reached their 18th birthday.

Vulnerable Adults: A vulnerable adult is generally defined as ‘an adult, who is unable to function cognitively or adequately undertake basic day-to-day functions without the help or oversight of someone not impaired in these ways or who is unable to protect him/herself against significant harms or exploitation’.

During the inspection, the inspection team will assess an organisation on the following aspects of Safeguarding.

1. Is there a suitable policy for the protection of participants under the age of 18 and vulnerable adults, that is reviewed at least annually?
2. Is there a named DSL (designated safeguarding lead), who is responsible for implementing this policy effectively and responding to child protection allegations?
3. The policy should be a working document (regularly reviewed) which sets out an organisation’s commitment to protect children from harm and the procedures in place to support this. It should cover: policy statements, codes of conduct, health and safety, safer recruitment, training, welfare provision and child protection procedures (including: awareness, how to raise concerns, responding to disclosure, named person(s) responsible, the decision-making process, systems for recording and reporting information and handling allegations/incidents). The policy should be clear and relevant to the organisation and up-dated at least annually.
4. Has the institution made the safeguarding policy known to all adults in contact with under 18s through their role with the organisation (including employees, sub-contractors, homestay hosts, group leaders and volunteers) and provided guidance or training relevant to its effective implementation?
5. Is there a code of conduct for staff effective in covering relationships with participants under the age of 18 and which includes whistleblowing procedures?
6. Are there approved arrangements in place to identify any person who is vulnerable and to ensure the right help and support is provided in a reasonable time scale?
7. Are up-to-date contact details recorded for a parent, carer or person acting in loco parentis for participants aged under 18 (and under 25 for participants with learning difficulties and/or disabilities, if the participants wish so)?
8. Are participants aware of how they can access support or complain, if they do not feel safe?
9. Is there an appropriate course of action to follow should a participant report abuse or concerns about their well-being? In reports of abuse, the arrangements should indicate how to receive disclosures and pass them on to statutory agencies and deal with staff who are subject to allegations.
10. Do recruitment and selection procedures follow safer recruitment best practice? Do the recruitment and selection procedures and other human resources management processes help to deter, reject, or identify people who might abuse children, or are otherwise unsuited to work or care for them? Is appropriate information provided to job applicants? Do recruitment materials for roles involving responsibility for or substantial access to under 18s (staff and host families) include reference to the organisation’s commitment to safeguarding and inform applicants that suitability checks will be required?

11. Are arrangements made for appropriate checks on staff, including enhanced Disclosure and Barring Service (DBS) checks from 2013 for staff who have regular, unsupervised access to children or vulnerable adults, and where appropriate (based on risk assessment) on proprietor/ governors and volunteers. (Note: In accordance with best practice – appropriate DBS checks should be carried out on all staff and host families. These checks should be carried out prior to their appointment or prior to the start of their regulated unsupervised activities. If a new starter does commence employment prior to clearance being received, they must have signed a self-declaration and their access should be supervised at all times; they must not be left alone with children.)
12. Does a single, central record (SCR) exist of all checks on SCP staff and, where appropriate, proprietor/governors and volunteers?
13. Are references taken up on all staff prior to employment and recorded on the SCR?
14. Do all staff, volunteers and contractors undertake appropriate training on safeguarding which is recorded and monitored for currency? Is this training updated regularly in line with advice from the Local Safeguarding Children Board (LSCB)?
15. For those working with regularly or hosting under 18s and vulnerable adults, does the training included how to recognise signs of abuse and how to respond to disclosures from participants?
16. Is safeguarding training part of the induction training for all staff, temporary staff and volunteers newly appointed? Does this include the safeguarding policy, staff behaviour policy or code of conduct, and the identification and role of the designated safeguarding lead and how to recognise and respond to concerns?
17. Good practice is that all staff are trained to Level 1 (basic); management to Level 2 (advanced) and DSL to Level 3.
18. Is there a board level lead responsible for safeguarding? Is there a designated senior member of staff responsible for safeguarding arrangements, who has been trained to the appropriate level, (including Inter-agency working) and understands her/his responsibilities with respect to the protection and welfare of participants under 18 and vulnerable adults?
19. Is clear information provided to the parents/guardians of under 18s? Does the publicity or other information made available, before enrolment, give an accurate description of the level of care and support given to participants under 18, especially concerning any periods when participants are unsupervised as well as including sleeping arrangements when accommodated overnight or when at leisure?
20. Are there safe working arrangements for off-site activities, such as any social programme?
21. Are there effective arrangements made to protect participants from the risks associated with radicalisation and extremism?
22. Is there an E-Safety policy, that references the staff code of conduct, participants' use of social media and devices on site such as mobile phones and cameras?
23. Do managers and staff take action immediately if there are concerns about any form of bullying including cyber-bullying or other online risks to the participants?
24. Are arrangements for accommodation, through homestay, halls of residence or otherwise, appropriately managed with adequate safeguards and levels of supervision and registered in accordance with national requirements?
25. When the institution arranges host family accommodation for under 18s, are enhanced DBS and barred list checks made for all permanent residents who are aged 16 or older?
26. Where under 16s are accommodated, other than with their parents or guardians, for more than 28 days, has the local authority been alerted?

Useful websites for further information and guidance on safeguarding

The Children Act 2004:

www.legislation.gov.uk/ukpga/2004/31/pdfs/ukpga_20040031_en.pdf

Keeping Children Safe in Education 2023:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1161273/Keeping_children_safe_in_education_2023_-_statutory_guidance_for_schools_and_colleges.pdf

Safeguarding Children and Safer Recruitment in Education:

www.gov.uk/government/publications/safeguarding-children-and-safer-recruitment-in-education

Safeguarding:

www.britishcouncil.org/education/accreditation/information-centres/care-children

Prevent:

https://www.britishcouncil.org/sites/default/files/information_for_providers_on_prevent_obligations_0.pdf#

Appendix C – Scheme mapping against the European Standards and Guidelines 2015

BAC Standards & Key Indicators								
European Standards & Guidelines 2015	Internal Quality Assurance	Governance, Strategy, and Financial Management (K1-3)	General and Academic Management and Administration (K1-4-10)	Teaching, Learning, and Assessment (K1-11-13)	Student Support, Guidance, and Progression (K1-14-19)	Premises, Facilities, and Learning Resources (K1-20-25)	Quality Management, Assurance, and Enhancement (K1-26-28)	Online, Distance, and Blended Learning (if applicable) (K1-29)
1.1 Policy for quality assurance	1.3-1.5				14.4, 14.7		26.1-26.3 27.1-27.7 28.1-28.4	
1.2 Design and approval of programmes			7.1-7.4 10.4	12.2			27.2, 27.3, 27.7	29.1
1.3 Student-centred learning, teaching, and assessment	1.5			11.1, 11.5-11.8 12.1-12.4, 12.6, 12.7	15.5, 15.6, 15.8 19.4	21.2 24.4		
1.4 Student admission, progression, recognition, and certification	2.1		5.8, 5.10 8.1-8.6 10.2, 10.4	12.4 14.2 15.2-15.4, 15.7, 15.8			27.1, 27.2, 27.5-27.7	
1.5 Teaching staff			6.2, 6.4-6.8 9.1-9.3	11.1, 11.9 13.1-13.4			26.1 28.2	29.2
1.6 Learning resources and student support	2.2 3.1		5.1, 5.2 7.4 10.5	11.6, 11.9 13.1-13.4	14.1-14.7 15.1-15.8 16.1-16.4	22.1-22.3 24.1-24.4 25.1-25.4		
1.7 Information management			5.4	12.1			26.1-26.3 27.1-27.7	
1.8 Public information	2.4		8.1, 8.4 10.1-10.5	12.1			27.4, 28.2	
1.9 Ongoing monitoring and periodic review of programmes	2.2		7.1-7.4				26.1-26.3 27.1-27.7	
1.10 Cyclical external quality assurance	1.2						26.1 27.2, 27.4	



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