

# Quality and Standards Review for Providers Applying to Register with the Office for Students

## Dyson Technical Training Ltd

### Review Report

September 2019



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## Summary of findings and reasons

Ref	Core practice	Outcome	Confidence	Summary of reasons
S1	The provider ensures that the threshold standards for its qualifications are consistent with the relevant national qualifications' frameworks.	Met	High	<p>From the evidence seen, the review team considered that the standards set by the University for the Institute's programme are in line with sector-recognised standards defined in paragraph 342 of the OfS regulatory framework. The review team is clear that sector-recognised standards for the qualification are set and maintained by the University through the use of methods outlined in the University's academic regulations. Based on the evidence provided, the review team considered that standards described in the approved course documentation are set at levels that are consistent with these sector-recognised standards and the University's academic regulations should ensure that standards can be set and maintained appropriately by the University.</p> <p>The review team considered that, based on the evidence scrutinised, the standards that will be achieved by the Institute's students are expected to be in line with the sector-recognised standards defined in paragraph 342 of the OfS regulatory framework. The review team considered that the University's academic regulations should ensure that these standards can be maintained through the partnership arrangements that are currently in place. The team considered that staff fully understand the University's approach to setting and maintaining these standards. Therefore, based on its scrutiny of the evidence provided, the review team concludes that this Core practice is met.</p>

S2	The provider ensures that students who are awarded qualifications have the opportunity to achieve standards beyond the threshold level that are reasonably comparable with those achieved in other UK providers.	Met	High	<p>Based on the evidence presented, the review team determined that the standards set for students to achieve beyond the threshold on the programme are comparable with those set by other UK providers. The review team considered that the standards described in the approved course documentation beyond the threshold level are reasonably comparable with those in other UK providers.</p> <p>The review team determined that the standards that will be achieved by the students beyond the threshold are expected to be reasonably comparable with those achieved in other UK providers. The team was clear that the assessment standards for the qualification are set and maintained by the University through the use of methods outlined in the academic regulations. The team considered that the University's academic regulations should ensure that standards beyond the threshold are maintained. The review team considered that staff fully understand the University's approach to setting and maintaining these standards and students understand what is required to reach standards beyond the threshold. Therefore, based on its scrutiny of the evidence provided, the review team concludes that this Core practice is met.</p>
S3	Where a provider works in partnership with other organisations, it has in place effective arrangements to ensure that the standards of its awards are credible and secure irrespective of where or how courses are delivered or who delivers them.	Met	High	The Institute, working in partnership with the University and DTL, has in place effective arrangements to ensure that the standards of the awards are credible and secure. The partnership agreements are clear and comprehensive in the articulation of the respective roles of the partner organisations. The University is responsible for setting and maintaining the standards of awards granted in its name through following the procedures of course design and delivery as outlined in the University's academic regulations. To secure standards in provision delivered in partnership, the

				programme delivered at the Institute is reviewed by the University periodically following the University's monitoring procedures. The Institute is responsible for all non-academic aspects of the programme through following the agreement for the supply of services between DTL and the Institute. The external examiner report confirms that the standards of awards delivered in partnerships are credible and secure. Staff from both the University and the Institute understand their respective responsibilities for academic standards. The review team concludes, therefore, that this Core practice is met.
S4	The provider uses external expertise, assessment and classification processes that are reliable, fair and transparent.	Met	High	The Institute uses external expertise, assessment and classification processes that are reliable, fair and transparent. The University is responsible for appointing and using external expertise, setting and managing the arrangements for assessment, moderation and classification. The University's academic regulations describe its requirements for using external expertise in setting and maintaining academic standards. The record of course approval indicates that appropriate external expertise is used at the course approval stage in line with the University's academic regulations. The approach to using external examiners is credible and robust because they are embedded within the University's monitoring and review procedures. The University's academic regulations explain the approaches to assessment and classification which are also outlined in the course documentation. Discussions with staff demonstrate that these approaches are well understood. The external examiner report confirms that the assessment and classification processes are reliable, fair and transparent. While some variability of student views was presented with regard to the clarity of the assessment process, students confirm that assessment

				processes overall were reliable, fair and transparent. The review team concludes that, on balance, this Core practice is met.
Q1	The provider has a reliable, fair and inclusive admissions system.	Met	High	The Institute has a reliable, fair and inclusive admissions system. This is evidenced through the Institute's clear and comprehensive admissions policy which provides detailed guidance on the application and selection process, and the process of making complaints and appeals on admissions. The Institute has a robust and credible approach to monitoring admissions, ensuring that the admissions system is reliable, fair and inclusive. Information for applicants is transparent, accessible and fit for purpose. The admissions requirements set out in the programme specification are consistent with the Admissions Policy. Sampled admissions records demonstrate that the Institute's Admissions Policy is implemented in practice, and reliable and fair admissions decisions are made for the applicants. Students tend to agree that the admissions system is reliable, fair and inclusive. Based on the review of job descriptions of staff involved in the admissions, staff admissions training materials, and meeting with staff, the review team confirmed that staff involved in admissions understand their role and are appropriately skilled. The review team concludes, therefore, that this Core practice is met.
Q2	The provider designs and/or delivers high-quality courses.	Met	High	The academic design and delivery of the programme are mainly managed by the University. The approaches for designing and delivering high-quality programmes and modules are outlined in the University's academic regulations. The Institute's plans for course design and delivery indicate that the Institute has procedures in place to facilitate the University's design and delivery of high-quality courses. Given the detailed procedures are in

				<p>place and the programme is reviewed by the University periodically following the University's monitoring procedures, the review team considered the approaches to designing and delivering high-quality courses are credible and robust. Module specifications indicate that the teaching, learning and assessment design enables students to meet and demonstrate the intended learning outcomes. The external examiner report confirms that the programme concerned is high quality. Staff understand their roles in designing and delivering high-quality courses and are able to articulate what 'high quality' means in the context of the Institute. Students tend to regard their courses as being of high quality. The review team concludes, therefore, that this Core practice is met.</p>
Q3	<p>The provider has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience.</p>	Met	High	<p>The Institute has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. The University's policies for staff recruitment, appointment, induction and support provide a sufficient number of appropriately qualified and skilled academic staff. Although the Institute has no policies detailing its approach to the recruitment, appointment, induction and support of professional support staff, it has procedures in place, as reflected from job descriptions, skills audit, and the training attendance list, to recruit, appoint, and support staff so that it meets the outcome. The organisational structure of the Institute, job descriptions and CVs of the Institute's staff further prove that there are sufficient appropriately skilled and qualified staff to deliver a high-quality academic experience. Both the University and the Institute's staff understand their respective roles and responsibilities in maintaining the high-quality of academic experience. Students tend to agree that there are sufficient appropriately skilled and qualified staff to deliver a high-quality academic experience. Observations</p>

				of teaching and learning indicate that teaching staff are appropriately qualified and skilled. The review team concludes, therefore, that this Core practice is met.
Q4	The provider has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience.	Met	High	The Institute has sufficient and appropriate facilities, learning resources, and student support services to deliver a high-quality academic experience. The Institute's plans for facilities, resources and support services are credible, realistic, and demonstrably linked to the delivery of successful academic and professional outcomes for students. Staff from the University and the Institute demonstrate a clear understanding of their respective roles and responsibilities for maintaining and developing student support services to ensure a high-quality student experience. Students tend to regard facilities, learning resources and student support services as sufficient and appropriate, and facilitating a high-quality academic experience. The review team's own assessment of particular facilities and learning resources, including the virtual learning environment confirms that they provide a high-quality academic experience. The review team concludes, therefore, that this Core practice is met.
Q5	The provider actively engages students, individually and collectively, in the quality of their educational experience.	Met	High	The Institute actively engages students, individually and collectively, in the quality of their educational experience. The Institute has credible and robust procedures in place to collect, consider and act upon student feedback, engaging students, individually and collectively, in the quality of their educational experience. This includes through a range of mechanisms including University and Institute surveys and course representatives. Feedback is considered and actions fed back to students to close the feedback loop. There are examples of the Institute changing and improving students' learning experience as a result of student engagement including streamlining



				communications between the Institute and students and the development of an Integrated Library Solution to provide a better overall user experience. Students report that the Institute engages them in the quality of their educational experience and tend to agree that their voice is heard and valued, and that their feedback is listened to and acted upon by the Institute. The review team concludes, therefore, that this Core practice is met.
Q6	The provider has fair and transparent procedures for handling complaints and appeals which are accessible to all students.	Met	High	The Institute has fair and transparent procedures for handling complaints and appeals which are accessible to all students. The partnership agreement confirms that academic complaints and appeals are the responsibility of the University while complaints that students may have about other aspects of delivery or the provision of support are the responsibility of the Institute. Both the University and the Institute's policies for handling complaints and the University's academic regulations for handling appeals clearly explain situations that can or cannot be the subject of complaints or appeals, the process that should be followed or when a complaint should be escalated to OIA, along with the deadline for each step. Both the University and the Institute have procedures in place for recording and monitoring complaints. All relevant policies and procedures regarding complaints and appeals are accessible through the Undergraduate Handbook and the VLE and can be found easily by students. They are written in plain language so can be easily understood. Although no complaints or appeals have been lodged, students did not raise any concerns or doubts about their ability to access details of the relevant procedures. The review team concludes, therefore, that this Core practice is met.

Q8	Where a provider works in partnership with other organisations, it has in place effective arrangements to ensure that the academic experience is high-quality irrespective of where or how courses are delivered and who delivers them.	Met	High	<p>The Institute has in place effective partnership arrangements with the University of Warwick to ensure that the academic experience is high-quality for the students. This is because the partnership agreements are clear and comprehensive in the articulation of the respective roles of each of the partner organisations (the Institute, the University and DTL). The University maintains the quality of the academic experience through following its clear and comprehensive regulations and policies. The University monitors the effectiveness of its work through its periodic programme reviews and quality assurance procedures, ensuring its approach to maintaining a high-quality academic experience in partnership work is robust and credible. The external examiner considers the partnership arrangements to be effective and the course delivered in partnership to be of high quality. Staff from both the University and the Institute clearly understand their respective responsibilities for working in partnership to deliver a high-quality academic experience. Students tend to regard their course delivered in partnership with the University and DTL as being of high quality. The review team concludes, therefore, that this Core practice is met.</p>
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Q9	The provider supports all students to achieve successful academic and professional outcomes.	Met	High	The Institute supports all students to achieve successful academic and professional outcomes. The Institute and the University have clear approaches to student support which facilitate successful academic and professional outcomes including through support offered by the Undergraduate Line Manager and Student Support Advisor. The Institute and the University have credible and robust procedures in place to monitor and review the effectiveness of their student support services, ensuring students achieve successful academic and professional outcomes. All staff met by the review team understand their role in supporting students to achieve successful academic and professional outcomes. Students tend to agree that they are adequately supported to achieve successful academic and professional outcomes. The review team concludes, therefore, that this Core practice is met.
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## About this report

This is a report detailing the outcomes of the Quality and Standards Review for providers applying to register with the Office for Students (OfS), conducted by QAA in September 2019, for Dyson Technical Training Ltd.

A Quality and Standards Review (QSR) is a method of review QAA uses to provide the OfS with evidence about whether new providers applying to be on the OfS Register meet the Core practices of the UK Quality Code for Higher Education (the Quality Code), based on evidence reviewed by expert assessors. This report is structured to outline the review team's decisions about the provider's ability to meet the Core practices through detailing the key pieces of evidence scrutinised and linking that evidence to the judgements made.

The team for this review was:

Name: Professor Mark Davies  
Institution: University of Sunderland  
Role in review team: Institutional reviewer

Name: Ms Cheryl Dunn  
Institution: Blackpool and The Fylde College  
Role in review team: Institutional reviewer

Name: Professor Hastings McKenzie  
Institution: University of Northampton  
Role in review team: Subject reviewer, Engineering

Name: Mrs Cara Molyneux  
Institution: Lancaster University  
Role in review team: Student reviewer

The QAA Officer for this review was Stephen Rylie.

The size and composition of this review team is in line with published guidance and, as such, is comprised of experts with significant experience and expertise across the higher education sector. The team included members with experience of a similar provider to the institution, knowledge of the academic awards offered and included academics with expertise in subject areas relevant to the provider's provision. Collectively the team had experience of the management and delivery of higher education programmes from academic and professional services perspectives, included members with regulatory and investigative experience, and had at least one member able to represent the interests of students. The team included at least one senior academic leader qualified to doctoral level. Details of team members were shared with the provider prior to the review to identify and resolve any possible conflicts of interest.

## About Dyson Technical Training Ltd

Dyson Technical Training Ltd was established in 2016 with the aim of providing educational experiences in engineering aligned with the needs of industry. Since 2017, under its trading name of The Dyson Institute of Engineering and Technology (the Institute), it has offered a single qualification leading to a Bachelor of Engineering Degree Apprenticeship awarded by the University of Warwick (the University), delivered at its site in Malmesbury.

The first cohort of 33 students was registered on the qualification in September 2017 followed by a further 41 students in September 2018. At the time of the review a third cohort of no more than 50 students was undergoing enrolment. These three cohorts account for all undergraduate enrolments.

The strategic and financial management of the Institute is the responsibility of the Institute's Council, which has delegated to the Academic Board the responsibility for academic standards and quality. While the University is responsible for delivery of the qualification and for assessment of students, the Institute takes responsibility for matters including recruitment and admission of students, and aspects of student support.

The Institute regards workplace experience as being integral to students' personal and professional development. In order to ensure such experience, students at the Institute are employees of Dyson Technology Ltd (DTL), which provides them with opportunities for workplace experience alongside their studies. The partnership between the Institute and DTL is governed by an agreement for the supply of services between the two companies.

In 2019 the Institute is developing its own qualification in preparation for its application for degree awarding powers, but this qualification does not lie within the scope of this QSR and was instead considered as part of a Degree Awarding Powers review that was conducted at the same time as this QSR. As such, all of the judgements presented in this report are based on the partnership arrangements that were in place and the qualification being delivered as presented in the evidence submitted.

## How the review was conducted

The review was conducted according to the process set out in [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

When undertaking a QSR all 13 of the Core practices are considered by the review team. However, for this review it was clear that the provider does not offer a research degree programme. Therefore, the review team did not consider Q7 (where the provider offers research degrees, it delivers these in appropriate and supportive research environments).

To form its judgements about the provider's ability to meet the Core practices, the review team considered a range of evidence that was submitted prior to the review visit and evidence gathered at the review visit itself. To ensure that the review team focused on the principles embedded in the Core practices, and that the evidence considered was assessed in a way that is clear and consistent with all other reviews, the team used Annex 4 of the Guidance for Providers to construct this report and detail the key pieces of evidence seen. Annex 4 expects that review teams will sample certain types of key evidence using a combination of representative sampling, risk-based sampling and randomised sampling. In this review, the team sampled the following areas for evidence for the reasons given below:

- The review team considered all module specifications for the programme, in order to test that specified sector-recognised standards for courses sampled are consistent with relevant national qualifications' frameworks; to test that specified sector-recognised standards for courses sampled are reasonably comparable with those achieved in other UK providers; to assess the reliability, fairness and transparency of assessment and classification processes; to test that all elements of the courses sampled are high quality (curriculum design, content and organisation; learning, teaching and assessment approaches) and that the teaching, learning and assessment design will enable students to demonstrate the intended learning outcomes.

- The review team considered the only available external examiner's report, in order to check that external examiners confirm threshold standards are consistent with national qualifications' frameworks, and that credit and qualifications are awarded only where those threshold standards have been met; to check that external examiners confirm that standards beyond the threshold for courses sampled are reasonably comparable with those achieved in other UK providers, and that credit and qualifications are awarded only where those standards have been met; to test whether external examiners consider that standards are credible and secure, thus confirming the effectiveness of the underpinning arrangements; to identify externals' views about reliability, fairness and transparency of assessment and classification processes; to identify external examiners' views about the quality of the courses sampled.
- To assess whether reliable, fair and inclusive admissions decisions were made for the applicants sampled, the review team considered all applicant data and a random sample of three interview notes and three assessment day observation records.
- To determine whether staff roles are consistent with the delivery of a high-quality learning experience, the review team considered job descriptions for all members of staff currently employed at the Institute and CVs of all technical engineers and all student support advisers employed by the Institute for current programme delivery.
- The Institute reported that no complaints or appeals have been received so far.

Further details of all the evidence the review team considered are provided in Annex 1 of this report.

## Explanation of findings

### S1 The provider ensures that the threshold standards for its qualifications are consistent with the relevant national qualifications' frameworks

1 To meet this Core practice a provider must ensure that threshold standards for its qualifications are consistent with the relevant national qualifications' frameworks. The threshold standards for its qualifications must be articulated clearly and must be met, or exceeded, through the delivery of the qualification and the assessment of students.

2 The sector-recognised standards that are used in relation to this Core practice are those that apply in England, as defined in paragraph 342 of the OfS regulatory framework. That is, those set out in Table 1, in paragraphs 4.10, 4.12, 4.15, 4.17, 4.18, in paragraphs 6.13-6.18 and in the Table in Annex C, in the version of [The Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies](#) (FHEQ) published in October 2014. These sector-recognised standards represent the threshold academic standards for each level of the FHEQ and the minimum volumes of credit typically associated with qualifications at each level.

3 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

#### The evidence the team considered

4 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The partnership agreement and the agreement extension between the Institute, the University and DTL
- b The University's academic regulations
- c Module specifications
- d The external examiner report
- e Meeting with senior staff
- f Meeting with the University staff
- g Meeting with academic and professional support staff.

5 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

6 Third party endorsements as none are available for the provision on offer at the Institute.

7 Assessed student work, as confirmed by the Institute, it is the University's responsibility for managing assessment.

## **How any samples of evidence were constructed**

8 To test that specified threshold standards for courses sampled are consistent with relevant national qualifications' frameworks, the review team considered all module specifications for the programme.

9 To check that external examiners confirm threshold standards are consistent with national qualifications' frameworks, and that credit and qualifications are awarded only where those threshold standards have been met, the review team considered the only available external examiner's report.

## **Why and how the team considered this evidence**

10 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

11 To identify institutional approach to course and assessment design, marking and moderation, requirements for awards and approach to classification as the underlying basis for the standards of awards, the review team considered the University's academic regulations and the partnership agreement(s) between the partner organisations, which determine the roles and responsibilities of each in the design and delivery of the programme.

12 To interrogate the robustness and credibility of the Institute's approach to ensuring sector-recognised standards, the review team considered the partnership agreements.

13 To test that staff understand and apply the approach to maintaining sector-recognised standards, the review team met with University staff, the Institute's senior staff, and academic and professional support staff.

## **What the evidence shows**

14 The review team's analysis of the evidence led to the following observations.

15 The partnership agreement and the agreement extension between the Institute, the University and the DTL confirm that the current qualification offered to students was designed and delivered by the University (in collaboration with Institute staff). The partnership agreement highlights the University's responsibility in setting and maintaining the academic standards of the degree awarded by the University in line with the University's academic regulations. The University's academic regulations provide detailed guidance on the University's approach to course and assessment design, marking and moderation, requirements for awards and approaches to classification as the underlying basis for the standards of awards. The review team confirmed that the methodology used by the University is well established in its academic regulations and clearly demonstrates how relevant national qualifications' frameworks are taken into account when designing and delivering the programme in collaboration with Institute staff.

16 The partnership agreements explain that, to maintain sector-recognised standards on an ongoing basis, the programme delivered at the Institute is subject to the same rigorous periodic and annual reviews as all University courses, following the University's procedures for the approval and monitoring of collaborative courses as outlined in its academic regulations. The University is also responsible for monitoring its own effectiveness in



discharging its responsibilities as to both procedure and course materials, in accordance with the University's quality assurance procedures. The ultimate responsibility for maintenance of academic standards and the quality of the course lie with the Senate and Council of the University. As such, the review team concludes that the approach to maintaining sector-recognised standards is robust and credible.

17 The sector-recognised standards described in all module specifications at Level 6 are consistent with the FHEQ. The module specifications clearly outline module content and teaching, assessment method, credit values, and learning outcomes, with appropriate references to the FHEQ.

18 The external examiner's report confirms that the relevant University requirements were being met through the delivery of the qualification and the assessment of students. The external examiner confirms in the report that sector-recognised standards for the programme are consistent with sector-recognised standards and have been maintained at that level.

19 The meetings with the University staff, the institute's senior staff and academic and professional support staff enabled the review team to discuss how staff understand the approach to maintaining sector-recognised standards. Through triangulating the conversations with the information gathered from the academic regulations and the course documentation, the team was able to determine that the staff are aware of their responsibility in supporting the delivery of the qualification in line with the expectations of national frameworks.

## **Conclusions**

20 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

21 From the evidence seen, the review team considered that the standards set by the University for the Institute's programme are in line with sector-recognised standards defined in paragraph 342 of the OfS regulatory framework. The review team is clear that sector-recognised standards for the qualification are set and maintained by the University through the use of methods outlined in the University's academic regulations. Based on the evidence provided, the review team considered that standards described in the approved course documentation are set at levels that are consistent with these sector-recognised standards and the University's academic regulations should ensure that standards can be set and maintained appropriately by the University.

22 The review team considered that, based on the evidence scrutinised, the standards that will be achieved by the Institute's students are expected to be in line with the sector-recognised standards defined in paragraph 342 of the OfS regulatory framework. The review team considered that the University's academic regulations should ensure that these standards can be maintained through the partnership arrangements that are currently in place. The review team considered that staff fully understand the University's approach to setting and maintaining these standards. Therefore, based on its scrutiny of the evidence provided, the review team concludes that this Core practice is met.

23 The evidence underpinning this judgement reflects all the evidence described in QSR evidence matrix, with the exception of the third-party endorsement and assessed student work. The rest of the evidence base leads the review team to have a high degree of confidence in this judgement.

## **S2 The provider ensures that students who are awarded qualifications have the opportunity to achieve standards beyond the threshold level that are reasonably comparable with those achieved in other UK providers**

24 This Core practice expects that the provider ensures that students who are awarded qualifications have the opportunity to achieve standards beyond the threshold level that are reasonably comparable with those achieved in other UK providers.

25 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

26 The review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The partnership agreement and the agreement extension between the Institute, the University and DTL
- b The University's academic regulations
- c Module specifications
- d The external examiner report
- e Student submission
- f Meeting with senior staff
- g Meeting with students
- h Meeting with the University staff
- i Meeting with academic and professional support staff.

27 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

28 Third party endorsements as none are available for the provision on offer at the Institute.

29 Assessed student work, as confirmed by the Institute, it is the University's responsibility for managing assessment.

### **How any samples of evidence were constructed**

30 To test that specified standards beyond the threshold for courses sampled are reasonably comparable with those achieved in other UK providers, the review team considered all module specifications for the programme.

31 To check that external examiners confirm that standards beyond the threshold for courses sampled are reasonably comparable with those achieved in other UK providers,

and that credit and qualifications are awarded only where those standards have been met, the review team considered the only available external examiner's report.

### **Why and how the team considered this evidence**

32 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

33 To identify institutional approach to course and assessment design, marking and moderation, requirements for awards and approach to classification as the underlying basis for the standards of awards, the review team considered the University's academic regulations and the partnership agreement(s) between the partner organisations, which determine the roles and responsibilities of each in the design and delivery of the programme.

34 To interrogate the robustness of the Institute's approach to maintaining comparable standards, the review team considered the partnership agreements.

35 To test that staff understand and apply the approach to maintaining threshold standards, the review team met with University staff, the Institute's senior staff, and academic and professional support staff.

36 To assess whether students understand what is required of them to reach standards beyond the threshold, the review team considered the student submission and met with students.

### **What the evidence shows**

37 The review team's analysis of the evidence led to the following observations.

38 The partnership agreement and the agreement extension between the Institute, the University and the DTL confirm that the current qualification offered to students was designed and delivered by the University in collaboration with Institute staff. The partnership agreement highlights the University's responsibility in setting and maintaining comparable standards of the degree awarded by the University in line with the University's academic regulations. The University's academic regulations provide detailed guidance on how programme(s) are designed and developed at the University to facilitate the assessment of students at, and beyond, threshold levels that are reasonably comparable with those achieved in other UK providers. Given the clear roles and responsibilities that have been clearly set out in the partnership agreements between the partner organisations and the methodology used by the University has been well established in its academic regulations, the team is assured that standards of assessment in the programme(s) delivered and developed for delivery at the Institute are comparable with other UK providers.

39 The partnership agreements explain that, to maintain comparable standards on an ongoing basis, the programme delivered at the Institute is subject to the same rigorous periodic and annual reviews as all University courses, following the University's procedures for the approval and monitoring of collaborative courses as outlined in its academic regulations. The University is also responsible for monitoring its own effectiveness in discharging its responsibilities as to both procedure and course materials, in accordance with the University's quality assurance procedures. The ultimate responsibility for maintenance of academic standards and the quality of the course lie with the Senate and

Council of the University. As such the review team concludes that the approach to maintaining comparable standards is robust and credible.

40 The module specifications clearly outline how students should be assessed, how they can reach standards beyond threshold and who is responsible for the assessments and moderation of achievement. The assessment methods set out in module specifications are in line with the approach to marking and moderation, and the requirements for awards as defined in the University's academic regulations, which assures the standards applied to assessed work are in line with the expectations of other UK providers.

41 The external examiner's report confirms that the relevant University requirements are being met through the delivery of the qualification and the assessment of students. The external examiner confirms in the report that standards beyond the threshold for the programme are reasonably comparable with those achieved in other UK providers.

42 The meetings with the University staff, the Institute's senior staff and academic and professional support staff enabled the review team to discuss how staff understand the University's approach to setting and maintaining the standards for students' assessment and achievement. Through triangulating the conversations with the information gathered from the academic regulations and the course documentation, the team was able to determine that staff are aware of their responsibility in facilitating the achievement of students beyond a threshold level, where possible.

43 The students' views as expressed in the student submission suggest some lack of clarity in their understanding of how to achieve a particular grade. However, students whom the review team met confirmed that while there is some variability in the application of assessment standards, the assessment process overall was reliable, fair and transparent. Through further discussion the review team understood that students knew where in the course documentation to find information about assessments and what is required to reach standards beyond the threshold.

## **Conclusions**

44 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

45 The review team, based on the evidence presented, determined that the standards set for students to achieve beyond the threshold on the programme are comparable with those set by other UK providers. The review team considered that the standards described in the approved course documentation beyond the threshold level are reasonably comparable with those in other UK providers.

46 The review team determined that the standards that will be achieved by the students beyond the threshold are expected to be reasonably comparable with those achieved in other UK providers. The review team was clear that the assessment standards for the qualification are set and maintained by the University through the use of methods outlined in the academic regulations. The team considered that the University's academic regulations should ensure that standards beyond the threshold are maintained. The review team considered that staff fully understand the University's approach to setting and maintaining these standards and students understand what is required to reach standards beyond the threshold. Therefore, based on their scrutiny of the evidence provided, the review team concludes that this Core practice is met.

47 The evidence underpinning this judgement reflects all the evidence described in QSR evidence matrix, with the exception of the third-party endorsement and assessed student work. The rest of the evidence base leads the review team to have a high degree of confidence in this judgement.

### **S3 Where a provider works in partnership with other organisations, it has in place effective arrangements to ensure that the standards of its awards are credible and secure irrespective of where or how courses are delivered or who delivers them**

48 This Core practice expects that where a provider works in partnership with other organisations, it has in place effective arrangements to ensure that the standards of its awards are credible and secure irrespective of where or how courses are delivered or who delivers them.

49 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

#### **The evidence the team considered**

50 The review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The University's academic regulations
- b The agreement for the supply of services between the Institute and DTL
- c The partnership agreement and the agreement extension between the Institute, the University and DTL
- d The external examiner report
- e Meeting with senior staff
- f Meeting with the University staff
- g Meeting with academic and professional support staff.

51 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

52 Third party endorsements as none are available for the provision on offer at the Institute.

53 Assessed student work, as confirmed by the Institute, it is the University's responsibility for managing assessment.

#### **How any samples of evidence were constructed**

54 To test whether external examiners consider that standards are credible and secure, thus confirming the effectiveness of the underpinning arrangements, the review team considered the only available external examiner's report.

## **Why and how the team considered this evidence**

55 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

56 To identify how the Institute works with its awarding body to ensure the standards of the awards are credible and secure, the review team considered the partnership agreement and the agreement extension between the Institute, the University and DTL, the partnership agreement for the supply of services between DTL and the Institute, and the University's academic regulations.

57 To assess whether the Institute has a credible, robust and evidence-based approach to securing standards in partnership work, the review team considered the partnership agreements.

58 To interrogate the basis for the maintenance of academic standards within specific partnerships, and that those arrangements are in line with the University's regulations, the review team considered the partnership agreements.

59 To test that staff understand and discharge their responsibilities effectively to the awarding body and to test the awarding body's understanding of its responsibilities and how this is implemented and monitored in practice, the review team met with University staff, the Institute's senior staff, and academic and professional support staff.

## **What the evidence shows**

60 The review team's analysis of the evidence led to the following observations.

61 The partnership agreements for the current, and continued, delivery of the qualification set out the roles and responsibilities of each of the partner organisations (the Institute, the University and DTL). The University is responsible for the design and delivery of the academic elements of the programme and maintaining relevant academic standards. The University ensures that its responsibility for setting and maintaining academic standards is implemented through its approach to course and assessment design, marking, moderation and external examining as outlined in the University's academic regulations. The DTL is responsible for the design and delivery of the practical elements (all non-academic aspects) of the programme. The partnership agreement for the supply of services between DTL and the Institute outlines how the practical elements of the qualification are delivered by DTL through the employment of students. Based on the University's academic regulations and the partnership agreement for the supply of services between DTL and the Institute, the review team considered that the Institute, working in collaboration with the University and DTL, has effective arrangements in place to ensure that the standards of the awards are credible and secure.

62 The partnership agreements explain that, to secure standards in partnership work on an ongoing basis, the programme delivered at the Institute is subject to the same rigorous periodic and annual reviews as all University courses, following the University's procedures for the approval and monitoring of collaborative courses as outlined in its academic regulations. The University is also responsible for monitoring its own effectiveness in discharging its responsibilities as to both procedure and course materials, in accordance with the University's quality assurance procedures. The ultimate responsibility for

maintenance of academic standards and the quality of the course lie with the Senate and Council of the University. As such, the review team concludes that the approach to maintaining standards in partnership work is robust and credible.

63 The partnership agreement and the agreement extension between the Institute, the University and DTL is legally binding, the partner organisations agreeing to abide by the University's academic regulations which outlines the University's approach to maintaining sector-recognised standards and ensuring that qualifications are awarded only where sector-recognised standards have been met. The review team considered the partnership agreements clear and comprehensive, because the roles and responsibilities of the partner organisations and what services and resources that the University and DTL should provide to the programme delivery are defined in the partnership agreements. The review team noted that the partnership agreements permit for further cohorts to be enrolled under similar delivery arrangements beyond September 2019, allowing the team to be assured that standards are likely to be maintained.

64 The external examiner's report confirms that the relevant University requirements were being met through the partnership delivery of the current qualification and the assessment of students. The external examiner confirms in the report that the standards of awards delivered in partnership are credible and secure.

65 The meetings with the University staff, the Institute's senior staff and academic and professional support staff enabled the review team to discuss how staff understand the University's approach to setting and maintaining the standards for students' assessment and achievement through partnership working. By triangulating these conversations with information gathered from the University's academic regulations and the partnership agreements, which clearly sets out the roles and responsibilities of the partner organisations in the delivery of the qualification and the maintenance of appropriate standards, the review team was able to determine that the staff from both the Institute and the University understand their respective responsibilities for academic standards.

## **Conclusions**

66 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

67 The Institute, working in partnership with the University and DTL, has in place effective arrangements to ensure that the standards of the awards are credible and secure. The partnership agreements are clear and comprehensive in the articulation of the respective roles of the partner organisations. The University is responsible for setting and maintaining the standards of awards granted in its name through following the procedures of course design and delivery as outlined in the University's academic regulations. To secure standards in provision delivered in partnership, the programme delivered at the Institute is reviewed by the University periodically following the University's monitoring procedures. The Institute is responsible for all non-academic aspects of the programme through following the agreement for the supply of services between DTL and the Institute. The external examiner report confirms that the standards of the award delivered in partnerships are credible and secure. Staff from both the University and the Institute understand their respective responsibilities for academic standards. The review team concludes, therefore, that this Core practice is met.



68 The evidence underpinning this judgement reflects all the evidence described in QSR evidence matrix, with the exception of the third-party endorsement and assessed student work. The rest of the evidence base leads the review team to have a high degree of confidence in this judgement.

## **S4 The provider uses external expertise, assessment and classification processes that are reliable, fair and transparent**

69 This Core practice expects that the provider uses external expertise, assessment and classification processes that are reliable, fair and transparent.

70 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

71 The review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The University's academic regulations
- b Undergraduate Handbook
- c Module specifications
- d Minutes of the University's Academic Quality and Standards Committee recording approval of the qualification
- e The external examiner report
- f Student survey analysis
- g Student submission
- h Meeting with senior staff
- i Meeting with students
- j Meeting with University staff
- k Meeting with academic and professional support staff.

72 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

73 Third party endorsements as none are available for the provision on offer at the Institute.

### **How any samples of evidence were constructed**

74 To assess the reliability, fairness and transparency of assessment and classification processes, the review team considered all module specification for the programme.

75 To identify externals' views about reliability, fairness and transparency of assessment and classification processes, the review team considered the only available external examiner's report.

## **Why and how the team considered this evidence**

76 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

77 To identify how external experts are used in maintaining academic standards, and how the Institute's assessment and classification processes operate, the review team considered the University's academic regulations, the partnership agreement and the agreement extension between the Institute, the University and (DTL), and the Undergraduate Course Handbook.

78 To assess whether the approach to using external expertise in maintaining academic standards and the approaches to assessment and classification are credible, robust and evidence-based, the review team considered the partnership agreements.

79 To test that external experts are used according to the Institute's regulations or policies, the review team considered the minutes of the University's Academic Quality and Standards Committee recording approval of the qualification.

80 To test that staff understand the requirements for the use of external expertise, and the Institute's assessment and classification processes, the review team met with the University staff, the Institute's senior staff, and academic and professional support staff.

81 To identify how students regard the reliability, fairness and transparency of assessment and classification processes, the review team considered the student submission, student survey analysis, and the meeting with students.

## **What the evidence shows**

82 The review team's analysis of the evidence led to the following observations.

83 The partnership agreement and the agreement extension between the Institute, the University and the DTL confirm that the University is responsible for the appointment of external examiners and the use of external expertise. The University's academic regulations set out how external experts should be included in the design of the qualification and in the setting of appropriate, transparent assessment standards for programmes at the Institute. The record of approval of the qualification demonstrates that external expertise is used in the creation and approval of the programme according to the University's academic regulations. The University's academic regulations explain how external expertise is used for the assessment of the programme, including marking and moderation of assessment, progression, reassessment, and consideration and confirmation of results.

84 The review team considered the approach to using external expertise in maintaining academic standards to be robust and credible, because the use of external examiners is embedded in the monitoring and review procedures as outlined in the University's academic regulations.

85 The partnership agreement and the agreement extension between the Institute, the University and the DTL confirm that the University is responsible for assessment and examination arrangements, arrangements for marking, moderation and determination of examination results. The University's academic regulations provide an appropriate quality

framework for the operation of assessment and classification processes. It is clearly evident that they have been used to underpin the assessment and classification guidance in the Institute's Undergraduate Handbook. The Undergraduate Handbook explains the approach to determining the programme structures and associated learning outcomes, setting, approving and reviewing assessments, conducting those assessments and moderation of the marking to ensure the maintenance of academic standards.

86 The review team considered the approaches to assessment and classification to be robust and credible because the effectiveness of assessment and classification processes is monitored and reviewed within the University's quality cycle. In addition, the partnership agreement explains that, to maintain the sector-recognised standards on an ongoing basis, the programme delivered at the Institute is subject to the same rigorous periodic and annual reviews as all University courses, following the University's procedures for the approval and monitoring of collaborative courses as outlined in the University's academic regulations.

87 The module specifications set out the assessment methods for each module and the percentage weightings of each assessment task. The module specifications demonstrate how the design of the qualification outlined in the approval documentation has been implemented in practice and indicate that the assessment and classification processes are reliable, fair and transparent.

88 The external examiner's report confirms to the review team that the standards and consistency of marking are appropriate, in line with the University academic regulations. The external examiner confirms in the report that the assessment moderation processes are reliable and clear.

89 The meetings with the University staff, the Institute's senior staff and academic and professional support staff enabled the review team to discuss staff understanding of the requirements for the use of external expertise, and the assessment and classification processes. Through triangulating the conversations with the information gathered from the academic regulations and the course documentation, the team was able to determine that the staff are aware of their responsibility in assessment and classification processes and using external expertise in maintaining sector-recognised standards.

90 The students' views as expressed in the student submission suggest some lack of clarity in their understanding of how certain grades could be achieved. This was affirmed in the student survey carried out in March 2019 which showed that 'only 27% of undergraduates across both cohorts think there is clear guidance on how to achieve a particular grade'. However, in their discussion with students, the review team noted there was a general view expressed that while some variability was present, the assessment process overall was reliable, fair and transparent. The review team also noted that the students were aware of where there was information in Undergraduate Handbook and module specifications that relates to assessment and that this information is helpful in aiding students' understanding of grades. Students agreed that the assessment process was in line with the process described in their course documentation.

## **Conclusions**

91 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

92 The Institute uses external expertise, assessment and classification processes that are reliable, fair and transparent. The University is responsible for appointing and using external expertise, and setting and managing the arrangements for assessment, moderation and classification. The University's academic regulations describe its requirements for using external expertise in setting and maintaining academic standards. The record of course approval indicates that appropriate external expertise is used at the course approval stage in line with the University's academic regulations. The approach to using external examiners is credible and robust because they are embedded within the University's monitoring and review procedures. The University's academic regulations explain the approaches to assessment and classification which are also outlined in the course documentation. Discussions with staff demonstrate that these approaches are well understood. The external examiner report confirms that the assessment and classification processes are reliable, fair and transparent. While some variability of student views was presented with regard to the clarity of the assessment process, students confirm that assessment processes overall are reliable, fair and transparent. The review team concludes, therefore, that this Core practice is met.

93 The evidence underpinning this judgement reflects all the evidence described in QSR evidence matrix, with the exception of the third-party endorsement and assessed student work. The rest of the evidence base leads the review team to have a high degree of confidence in this judgement.

## **Q1 The provider has a reliable, fair and inclusive admissions system**

94 This Core practice expects that the provider has a reliable, fair and inclusive admissions system.

95 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

96 The review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The Partnership Agreement
- b The Admissions Policy
- c The Recruitment and Admissions Operational Plan
- d Admissions training presentation
- e Scoring guidance
- f Standardised scoring matrix
- g Admissions process mapping
- h The Access and Participation Statement
- i The Institute's Strategic Overview
- j Evidence relating to complaints and appeals made to the University
- k The Institute's website
- l The programme specification
- m Applicants data
- n A random sample of three interview notes and three assessment day observation records
- o Student submission
- p Meeting with students
- q Meeting with academic and professional support staff.

97 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

98 Arrangements with recruitment agents because the Institute reported that they do not use recruitment agents.

### **How any samples of evidence were constructed**

99 To assess whether reliable, fair and inclusive admissions decisions were made for the applicants sampled, the review team considered all applicants' data and a random sample of three interview notes and three assessment day observation records.

## **Why and how the team considered this evidence**

100 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

101 To identify institutional policy relating to: the recruitment, selection and admission of students; roles and responsibilities of staff involved in the admissions process; support for applicants; how the Institute facilitates an inclusive admissions system; and how it handles complaints and appeals, the review team considered the Partnership Agreement, the Admissions Policy, the Recruitment and Admissions Operational Plan, scoring guidance, standardised scoring matrix, admissions process mapping, the Access and Participation Statement, the Institute's Strategic Overview, and evidence relating to complaints and appeals made to the University.

102 To assess whether the Institute has credible, robust and evidence-based plans for ensuring that admissions systems are reliable, fair and inclusive, the review team considered the Admissions Policy and the Recruitment and Admissions Operational Plan.

103 To test whether the information given to applicants is transparent, inclusive and fit for purpose, the review team considered the Institute's website, the Admissions Policy, the Recruitment and Admissions Operational Plan, and the student submission.

104 To test whether admissions requirements for courses sampled reflect the Institute's policy, the review team considered the Institute's website, the Admissions Policy and the programme specification.

105 To test whether staff understand their responsibilities, are appropriately skilled and supported and can articulate how the Institute's approach to inclusivity is manifest in the admissions process, the review team considered the Admissions Policy, job descriptions for all members of staff currently employed at the Institute including the Undergraduate Experience Manager and Undergraduate Admissions Partner, admissions training presentation, scoring guidance, and held a meeting with staff involved in admissions.

106 To assess students' views about the admissions process, the review team considered the student submission and held a meeting with students.

## **What the evidence shows**

107 The review team's analysis of the evidence led to the following observations.

108 The Partnership Agreement confirms that the Institute is responsible for recruitment, selection and admission of students, in collaboration with DTL as the employer. The Institute's Admissions Policy provides detailed guidance on the five-stage process for application and selection, and the timescale for each stage. At Stage one applicants register their interest in the programme and provide information about their education history and predicted grades. The information is checked by the Institute's admissions team to confirm applicants' eligibility for the programme. Applicants will receive notification as to whether they can progress to the next stage of the process within 10 working days. Stage two is the completion of a numerical and a diagrammatic reasoning test, which are administered online to assess applicants' problem-solving aptitude. Applicants who pass the required benchmark for these tests will be able to progress their application to Stage three, which is

to submit their formal application online with a list of questions required to be answered. The Institute's admissions team will score each answer based on an agreed assessment matrix. Applicants who achieve the agreed threshold will progress to Stage four, which is a phone interview administered by a member of the admissions team, and Stage five, which is the 'assessment day'. This encompasses a day of in-person assessments including group exercise and interviews at the Institute campus. The Admissions Panel, including the Undergraduate Experience Manager, the Undergraduate Admissions Partner, the Technical Director, the Director of the Institute, and the Technical Manager, will make decisions based on each applicant's interview and assessment performance. Once the decision has been made, a conditional offer will be made to successful applicants in writing within four weeks of the assessment day. All offers are conditional on the offer holder achieving, or having already achieved, the required entry criteria for the programme and meeting the criteria for employment and signing an employment contract with DTL. Feedback will be given, when requested, to applicants who have not been offered a place. As confirmed in the Recruitment and Admissions Operational Plan, throughout the admissions process applicants receive personalised communication and updates on their application to ensure they understand how to progress to the next step and have access to an email address that reaches the Dyson Institute admissions team directly for any further support or advice. The review team concludes that the Institute has a clear procedure for recruitment, selection and admission of students.

109 As confirmed in the Admissions Policy, all applicants progress through the same stages throughout the process and are considered on the basis of their merits, abilities, and potential, regardless of age, gender, ethnic or national origin, disability, religion, sexual orientation or any other inappropriate grounds. To prevent unconscious bias, all application screening, up to the start of the telephone interview, is name-blind. The dedicated admissions team do not have access to the diversity data of individuals, and limited applicant information is shared with staff prior to the assessment day. Assessment at each stage is carried out by the same consistent group within a specific application stage, but with different groups assessing at each stage, to ensure diversity of opinion. In addition, a clear scoring guidance and a standardised scoring matrix are used to ensure all assessors are consistent on scoring at each stage. A process mapping detailing the timeline from planning the recruitment to reviewing the admissions is in place to ensure each step is managed in a clear timescale. The review team, therefore, considered the procedure for the recruitment and admission of students reliable and fair.

110 The Admissions Policy is informed by the Access and Participation Statement, which addresses widening access through increasing the recruitment of female students as well as students from educationally or economically disadvantaged backgrounds. In alignment with the Access and Participation Statement, the Recruitment and Admissions Operational Plan targeted 35 schools for outreach recruitment activities, with the aim of reaching a diverse range of students, increasing the size and diversity of the talent pipeline coming into the Institute. The Recruitment and Admissions Operational Plan and the Institute's Strategic Overview confirm that the Institute is committed to widening participation through paying undergraduate students instead of charging them tuition fees, offering further financial support to students and running a Physics Summer School prior to the start of the programme for students without A-level Physics. To ensure inclusivity of admissions, the Admissions Policy explains that applicants are given the opportunity to disclose disabilities or additional learning or support needs at each stage of the admissions process and are encouraged to discuss their potential requirements as early as possible in the admissions process to ensure that reasonable adjustments and support can be put in place. The review team therefore considered the procedure for the recruitment and admission of students inclusive.



111 The Admissions Policy makes explicit reference to the opportunity for a prospective student to complain about the admissions process or to appeal a decision not to offer a place. It explains the grounds for complaints or appeals, what can and cannot be complained about or appealed against. It specifies who can lodge an admissions complaint or appeal, and the rights of a complainant/appellant. It specifies the time limits within which an admissions complaint or appeal can be lodged. It specifies the complaints/appeals processes to be followed in the Institute and the timescale for each step. The application forms for making complaints and appeals on admissions are attached as an appendix to the Admissions Policy. Although the Institute reported that no complaints or appeals on admissions have been received to date, given that detailed policies and procedures are in place, the review team concludes that the Institute's approach to handling complaints and appeals regarding admissions is reliable, fair and likely to deliver timely outcomes.

112 The Institute has arrangements in place to monitor and review the admissions system. The Admissions Policy is reviewed annually by the Institute's Senior Leadership Team and approved by the Director of the Institute. In addition, as explained in the Recruitment and Admissions Operational Plan, all matters related to recruitment and admissions, including application records, student feedback on admissions, student complaints and appeals on admissions, recruitment materials, staff admissions training materials, and any pre-entry information and activities, are reviewed by the Undergraduate Experience Team and Admissions Team on an annual basis. Any issues identified and associated actions feed into the Institute's annual review report. The review team concludes that the Institute has a robust and credible approach to monitoring admissions, ensuring that the admissions system is reliable, fair and inclusive.

113 The primary source of information for prospective applicants is the Institute's website. The information on the website is clear and tells an applicant all that they would need to know before making an application, including information on the academic and non-academic entry requirements; the application and assessment process; expected timescales, including how long the process typically takes overall, and with specific key milestone dates where possible; how students are likely to be communicated with at each stage; information about reasonable adjustment and financial support; and what to expect from their student experience should they be successful. The website also includes a list of frequently asked questions (FAQs) and answers on admissions and contact details for further information and advice. The Institute's Access and Participation statement is publicly available on the website. The course webpage includes detailed course information including each year's module structure and content, career expectations and the qualification to be awarded. To provide information to prospective students, the Institute holds a range of recruitment and outreach activities. To ensure the publication of information is accurate and consistent, as confirmed in the Admissions Policy, a full review of the website content and printed recruitment materials is conducted annually prior to applications opening for the relevant year of entry. Students stated in their submission and in the meeting with the review team that information provided about the application and admissions process was clear and transparent, and all students agreed that their experiences as students aligned with the expectations that they had based on pre-admission information. Therefore, the review team concludes that the Institute has procedures in place to manage the publication of information, ensuring information for applicants is transparent, accessible and fit for purpose.

114 Students at the Institute are required to enrol on a programme of study and to enter employment with DTL. Therefore, entry requirements, including academic requirements for programme study, non-academic entry requirements for employment, and English language requirements, are clearly explained in the Institute's Admissions Policy and on the website. The academic entry requirements for the programme are also clearly presented in the programme specification. The review team concludes that the admissions requirements set out in programme specifications are consistent with the Admissions Policy.

115 The review team considered all applicant data for the past two years and a random sample of three interview notes and three assessment day observation records. The applicant data indicates that all applicants' prior qualifications were submitted for consideration. No applicant had been made an offer when their qualifications were below the admissions requirements as set out in the Admissions Policy. The interview notes and assessment day observation records indicate that the assessors' scoring consistently followed the scoring guidance. The review team therefore concludes that admissions records demonstrate that the Institute's policies are implemented in practice and that reliable and fair decisions were made for the applicants sampled.

116 The review team found that staff roles and responsibilities in relation to the recruitment and admissions of students are well defined in the Admissions Policy and in staff job descriptions. To ensure the staff are appropriately skilled and supported, all staff involved in admissions are given appropriate, compulsory training to ensure consistency of approach, covering areas such as unconscious bias, preventing discrimination, how to use the assessment tools effectively, what success at the relevant stage looks like and answering or signposting frequently asked questions. As explained in the Admissions Policy, all staff involved in interviews and assessments are required to complete training on an annual basis, regardless of prior involvement in the Institute's assessment process. In addition, a scoring guidance and a standardised scoring template also help staff to consider applications in a consistent way. Staff involved in the Admissions Process, including the Undergraduate Admissions Partner, Undergraduate Experience Manager, and the Technical Manager, demonstrated a clear understanding of their respective roles because they were able to explain their responsibilities relating to admissions in detail and referred to relevant policies when questioned. The Undergraduate Admissions Partner clearly outlined the process to be applied in admissions and how the admissions process is monitored and audited. Staff involved in the admissions confirmed that they had been appropriately trained and supported through admissions training, with updates provided on any changes to course admissions criteria or any national policy changes at the beginning of the admission cycle.

117 Student views presented in the student submission and in the meeting show satisfaction with their experience of the recruitment and admissions process. Students who met the review team agreed that, in their experience, the admissions procedure is fair and transparent. All students confirmed in the meeting that they had been through the five-stage admissions process as described in the Admissions Policy and received appropriate information regarding the admissions process and the programme they intended to study. Students confirmed that they were clear about the entry requirements and the application process and agreed that the information for applicants was easily accessible and useful and that the Institute's close engagement with them during the application process ensured they were well informed and given opportunities to clarify where there were uncertainties.

## **Conclusions**

118 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

119 The Institute has a reliable, fair and inclusive admissions system. This is evidenced through the Institute's clear and comprehensive Admissions Policy which provides detailed guidance on the application and selection process, and the process of making complaints and appeals on admissions. The Institute has a robust and credible approach to monitoring admissions, ensuring that the admissions system is reliable, fair and inclusive. Information

for applicants is transparent, accessible and fit for purpose. The admissions requirements set out in the programme specification are consistent with the Admissions Policy. Sampled admissions records demonstrate that the Institute's Admissions Policy is implemented in practice and reliable and fair admissions decisions are made for the applicants. Students tend to agree that the admissions system is reliable, fair and inclusive. Based on the review of job descriptions of staff involved in admissions, staff admissions training materials, and meeting with staff, the review team confirmed that staff involved in admissions understand their role and are appropriately skilled. The review team concludes, therefore, that this Core practice is met.

120 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.

## **Q2 The provider designs and/or delivers high-quality courses**

121 This Core practice expects that the provider designs and/or delivers high-quality courses.

122 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

123 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The Institute's plan for programme design
- b The Institute's plan for programme delivery
- c The partnership agreements
- d The University's academic regulations
- e The letter from the University confirming the programme delivery status
- f Undergraduate Handbook
- g The plans for securing appropriate infrastructure
- h The organisational and governance structures
- i Module specifications
- j The external examiner's report
- k Student survey analysis
- l Student submission
- m Meeting with senior staff
- n Meeting with students
- o Meeting with the University staff
- p Meeting with academic and professional support staff
- q Observations of two learning sessions as part of the Institute's Physics Summer School.

124 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

125 Third party endorsements as none are available for the provision on offer at the Institute.

### **How any samples of evidence were constructed**

126 To test that all elements of the courses sampled are high quality (curriculum design, content and organisation, and learning, teaching and assessment approaches) and that the teaching, learning and assessment design will enable students to demonstrate the intended learning outcomes, the review team considered all module specifications for the programme.

127 To identify external examiners' views about the quality of the courses sampled, the review team considered the external examiner's report.

128 To test whether course delivery is high quality, the review team observed two learning sessions as part of the Institute's Physics Summer School.

### **Why and how the team considered this evidence**

129 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

130 To identify the Institute's approach to designing and delivering high-quality courses, the review team considered the Institute's plan for programme design and programme delivery, the partnership agreements, the University's academic regulations, the letter from the University confirming the programme delivery status, and the Undergraduate Handbook.

131 To assess whether the Institute has credible, robust and evidence-based plans for designing and delivering high-quality courses, the review team considered the partnership agreements, the University's academic regulations, the Programme Delivery Operational Plan, the plans for securing appropriate infrastructure, the organisational and governance structures.

132 To assess how staff ensure courses are high quality, the review team met with the University staff, the Institute's senior staff and academic and professional support staff and considered the University's academic regulations and the module specifications.

133 To assess students' views about the quality of the courses sampled, the review team considered the student submission, student survey, and meeting with students.

### **What the evidence shows**

134 The review team's analysis of the evidence led to the following observations.

135 The partnership agreements confirm that the University is responsible for the design and delivery of the academic elements of the programme and the DTL is responsible for the design and delivery of the practical elements (all non-academic aspects) of the programme. The Institute's plan for programme design outlines the Institute's current approaches for degree development with the University of Warwick and the workplace development with DTL, clarifying how the degree and workplace have been designed, approved and improved. The plan confirms that the degree apprenticeship programme currently delivered by the University of Warwick to Dyson Institute students was developed collaboratively by the University and Dyson Institute staff. The partnership agreements explain that, to ensure the programme's academic rigour and currency with industry, the academic content of the course is written by the University with the Institute offering support from relevant engineering leads and inputting to the content as appropriate, including through the inclusion of case studies. The approach to designing high-quality programmes and modules is outlined in the University's academic regulations. The review team therefore concludes that the Institute has a clear approach which facilitates high-quality course design.

136 As confirmed in the partnership agreements and the letter from the University confirming the programme delivery status, the University of Warwick currently teaches the

degree, which is awarded by the University and will continue to deliver to the three cohorts already recruited to the programme. The approach to delivering high-quality programmes and modules is outlined in the University's academic regulations. The Institute's plan for programme delivery specifies the current delivery model at the Institute which devotes two days to study and three days to applying the knowledge in the workplace. Teaching is delivered in one intensive day by the University with the second day provided for self-study. The Physics Summer School prior to the start of the programme is also delivered by the University to ensure students are well prepared for the study. To ensure high-quality course delivery, detailed lecture notes are uploaded to the virtual learning environment (VLE) and each module includes a discussion forum on the VLE for continual academic support and discussions. Academic study is contextualised and reinforced through case studies of engineering problems embedded in the curriculum and through practices in projects linked to engineering industry. The review team therefore concludes that the Institute has a clear approach which facilitates high-quality course delivery.

137 The partnership agreements explain that, to ensure high-quality course delivery, the programme delivered at the Institute is subject to the same rigorous periodic and annual reviews as all University courses, following the University's procedures for the approval and monitoring of collaborative courses as outlined in its academic regulations. The University is also responsible for monitoring its own effectiveness in discharging its responsibilities as to both procedure and course materials, in accordance with its quality assurance procedures. The ultimate responsibility for maintenance of academic standards and the quality of the course lie with the Senate and Council of the University. As such, the review team concludes that the approach to monitoring the delivery of high-quality courses is robust and credible.

138 The Institute's plan for academic delivery of programmes, the plans for securing appropriate infrastructure and the organisational and governance structures of the Institute gave the review team a detailed understanding as to the plans for high-quality qualification design and delivery in the future. The review team scrutinised this evidence alongside the current contractual arrangements between the Institute, the University and DTL. This enabled the review team to discern that the arrangements for the design and delivery of programmes may be very different in the future if the Institute delivers the programme upon granting of its own degree awarding power. However, the partnership agreement extension ensures that the current arrangements that were in place at the time of the visit would remain in place until such time as the Institute gains the relevant powers. The review team therefore concludes that the plans for designing and delivering high-quality courses are credible and robust.

139 The module specifications clearly outline course content for each module, course delivery plans for each semester, course learning outcomes, skills development requirements, teaching and learning approaches, teaching and learning tools and technologies, assessment methods, and opportunities for professional development. The module specifications detail the assessment types and learning outcomes for each module, providing clear links between the learning outcomes and the assessment types to test student achievement.

140 The external examiner's report confirms that the learning outcomes are achievable and are being achieved by students through the high-quality delivery of the programme in line with the requirements of the University's academic regulations. The external examiner comments that the partnership delivery arrangements for the degree are innovative, effective and of high quality.

141 The meetings with the University staff, the Institute's senior staff and academic and professional support staff enabled the review team to discuss how programmes at the Institute were designed and delivered to ensure they are of high quality. Through

triangulating the conversations with the information gathered from the academic regulations and the module specifications, the team was able to determine that staff have a detailed understanding of their responsibilities in the delivery of a high-quality programme. The Institute's technical staff involved in the programme design were able to articulate what 'high quality' means in the context of the Institute and explained the plan for programme design and delivery for the future with clear reference to the operational plans as described above.

142 From the scrutiny of the student submission and student survey, the review team noted that 85% of students believe that the qualification is of high quality. This opinion was mirrored in discussions with students who were clear that the teaching and learning opportunities on offer were high quality and mirrored what was outlined in the course documentation.

143 Observations of two learning sessions as part of the Institute's Summer Series, which takes place over the summer between academic years, demonstrate the clarity of objectives and intended learning outcomes, good planning and organisation, a sound method and approach, good delivery, appropriate content, effective use of resources and student engagement. The staff had a good command of their subject content and used resources successfully, using break-out areas where appropriate. Students were engaged in project-based learning by designing and implementing engineering solutions for real world problems.

## **Conclusions**

144 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

145 The academic design and delivery of the programme are mainly managed by the University. The approaches for designing and delivering high-quality programmes and modules are outlined in the University's academic regulations. The Institute's plans for course design and delivery indicate that the Institute has procedures in place to facilitate the University's design and delivery of high-quality courses. Given the detailed procedures are in place and the programme is reviewed by the University periodically following its own monitoring procedures, the review team considered the approaches to designing and delivering high-quality courses are credible and robust. Module specifications indicate that the teaching, learning and assessment design enable students to meet and demonstrate the intended learning outcomes. The external examiner report confirms that the programme concerned is high quality. Staff understand their roles in designing and delivering high-quality courses and are able to articulate what 'high quality' means in the context of the Institute. Students tend to regard their courses as being of high quality. The review team concludes, therefore, that this Core practice is met.

146 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.

### **Q3 The provider has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience**

147 This Core practice expects that the provider has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience.

148 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

#### **The evidence the team considered**

149 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The partnership agreements
- b The University's approaches to staff recruitment, appointment, induction and support
- c The Institute's plan for the recruitment, appointment, induction and support for academic staff
- d Organisational structure of the Institute
- e Job descriptions for all members of staff currently employed at the Institute
- f Six CVs for staff employed by the Institute for current programme delivery
- g Skills audit for all members of staff currently employed at the Institute
- h Lists of training/conferences/networking activity attended by the Institute staff
- i Student survey analysis
- j Meeting with senior staff
- k Meeting with students
- l Meeting with the University staff
- m Meeting with academic and professional support staff
- n Observations of two learning sessions as part of the Institute's Physics Summer School.

150 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

151 Third party endorsements, as none are available for the provision on offer at the Institute.

#### **How any samples of evidence were constructed**

152 To assess whether the staff sampled are appropriately qualified and skilled to perform their roles effectively, the review team considered job descriptions for all members of staff currently employed at the Institute and CVs of all technical engineers and all student support advisers employed by the Institute for current programme delivery.



153 To test whether academic staff deliver a high-quality learning experience, the review team observed two learning sessions as part of the Institute's Physics Summer School.

### **Why and how the team considered this evidence**

154 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

155 To identify how the Institute recruits, appoints, inducts and supports staff so that it meets the outcome, the review team considered the partnership agreements, the University's approaches to staff recruitment, appointment, induction and support, job descriptions for all members of staff currently employed at the Institute, skills audit for all members of staff currently employed at the Institute, a list of training/conferences/networking activity attended by the Institute staff.

156 To assess whether the Institute has credible, robust and evidence-based plans for ensuring that they have sufficient appropriately qualified and skilled staff to deliver a high-quality learning experience, the review team considered the plan for the recruitment, appointment, induction and support for academic staff.

157 To assess whether the roles or posts the Institute has to deliver a high-quality learning experience are sufficient, and to assess whether the staff sampled are appropriately qualified and skilled to perform their roles effectively, the review team considered the organisational structure of the Institute, job descriptions for all members of staff employed at the Institute, and CVs of Institute technical engineers and student support advisers.

158 To assess whether the staff are appropriately qualified and skilled, the review team met with the University staff, the Institute's senior staff, and academic and professional support staff.

159 To identify students' views about sufficiency, qualifications and skills of staff, the review team considered the annual student survey and held a meeting with students.

### **What the evidence shows**

160 The review team's analysis of the evidence led to the following observations.

161 The partnership agreements confirm that the University is responsible for the academic delivery of the programme, including teaching and assessment. Accordingly, the ultimate responsibility for the recruitment, appointment, induction and support of academic staff lies with the University. The University's approaches to staff recruitment, appointment, induction and support are well established in its policies. The University also has detailed procedures, including a staff appraisal procedure, in place to monitor the performance of staff, ensuring staff are appropriately qualified and skilled to deliver a high-quality academic experience.

162 The Institute is responsible for the recruitment, appointment, induction and support of the support staff. No policy or procedure document details the Institute's approach to current staff recruitment or appointment, but the job descriptions for all members of staff currently employed at the Institute indicate that all applications should be assessed and

reviewed based on the person specification, which includes checking on staff attainment, experience, competencies and other relevant information. No policy or procedure document details the Institute's approach to current staff induction and support, but the skills audit indicates that staff training and personal developmental needs are clearly identified. In addition, the Institute provided a list of training/conferences/networking activity attended by Institute staff, which demonstrates that despite a lack of formal policy some training and development opportunities have been provided in response to staff needs. The review team therefore considers the Institute has procedures in place to recruit, appoint, and support staff so that it meets the outcome.

163 For the future, the Institute has a detailed plan for the recruitment, appointment, induction and support for academic staff in place, which will be implemented once the Institute delivers the programme upon granting of its own degree awarding power.

164 The organisational structure of the Institute, including the current and future staffing structures, suggests that appropriate structures and resources are made available in line with the change of programme delivery and student numbers. Job descriptions for all members of staff employed at the Institute include detailed requirements on qualification, experience and skills, ensuring staff recruited are appropriately qualified and skilled to support students. The CVs of Institute technical engineers and student support advisers demonstrate that the Institute has appointed appropriately qualified and experienced staff to fulfil the roles and that these appointments are consistent with the role descriptors.

165 The University staff explained how it fulfils its responsibilities in maintaining the quality of the academic experience through high-quality teaching by subject-specialist staff, specialised resources assessment, staff development and providing student academic support, advice and guidance. The Institute's senior staff and professional support staff explained how the Institute provides professional input into supporting the programme. Both the University and the Institute's staff demonstrated a clear understanding of their respective roles and responsibilities in maintaining the high quality of academic experience.

166 Students confirmed in the meeting that there are sufficient appropriately skilled and qualified staff to deliver a high-quality academic experience. Evidence of students' satisfaction of their academic experience is also reflected in the results of the students' annual survey 2018 where 87% of undergraduates agreed that the course is well organised and well run by the teaching staff. Students reported in the meeting that they have good access to Institute staff and value greatly their professional input to supporting the programme.

167 The evidence provided by the observation of teaching confirmed that the teaching was of high quality and carried out by the Institute's academic staff who were suitably qualified to provide a high-quality learning experience. The academic staff were engaging and knowledgeable about their subject. They explained clearly to students how to apply each concept to the relevant industry. They used appropriate learning resources to support their delivery. The observations of teaching provided evidence that academic staff are suitably qualified to deliver a high-quality learning experience.

## **Conclusions**

168 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

169 The Institute has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. The University's policies for staff recruitment, appointment, induction and support provide a sufficient number of appropriately qualified and skilled academic staff. Although the Institute has no policies detailing its approach to the recruitment, appointment, induction and support of professional support staff, it has procedures in place, as reflected from job descriptions, skills audit, and the training attendance list, to recruit, appoint, and support staff so that it meets the outcome. The organisational structure of the Institute, job descriptions and CVs of the Institute's staff further prove that there are sufficient appropriately skilled and qualified staff to deliver a high-quality academic experience. Both the University and the Institute's staff understand their respective roles and responsibilities in maintaining the high-quality of academic experience. Students tend to agree that there are sufficient appropriately skilled and qualified staff to deliver a high-quality academic experience. Observations of teaching and learning indicate that teaching staff are appropriately qualified and skilled. The review team concludes, therefore, that this Core practice is met.

170 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.

## **Q4 The provider has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience**

171 This Core practice expects that the provider has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience.

172 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

173 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The partnership agreements
- b Document outlining Student Support responsibilities at the University and the Dyson Institute
- c The Institute's plans for student support services
- d The Institute's plans for facilities and learning resources
- e Undergraduate Handbook
- f Organisational structure of the Institute
- g Job descriptions for all members of staff currently employed at the Institute
- h Six CVs for staff employed by the Institute for current programme delivery
- i Student submission
- j Meeting with students
- k Meeting with the University staff
- l Meeting with student support advisers
- m Meeting with academic and professional support staff
- n VLE demonstration (Moodle Site)
- o A direct assessment of learning resources including classrooms, laboratories, specialist facilities and the library.

174 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

175 Third party endorsements as none are available for the provision on offer at the Institute.

### **How any samples of evidence were constructed**

176 To determine whether staff roles are consistent with the delivery of a high-quality learning experience, the review team considered job descriptions for all members of staff

currently employed at the Institute and CVs of all technical engineers and all student support advisers employed by the Institute for current programme delivery.

177 To test that the facilities, resources or services under assessment deliver a high-quality academic experience, the review team observed the Institute's facilities and learning resources.

### **Why and how the team considered this evidence**

178 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

179 To identify how the Institute's facilities, learning resources and student support services contribute to delivering a high-quality academic experience, the review team considered the partnership agreements, the document outlining student support responsibilities at the University and the Dyson Institute, the Institute's plans for student support services, the Institute's plans for facilities and learning resources, Undergraduate Handbook, and a VLE demonstration.

180 To assess whether the Institute has credible, robust and evidence-based plans for ensuring that it has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience, the review team considered the Institute's plans for student support services, and plans for facilities and learning resources.

181 To determine whether the roles are consistent with the delivery of a high-quality learning experience, the review team considered the organisational structure of the Institute, job descriptions for all members of staff employed at the Institute, CVs of Institute technical engineers and student support advisers.

182 To test whether staff are appropriately qualified and skilled, and understand their roles and responsibilities, the review team met with University staff, the Institute's student support advisers, and academic and professional support staff.

183 To identify and assess students' views about facilities, learning resources and support services, the review team considered the student submission and the meeting with students.

### **What the evidence shows**

184 The review team's analysis of the evidence led to the following observations.

185 As confirmed in the partnership agreements, current Dyson Institute students are enrolled at the University of Warwick and have access to all Warwick facilities, learning resources and student support services. However, given the distance to the University of Warwick's campus and the potential for students to feel disconnected from this support, the Institute is developing its own facilities, learning resources and student support services on-site. The Institute provided a detailed document outlining student support responsibilities at the University and the Dyson Institute. The Institute's current facilities, learning resources and student support services available to students are detailed in the Undergraduate Handbook.

186 How the Institute's facilities and learning resources, including teaching and learning spaces, IT hardware/software, are used for supporting learning, teaching and assessment, currently and in the future, is specified in the Undergraduate Handbook and in the Institute's plans for facilities and learning resources. As confirmed in the Undergraduate Handbook, students can access all the University's library resources, including online journals and e-books. However, student feedback suggested that the University's online library system did not provide a smooth user experience, leaving undergraduates frustrated when they needed to access online resources. Accordingly, the Institute has developed an Integrated Library Solution to identify appropriate library resources for students' module study, providing a better overall user experience.

187 The Institute uses the University's VLE for learning, teaching and assessment. Students are able to access a variety of course content through the VLE. It allows any member of staff or student to communicate through the discussion forums. Students will submit assignments, and receive marking and feedback through the VLE.

188 How the University and Institute's student support services contribute to delivering a high-quality academic experience, currently and in the future, is specified in the Undergraduate Handbook and in the Institute's plans for student support services. The University's academic tutor and the Institute's technical engineer provide academic support for students. Students can refer queries regarding course content, teaching or exams to University tutors, and students encountering technical problems on their course can ask the Institute's technical engineer for help. The Institute's Student Support Advisors supports students' personal and professional development through regular one-to-one meetings. For personal and family matters, financial matters, disability services, mental health support and counselling, the Institute uses the University's welfare support services. However, the Institute also has its own Mental Health Nurse onsite who offers confidential consultations to students to discuss any mental health concerns.

189 Noting that the initial investment in facilities, learning resources and student support services will require ongoing observation and maintenance, the Institute has detailed plans for monitoring and reviewing facilities, learning resources and student support services within its quality cycle to ensure the delivery of a high-quality learning experience. As explained in the Institute's plans for student support services and for facilities and learning resources, facilities, learning resources and student support services are reviewed regularly by the Undergraduate Experience Team. All interventions, policies and procedures undergo a formal review on an annual basis at the end of each academic year. The annual review of each intervention takes into account feedback from the student population collected through various mechanisms. The Undergraduate Experience Team works closely with the Quality and Standards Team to collate and analyse student feedback, and to ensure that appropriate improvements are made. Given detailed monitoring and review procedure are in place, the review team considered the Institute's development of facilities, learning resources and student support services to be credible, realistic and demonstrably linked to the delivery of successful academic and professional outcomes for students.

190 The organisational structure of the Institute, including the current and future staffing structures, suggests that appropriate structures and resources are made available in line with the change of programme delivery and student numbers. Job descriptions for all members of staff employed at the Institute include detailed requirements on qualification, experience and skills, ensuring staff recruited are appropriately qualified and skilled to support students. The CVs of Institute technical engineers and student support advisers demonstrate that the Institute has appointed appropriately qualified and experienced staff to fulfil the roles and that these appointments are consistent with the role descriptors.

191 Staff from the University and the Institute demonstrate a clear understanding of their respective roles and responsibilities in supporting students, which is in line with their roles as defined in the partnership agreements and the document outlining student support responsibilities at the University and the Institute. The Institute's student support advisers provided details of student support services and their contribution to supporting a high-quality student experience. All Institute staff confirmed that their roles are an integral part of the delivery of a high-quality learning experience and were familiar with student support plans in place.

192 In both the student submission and in the meeting with the review team, students expressed overall satisfaction with the facilities, learning resources, and support services. However, the review team noted that students expressed some negative views about the small scale and availability of learning materials in the Institute library. In discussions with students, the review team noted an acknowledgment that the range of learning materials accessible through the University was adequate to meet students' needs. As such, the review team was led to conclude that while the library-based learning materials on offer were sufficient, the negative opinions of students are most likely due to the ease of accessing these materials.

193 A direct examination by the review team of learning and teaching resources enabled them to determine that the specialist facilities on offer can provide high-quality technical resources that are likely to ensure effective learning and teaching, especially in relation to industrial practice. The review team considered the classrooms and laboratory learning spaces to be modern and well-equipped with technological learning aids. However, as highlighted by the students, the review team felt that the Institute's library may not provide enough books to support students' academic study and as such offered limited wider reading opportunities. However, as discussed with the students and staff, the review team noted that the Institute's own library facilities are intended to be supplemental to the resource provided by the University and the Institute has detailed plans in place to identify appropriate library resources for students.

194 The review team reviewed the VLE which contains all the module information for students and course materials are uploaded in advance of teaching sessions. The discussion forums on the VLE are easily accessed. The navigation of the VLE is intuitive and easy to follow. Observations by the team of the VLE confirm that it is well structured and supports course delivery with appropriate teaching materials, guidance on module structures and links to further resources. The level of detail of learning materials provided, which were prepared by academic staff from the University, indicate that teaching staff are appropriately qualified and skilled to deliver high-quality learning. As such the review team considered the facilities and learning resources were appropriate to support the delivery of the programme.

## **Conclusions**

195 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

196 The Institute has sufficient and appropriate facilities, learning resources, and student support services to deliver a high-quality academic experience. The Institute's plans for facilities, resources and support services are credible, realistic, and demonstrably linked to the delivery of successful academic and professional outcomes for students. Staff from the University and the Institute demonstrate a clear understanding of their respective roles

and responsibilities for maintaining and developing student support services to ensure a high-quality student experience. Students tend to regard facilities, learning resources and student support services as sufficient and appropriate, and facilitating a high-quality academic experience. The review team's own assessment of particular facilities and learning resources, including the VLE confirms that they provide a high-quality academic experience. The review team concludes, therefore, that this Core practice is met.

197 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.



## **Q5 The provider actively engages students, individually and collectively, in the quality of their educational experience**

198 This Core practice expects that the provider actively engages students, individually and collectively, in the quality of their educational experience.

199 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

200 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The governance structure of the Institute
- b Student Engagement Calendar
- c Student Concerns Log
- d Course Representative Handbook provided by the University of Warwick
- e Guide to the Undergraduate Experience Committee
- f SSLC meeting minutes
- g SSLC action tracker
- h SSLC annual report
- i Email feedback process
- j Student survey analysis
- k A presentation given to all Dyson Institute students, updating on actions taken following a student survey
- l Mid-module feedback relating to module WM212
- m Action plan taken to address concerns raised by student feedback in respect of WM212
- n The Institute's plans for student support services
- o The Institute's plans for facilities and learning resources
- p Student submission
- q Meeting with students.

### **How any samples of evidence were constructed**

201 No samples were considered for this Core practice.

### **Why and how the team considered this evidence**

202 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key

pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

203 To identify how the Institute actively engages students in the quality of their educational experience and to assess whether the Institute has credible, robust and evidence-based plans for engaging students, individually and collectively, in the quality of their educational experience, the review team considered the Student Engagement Calendar, mid-module feedback relating to module WM212, action plan taken to address concerns raised by student feedback in respect of module WM212, student survey analysis, a presentation given to all Dyson Institute students, updating on actions taken following a student survey, student Concerns Log, email feedback process, Course Representative Handbook, Governance structure, SSLC meeting minutes, SSLC action tracker, SSLC annual report, and the Guide to Undergraduate Experience Committee.

204 To illustrate the impact of the Institute's approach, the review team considered the Institute's plans for student support services, facilities and learning resources.

205 To identify and assess students' views about student engagement in the quality of their educational experience, the review team considered the student submission and the meeting with students.

### **What the evidence shows**

206 The review team's analysis of the evidence led to the following observations.

207 The Student Engagement Calendar outlines the Institute's approach to engaging students, individually and collectively, in the quality of their educational experience.

208 Individual student feedback is gathered through module surveys and an annual survey. The module surveys managed by the University ask students to comment on their experience of learning, teaching and assessment of the module, along with commenting on resources and the general learning experience. Results of the module surveys are considered within the University's programme periodic monitoring and review procedures. Actions taken to address student concerns raised from module surveys are fed back to students in writing. The annual survey, managed by the Institute, asks students to comment on their academic experience, workplace experience and experience outside work and study. Results of the annual survey are considered by the Undergraduate Experience Team and the Quality and Standards Team, which may be escalated to the Council. Actions taken to address student concerns raised from the annual survey are summarised in a presentation given to all students. Individual feedback may also be collected through students raising concerns with staff or through students emailing to [dysoninstitutefeedback@dyson.com](mailto:dysoninstitutefeedback@dyson.com). Issues raised by students are dealt with promptly by relevant staff and escalated where necessary.

209 Collective feedback is gathered through student representatives, the Staff Student Liaison Committee (SSLC) and Undergraduate Experience Committee. As set out in the University of Warwick's Course Representative Handbook, students are elected from each cohort to represent their peers as a course representative. The responsibilities of course representatives are detailed in the Course Representative Handbook. Course representatives are required to gather input from their fellow students on issues, including good practice examples as well as concerns. Course representatives are then expected to represent the student voice for their fellow students in SSLC. As explained in the Governance structure, the SSLC is a forum for students and staff to discuss ideas and solve problems connected with teaching, learning and student support and a formal opportunity to consult with students and receive feedback on new proposals. It is currently managed by the University in accordance with its policies and procedures. The committee includes the

course lead, lecturers and administrators from the University, elected course representatives from each cohort, and the Institute's Technical Manager. Issues that course representatives raise, and possible solutions discussed in the SSLC meetings feed into the committee's annual report and action tracker. The University of Warwick Students' Union provides an initial training for course representatives and online resources to support them in their roles. Course representatives whom the team met stated that they were well supported in their role when joining committee meeting discussions.

210 The Institute has convened an Undergraduate Experience Committee to provide students with the opportunity to have a say on their non-academic experience, and for the Institute to consult with students and obtain feedback on new proposals. The Undergraduate Experience Committee is made up of elected student representatives (known as Undergraduate representatives). The committee meetings are student-led and allow students and the Institute staff to discuss issues related to non-academic student experience. The Guide to the Undergraduate Experience Committee details how undergraduate representatives are elected, trained and involved in the committee work. Issues raised and possible solutions discussed in the Undergraduate Experience Committee meetings feed into the committee's annual report which is considered by the Institute's Council who may make recommendations or take actions to address student concerns.

211 To close the loop in relation to all student feedback, actions taken to address student concerns raised from surveys and committee meetings are fed back to students in writing or in presentations.

212 From what has been discussed above, it is clear how student feedback is individually and collectively sought, how actions resulting from student feedback are taken, which bodies are accountable for such actions, and how actions taken are communicated back to students. Given that the detailed policies and procedures to student engagement are in place, and the consideration of student feedback in committees are minuted and reflected in the reports and action trackers, the review team considered the Institute's approaches to individually and collectively engaging students in the quality of their educational experience to be credible and robust.

213 The Institute's plans for student support services, facilities and learning resources indicate that the Institute is making changes in response to student feedback. For example, student feedback suggested that communication between the Dyson Institute and undergraduates (and vice versa) could be made more streamlined, and information could be made more easily accessible. Accordingly, the Institute considered communication channels and methods across all the IT systems which the undergraduates come in contact with and is working on setting up an internal communication system to provide a 'one stop shop' for all Dyson Institute communication and information sharing needs, alongside easy signposted access to all other digital resources. Student feedback suggested that the University's online library system did not provide a smooth user experience, leaving undergraduates frustrated when they needed to access online resources. Accordingly, the Institute has developed an Integrated Library Solution to provide a better overall user experience. The review team therefore concludes that there are examples of the Institute changing and improving students' learning experience as a result of student engagement.

214 Students reported in the meeting and in the student submission that they felt engaged in the quality of their learning experience and that their feedback was listened to and acted upon by the University and by the Institute. Students demonstrated a clear understanding of the procedures in which they could be involved in improving the quality of their educational experience, including through surveys, student representations, the SSLC and the Undergraduate Experience Committee. Students also referred to the informal engagement that is facilitated by the accessibility and approachability of staff.

## Conclusions

215 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

216 The Institute actively engages students, individually and collectively, in the quality of their educational experience. The Institute has credible and robust procedures in place to collect, consider and act upon student feedback, engaging students, individually and collectively, in the quality of their educational experience. This includes through a range of mechanisms including University and Institute surveys and course representatives. Feedback is considered actions fed back to students to close the feedback loop. There are examples of the Institute changing and improving students' learning experience as a result of student engagement including streamlining communications between the Institute and students and the development of an Integrated Library Solution to provide a better overall user experience. Students report that the Institute engages them in the quality of their educational experience and tend to agree that their voice is heard and valued, and that their feedback is listened to and acted upon by the Institute. The review team concludes, therefore, that this Core practice is met.

217 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.

## **Q6 The provider has fair and transparent procedures for handling complaints and appeals which are accessible to all students**

218 This Core practice expects that the provider has fair and transparent procedures for handling complaints and appeals which are accessible to all students.

219 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

220 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The partnership agreement
- b The University's procedures for handling academic complaints
- c The University's procedures for handling academic appeals, outlined in the University's academic regulations
- d The Institute's complaints policy
- e Evidence relating to complaints and appeals made to the University
- f Complaints and appeals at the Dyson Institute
- g Undergraduate Handbook
- h VLE demonstration (Moodle Site)
- i Meeting with students.

### **How any samples of evidence were constructed**

221 The Institute reported that no complaints or appeals have been received to date.

### **Why and how the team considered this evidence**

222 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

223 To identify the Institute's processes for handling complaints and appeals and to confirm that these processes are fair and transparent, the review team considered the partnership agreement, the University's procedures for handling academic complaints, the University's procedures for handling academic appeals outlined in the University's academic regulations, the Institute's Complaints Policy, evidence relating to complaints and appeals made to the University.

224 To assess whether the Institute has credible, robust and evidence-based plans for developing and operating fair and transparent procedures for handling complaints and appeals which are accessible to all students, the review team considered the University's procedures for handling academic complaints, the University's procedures for handling academic appeals outlined in the University's academic regulations, and the Institute's Complaints Policy.

225 To assess whether information for potential and actual complainants and appellants is clear and accessible, the review team considered the Undergraduate Handbook, VLE demonstration (Moodle Site), complaints and appeals at the Dyson Institute.

226 To identify students' views about the clarity and accessibility of the Institute's complaints and appeals procedures, the review team met with students.

### **What the evidence shows**

227 The review team's analysis of the evidence led to the following observations.

228 The partnership agreement confirms that academic complaints and appeals were the responsibility of the University while complaints that students may have about other aspects of delivery or the provision of support were the responsibility of the Institute and DTL.

229 The University handles academic complaints according to the procedures set out in the University Student Academic Complaints Procedure and academic appeals according to the procedures set out in the University's academic regulations. The Complaints Procedure and the University's academic regulations include detailed information on the grounds for complaints or appeals, the complainant's and appellant's rights, the process to follow within the University and the timescale for each step. Although the Institute reported that no complaints or appeals have been received to date, given that detailed policies and procedures are in place, the review team concludes that the University's approach to handling academic complaints and academic appeals is reliable, fair and likely to deliver timely outcomes.

230 The Institute's Complaints Policy sets out the Institute's approach to handling complaints relating to non-academic issues. It explains the purpose of the policy, the scope of the policy, and the types of issues which do or do not apply. It explains the three-stage process that is followed within the Institute to handle complaints and the timeline for each stage. Stage 1 is an informal investigation, which may lead to a resolution without the need for escalation to Stage 2, which is a formal investigation. Stage 3 comes into play if the complainant is dissatisfied with the outcome of Stage 2, at which point the case would be reviewed by the Director of the Institute whose decision is final. Where students are dissatisfied with the Institute's decision and have exhausted the Institute's internal complaints procedure, they have a right of appeal to the Office of the Independent Adjudicator (OIA). During all stages of the procedure, students may be accompanied to meetings by a member of the Institute, usually either a staff member, a Dyson employee or a fellow student. Although the Institute reported that no complaints or appeals have been received to date, given that detailed policy is in place, the review team concludes that the Institute's approach to handling complaints is reliable, fair and likely to deliver timely outcomes.

231 The Complaints Procedure and the University's academic regulations clearly explain how complaints and appeals are logged and monitored through the University's quality assurance procedures. The Institute also has a system for logging and monitoring complaints. Any concerns which have been raised independently by more than one student

should be discussed on a weekly basis by the Institute's Senior Leadership Team, who will monitor the situation and take action as appropriate.

232 Both the University and the Institute's procedures for handling complaints and the University's procedures for handling appeals are written in easy-to-understand language, with clear explanations and without exclusionary terminology. They are accessible through the Undergraduate Handbook and the VLE. In addition, student support advisers are trained to signpost students to the University's Complaints and Appeals policies or support students to make complaints according to the Institute's Complaints Policy.

233 Given detailed policies and procedures for handling complaints and appeals and the clear procedure for monitoring and reviewing complaints and appeals are in place and available to students through the Undergraduate Handbook and the VLE, the review team considered the Institute has credible, robust and evidence-based plans for developing and operating fair and transparent procedures for handling complaints and appeals which are accessible to all students.

234 Students did not raise any concerns regarding the fairness, transparency or credibility of the approaches for handling complaints and academic appeals. Students who met the team had no experience of making complaints or appeals, but they confirmed that they were aware of the procedures in making complaints and academic appeals and where to access the policies and forms.

## **Conclusions**

235 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

236 The Institute has fair and transparent procedures for handling complaints and appeals which are accessible to all students. The partnership agreement confirms that academic complaints and appeals are the responsibility of the University while complaints that students may have about other aspects of delivery or the provision of support are the responsibility of the Institute. Both the University and the Institute's policies for handling complaints and the University's academic regulations for handling appeals clearly explain situations that can or cannot be the subject of complaints or appeals, the process that should be followed or when a complaint should be escalated to OIA, along with the deadline for each step. Both the University and the Institute have procedures in place for recording and monitoring complaints. All relevant policies and procedures regarding complaints and appeals are accessible through the Undergraduate Handbook and the VLE and can be found easily by students. They are written in plain language so can be easily understood. Although no complaints or appeals have been lodged, students did not raise any concerns or doubts about their ability to access details of the relevant procedures. The review team concludes, therefore, that this Core practice is met.

237 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.

## **Q8 Where a provider works in partnership with other organisations, it has in place effective arrangements to ensure that the academic experience is high-quality irrespective of where or how courses are delivered and who delivers them**

238 This Core practice expects that where a provider works in partnership with other organisations, it has in place effective arrangements to ensure that the academic experience is high-quality irrespective of where or how courses are delivered and who delivers them.

239 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

240 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a The University's academic regulations
- b The agreement for the supply of services between the Institute and DTL
- c The partnership agreement and the agreement extension between the Institute, the University and DTL
- d The external examiner's report
- e Student submission
- f Meeting with senior staff
- g Meeting with students
- h Meeting with the University staff
- i Meeting with academic and professional support staff.

241 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

242 Third party endorsements as none are available for the provision on offer at the Institute.

### **How any samples of evidence were constructed**

243 To test that external examiners consider courses delivered in partnership to be of high quality, thus confirming the effectiveness of the underpinning arrangements, the review team considered the only available external examiner report.

### **Why and how the team considered this evidence**

244 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the



provider's ability to meet this Core practice. To ensure consistency in decision making and to ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

245 To assess how the Institute ensures courses are high quality irrespective of where or how courses are delivered or who delivers them, the review team considered the partnership agreements and the partnership agreement for the supply of services between DTL and the Institute.

246 To assess whether the Institute has credible, robust and evidence-based plans for ensuring a high-quality academic experience in partnership work, the review team considered the partnership agreements and the University's academic regulations.

247 To test whether staff understand and discharge effectively their responsibilities to the awarding body, and to test that the awarding body/organisation/lead Institute is meeting its responsibilities, the review team met with the University staff, the Institute's senior staff, and academic and professional support staff.

248 To assess students' views about quality of courses delivered in partnership, the review team considered the student submission and the meeting with students.

### **What the evidence shows**

249 The review team's analysis of the evidence led to the following observations.

250 The partnership agreements for the current and continued delivery of the qualification are clear and comprehensive and form the basis for the Institute's partnership work. The agreements assign clear responsibilities to each of the partner organisations (the Institute, the University and DTL).

251 The University is responsible for the design and delivery of the academic elements of the programme. The University maintains the quality of the academic experience through following its clear and comprehensive regulations and policies. The DTL is responsible for the design and delivery of the practical elements (all non-academic aspects) of the programme. The partnership agreement for the supply of services between DTL and the Institute outlines how the quality of the non-academic experience is maintained by DTL through the employment of the students. Based on the University's regulations and policies, and the partnership agreement for the supply of services between DTL and the Institute, the review team considered that the Institute, working in collaboration with the University and DTL, has effective arrangements in place to ensure the maintenance of high quality within partnerships working.

252 The partnership agreements explain that, to ensure that the quality of the academic experience is maintained, the programme delivered at the Institute is subject to the same rigorous periodic and annual reviews as all University courses, following the University's procedures for the approval and monitoring of collaborative courses as outlined in the University's academic regulations. In addition, the University has well-established quality assurance procedures in place to monitor its own effectiveness in discharging its responsibilities in maintaining the quality of the academic experience. As such, the review team concludes that the approach to ensuring a high-quality academic experience in partnership work is robust and credible.

253 The external examiner considers the partnership arrangements to be effective and the course delivered in partnership to be of high quality. The external examiner's report

notes as a 'strength' the opportunities for students to undertake work placements at DTL and notes in a positive tone views about mentoring by workplace supervisors.

254 Staff from the University and the Institute demonstrate a clear understanding of partnership arrangements and their responsibilities in partnership work. The University's representatives confirmed that the University is satisfied with the development of the partnership to date and that the course arrangements have met all their requirements as confirmed in the partnership agreements. The Institute's senior staff and academic and professional support staff explained how the Institute fulfils its responsibilities to the University for maintaining the quality of the academic experience through providing student support, signposting students to the University's academic regulations and policies.

255 Students the review team met spoke positively about their experience and said that the course was well designed and relevant to their future goals. Students also confirmed in the student submission that the course delivered in partnership with the University and DTL is of high quality.

## **Conclusions**

256 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

257 The Institute has in place effective partnership arrangements with the University of Warwick to ensure that the academic experience is high quality for the students. This is because the partnership agreements are clear and comprehensive in articulation of the respective roles of each of the partner organisations (the Institute, the University and DTL). The University maintains the quality of the academic experience through following its clear and comprehensive regulations and policies. The University monitors the effectiveness of its work through its periodic programme reviews and quality assurance procedures, ensuring its approach to maintaining a high-quality academic experience in partnership work is robust and credible. The external examiner considers the partnership arrangements to be effective and the course delivered in partnership to be of high quality. Staff from both the University and the Institute clearly understand their respective responsibilities for working in partnership to deliver a high-quality academic experience. Students tend to regard their course delivered in partnership with the University and DTL as being of high quality. The review team concludes, therefore, that this Core practice is met.

258 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.

## **Q9 The provider supports all students to achieve successful academic and professional outcomes**

259 This Core practice expects that the provider supports all students to achieve successful academic and professional outcomes.

260 The QAA review team completed an assessment of this Core practice in line with the principles and outcomes that are detailed in the [Quality and Standards Review for Providers Applying to Register with the Office for Students: Guidance for Providers](#) (March 2019).

### **The evidence the team considered**

261 The QAA review team assessed the evidence presented, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team used that matrix to ensure that the evidence considered was assessed in a way that is clear and consistent with all other reviews and focused on relevant outcomes. A list of the key pieces of evidence seen by the team is below:

- a Undergraduate Handbook
- b Evidence of the University's additional learning support provided to students
- c Evidence of the Institute's additional learning support provided to students
- d Roles of Undergraduate Line Managers and Technical Mentors
- e Apprenticeship review form
- f Undergraduate Engineer's Logbook
- g The partnership agreements
- h The Institute's plan for student support
- i Student submission
- j Meeting with students
- k Meeting with senior staff
- l Meeting with the University staff
- m Meeting with student support advisers
- n Meeting with academic and professional support staff.

262 Some of the key pieces of evidence outlined in Annex 4 were not considered by the review team. These pieces of evidence and the reason why they were not considered during this review are outlined below:

263 Assessed student work, as confirmed by the Institute it is the University's responsibility for managing assessment.

### **How any samples of evidence were constructed**

264 No samples were considered for this Core practice.

### **Why and how the team considered this evidence**

265 As highlighted, all of the evidence submitted by the provider was considered by the review team either prior to the visit, or at the visit itself. As such, several pieces of evidence will have been considered to allow the review team to make its judgement regarding the provider's ability to meet this Core practice. To ensure consistency in decision making and to

ensure that those decisions focused on outcomes, the review team considered the key pieces of evidence outlined in Annex 4 of the Guidance for Providers. These key pieces of evidence and the reason for scrutinising them are outlined below.

266 To identify the Institute's approach to student support, including how it identifies and monitors the needs of individual students, the review team considered evidence of the University's additional learning support provided to students, Undergraduate Handbook, evidence of the Institute's additional learning support provided to students, roles of Undergraduate Line Managers and Technical Mentors, Apprenticeship review form, the Undergraduate Engineer's Logbook.

267 To assess whether the Institute has credible, robust and evidence-based plans for ensuring that all students are supported to achieve successful academic and professional outcomes, the review team considered the University's academic regulations and the Institute's plans for student support services.

268 To test whether staff understand their responsibilities and are appropriately skilled and supported, the review team met with University staff and the Institute's staff.

269 To identify and assess students' views about student support mechanisms, the review team considered the student submission and the meeting with students.

### **What the evidence shows**

270 The review team's analysis of the evidence led to the following observations.

271 To ensure students achieve successful academic outcomes, the University delivers a two-day study skills programme that includes training for the Institute's students on research skills, academic referencing, academic reading and note-taking, and academic writing. The training materials are available on the VLE. In addition, the University's academic tutor provides individual or group support to students who have questions regarding course content, teaching or exams. The Institute's technical engineers also provide academic support for students, while the Institute's Technical Manager reviews the performance of the undergraduates in their mathematics exams in year one and year two. Students who achieved less than 50% in their exam are invited to attend optional supplementary mathematics sessions that are held during the morning of self-study days by technical engineers. For students who did not pass a module, the Institute's technical engineers run weekly personal or group support sessions to help with any technical problems the students encountered on their course.

272 To ensure students achieve successful professional outcomes, each student is assigned to an Undergraduate Line Manager from DTL who scopes and defines a project that has an engineering output that can be delivered by the student within the length of the rotation. The Undergraduate Line Manager is responsible for setting objectives, coaching the student to develop the project and monitoring the student's performance. Apprenticeship performance review is carried out three times per year by students together with their line manager and representatives from the University, ensuring students' workplace experience and performance is on track and identifying any areas for development and associated actions required. In addition, the Undergraduate Engineer's Logbook, completed by students and signed off by their line managers, is used as a reflective journal to evidence how step-by-step students gain competencies and skills required of professional engineers. The Undergraduate Line Manager is also responsible for assigning a Technical Mentor who provides technical support and guidance to the student.

273 To identify and monitor the needs of individual students, each student is assigned to a Student Support Advisor who is the first point of contact for any questions or concerns the

student may have. The Student Support Advisor arranges regular one-to-one meetings with students to review their personal and professional development. Students are also able to request additional one-to-one meetings with Student Support Advisors to discuss and assess their learning experience where Student Support Advisor will provide guidance and support or signpost students to specialist support if required. Concerns about individual student progress or student support identified from the one-to-one meetings with Student Support Advisor are discussed with the University's academic tutor or the student's Undergraduate Line Manager, and subsequent action plans may be developed to support underperforming students to achieve successful academic and professional outcomes.

274 To ensure that all students are supported to achieve successful academic and professional outcomes, the University has well-established quality assurance procedures in place to monitor its own effectiveness in discharging its responsibilities in managing the academic delivery of the programme. The programme delivered at the Institute is subject to the same rigorous periodic and annual reviews as all University courses, following the University's procedures for the approval and monitoring of collaborative courses as outlined in the University's academic regulations.

275 The effectiveness of student support services is also monitored and reviewed within the Institute's own quality cycle. As outlined in the Institute's plans for student support services, student feedback on student support is gathered through various mechanisms and considered and acted upon by the Undergraduate Experience Team and the Quality and Standards Team to ensure that appropriate improvements are made. Given detailed monitoring and review procedures are in place, the review team agreed that the Institute has a credible and robust approach to monitoring student support to ensure students achieve successful academic and professional outcomes.

276 All the University and the Institute's staff met by the team fully understood their roles in supporting student achievement and were able to articulate clearly how their role contributes to student outcomes. The student support advisers clearly explained how the Institute works with the University to support student wellbeing and success.

277 Students reported in the meeting and in the student submission that they feel adequately supported to achieve successful academic and professional outcomes. Students' feedback on IT support, academic guidance and staff availability are very positive.

## **Conclusions**

278 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the provider meets this Core practice. In making this judgement the team followed the process set out in Guidance for Providers and took account of the key statements outlined in Annex 5. In so doing the review team ensured that its judgement was consistent with all other reviews and remained outcomes focused. The team's conclusions, based on the evidence considered, are detailed below.

279 The Institute supports all students to achieve successful academic and professional outcomes. The Institute and the University have clear approaches to student support which facilitate successful academic and professional outcomes including through support offered by the Undergraduate Line Manager and Student Support Advisor. The Institute and the University have credible and robust procedures in place to monitor and review the effectiveness of their student support services, ensuring students achieve successful academic and professional outcomes. All staff met by the review team understand their role in supporting students to achieve successful academic and professional outcomes. Students tend to agree that they are adequately supported to achieve successful academic and professional outcomes. The review team concludes, therefore, that this Core practice is met.

280 The evidence underpinning this judgement reflects the evidence described in the QSR evidence matrix, therefore the review team has a high degree of confidence in this judgement.

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