

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

London Churchill College

Review Report

September 2019



Working as the Designated Quality Body for England

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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 considers that the standards set for the College's courses are in line with the sector-recognised standards defined in paragraph 342 of the OfS's regulatory framework. The review team also considers that the standards described in the approved programme documentation are set at levels that are consistent with these sector-recognised standards and the College's academic regulations and policies should ensure that standards are maintained appropriately.</p> <p>The review team considers that, based on the evidence scrutinised, the standards that will be achieved by the College's students are expected to be line with the sector-recognised standards defined in paragraph 342 of the OfS's regulatory framework. Based on this information the review team also considers that the College's academic regulations and policies will ensure that these standards are maintained. The review team considers that staff fully understand the College's approach to maintaining these standards and that the evidence seen demonstrates they are committed to implementing this approach. Therefore, based on its scrutiny of the evidence provided, the review team concludes that this Core practice is met.</p> <p>Although external examiners have identified the need for greater rigour in the internal verification process on occasion and the 2018-19 Pearson Annual Management Review report draws attention to the need for the College to ensure that it maintains up-to-date records of</p>

				<p>student achievement which are regularly reviewed and accurately tracked against sector-recognised standards, external examiners confirm that credit and qualifications are awarded only where sector-recognised standards have been met. External examiners also note the commitment of staff to maintaining sector-recognised standards. Staff training and development is provided to enable staff to understand and apply the College's approach to ensuring that standards are maintained and are consistent with the relevant national qualifications frameworks, as described in Pearson-approved programme documentation. The regulatory framework supporting the maintenance of academic standards at the sector-recognised level is clear and comprehensive.</p>
S2	<p>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.</p>	Met	High	<p>The review team, based on the evidence presented to it, determined that the standards set for students to achieve beyond the threshold on the College's courses are reasonably comparable with those set by other UK providers. The review team considered that the standards described in the approved programme documentation and in the College's academic regulations and policies should ensure that such standards are maintained appropriately.</p> <p>Therefore, the review team concludes, based on the evidence described above, 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 and this Core practice is met.</p> <p>The College adheres to Pearson's criteria for the award of merit and distinction, and programme documentation specifies what is required of students to achieve at</p>

				different levels beyond the threshold, ensuring that all students are aware of what is required to achieve standards beyond the threshold level. Pearson's requirements, supplemented by College policies and published course information, provide a clear and comprehensive framework, which supports the maintenance of academic standards beyond the threshold level. External examiners confirm that standards beyond the threshold level are reasonably comparable with those of other UK providers, and credit and qualifications are awarded only where those standards have been met.
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.	Not met	High	The review team concludes that, while the relationship with Barts NHS Trust appears to be working for the benefit of the parties involved, where the College works in partnership with other organisations, it does not have in place effective arrangements to ensure that the standards of awards are credible and secure irrespective of where or how courses are delivered or who delivers them. This is because the evidence presented to the team with regard to the HND in Health and Social Care indicates that the College does not manage its relationships with placement providers to effectively discharge its responsibilities for enabling students to have appropriate opportunities to achieve required learning outcomes; ensure that staff, students and providers of work experience understand their respective roles and responsibilities in relation to work experience and learning outcomes expected; or have a robust approach to securing standards delivered in partnership with providers of work experience for those students on the HND in Health and Social Care. While it has relevant policies and procedures in place, these are not implemented as intended, giving rise to questions

				about the security of academic standards relating to the work experience unit on the HND in Health and Social Care and the credibility of the College's plans to expand the range of work experience opportunities. The review team concludes, therefore, that the Core practice is not met.
S4	The provider uses external expertise, assessment and classification processes that are reliable, fair and transparent.	Met	High	The review team concludes that the College uses external expertise, assessment and classification processes that are reliable, fair and transparent. This is because analysis of the evidence shows the effectiveness of the College's use of external expertise in maintaining assessment standards and confirms these are fair and reliable. The College also makes effective use of local stakeholder input to help shape academic standards and policy through its higher-level committees. However, plans for external stakeholder input to curriculum developments could be more systematic and regular. Staff and students who met the team clearly understood and valued the role of external examiners. The review team concludes, therefore, that the Core practice is met.
Q1	The provider has a reliable, fair and inclusive admissions system.	Met	High	The review team concludes that the College has a reliable, fair and inclusive admissions system. This is because the College has appropriate policies and procedures in place in line with Pearson's requirements and has credible and robust plans for ensuring that admissions systems are reliable, fair and inclusive. Admission records demonstrate that the College's policies are implemented in practice. Students' experience of the admissions process confirms that the process is reliable, fair and inclusive. Staff involved in admissions understand their role and are appropriately skilled and trained. Although there was one account of a

				discrepancy, on the whole, the College provides information for applicants that is transparent, accessible and fit for purpose. The review team concludes, therefore, that the Core practice is met.
Q2	The provider designs and/or delivers high-quality courses.	Met	High	The review team concludes that the College delivers high-quality courses which are designed by Pearson as the awarding organisation. Course documentation and assignment briefs provided by the College indicate that teaching, learning and assessment design enable students to meet and demonstrate the intended learning outcomes. Students, through their submission and in meetings, tend to regard their courses as being of high quality and staff are able to articulate what high quality means. Observations of teaching and learning demonstrate clarity of objectives, good planning and organisation, a sound approach, good delivery, appropriate resources and student engagement undertaken. However, the team noted that a number of students were failing to complete a mandatory core unit on the HND in Health and Social Care which requires students to undertake a minimum of 200 hours of work experience to achieve the intended learning outcomes. However, on balance, the team concludes that the College meets this Core practice.
Q3	The provider has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience.	Met	High	The review team concludes that the College has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. This is because the observations of teaching and learning indicate that teaching staff are appropriately qualified and skilled to deliver a high-quality academic experience; the College has credible plans for the recruitment, appointment, induction and support of sufficient, appropriately qualified and skilled staff; and its

				<p>policies for staff recruitment, appointment, induction and support are transparent and effective in providing for a sufficient number of appropriately qualified and skilled staff. Staff who met the review team have been recruited, appointed, inducted and supported in accordance with the College's policies, are appropriately skilled and are committed to providing a high-quality academic experience. Positive views expressed by both students and external examiners further serve to confirm that the College has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. The review team concludes, therefore, that the Core practice is met.</p>
Q4	<p>The provider has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience.</p>	Met	High	<p>The review team concludes that the College has sufficient and appropriate facilities, learning resources and student-support services to deliver a high-quality academic experience. This is because the team's analysis of the evidence, and the tours undertaken of the two sites where teaching takes place, confirms that there are sufficient and appropriate facilities, learning resources and support in place to deliver a high-quality academic experience for the current programmes. The College reviews its resources and responds to student feedback regularly. Staff understand their respective roles in relation to student support and students greatly value the support available to help them achieve. The review team concludes, therefore, that the Core practice is met.</p>

Q5	The provider actively engages students, individually and collectively, in the quality of their educational experience.	Met	High	The review team concludes that the College has sufficient and appropriate facilities, learning resources and student-support services to deliver a high-quality academic experience. This is because the team's analysis of the evidence, and the tours undertaken of the two sites where teaching takes place, confirms that there are sufficient and appropriate facilities, learning resources and support in place to deliver a high-quality academic experience for the current programmes. The College reviews its resources and responds to student feedback regularly. Staff understand their respective roles in relation to student support and students greatly value the support available to help them achieve. The review team concludes, therefore, that the 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 review team concludes that the College engages in systematic monitoring of all formal and informal complaints and appeals, which was referenced in relevant committees and annual reports. Students have a good understanding of the process to submit a complaint or appeal, and the sample of complaints and appeals decisions seen by the team shows no discrepancies in the use of the policy. Complaints are related directly to student behaviour rather than provider delivery, in the main, and are generally resolved informally. The review team concludes, therefore, that the 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.	Not met	High	The review team concludes that the College, working in partnership with its awarding organisation, does not have 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. This is because, although Pearson partnership agreements are clear and external examiner reports indicate that the academic experience for students is of a high quality, the College does not have effective and comprehensive arrangements in place to ensure a high-quality work experience for those students for which this is a mandatory requirement of their programme (the HND in Health and Social Care) which therefore presents a risk to quality. Students do not always provide employers' details when they obtain work experience and some students are known to be undertaking work experience without appropriate contact with supervisors to conduct suitability checks, risk assessments and to provide support. In addition, it is not clear how the College processes assessment results for Unit 4 - Personal and Professional Development on the HND in Health and Social Care, in order to record the assessment as not being completed. The review team concludes, therefore, that the Core practice is not met.
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Q9	The provider supports all students to achieve successful academic and professional outcomes.	Not met	High	<p>The review team concludes that the College does not support all students to achieve successful academic and professional outcomes. This is because, while it has appropriate mechanisms to support students who are engaged and fully committed to their programme and offers many opportunities for support, including the role of the personal tutor which is vital to this, enabling these students to achieve their academic and professional outcomes, there is a lack of concrete and timely action on attendance rates and facilitation of the completion of courses within the expected timeframes, especially in relation to the HND in Health and Social Care, where failure to complete appropriate work experience means that students are not able to qualify for their award. Coupled with this finding is that of the College's inability to produce definitive student data and evidence-based plans for ensuring that all students are supported to achieve successful academic and professional outcomes. The team questioned the ability of the data the College collects to effectively monitor student retention and achievement with a view to supporting all students to achieve successful academic and professional outcomes and to put in place robust plans to mitigate risks to students being unable to complete. Notwithstanding positive students' comments about their experience and the support available to them, the observations described above are consistent with the criteria for a 'does not meet' judgement, and the review team concludes that the School does not meet this Core practice.</p>
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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 London Churchill College.

A Quality and Standards Review (QSR) is a method of review QAA uses to provide 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 providers' 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: Michal Izak
Institution: University of Roehampton
Role in review team: Subject reviewer in Business and Management

Name: Paul Taylor
Institution: Teesside University
Role in review team: Institutional and subject reviewer in Health and Social care

Name: Kate Wicklow
Institution: Lancaster University
Role in review team: Student reviewer

The QAA officer for the review was Irene Ainsworth.

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 London Churchill College

London Churchill College (the College) was established in 2006. In 2009, the College secured Centre approval from Pearson to offer Higher National Diploma (HND) programmes. From 2009 to 2011, HNDs were only available for international students. Since 2012, following the College's decision to withdraw from the international market, these programmes have been provided for UK and European Union students. In 2016, the College entered into partnership with the University of Bedfordshire to deliver foundation degrees and Level 6 top-up degrees as a study centre of the University. This agreement ended in 2017.

Pearson HND programmes are currently delivered at the College's Whitechapel campus (which also serves as the College's administrative base) and, since January 2018, at its

Upton Park Campus (Barclay Hall). The rental agreement on the Whitechapel campus will end in 2020 and, since the College has recently purchased the leasehold on a property in Barking (King's House), it has decided to cease new student recruitment at Whitechapel while teaching out students currently enrolled there. The College intends that each campus should specialise in programmes based on a discipline or field of study. The Barclay Hall campus will specialise in delivering HND programmes in Business and Hospitality as well as Hospitality Management, while the King's House campus will specialise in delivering the HND Health and Social Care.

The College is governed by a Board of Directors, to which the College Oversight Board (COB) and Academic Board Chairs report on the functioning of their Boards and their membership on an annual basis. The Quality and Enhancement Steering Committee (QESC) reports to the Academic Board and the Assessment and Progression Board, Programmes Committee and Marketing, Recruitment and Admissions Committee feed into the QESC. All staff meetings, the Student Engagement Group and the Public Information Monitoring Group feed into the Principal's Executive Group and thence to the Board of Directors. The College Principal is responsible for operational and management matters and the Principal's Executive Group comprises the Head of Programmes and Academic Monitoring, Registrar, Head of Marketing and Recruitment, IT and Data Manager, Head of Quality Assurance and Compliance, Head of Student Engagement, Facilities Manager and another six managers and officers.

At the time of the visit, there were 745 full-time students enrolled on Pearson HND programmes. There were no part-time HND students at the College. The figures in brackets below indicate student enrolment on these programmes:

- HND (Regulated Qualifications Framework (RQF)) in Business (266)
- HND (RQF) in Business (Entrepreneurship and Small Business Management (352)
- HND (Qualifications and Credit Framework (QCF)) in Health and Social Care (99)
- HND (QCF) in Hospitality Management (28).

New Pearson HND programmes planned by the College are as follows:

- HND (RQF) in Healthcare Practice (Integrated Health and Social Care)
- HND (RQF) in Social and Community Work (Community Development)
- HND (RQF) in Hospitality Management.

In 2018 the College entered into a volunteering agreement with Barts NHS Trust to offer volunteering experience to students as part of their HND Health and Social Care work experience and the planned HND in Healthcare Practice. The College plans to establish further partnerships to support more students in completing work experience.

London Churchill College and Pearson Education Ltd: Responsibilities

London Churchill College Ltd offers Higher National programmes in the scope of this review that lead to an award from Pearson Education Ltd.

Pearson Education Ltd (Pearson) is an awarding organisation that has its qualifications, examinations and assessments regulated by the Office of Qualifications and Examinations Regulation (Ofqual). As an awarding organisation, Pearson creates Ofqual-regulated curricula (which include detailed learning outcomes) as well as programme specifications

and handbooks. Pearson also issues certificates to students, when providers submit evidence that their students have completed the relevant programme of study to the standard required.

Pearson devolves responsibility for the recruitment, teaching, support and assessment of students to providers and uses information gained from the initial approval and subsequent external examiner visits to determine if the relevant sector-recognised standards continue to be met. The provider should also have in place processes and procedures to ensure that the learning materials and the learning and teaching strategy are regularly reviewed and modified as appropriate to ensure their continued relevance and validity.

As set out in BTEC Centre Guide to Quality Assurance (2018-19), providers are specifically responsible for:

- preparing for external examiner visits and seriously considering and acting upon recommendations which are outcomes of visits
- designing effective learning materials and a learning and teaching strategy that meets the learning outcomes of the Higher Nationals
- putting in place processes and procedures to ensure that the learning materials and the learning and teaching strategy are regularly reviewed and modified as appropriate to ensure their continued relevance and validity
- providing definitive programme information relating to the Higher Nationals as delivered at their institution, including a tailored programme specification
- operational responsibility for ensuring that students have appropriate opportunities to show they have achieved the intended learning outcomes and grading descriptors (where appropriate); this includes responsibility for setting assessments in direct compliance with Pearson requirements
- first marking of student work
- giving feedback to student on their work
- the admission of students including promoting and marketing the programme; setting admissions criteria; selecting applicants; making offers and enrolment, induction and orientation of new students and making student registrations in a timely fashion
- widening access so that all students have an equal opportunity to access their qualifications and assessments
- the appointment of teaching staff and ensuring they have the right skills and experience to deliver a high-quality programme
- delivery of the programme, including provision of learning resources and all aspects of learning and teaching strategy; appointment of teaching staff; strategic oversight of the identification and provision of learning resources to enable students to develop their academic, personal and professional potential, including provision for students with additional learning needs
- developing, implementing and facilitating arrangements and processes that ensure the engagement of students, individually and collectively, in the enhancement and assurance of the educational experience
- ensuring appropriate processes are in place to routinely monitor and periodically review the programme as delivered by them and to keep under constant review all aspects of standards management, quality assurance and day-to-day delivery of the

programme

- implementation of a fair and accessible complaints procedure for the informal, and where appropriate formal, investigation and determination of a student complaint.

Prior to delivery, any provider must be approved by Pearson to deliver the relevant qualifications. Once approved, providers must register students with Pearson and then be subject to annual visits from Pearson-appointed external examiners to determine if the delivery of the qualifications is in line with the published specifications. Providers are also required to submit provider-wide evidence of review of their higher education Pearson provision annually and some providers are subject to annual academic management review (AMR) visits.

As such, Pearson do not have direct relationships with the students of a provider but do provide online support materials (<https://hnglobal.highernationals.com/>). Pearson also accepts complaints or academic appeals from students if the students do not feel that these issues have been dealt with appropriately by the provider.

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 College 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 College'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 it 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 review team sampled the following areas for evidence for the reasons given below.

- The review team conducted a random sample of admissions records to assess whether reliable, fair and inclusive admissions decisions were made.
- The review team considered a representative sample of 10 staff CVs and two job descriptions to gain an understanding of specific roles at the College, to assess whether staff are appropriately qualified and skilled to perform their roles effectively and to determine whether the roles are consistent with the delivery of a high-quality academic experience.
- The review team considered documentation relating to the approval of one HND (Social and Community Work) to test that external experts are used according to the College's regulations or policies.
- The review team considered a volunteering agreement between the College and Barts NHS Health Trust to understand the nature of the collaborative arrangement and the responsibilities of the College, its students and the Trust in this

arrangement.

- The review team undertook a representative sample of assessed work for seven modules on the HND in Health and Social Care, HND in Hospitality Management, and HND in Business to test that marks and awards given to students are reasonably comparable with those achieved in other UK providers and to test whether students are given comprehensive, helpful and timely feedback. The sample included three assignment briefs and assessed work for each HND, giving a total sample size of 21.
- The review team considered a random sample of complaints and appeals, namely 20 complaints and appeals received for 2017-18, to test that complaints and appeals sampled were dealt with in a fair, transparent and timely manner.
- The review team observed a representative sample of eight teaching and learning sessions on the HND in Business and the HND in Health and Social Care to test whether staff deliver a high-quality learning experience.
- The review team visited two sites (Whitechapel and Upton Park) where teaching was taking place to test that the facilities, learning resources and support services deliver a high-quality academic experience.
- In addition, the review team met 10 senior managers, 13 academic and professional support staff and 10 students, including student representatives.

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 to it, both prior to and at the visit, to determine if the College 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 it considered was assessed in 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 Programme handbook for the HND in Business
- b Introduction to Assignment writing and assessment for the Regulated Qualification Framework Higher Nationals in Business
- c Internal Verification Policy (April 2019)
- d Academic Team meeting minutes, July 2019
- e Action plan included as part of the programme annual monitoring report (PAMR) for the HND in Business 2017-18
- f 2018-19 external examiner report for the HND in Business
- g HND Business Unit 03 Specification (Human Resource Management, April 2019)
- h HND Business Unit 06 Sample Assignment Brief (Managing a successful business project, January 2019)
- i Learning, Teaching and Assessment Policy and Strategy
- j Academic Misconduct Policy (April 2019)
- k Academic Appeals Policy and Procedure
- l Mitigating Circumstances Policy (April 2019)
- m Student Support and Reasonable Adjustments Policy (April 2019)
- n Recognition of prior learning (RPL) Policy and Procedure (April 2019)

o	2018-19 external examiner report for the HND in Health and Social Care
p	2018-19 external examiner report for the HND in Hospitality Management
q	Programme handbook for the HND in Health and Social Care
r	Programme handbook for the HND in Hospitality Management
s	Action plan included as part of the PAMR for the HND in Health and Social Care 2017-18
t	Action plan included as part of the PAMR for the HND in Hospitality Management
u	Unit Handbook for Health and Social Care (Complementary Therapies Unit)
v	Unit Handbook for Hospitality Management (Research Project)
w	Minutes of the Assessment and Progression Board (Resubmit), March 2019
x	Minutes of the Quality and Enhancement Steering Committee, July 2019
y	Minutes of the Quality and Enhancement Steering Committee, July 2018
z	Updated action plan from the Business PAMR
aa	Report on the current status on the work placement of HND Health and Social Care students
bb	2018-19 Pearson Annual Management Review report
cc	A representative sample of seven HND Business, Hospitality Management and Health and Social Care assignments and associated assessment feedback
dd	Meetings with senior staff and academic, professional and support staff involved in assessment.

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:

- third-party endorsements as none are available for the provision on offer at the College.

How any samples of evidence were constructed

6 The sampling approach adopted is described in the section 'How the review was conducted'. The team considered a representative sample of assessed work for seven modules on the HND in Business, HND in Health and Social Care, and the HND in Hospitality Management. The sample included three assignment briefs and assessed work for each HND, giving a total sample size of 21.

Why and how the team considered this evidence

7 As highlighted, all of the evidence submitted by the College 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 College's ability to meet this Core practice. To ensure consistency in decision-making and 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.

8 The team considered the College's Learning, Teaching and Assessment Policy and Strategy including associated policies on the recognition of prior learning, Student Support and Reasonable Adjustments Policy, Internal Verification Policy, Mitigating Circumstances Policy, Academic Misconduct Policy and Academic Appeals Policy and Procedure, and focused on the Internal Verification Policy, to establish whether the institutional approach to course and assessment design, marking and moderation ensures that the sector-recognised standards for the qualifications the College delivers are consistent with relevant national qualifications frameworks and that credits and qualifications are awarded only where sector-recognised standards are met.

9 The team considered the minutes of the Assessment and Progression Board (Resubmit), March 2019 and the Quality and Enhancement Steering Committee, July 2019 and July 2018 to test the robustness and credibility of the policies and associated procedures underpinning the Learning, Teaching and Assessment Strategy and to establish whether they are being implemented in accordance with College policy to ensure consistency of sector-recognised standards with the relevant national qualifications framework.

10 The team considered action plans included as part of the programme annual monitoring reports (PAMR) for the HND in Business 2017-18, HND in Health and Social Care 2017-18 and the HND in Hospitality Management in addition to an updated action plan from the Business PAMR, Introduction to Assignment writing and assessment for the Regulated Qualification Framework Higher Nationals in Business, Academic Team meeting minutes, July 2019, and a report on the current status on the work placement of HND Health and Social Care students to identify the College's responsiveness to external examiner feedback relating to maintaining sector-recognised standards.

11 The team considered approved course documentation in the form of programme handbooks for the HND in Business, HND in Health and Social Care and HND in Hospitality Management, which include information on learning outcomes and assessment criteria for units covered by each programme; and unit handbooks for Health and Social Care (Complementary Therapies Unit), Hospitality Management (Research Project); the HND Business unit 03 specification (Human Resource Management, April 2019) and the HND Business unit 06 assignment brief (Managing a successful business project, January 2019) which include information on unit content, learning outcomes, assessment criteria and the scheme of work, to test that the qualification level descriptors and the award of credits, reflecting student progression at each level, are consistent with relevant national qualifications frameworks and reflect Higher National requirements.

12 The team considered the 2018-19 external examiner reports for the HND in Business, HND in Health and Social Care, HND in Hospitality Management and the 2018-19 Pearson Annual Management Review report to establish whether external examiners confirm that sector-recognised standards are consistent with national qualifications frameworks and that credit and qualifications are awarded only where those sector-recognised standards have been met.

13 The team conducted a review of a representative sample of seven HND Business, Hospitality Management and Health and Social Care assignments and associated assessment feedback to test whether the College's policies and procedures for maintaining sector-recognised standards are robust, credible and fully understood by staff and that credit and qualifications are awarded only where the relevant standards have been met.

14 The team met staff involved with assessment and considered the minutes of an end-of-term academic team meeting, July 2019, to test that staff understand and apply the College's approach to maintaining sector-recognised standards.

What the evidence shows

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

16 The Learning, Teaching and Assessment Policy and Strategy and associated policies (covering the recognition of prior learning, student support and reasonable adjustments, internal verification, mitigating circumstances, academic misconduct and academic appeals) have been developed to support the College's assessment process.

It takes account of the UK Quality Code, specifically the Frameworks for Higher Education Qualifications Framework, and Pearson's BTEC Centre Guide to Quality Assurance and Assessment 2018-19, reflecting the need to enable students to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought. The College's policies address and explain aspects of academic regulations that apply to HNDs awarded by Pearson. These policies, in conjunction with Pearson's regulations for HND provision, provide a clear and comprehensive regulatory framework to support the maintenance of sector-recognised standards. The policies are easily accessible to staff and students through the College's online portal, contributing to staff and student understanding of the College's approach to maintaining sector-recognised standards.

17 The Learning, Teaching and Assessment Policy and Strategy aims to ensure that assessment briefs are fit for purpose and assessment tasks are based on published assessment criteria or learning outcomes for units and internal verification of assessment is conducted to ensure that assessment decisions are valid, fair, consistent and reliable. The College uses Turnitin plagiarism-detection software to prevent and discourage academic malpractice. It limits the number of times a student may submit an individual assessment through Turnitin. Students may obtain one similarity report prior to final submission for an assessment.

18 The Internal Verification Policy indicates that internal verifiers are required to check that assignment briefs show all the relevant criteria to be covered in assignments and indicate relevant assessment criteria against each task. The policy outlines the responsibilities of the different parties involved in the assessment process and indicates that the Assessment and Progression Board, which receives termly reports from programme managers (the lead internal verifiers) confirming that internal verification has taken place, is responsible for overseeing the internal verification process. The policy also states that programme leaders and/or programme managers report on progress to the Quality and Enhancement Steering Committee (QESC) which discusses external examiner reports.

19 The review team considered QESC minutes and noted that the July 2019 QESC minutes record that the three external examiner visits relating to the 2018-19 academic year were successful but no detailed discussion by the QESC was reported at that time. The July 2018 QESC minutes do not record any detailed discussion other than to record that a temporary block on recruitment to the HND Business and HND Health and Social Care (arising from external examiner reports) had been lifted; that the HND Hospitality Management external examiner had not identified any issues in what was reported by the College to be a complimentary report; and the Head of Higher Education would be meeting programme managers to review the reports and identify actions for inclusion in a consolidated action plan.

20 The action plans produced in response to external examiners' comments demonstrate that the College is responsive to external examiner feedback and has taken appropriate action to address issues identified through, for example, staff training and development on Pearson requirements relating to assignment writing and assessment, standardisation and assessment feedback to ensure consistency of approach in maintaining sector-recognised standards; the implementation of different forms of assessment, including practical work and examinations to prepare students for top-up programmes and to negate possible plagiarism; and the need for closer monitoring of students' work experience on the HND in Health and Social Care.

21 The approved course documentation in the form of the 2018-19 Programme Handbook for the HND in Business (Pathway: Entrepreneurship and Small Business

Management); HND in Health and Social Care; HND in Hospitality Management; and Unit Handbooks for the HND in Health and Social Complementary Therapies Unit and the HND in Hospitality Management Research Project Unit, unit assessment specification and example of an assignment brief made available to the review team clearly demonstrate compliance with sector-recognised standards consistent with the relevant national qualifications' framework. Standards described in the Pearson-approved programme documentation are set at levels that are consistent with sector-recognised standards.

22 Pearson-appointed external examiners confirm that sector-recognised standards on the HND programmes are robust and consistent with sector-recognised standards and that credit and qualifications are awarded only where those sector-recognised standards have been met. While generally positive, the 2018-19 external examiner report for the HND in Business encouraged greater rigour in the internal verification process, given comments made by the external examiner about the occasional use of dated case study material for assessment purposes and the need for some assessment instruments to clearly indicate the format of assessment required, for example. The external examiner for the HND in Health and Social Care had also identified that the internal verification process had not picked up on assessment methods for Unit 1 Communicating in HSC Organisations being inappropriate to address all the assessment criteria to be met and the need for Unit 4 Personal and Professional Development in Health and Social Care to make clear the need for students to produce evidence of their 200 hours of appropriate work experience. The review team noted that the 2018-19 Pearson Annual Management Review report had identified the need for assessment decisions to be tracked at assessment criteria level rather than at unit level and to ensure that all assessment records show students' current achievements. This essential action (see paragraph 48 in S2), to be completed by 1 June 2019, was required to address the need for the College to demonstrate that it maintains up-to-date records of student achievement and that these are regularly reviewed and accurately tracked against recognised, regulated standards. While noting the external examiners' comments, the team noted the generally positive tenor of the external examiner reports which confirmed that sector-recognised standards were consistent with sector-standards and further noted external examiner comments about the responsiveness of the College to issues raised in external examiner reports.

23 The review of assignments and assessment feedback demonstrated that assessment is conducted in line with College policies and procedures and that standards achieved by students are, and will continue to be, in line with sector-recognised standards. The sample of assessments not reaching the pass mark provided by the College confirms consistency in applying sector-recognised standards and that credit and qualifications are awarded only where those standards have been met.

24 Staff report that they are made aware of College policies and procedures at induction, have opportunities to keep themselves informed of developments with regard to maintaining standards through academic team meetings and peer-to-peer staff interactions; are involved in staff development and share good practice; and undertake relevant continuing professional development activity.

Conclusions

25 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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.

26 From the evidence seen, the review team considers that the standards set for the College's courses are in line with the sector-recognised standards defined in paragraph 342 of the OfS regulatory framework. The review team also considers that the standards described in the approved programme documentation are set at levels that are consistent with these sector-recognised standards and the College's academic regulations and policies should ensure that standards are maintained appropriately.

27 The review team considers that, based on the evidence scrutinised, the standards that will be achieved by the College's students are expected to be in line with the sector-recognised standards defined in paragraph 342 of the OfS's regulatory framework. Based on this information the review team also considers that the College's academic regulations and policies will ensure that these standards are maintained. The review team considers that staff fully understand the College's approach to maintaining these standards and that the evidence seen demonstrates they are committed to implementing this approach. Therefore, based on its scrutiny of the evidence provided, the review team concludes that this Core practice is met.

28 Although external examiners have identified the need for greater rigour in the internal verification process on occasion and the 2018-19 Pearson Annual Management Review report draws attention to the need for the College to ensure that it maintains up-to-date records of student achievement which are regularly reviewed and accurately tracked against sector-recognised standards, external examiners confirm that credit and qualifications are awarded only where sector-recognised standards have been met. External examiners also note the commitment of staff to maintaining sector-recognised standards. Staff training and development is provided to enable staff to understand and apply the College's approach to ensuring that standards are maintained and are consistent with the relevant national qualifications' frameworks, as described in Pearson-approved programme documentation. The regulatory framework supporting the maintenance of academic standards at the sector-recognised level is clear and comprehensive.

29 The evidence underpinning this judgement reflects all of the evidence described in the QSR evidence matrix. Therefore, the review team has 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

30 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.

31 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

32 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it 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 Provider submission
- b HND in Business Programme Handbook
- c End of term Academic Team meeting minutes, July 2019
- d 2018-19 External examiner report HND in Business
- e HND Business Unit 03 specification (Human Resource Management, April 2019)
- f HND Business unit 06 assignment brief (Managing a successful business project, January 2019)
- g Learning, Teaching and Assessment Policy and Strategy (April 2019)
- h Student Support and Reasonable Adjustments Policy (April 2019)
- i Progression and Completion Policy (April 2019)
- j Recognition of Prior Learning Policy and Procedure (April 2019)
- k 2018-19 External examiner report HND in Health and Social Care
- l 2018-19 External examiner report HND in Hospitality Management
- m HND in Health and Social Care Programme Handbook
- n HND in Hospitality Management Programme Handbook
- o Unit Handbook for Health and Social Care (Complementary Therapies Unit)
- p Unit Handbook for Hospitality Management (Research Project)
- q Pearson Academic Management Review 2018-19 report on London Churchill College
- r Personal Tutoring and Enabling Student Development Policy
- s Consolidated action plan (master), 2019
- t A representative sample of seven HND Business, Hospitality Management and Health and Social Care assignments and assessment feedback
- u Meeting with Level 4 and 5 students, including student representatives
- v Meeting with senior staff and academic, professional and support staff involved in assessment.

33 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:

- third-party endorsements as none are available for the provision on offer at the School.

How any samples of evidence were constructed

34 The sampling approach adopted is described in the section 'How the review was conducted'. The review team considered a representative sample of assessed work for seven modules on the HND Health and Social Care, HND in Hospitality Management, and HND in Business. The sample included a review of three assignment briefs and assessed work for each HND.

Why and how the team considered this evidence

35 As highlighted, all of the evidence submitted by the College 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 their judgement regarding the College'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.

36 The team considered the Learning, Teaching and Assessment Policy and Strategy (April 2019), the Progression and Completion Policy (April 2019), the Personal Tutoring and Enabling Student Development Policy, Recognition of Prior Learning Policy and Procedure (April 2019) and the Student Support and Reasonable Adjustments Policy (April 2019) to establish how the College seeks to ensure that students are enabled to achieve standards beyond the threshold level.

37 The team considered the consolidated action plan (master), 2019 and the Academic Team meeting minutes, July 2019 to establish the robustness of the College's plan for maintaining comparable standards and to ensure that the plans are credible and evidence based.

38 The team scrutinised programme handbooks for the HND in Business, HND in Health and Social Care and HND in Hospitality Management; unit handbooks for Health and Social Care (Complementary Therapies Unit) and for Hospitality Management (Research Project; the HND Business unit 03 specification (Human Resource Management, April 2019) and HND Business unit 06 assignment brief (Managing a successful business project, January 2019) to test that specified standards beyond the threshold for courses sampled are reasonably comparable with those achieved in other UK providers.

39 The team scrutinised external examiners' reports for 2018-19 to check that external examiners confirm that standards beyond the threshold for the HND programmes considered by the team are reasonably comparable with those achieved in other UK providers.

40 The team considered Pearson's Academic Management Review 2018-19 report on London Churchill College to identify how the awarding organisation regards the College's standards and award procedures.

41 The team considered a representative sample of seven HND Business, Hospitality Management and Health and Social Care assignments and assessment feedback to test that marks and awards given to students are reasonably comparable with those achieved in other UK providers.

42 The team met students to assess their understanding of what is required of them to reach standards beyond the threshold.

43 The team met staff to test their understanding and application of the College's approach to maintaining comparable standards.

What the evidence shows

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

45 While the criteria for achieving qualifications above the threshold are established by Pearson, the College has adopted policies that are sensitive to the needs of its student body which is multicultural and comprised of, in the main, adult learners. In order to achieve the aims of the Learning, Teaching and Assessment Policy and Strategy, programme leaders are responsible for ensuring that students receive unit handbooks, providing detailed information about a programme, at enrolment. They also receive Expected Answer Guidelines (EAG) for each unit to develop their understanding of what they need to do to achieve a pass, merit or distinction. The Progression and Completion Policy also indicates what a student must do to achieve a pass, merit or distinction. As paragraph 52 below indicates, information and guidance, including the Expected Answer Guidelines, provided to students enables them to understand what is required to reach standards beyond the threshold.

46 The Personal Tutoring and Enabling Student Development Policy is designed to provide students with both academic and pastoral support to achieve their potential. The responsibilities of personal tutors include signposting students to relevant course materials and textbooks in support of their needs as learners; referring students, as appropriate, to other College departments regarding any mitigating circumstances claims, disability assessments or emotional support assistance required. Personal tutors also have a role to play in guiding applicants and students through the process of applying for recognition of prior learning and conducting admission interviews for prospective students. It was clear from the discussion with students that they valued the contribution made by personal tutors in supporting them to achieve beyond the threshold.

47 The Learning, Teaching and Assessment Policy and Strategy demonstrates the College's commitment to student inclusivity and the Student Support and Reasonable Adjustments Policy is intended to enable all students to develop academically, personally and professionally and includes provision for support agreement plans to be established, taking account of student-specific needs identified in conjunction with the Registrar. Examples of adjustments include extended library book loans, additional one-to-one tutorials, extra time in examinations or to submit assignments, and handouts available in different formats. The policies, coupled with Pearson's requirements, set out the College's expectations of both staff and students to enable student achievement beyond the threshold.

48 The consolidated action plan indicates that the College is to track assessment decisions at assessment criteria level rather than at unit level. The plan states that this is work in progress and that the next Assessment and Progression Board will capture grading decisions at assessment criteria level.

49 Approved course documentation specifies what is required of students to achieve at different levels beyond the threshold and these levels are reasonably comparable with those of other UK providers.

50 Standards set beyond the threshold for the College's courses are reasonably comparable with those set by other UK providers, as confirmed by external examiners' reports, and students who are awarded qualifications will continue to have the opportunity to achieve standards beyond the threshold level that are reasonably comparable with those achieved in other UK providers. The HND Hospitality Management external examiner report notes the good contextualisation of the higher-grade descriptors and clear details of evidence requirements, as does the HND Health and Social Care external examiner report who notes that guidance is available for students, directing them to produce the correct forms of evidence for achievement for Unit 5: Working in Partnership in Health and Social Care, although the HND Health and Social Care external examiner also identifies a need for assessment to enable students to demonstrate that they meet all the assessment criteria, including demonstrating practical competence, for Unit 1, Communicating in Health and Social Care Organisations. End of Term Academic Team minutes indicate action taken in response to external examiners' comments, including discussion on assessment standardisation and good practice in relation to assessment feedback to students.

51 As indicated previously in this report (paragraph 22), the Pearson Academic Management Review (AMR) 2018-19 report identified, as an essential action, the need to track assessment decisions at assessment criteria level rather than unit level (to be in place by June 2019). The College reports that staff have received training on the learning outcome-based approach to maintaining threshold standards for HND provision. The consolidated action plan provided for the September 2019 review visit indicates that actions to be taken by the College in response to the identified need to track assessment decisions at assessment criteria level rather than unit level included the production of a redesigned group grade analysis spreadsheet and the development of a mechanism to capture the data at assessment criteria level. The action plan recorded this action as work in progress with the next Assessment and Progression Board capturing grading decisions at assessment criteria level. The College reported that issues raised by the AMR report would be addressed by September 2019.

52 Feedback provided to students on assessed work sampled enables students to understand what is required for them to achieve standards beyond the threshold. Students who met the review team confirm that they are satisfied with the level and clarity of the assessment feedback they receive and report that assignment briefs and Expected Answer Guidelines help them to understand what is required to achieve pass, merit and distinction grades. Students also report that staff are accessible and that they particularly value the contribution made by personal tutors in supporting them to achieve beyond the threshold. Students spoke of their growing confidence, based on greater understanding of assessment expectations and guidance provided to them on how to improve their work to enable them to achieve merit and distinction grades. They spoke of good interaction with their tutors who helped to break down the assessment criteria to enable them to understand what they need to demonstrate through the assessment process. Students also spoke of the value they placed on the real-life experience of teaching staff and appreciate the reading material uploaded for them on the virtual learning environment.

53 Staff confirm their understanding of the College's approach to maintaining comparable standards, which is reinforced through staff meetings and through staff development and training opportunities provided to ensure that they are informed about any new developments relating to maintaining comparable standards, taking account of external reference points, including Pearson and QAA. Staff report that they attend designated sessions to share best practice relating to the provision of assessment feedback to students

to enable students to develop their understanding of what they need to do to achieve beyond the threshold.

Conclusions

54 As described above the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

55 The review team, based on the evidence presented to it, determined that the standards set for students to achieve beyond the threshold on the College's courses are reasonably comparable with those set by other UK providers. The review team considered that the standards described in the approved programme documentation and in the College's academic regulations and policies should ensure that such standards are maintained appropriately.

56 Therefore, the review team concludes, based on the evidence described above, 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 and this Core practice is met.

57 The College adheres to Pearson's criteria for the award of merit and distinction, and programme documentation specifies what is required of students to achieve at different levels beyond the threshold, ensuring that all students are aware of what is required to achieve standards beyond the threshold level. Pearson's requirements, supplemented by College policies and published course information, provide a clear and comprehensive framework, which supports the maintenance of academic standards beyond the threshold level. External examiners confirm that standards beyond the threshold level are reasonably comparable with those of other UK providers, and credit and qualifications are awarded only where those standards have been met.

58 The evidence underpinning this judgement reflects all of the evidence described in the QSR evidence matrix. Therefore, the review team has 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

59 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.

60 The 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

61 The review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it 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 Responsibilities checklist for providers with Pearson Education Ltd provision
- b Academic Board terms of reference
- c Risk Register
- d Student Engagement and Employability Plan 2019
- e Volunteering agreement with Barts NHS Health Trust
- f Learning, Teaching and Assessment Policy and Strategy
- g Progression and Completion Policy
- h External examiner report for 2018-19 for the HND in Health and Social Care (September 2019)
- i Assessment and Progression Board (Resubmit) minutes (March 2019)
- j Minutes of the July 2019 Academic Board meeting
- k Chair's report on the effectiveness of the Academic Board
- l HND in Health and Social Care Work Experience Information Form and Booklet
- m Data on work experience completion presented in a Work-based Learning report relating to the HND in Health and Social Care to the Academic Board (July 2019)
- n Work Experience Policy
- o Statement on work experience arrangement and Health and Social Care
- p Collaborative Partnerships Policy
- q Student Engagement Group minutes (November 2018)
- r HND in Health and Social Care Unit 4 Specification: Personal and Professional Development
- s Progression and completion list for Resubmit Board (September 2019)
- t Current work-based learning data provided at the time of the visit
- u Volunteering agreement with a representative of Barts Health Trust
- v Meetings with senior staff and with academic, professional and support staff involved in collaborative student placement and work experience activity.

62 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:

- third-party endorsements as none are available for the provision on offer at the College.

How any samples of evidence were constructed

63 The sampling approach adopted is described in the section 'How the review was conducted' and reflects both representative and risk-based considerations. Specifically, the review team focused on the HND Health and Social Care for assessment due to this course being the only one that includes a mandatory requirement for completion of 200 work experience hours within Unit 4, Personal and Professional Development in Health and Social Care. The team therefore considered approved course documentation for the HND course in Health and Social Care delivered by the College, based on a risk-based sampling approach and relevant College policies and processes relating to work experience undertaken by students as part of the HND in Health and Social Care.

Why and how the team considered this evidence

64 As highlighted, all of the evidence submitted by the College 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 College'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.

65 The team considered the responsibilities checklist for providers with Pearson Education Ltd provision, the Learning, Teaching and Assessment Policy and Strategy, Progression and Completion Policy, Work Experience Policy, the Collaborative Partnerships Policy and current work-based learning data provided at the time of the visit to identify the College's approach to ensuring that students have appropriate opportunities to achieve required learning outcomes relating to work experience.

66 The team considered the Work Experience Policy, Student Engagement Group minutes (November 2018), the Academic Board's terms of reference, Chair's report on the effectiveness of the Academic Board, minutes of a July 2019 Academic Board meeting, Assessment and Progression Board (Resubmit) minutes (March 2019), progression and completion list for Resubmit Board (September 2019), data on work experience completion presented in a Work-based Learning report relating to the HND in Health and Social Care to the Academic Board (July 2019) and current work-based learning data provided at the time of the visit to test the effectiveness of the College's plans for securing standards in partnership work and its management, monitoring and oversight of the work experience undertaken by students on the HND Health and Social Care.

67 The team considered the Risk Register, the Student Engagement and Employability Plan 2019, a statement on work experience arrangement and the HND Social Care and Work Experience Work Experience Information Form and Booklet to assess whether the College has credible, robust and evidence-based plans for securing standards for partnership work.

68 The College does not have any partnership agreements although it does have an agreement with Barts NHS Trust to provide volunteering opportunities for students on the HND in Health and Social Care. The team considered this agreement to understand the respective responsibilities of the College, students and the Trust involved in this collaborative arrangement.

69 The team considered an external examiner report for 2018-19 for the HND in Health and Social Care (September 2019) to test whether the external examiner considers that the arrangements in place are effective, leading to standards that are credible and secure.

70 The team discussed the volunteering agreement with a representative of Barts Health Trust and staff of the College to identify the College's approach to ensuring that students have appropriate opportunities to achieve required learning outcomes relating to work experience

What the evidence shows

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

72 The responsibilities checklist for providers with Pearson Education Ltd provision indicates that the College is responsible for designing effective learning materials and a learning and teaching strategy that meets Higher National learning outcomes. The Learning, Teaching and Assessment Policy and Strategy refers to required learning outcomes being delivered at the appropriate level in accordance with the Framework for Higher Education Qualifications (FHEQ), and Pearson's BTEC Centre Guide to Quality Assurance and Assessment 2018-19. Under the heading of professional standards in the Learning, Teaching and Assessment Policy and Strategy, reference is made to the need for staff and students to reinforce standards required in the workplace. The Progression and Completion Policy aims to ensure that programmes and individual learning outcomes allow appropriate student development towards successful outcomes. The Policy sets out the requirements for student progression and completion and outlines compensation arrangements for the award of an HNC or HND.

73 The College has a Work Experience Policy to manage the provision and management of student work experience. The Policy is detailed and sets out a clear process for checking the suitability of work experience; the provision of support to work experience providers; and the monitoring of progress made towards the required 200 hours on the HND in Health and Social Care, which is part of the assessment requirement for Unit 4 - Personal and Professional Development, which aims to encourage learners to develop as reflective practitioners by applying their understanding and skills to their own health and social care setting. The College also has a Collaborative Partnerships Policy which is intended to ensure the College's internal policies and procedures for undertaking and monitoring collaborative arrangements are sufficiently robust to meet the needs of students registered on awarding organisation programmes.

74 The Work Experience Policy requires the Student Engagement Group (SEG) to monitor work experience and states that the College will contact all employers to confirm the suitability of the students' work experience. However, the review team noted that documentation provided during the review showed that this aspect of the Work Experience Policy was not adhered to for all students. During the visit, the review team received current data on work experience progress that showed 69 of 177 students (who had already studied Unit 4) were in the 'No work-based learning information' category. The definition of this category stated that 'in many instances students start work but do not complete the relevant forms until towards the end of their course'. Therefore the review team was unclear as to how, for this group of students, the suitability of the work experience was confirmed as

suitable by the College prior to students undertaking their work experience. As such the review team could not identify, from the evidence provided, how the College clarifies the responsibilities of the employer for each placement setting. Hence, the review team considered the evidence to show that the College was not fulfilling its responsibility to ensure all students have appropriate opportunities to meet the assessment requirements set out in the Unit descriptor and in the Work Placement Policy.

75 The College reported that, although it would like to think that it and Barts are partners, and the relationship is serious and substantial and working well, it recognises that it is not a partnership as typically understood. In addition to Barts, the College works with other local employers to expand the range of work experience opportunities available to students but gives to students the responsibility to find an employer and then notify the College's Work-based Learning Coordinator, who will check the suitability of the work experience provider. Senior staff told the review team that suitability was checked by workplace supervisors when they receive the Work Experience Information Form from students. In subsequent meetings, staff clarified that suitability was checked by College staff contacting employers when they receive the completed Work Experience Information Form from students containing employer details.

76 The HND in Health and Social Care Work Experience and Information Form and Booklet show that those students who complete their work experience are able to evidence their achievements during their 200 hours, as confirmed by their workplace mentor, but the number of students not completing their work experience in a timely manner does raise issues in relation to the quality of the student experience, as discussed in Q8 and is also relevant to Q9.

77 The College has not recently recruited to the Health and Social Care programme given its relocation plans and, in the future, it intends to deliver an HND in Healthcare Practice involving 450 hours of work experience and an HND in Social and Community Work requiring 375 hours' work placement or experience. Given the evidence seen by the review team, which highlights that not all students are able to complete 200 hours of placement experience in the expected timeframes for an HND, the team was unclear as to how the College's plan to move to an increased hours' placement experience to meet course requirements can be effectively delivered.

78 As indicated above, the Work Experience Policy requires the Student Engagement Group (SEG) to monitor work experience. The Policy also states that students have one year after the end of their programme to complete their work experience. Staff told the review team that students who had not completed within the year were withdrawn. In November 2018, SEG received data showing that 42 of 195 students (whose programme ended in either 2016 or 2017) still needed to undertake work experience. No identified actions were evident in the minutes of that meeting, or in the other evidence seen by the review team, to show how SEG was fulfilling its responsibility for monitoring work experience.

79 Academic Board has oversight of work experience arrangements and a report on a review of the effectiveness of the Academic Board to the Board of Directors (July 2019) noted that Academic Board's performance against the requirement for the Board to have oversight over work experience arrangements for all programmes through the receipt of reports from the Head of Student Engagement had been met. The Board received a work-based learning report in July 2019 showing 108 of 190 students with work-based learning outstanding, all student groups having studied Unit 4 during their first year of study. No discussion of the report or actions were identified in the minutes of the Board.

80 Minutes and data provided to the team do not show withdrawals and do show students still being counted beyond one year of completing their programme.

81 The College's Risk Register identifies a failure to achieve adequate placements and work experience for students as high risk. The Student Engagement and Employability Plan outlines the College's plans for building work experience leads and refers to the appointment of a Senior Student Engagement Officer in April 2019 to manage and engage with externals. A statement on work experience arrangement refers to substantial changes in work experience requirements from October 2018, outlines the arrangements for managing the work experience process and outlines support the College provides for enabling students to find work experience.

82 The external examiner for the HND Health and Social Care notes the appointment of a work-based learning coordinator as good practice and further notes that more accurate information on student achievement is now available. The examiner also draws attention to the need to make clear the need for students to produce evidence of their 200 hours of appropriate work experience.

83 The College has entered into a volunteering agreement with Barts NHS Trust to provide HND in Health and Social Care students with volunteering opportunities at the Trust. The agreement between the College and the Trust formalises the volunteering agreement arrangements and expectations. The agreement, which is limited in detail, indicates that London Churchill College and Trust representatives supervise students to ensure that they attend their placements on time and deliver work to a good standard. Students are required to complete their Work Experience Booklet and a member of the Trust monitors their work and countersigns the completed activities and hours entered into the workbook. The Trust has worked with the College for three years and considers the working relationship to be good, with the College students being some of the most reliable students the Trust has had. The review team noted that the Trust has the capacity to take on more students to complete their work experience

Conclusions

84 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

85 The review team concludes that the evidence it saw describes a relationship with Barts NHS Trust that appears to be working for the benefit of the parties involved. However, the team also saw evidence that, where the College works in partnership with other organisations, its arrangements to ensure that the standards of awards are credible and secure irrespective of where or how courses are delivered or who delivers them are not effective. This is because the evidence presented to the team with regard to the HND in Health and Social Care indicates that the College does not follow the requirements set out in its own documentation to manage its relationships with placement providers to effectively discharge its responsibilities for enabling students to have appropriate opportunities to achieve required learning outcomes; ensure that staff, students and providers of work experience understand their respective roles and responsibilities in relation to work experience and learning outcomes expected; or have a robust approach to securing standards delivered in partnership with providers of work experience for those students on the HND in Health and Social Care. While it has relevant policies and procedures in place, these are not implemented as intended, giving rise to questions about the security of academic standards relating to the work experience unit on the HND in Health and Social Care and the credibility of the College's plans to expand the range of work experience opportunities. The review team concludes, therefore, that the Core practice is not met.

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

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

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

88 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

89 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it 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 Provider submission
- b HND in Business Programme Handbook
- c Internal Verification Policy (April 2019)
- d Programme Annual Monitoring Report (2017-18) HND in Business
- e Academic Board Terms of Reference
- f External examiner report for the HND Business (June 2019)
- g Minutes of an HND Social and Community Work approval panel event (July 2018)
- h Academic Misconduct Policy (also referred to as the Academic Discipline Policy) (April 2019)
- i Academic Appeals Policy and Procedure (April 2019)
- j External examiner report for the HND Health and Social Care (June 2019)
- k External examiner report for the HND Hospitality Management (May 2019)
- l HND in Health and Social Care Programme Handbook
- m HND in Hospitality Management Programme Handbook
- n Programme Annual Monitoring Reports (2017-18) HND in Health and Social Care
- o Programme Annual Monitoring Report (2017-18) HND in Hospitality Management
- p Updated action plan from the Business Programme Annual Monitoring Report (2017-18)
- q Academic Board minutes (November 2018)
- r Academic Board minutes (March 2019)
- s Academic Board minutes (July 2019)
- t Telephone conversation with an external Academic Board member
- u Meetings with senior staff and with academic, professional and support staff
- v Meeting with students.

90 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:

- third-party endorsements as none are available for the provision on offer at the College.

How any samples of evidence were constructed

91 The review team selected samples of evidence according to the process described in Annex 4 of the Guidance for Providers. It focused on the role of external examiners, input from external representatives on committees and course developments and the use of external expertise within the delivery of programmes.

Why and how the team considered this evidence

92 As highlighted, all of the evidence submitted by the College 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 College'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.

93 The team considered the Academic Appeals Policy and Procedure (April 2019), Academic Misconduct Policy (April 2019) and the Internal Verification Policy (April 2019) to identify how external experts are used in maintaining academic standards, and how the College's assessment and classification processes operate.

94 The team considered the Academic Board's terms of reference, Academic Board minutes for November 2018, March 2019 and July 2019 and spoke to an external Academic Board member to interrogate the use made of external expertise in the development of the College's academic regulations or policies.

95 The team scrutinised programme handbooks for the HND in Business, HND in Health and Social Care and HND in Hospitality Management to assess the reliability, fairness and transparency of assessment and classification processes for the courses sampled.

96 The team considered the Academic Appeals Policy and Procedure (April 2019), Academic Misconduct Policy (April 2019) and the Internal Verification Policy (April 2019) to identify how external experts are used in maintaining academic standards, and how the College's assessment and classification processes operate.

97 The team scrutinised programme handbooks for the HND in Business, HND in Health and Social Care and HND in Hospitality Management to assess the reliability, fairness and transparency of assessment and classification processes for the courses sampled.

98 The team evaluated external examiner reports for the HND Business (June 2019), HND Health and Social Care (June 2019), HND Hospitality Management (May 2019), Programme Annual Monitoring Reports (2017-18) HND in Business, Health and Social Care, Hospitality Management and an updated action plan from the Business Programme Annual Monitoring Report (2017-18), to identify the use of external examiners by the College and how it responds to external examiners' reports regarding standards; and to identify the views of external examiners about the reliability, fairness and transparency of assessment and classification processes.

99 The team considered the Programme Design and Development Policy, April 2019 and the minutes of an HND Social and Community Work approval panel event (July 2018) to test whether external experts are used according to the College's regulations or policies.

100 The team met staff to test their understanding of the requirements for the use of external expertise, and the College's assessment and classification processes; and met students to identify how they regard the reliability, fairness and transparency of assessment and classification processes.

What the evidence shows

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

102 Pearson allocates trained external examiners to providers of its HND awards and the College is required to seriously consider and act upon external examiner recommendations on the HND programmes delivered by the College. The Academic Appeals Policy and Procedure (April 2019) and Academic Misconduct Policy (April 2019) outline the internal procedure to be applied in each case following which, if the matter has not been resolved internally to the satisfaction of a student, the student will receive a Completion of Procedures letter and be informed of their right to put their case to Pearson or the Office of the Independent Adjudicator. The Internal Verification Policy (April 2019) sets out the responsibilities of staff involved in assessment and also refers to the responsibilities of external examiners. The College provides external examiners with evidence of internal verification and external examiners confirm whether the internal verification process is adequate, identifying action required or making recommendations, as necessary. The Programme Manager, Head of Quality Assurance and Director of Studies receive these reports which are made available to staff and students via the virtual learning environment. The Policy indicates that the Quality and Enhancement Steering Committee (QESC) discusses external examiners' reports, as appropriate, and receives reports on progress from programme leaders and/or programme managers with action recorded in the Programme Annual Monitoring Report, as appropriate. The review team considered that the College has clear policies which identify how external experts are used in maintaining academic standards, and how the College's assessment and classification processes operate. Membership of the Academic Board includes two external members, referred to as 'external subject specified advisers' in the College submission provided for the review. The review team noted from discussion with one of the external members that the individual concerned was not a subject specialist adviser but did have relevant experience of academic governance which was brought to bear in discussions at the Academic Board. This individual confirmed that the other external member on the Board is an academic. The review team's consideration of the Academic Board minutes of November 2018, March 2019 and July 2019 indicated that the academic member had not been able to attend these meetings and no other information was provided to indicate the contribution of the external academic member on the Academic Board to the academic development of the College. The review team noted that the College makes use of external expertise in the development of the College's academic regulations or policies.

103 The programme handbooks considered provide clear and transparent information about assessment and classification processes, drawing attention to the importance of ensuring the authenticity of student work and the support available to students to engage in good academic conduct and avoid plagiarism; and referring to the use of plagiarism detection software and the Academic Discipline Policy in the event of any suspected irregularity. The review team found the processes described to be reliable, fair and transparent.

104 The College has in place effective policies and processes for receiving, responding to, and acting upon, feedback and reports from external examiners, appointed by Pearson, to ensure assessment classification meets course requirements. Reports from external examiners confirm that the assessment practices are reliable and fair, and they provide

constructive feedback for improvements that are acted upon by programme teams. These reports have commented on the quality of tutor feedback and staff report that the College is responding to this through a series of staff development activities. Programme teams value external examiner input and clear actions are identified within programme monitoring processes. The review team considered that the College is responsive to external examiners' comments and responds to their reports appropriately.

105 The Programme Design and Development Policy, April 2019 indicates that, for Pearson provision, internal processes for programme design exist to complement those of Pearson, while validated programmes allow for stakeholder input, including externals (examiners, employers and practitioners). The approval event did not involve external representation at the July 2018 meeting but the minutes refer to the Stakeholder Workshop (February 2018) which was part of a review of the College provision to provide input to course developments, including identifying demand for courses, potential growth areas the College could support and an assessment of options for collaborative working in linking courses to work opportunities and experience. Discussions at the Workshop indicated that the three surrounding local authorities of the College were keen to form a collaboration with the College and provided evidence to support the viability of the programme.

106 Staff report that they value the reports from external examiners and that they respond to comments made through the annual monitoring process, academic team meetings and through staff development activities to enable them to keep informed of good practice in relation to assessment. Students confirmed their understanding of the external examiner process and had met external examiners during their assessment processes.

Conclusions

107 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

108 The review team concludes that the College uses external expertise, assessment and classification processes that are reliable, fair and transparent. This is because analysis of the evidence shows the effectiveness of the College's use of external expertise in maintaining assessment standards and confirms these are fair and reliable. The College also makes effective use of local stakeholder input to help shape academic standards and policy through its higher-level committees. However, plans for external stakeholder input to curriculum developments could be more systematic and regular. Staff and students who met the team clearly understood and valued the role of external examiners. The review team concludes, therefore, that the Core practice is met.

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

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

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

111 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

112 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it considered was assessed in 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 2017-18 programme annual monitoring report for the HND in Business
- b Marketing, Admissions Recruitment and Selection (MARS) Operational Handbook, 2019
- c Review of public information to ensure consistency with the principles of fair admission (July 2019)
- d Audit of admissions decisions, January 2019
- e Recruitment, Selection and Admissions Policy (April 2019)
- f Student Support and Reasonable Adjustments Policy (April 2019)
- g Recognition of Prior Learning Policy and Procedure
- h Minutes of the Marketing, Recruitment and Admissions Committee for August 2019
- i 2017-18 programme annual monitoring reports for the HND in Health and Social Care
- j 2017-18 programme annual monitoring reports for the HND in Hospitality Management
- k Two CVs of personal tutors
- l Academic Board minutes, March 2019 and July 2019
- m Admission Survey Report (April 2019)
- n Applications Conversion Rates Report January and April 2019
- o Student Support Agreement Plan
- p Minutes of the Recruitment and Admissions Committee for February 2018
- q Brand Advocate Policy
- r Public Information Policy
- s All Staff Meeting minutes, August 2019
- t Training on programme information for student recruitment and admission (October 2018)
- u Pearson Academic Management Review Report 2018-19
- v Principal's Executive Group minutes, July 2019 and October 2018, February 2019, April 2019
- w Audit of admissions decisions, September 2018
- x Consolidated action plan (master) 2019
- y London Churchill College website <https://londonchurchillcollege.ac.uk/>
- z HND in Business and the HND in Hospitality Management course documentation

- published on the College website
- aa Admissions records
- bb Meetings with senior and with academic, professional and support staff involved in admissions
- cc Meeting with students.

113 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:

- arrangements with recruitment agents because the College reported that it does not use recruitment agents.

How any samples of evidence were constructed

114 The review team considered a randomly selected sample of admissions records/decisions at the time of the review visit.

Why and how the team considered this evidence

115 As highlighted, all of the evidence submitted by the College 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 College'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.

116 The team considered the Marketing, Admissions Recruitment and Selection (MARS) Operational Handbook, 2019, Student Support and Reasonable Adjustments Policy (April 2019), Student Support Agreement Plan, Minutes of the Marketing, Recruitment and Admissions Committee for August 2019 and February 2018, Review of public information to ensure consistency with the principles of fair admission (July 2019), Public Information Policy, Recruitment, Selection and Admissions Policy (which includes the Admissions Appeals Policy) (April 2019) and the Recognition of Prior Learning Policy and Procedure to identify College 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 College verifies applicants' entry qualifications; how the College facilitates an inclusive admissions system; and how it handles complaints and appeals.

117 The team considered training provided for College staff on programme information for student recruitment and admission (October 2018) and reviewed two personal tutors' CVs, to understand their role in the process and how the College ensures that the process is implemented as intended in accordance with College policy and awarding organisation expectations.

118 The team evaluated the College's audit of admissions conducted in January 2019 and September 2018, minutes of the Marketing, Recruitment and Admissions Committee for August 2019, Recruitment and Admissions Committee minutes, February 2018, All Staff Meeting minutes, August 2019, Principal's Executive Group minutes, July 2019 and October 2018, February 2019, April 2019, Academic Board minutes, March 2019 and July 2019, Admission Survey Report (April 2019), Applications Conversion Rates Report January and April 2019, 2017-18 programme annual monitoring reports for the HNDs in Business; Health and Social Care; and Hospitality Management to identify how the College assures itself that its admissions system is reliable, fair and inclusive, and that it is implemented in accordance

with the Recruitment, Selection and Admissions Policy.

119 The team also considered Pearson's Academic Management Review Report 2018-19 on the College to establish Pearson's views on the admissions system and the consolidated action plan produced by the College in response to the Pearson Report to identify how the College has responded to the report.

120 The team considered the Recruitment, Selection and Admissions Policy to test whether the information given to applicants is transparent, inclusive and fit for purpose.

121 The team considered the Brand Advocate Policy to establish how the College ensures that third parties understand and implement the College's admissions policy and process effectively.

122 The team considered HND in Business and HND in Hospitality Management information published on the College website to test whether admissions requirements for courses sampled reflect the College's overall regulations and policy.

123 The team considered admissions records to assess whether reliable, fair and inclusive admissions decisions were made for the applications sampled.

124 The team met senior, academic and professional staff to test whether staff understand their responsibilities, are appropriately skilled and supported, and can articulate how the College's approach to inclusivity is manifest in the admissions process and met students to assess their views about the admissions process.

What the evidence shows

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

126 The College has a clear and comprehensive approach to student recruitment, selection and admissions which is set out in the MARS Operational Handbook, 2019. The process is managed by the Marketing, Recruitment and Admissions Committee (MRAC) and Public Information Monitoring Group. The Public Information Monitoring Group oversees compliance with Competition and Markets Authority (CMA) guidelines and compliance is also discussed at MRAC meetings.

127 The MARS Operational Handbook indicates the nature of tests and interviews conducted as part of the selection process, including academic interviews with personal tutors as a first step in the process. Applicants with additional learning needs are encouraged to declare these during the admissions process, when staff discuss adjustments required with such applicants, taking account of the College's Student Support and Reasonable Adjustment Policy. An example of a Student Support Agreement Plan seen by the review team outlined detailed agreed reasonable adjustments to be made. The College uses Pearson's entry requirements and has a Recognition of Prior Learning (RPL) Policy and Procedure to compensate credit but, at the time of the visit (September 2019), this had not been used for applicants in the 2018-19 academic year.

128 Central admissions teams process the final outcomes of interviews and ensure the correct documentation is in place. Any candidate who is unsuccessful has the right to appeal, and admissions outcomes are discussed at the MRAC. The practice set out in the Recruitment Selection and Admissions Policy allows the admissions process to be reliable, fair and inclusive. All relevant policies are freely available on the public site, and the review team found accurate programme information on the main College website. The review team

considered that the College's recruitment policies are reliable, fair and inclusive.

129 Personal tutors conduct academic interviews with all applicants before the offer of a place on a programme is made and are provided with training on programme information for student recruitment and admission detailing the admissions criteria and an overview of programme content. Three programme leaders as well as a variety of College staff who deal with admissions also attended an admissions training event in October 2018. CVs of the academic personal tutors supplied to the review team confirmed the tutors had appropriate academic qualifications for the role. The review team found that staff involved in admissions understand their role and are appropriately skilled and trained.

130 The College has credible and robust plans for ensuring that admissions systems are reliable, fair and inclusive. Evidence to support this includes the College Admissions Audit Process which includes an evaluation of the effectiveness of the admissions process against the Recruitment, Selection and Admissions Policy and enables the College to confirm that applications have been processed and documented in line with the Policy. Admissions outcomes are routinely monitored at high-level committees and programme annual monitoring reports include demographic cohort analysis and academic qualifications students hold on entry, though this analysis does not include those who were rejected. The review team noted that the Academic Board receives reports on the number of students with additional needs. No cases of students with additional needs were reported to the Academic Board in March or July 2019. The team also noted that the July 2019 PEG meeting identified that strengthened testing may be required as part of the College's drive to recruit more able students and improve retention in the future. The review team found that the College monitors the admissions system to ensure that it continues to be fit for purpose, reliable, fair and inclusive.

131 The Academic Management Review Report 2018-19 which includes oversight of the College's recruitment practices, notes that the College has clear admissions procedures and is adhering to them. However, it also notes discrepancies in how registration information is checked and indicates that it would be good practice for students to sign to indicate that they agree with details entered. Pearson also found an instance of the College website providing inaccurate information, advertising the Healthcare Practice as being delivered at the Barking site. The website indicates that the course was not recruiting in 2019-20, was not designated for Student Loans Company finance and a registration decision from the Office for Students was awaited. The College's consolidated action plan in response to Pearson's Academic Management Review Report 2018-19 indicates the establishment of new administrative processes, including the production of a form which students will be required to sign to confirm their registration details are correct and that action is to be taken by the Public Information Monitoring Group to confirm the accuracy of information published on the College website. The review team considered that information for applicants is generally transparent, accessible and fit for purpose, notwithstanding the occasional lapse in accuracy.

132 The Recruitment, Selection and Admissions Policy is very clear and details the nature of the admissions process and other information, for example, any tests that will apply for English language and recognition of prior learning. The admissions appeals process is also clearly spelled out for applicants and applicants are also made aware of the College complaints procedure, should they wish to invoke this procedure. The roles and responsibilities of staff members are explained, and the Policy concludes with a section on monitoring and enhancement of recruitment, selection and admissions procedures which fall within the remit of the Recruitment and Admission Committee.

133 The College uses brand advocates to raise awareness of, and to help with recruitment to, the College. The Brand Advocate Policy indicates that they are third parties

contracted by the College on an annual basis and they are required to attend mandatory training sessions provided by the College. They are responsible to the Marketing Manager and the MRAC and Marketing Manager monitor their effectiveness in recruiting individuals whose subsequent applications to the College are successful. Brand advocates may refer candidates to apply to the College if they believe the potential student meets the entry criteria for admission, but they do not make admissions decisions on behalf of the College. Students and alumni can also act as brand advocates, but they are not required to have a signed agreement with the College to act in this capacity. Published information available for students on the College website (<https://londonchurchillcollege.ac.uk/programmes-for-uk-eu-students>) reflects the College's overall regulations and policy relating to admissions and course documentation is consistent with admissions information. While the HND in Business information provides a link to a helpful admissions flowchart, the link to the flowchart in the HND in Hospitality Management is missing. The HND in Health and Social Care is not featured on the website as the College is not recruiting to this programme.

134 The review team's consideration of a sample of admissions decisions provided at the time of the team's visit to the College confirmed that the College is adhering to its own policies and procedures and to those of Pearson. All admissions files were complete, and decisions were transparent and fair. No file contained applicants who did not meet the entry criteria, and, where necessary, full details of English language tests were included in their files. The review team found that the sample of admissions records it considered demonstrated that reliable, fair and inclusive decisions had been made.

135 Staff who met the review team were all aware of their respective roles and responsibilities and confirmed that they received training on admissions. Shadowing opportunities were also reported to be available to enable new staff members to learn from experienced colleagues. Staff report that the number of brand advocates has fallen from more than 30 to 13, based on the College's monitoring of performance and trends identified. Staff and students understood and appreciated the College's commitment to widening participation and inclusivity. They confirm the College's use of interviews, and additional English language or academic skill tests required, to assess applicants' suitability for this level of study and report that the College provides appropriate training and development to ensure that the admissions process operates as intended. Students who met the team found the admissions process clear and supportive in helping them to understand programme requirements, and all gave an identical account of the admissions process. Student feedback in the student submission and in the College's April 2019 admissions survey discussed in detail at the Marketing, Recruitment and Admissions Committee in August 2019, corroborates this account. Students consider the admissions process to be reliable, fair and inclusive.

Conclusions

136 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

137 The review team concludes that the College has a reliable, fair and inclusive admissions system. This is because the College has appropriate policies and procedures in place in line with Pearson's requirements and has credible and robust plans for ensuring that admissions systems are reliable, fair and inclusive. Admission records demonstrate that the College's policies are implemented in practice. Students' experience of the admissions

process confirms that the process is reliable, fair and inclusive. Staff involved in admissions understand their role and are appropriately skilled and trained. Although there was one account of a discrepancy, on the whole, the College provides information for applicants that is transparent, accessible and fit for purpose. The review team concludes, therefore, that the Core practice is met.

138 The evidence underpinning this judgement reflects all of 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

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

140 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

141 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 they 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 Video submission from students of the College
- b 2018-19 Programme Handbook for the HND in Business
- c 2017-18 programme annual monitoring report for the HND in Business
- d Academic Board Terms of Reference
- e External examiner report for the HND Business (June 2019)
- f Sample HND assignment brief for Business
- g Student Engagement and Employability Plan – January 2019 to December 2019
- h Learning, Teaching and Assessment Policy and Strategy (April 2019)
- i Progression and Completion Policy (April 2019)
- j External examiner report for the HND Health and Social Care (June 2019)
- k External examiner report for the HND Hospitality Management (May 2019)
- l 2018-19 Programme Handbook for the HND in Health and Social Care
- m 2018-19 Programme Handbook for the HND in Hospitality Management
- n 2017-18 programme annual monitoring reports for the HND in Health and Social Care
- o 2017-18 programme annual monitoring reports for the HND in Hospitality Management
- p Sample HND assignment brief for HND Health and Social Care
- q Sample HND assignment brief for HND in Hospitality Management
- r Updated action plan from the Business Programme Annual Monitoring Report (2017-18)
- s Academic Board minutes, July 2019
- t Three examples of completed peer observation reports
- u 2019 National Student Survey Outcomes
- v Work Experience Policy
- w Lecturers' Peer Review Report, January 2019
- x Programme Design and Development Policy, April 2019
- y Collaborative Partnerships Policy
- z Meetings with senior staff and with academic, professional and support staff
- aa Meeting with students
- bb Observation of teaching and learning sample, excluding Hospitality Management.

142 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:

- third-party endorsements as none are available for the provision on offer at the College.

How any samples of evidence were constructed

143 The review team considered evidence relating to the three HND programmes currently offered (Business, Health and Social Care, and Hospitality Management). The team reviewed external examiner reports for these programmes and observed teaching on the HND Business and HND Health and Social Care programmes that were scheduled on the days the team visited the College. It did not observe Hospitality Management teaching as it was notified of cancellation of the class to be observed on the day of the observation.

Why and how the team considered this evidence

144 As highlighted, all of the evidence submitted by the College 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 providers' 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.

145 The review team considered the College's Learning, Teaching and Assessment Policy and Strategy (April 2019), Programme Design and Development Policy, April 2019, Progression and Completion Policy (April 2019), the 2018-19 Programme Handbooks for the HND in Business, Health and Social Care and Hospitality Management, sample HND assignment briefs for Business, Health and Social Care and Hospitality Management, three examples of completed peer observation reports and a Lecturers' Peer Review Report, January 2019 to identify the College's approach to designing and delivering high-quality courses.

146 The review team considered the College's Collaborative Partnerships Policy, the Work Experience Policy and the Student Engagement and Employability Plan – January 2019 to December 2019 to identify the College's plans for designing, developing and providing opportunities for students to develop academically and professionally.

147 The review team evaluated the 2018-19 Programme Handbooks for the HNDs in Business, Health and Social Care and Hospitality Management, to test that all elements of the courses sampled are high quality and that the teaching, learning and assessment design will enable students to demonstrate the intended learning outcomes.

148 The review team considered external examiner reports for the HND Business (June 2019), HND Health and Social Care (June 2019) and HND Hospitality Management (May 2019) to establish their views about the quality of courses sampled. The team also reviewed the Terms of Reference and minutes of the Academic Board, July 2019 to identify the College's responsibilities relating to external examiner reports and its response to the reports.

149 The review team considered the outcomes of the National Student Survey and the opinions of student contributors expressed in a video submission to establish students' views

on the quality of their courses.

150 The review team met students to assess their views about the quality of their courses, met staff and reviewed programme annual monitoring reports to identify how staff are enabled to deliver, and the processes they use to establish that they are delivering, high-quality courses.

151 The review team undertook eight observations of teaching to test whether course delivery is of high quality.

What the evidence shows

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

153 Responsibility for the design of Higher National qualifications rests with Pearson as the awarding organisation. The College is responsible for designing effective learning materials and the learning and teaching strategy, as well as ensuring that these are regularly reviewed and modified to ensure their relevance and quality. The College's Learning, Teaching and Assessment Policy and Strategy, Programme Design and Development Policy, April 2019 and the Progression and Completion Policy provide a facilitative framework for the delivery of high-quality courses.

154 The programme handbooks for the HNDs in Business, Health and Social Care, and Hospitality Management and sample assignment briefs for Business, Health and Social Care and Hospitality Management, demonstrate that handbooks and assignment briefs provided for students give a clear indication of what is required of students to achieve intended learning outcomes. However, the review team also noted that the HND Health and Social Care (June 2019) external examiner report had noted that the Personal and Professional Development in Health and Social Care Unit (Unit 4) did not make clear the need for students to produce evidence of their 200 hours of appropriate work experience.

155 The review team considered that learning, teaching and assessment approaches, as well as the content and organisation of courses are generally of high quality and that teaching, learning and assessment design enables students to demonstrate intended learning outcomes.

156 Peer review observations undertaken and the Lecturers' Peer Review Report, January 2019 testify to the College's commitment to deliver high-quality courses. However, the team found that, on the HND in Health and Social Care, a number of students were failing to complete the Personal and Professional Development and Health and Social Care Module (Unit 4), a core unit which requires students to undertake a minimum of 200 hours of work experience, with evidence from workplace settings being validated and authenticated by appropriately qualified expert witnesses. The Work Experience Policy, overseen by the Academic Board (through the receipt of reports from the Head of Student Engagement), governs the College's arrangements for work experience. The team noted the existence of a Student Engagement and Employability Plan – January 2019 to December 2019 which included reference to the need to build leads, including more contacts with companies in healthcare and the appointment of a Senior Student Engagement Officer (now in post) to manage and engage with externals. While these initiatives were welcome, the team formed the view that the College's arrangements for managing relationships with placement providers needed to be more robust to enable the College to effectively discharge its responsibilities to ensure the quality of student learning opportunities and enable students to demonstrate the intended learning outcomes for the HND in Health and Social Care.

157 While external examiner reports are generally positive, reference was made in the HND Business (June 2019) and the HND Health and Social Care (June 2019) reports to issues identified by the external examiners which should have been picked up in the internal verification process (including assessment methods for one unit on the HND in Business considered to be inappropriate as they did not enable students to meet all the assessment criteria).

158 While external examiner reports are generally positive, reference was made in the HND Business (June 2019) and the HND Health and Social Care (June 2019) reports to issues identified by the external examiners which should have been picked up in the internal verification process (including assessment methods for one unit on the HND in Business considered to be inappropriate as they did not enable students to meet all the assessment criteria).

159 The Academic Board is responsible for assessing the effectiveness of the College's quality assurance and enhancement processes by monitoring relevant performance indicators, including external examiners' reports. The Board received a report on external (Pearson) reports in July 2019 and the minutes refer to the positive outcomes, external examiners being pleased with academic performance, and praise for good practice at the College. No reference is made to any areas for development in the meeting minutes.

160 Staff commented on the contribution made by the programme annual monitoring report and action planning processes which take account of external examiner and student feedback to ensure the quality of the College's provision. The review team noted the use of academic team meetings as appropriate forums in which to enable staff to share good practice with a view to ensuring that courses delivered by the College are of high quality.

161 The National Student Survey results and the student submission confirm that students regard their courses as being of high quality. The results also confirm that, across all programmes, the majority of students are satisfied with the teaching on their course, with assessment and feedback, and with the academic support received.

162 Discussion with students about their courses at the time of the visit confirmed that students regard their courses as being of high quality. Students valued subject specialists having an input into course delivery as this helped them to apply their academic knowledge to real examples from local employers. The observations of teaching and learning conducted by the review team demonstrated clarity of objectives, good planning and organisation, a sound method or approach, good delivery, appropriate content of teaching, effective use of resources and good student engagement. The team noted that lessons are well organised and that lesson plans set out clear objectives. Tutors provide clear session plans that link topics to learning outcomes and assessment criteria, in particular what students should do to achieve a grade. Students benefitted from plenty of interaction throughout the sessions, including small group tasks. Group activity was well timed to change the focus of the session. Students were encouraged to draw on their work experience and contribute their perspectives. Students were enthusiastic and stimulated by the content and were able to relate to their current levels of knowledge in order to develop greater understanding. Tutors managed the class well to ensure that all students had the opportunity to contribute. Delivery style is clear and well-paced, giving students time for reflection and to absorb the knowledge. Supportive tutors make good use of resources and use a mixture of teaching methods.

Conclusions

163 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

164 The review team concludes that the College delivers high-quality courses which are designed by Pearson as the awarding organisation. Course documentation and assignment briefs provided by the College indicate that teaching, learning and assessment design enable students to meet and demonstrate the intended learning outcomes. Students, through their submission and in meetings, tend to regard their courses as being of high quality and staff are able to articulate what high quality means. Observations of teaching and learning demonstrate clarity of objectives, good planning and organisation, a sound approach, good delivery, appropriate resources and student engagement undertaken. However, the team noted that a number of students were failing to complete a mandatory core unit on the HND in Health and Social Care which requires students to undertake a minimum of 200 hours of work experience to achieve the intended learning outcomes. However, on balance, the team concludes that the College meets this Core practice.

165 The evidence underpinning this judgement reflects all of 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

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

167 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

168 The QAA review team assessed the evidence presented to them, both prior to and at the visit, to determine if the College 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 it considered was assessed in 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 Organogram (updated April 2019) included in the College Submission
- b Student submission video
- c Introduction to Assignment Writing and Assessment for RQF
- d June 2019 external examiner report for the HND in Business
- e Training Brief on Engaging Students in Learning
- f Teaching Observation Policy and Procedure (April 2019)
- g Staff Recruitment Policy (July 2018)
- h Draft Continuing Professional Development Policy (July 2019)
- i List of staff working towards or holding HEA fellowship
- j June 2019 external examiner report for the HND in Health and Social Care
- k May 2019 external examiner report for the HND in Hospitality Management
- l 10 CVs comprising a range of academic and professional support staff
- m Two job descriptions, one for an academic staff member and one for a professional support staff member
- n National Student Survey results
- o Programme committee meeting minutes (October 2018)
- p Programme committee meeting minutes (June 2019)
- q Draft Human Resources Strategy and Policy (July 2019)
- r Number of academic staff and current student enrolment
- s Meetings with senior staff and with academic and professional support staff involved in course delivery
- t Meeting with students
- u Eight teaching observations undertaken with the exception of Hospitality Management.

169 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:

- third-party endorsements as none are available for the provision on offer at the College.

How any samples of evidence were constructed

170 The review team considered two job descriptions, one for an academic staff member and one for a professional support staff member and reviewed 10 CVs encompassing a range of academic and professional support staff. The team also selected a random sample of eight teaching observations taking place at the time of the visit. The observations covered the HNDs in Business and in Health and Social Care. The proposed teaching observation of the HND in Hospitality Management did not take as the team received notification on the day that the class was due to take place, that due to staff illness, the class had been cancelled.

Why and how the team considered this evidence

171 As highlighted, all of the evidence submitted by the College 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 providers' 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.

172 The team examined the Teaching Observation Policy and Procedure (April 2019), Staff Recruitment Policy (July 2018), Draft Continuing Professional Development Policy (July 2019), Draft Human Resources Strategy and Policy (July 2019), information on the number of academic staff and current student enrolment, Introduction to Assignment Writing and Assessment for RQF and the Training Brief on Engaging Students in Learning relating to the College's plans for recruiting, selecting and developing sufficient appropriately qualified and skilled staff to assess whether the College has credible, robust and evidence-based plans for ensuring that it has sufficient appropriately qualified and skilled staff to deliver a high-quality learning experience.

173 The team considered 2019 external examiner reports for the HND in Business, the HND in Health and Social Care and the HND in Hospitality Management for an external perspective on the sufficiency, qualifications and skills of staff.

174 The team examined a document listing staff working towards or holding HEA fellowship to identify opportunities for staff development in support of delivering a high-quality academic experience.

175 The team considered an organogram (updated April 2019) included in the College submission to identify the roles or posts the College has to deliver a high-quality learning experience and assess whether they are sufficient.

176 The team examined the student submission, the National Student Survey results and programme committee meeting minutes held in October 2018 and June 2019 to identify students' views about the sufficiency, qualifications and skills of staff.

177 The team considered two job descriptions, one for an academic staff member and one for a professional support staff member and 10 CVs comprising a range of academic and professional support staff including seven full-time staff (an executive assistant, lecturer, librarian, two programme leaders, supervisor personal tutor, admission manager) and three part-time staff (a personal tutor, English assessor and a lecturer), to assess whether the staff sampled are appropriately qualified and skilled to perform their roles effectively and that they were recruited according to the College's policies and procedures.

178 The team met staff and students (separately) to test that staff are appropriately qualified and skilled and to assess whether students consider that the College has sufficient staff who are appropriately qualified and skilled.

179 The team undertook eight observations of teaching and learning to test whether academic staff deliver a high-quality learning experience.

What the evidence shows

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

181 The policies examined are transparent and provide detailed procedures for teaching observation, staff recruitment, and continuing professional development, testifying to the College's commitment to developing teaching standards on an ongoing basis. The Continuing Professional Development Policy is a draft document and has been developed alongside the draft Human Resources Strategy and Policy (July 2019) with the aim of enabling staff to develop their personal and professional development in support of providing students with an academic experience of the highest quality. The Continuing Professional Development Policy sets out the respective responsibilities of managers and staff, provides information about funding available and the type of activities that might be funded. The Policy also covers continuing professional development for student representatives. The key strategic aim of the Human Resources Strategy and Policy is to match the capabilities of teaching and support staff to the challenges of their role and to ensure the development of staff. The Policy includes a staff progression policy, which staff report is robustly enacted in practice. The review team found that the subsequent stages of academic progression, starting at personal tutor level, are logical and supportive towards not only helping staff to move towards higher positions, but are also aligned with the particular needs of the College given the student cohorts hosted on various programmes. The personal tutor role provides a good platform to acquire better understanding of both student needs and the College operations, which, in conjunction with the fact that the personal tutors work in close collaboration with more senior staff, provides students with a supportive learning environment. The review team considered that the College's policies for the recruitment, appointment, induction and support for staff provide for a sufficient number of appropriately qualified and skilled staff.

182 The review team found that job descriptions are clear and the staff CVs provided confirm that the staff sampled meet the College's requirements. The May 2019 external examiner report for the HND in Hospitality Management (QCF) also noted that staff CVs demonstrated a breadth of teaching, management and diverse subject specialisms. The team noted that the academic job description called for academic and/or professional qualifications to master's level in a relevant academic discipline in addition to over four years' teaching experience in higher education, effective management, leadership and interpersonal skills plus an ability to manage staff development and performance, direct the development of subjects/disciplines in the academic department and to chair meetings. Fellowship of the Higher Education Academy is also desirable. In 2019, the ratio of permanent to temporary academic staff members was approximately 73:27 (full-time: part-time), amounting to 33.5 full-time equivalent posts, which was appropriate to student numbers at the time of the visit (745). The College has confirmed its intention to further increase the proportion of permanent positions. The team was told of the College's intentions to increase the current ratio of full-time to part-time staff further, given the College's higher education development plans and this was confirmed in the draft Human Resources Strategy and Policy. The team considered that the staffing structure was appropriate for the size of the HND provision.

183 The Introduction to Assignment Writing and Assessment for RQF and the Training Brief on Engaging Students in Learning indicate that training and support are in place for members of staff when the need arises in support of high-quality teaching and learning. The College actively encourages further professional development of staff members, for example, through the Higher Education Academy (HEA) affiliation route. Currently, 11 members of staff are affiliated members of HEA, and nine other members of staff are in the process of obtaining HEA affiliation. Staff reported that the College provides staff induction and training and enables staff to engage in development opportunities, including peer observation of teaching and shadowing opportunities to promote their development. The June 2019 external examiner report on the HND in Business notes that staff CVs reveal well qualified personnel teaching on subjects specific to their specialist areas of postgraduate study. The examiner also comments on improvements achieved as a result of the College employing more full-time staff, including part-time lecturers structuring classes better and having more flexible availability. An HND in Health and Social Care external examiner report (June 2019) recommended that the College send staff to attend Regulated Qualifications Framework (RQF) training events by December 2019 to prepare the programme team for delivery and assessment of RQF programmes. The examiner also drew attention to the need for assessment to take account of the need for students to demonstrate that they meet competency requirements for one unit (Unit 1: Communicating in Health and Social Care Organisations). While noting the HND in Health and Social Care external examiner's comments, the team considered that, overall, the College has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience.

184 Staff are aware of role requirements and understand the process for further career progression which they report to be robustly enacted in practice. Staff confirm that the College's staffing-related policies and procedures are clear and transparent, and enable the College to recruit and retain sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience.

185 The views expressed by students in the student submission confirm that, in their opinion, the College has sufficient appropriately qualified and skilled staff in place.

186 However, feedback provided by students at programme committee meetings indicates that staff members' use of English has been identified by students as a potential area for improvement on occasions. Students value the support provided by staff of the College, appreciate the fact that staff are also working towards higher qualifications themselves and acknowledge that staff members' knowledge and experience feeds into the students' learning experience to make it more interesting and current.

187 The review team's observations of teaching indicated that sessions were generally well planned and presented with a mixture of teaching methods used and tutors encouraging student participation and interaction. Clear links were made to learning outcomes and to assessment criteria. The team noted that the wording on presentation slides could have been clearer on occasion, and that contributions from students could sometimes have been summarised to ensure that all the student cohort were clear about what was said but, overall, the team confirmed that the sample they observed demonstrated that staff deliver a high-quality learning experience.

Conclusions

188 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its

conclusions, based on the evidence considered, are detailed below.

189 The review team concludes that the College has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. This is because the observations of teaching and learning indicate that teaching staff are appropriately qualified and skilled to deliver a high-quality academic experience; the College has credible plans for the recruitment, appointment, induction and support of sufficient appropriately qualified and skilled staff; and its policies for staff recruitment, appointment, induction and support are transparent and effective in providing for a sufficient number of appropriately qualified and skilled staff. Staff who met the review team have been recruited, appointed, inducted and supported in accordance with the College's policies, are appropriately skilled and are committed to providing a high-quality academic experience. Positive views expressed by both students and external examiners further serve to confirm that the College has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. The review team concludes, therefore, that the Core practice is met.

190 The evidence underpinning this judgement reflects all of 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

191 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.

192 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

193 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it 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 Student submission
- b HND Business annual programme monitoring report
- c HND Business External Examiner Report (June 2019)
- d Analysis of student feedback covering HND provision in a Student Survey Report (January 2019)
- e Student Support and Reasonable Adjustments Policy
- f HND Health and Social Care External Examiner Report (June 2019)
- g HND Hospitality Management External Examiner Report (May 2019)
- h 10 CVs for seven full-time staff (an executive assistant, lecturer, librarian, two programme leaders, supervisor personal tutor, admission manager) and three part-time staff (a personal tutor, English assessor and a lecturer)
- i Job description for an academic post
- j Sample Support Agreement Plan
- k Programme Committee minutes (October 2018)
- l Programme Committee minutes (June 2019)
- m Personal Tutoring and Enabling Student Development Policy
- n Job description for a professional support post
- o College's statement on relocation
- p Learning Resource Centre and IT Using Policy, April 2019
- q Learning Resources Strategy
- r Learning Resource Centre and IT Usage Policy
- s Learning Resources Strategy
- t Meetings with senior staff, with the Principal, with academic, professional and support staff and with students
- u Tour of Barclay Hall (Upton Park) and Whitechapel premises.

194 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:

- third-party endorsements as none are available for the provision on offer at the College.

How any samples of evidence were constructed

195 The review team undertook a tour of the facilities and learning resources available at Barclay Hall and Whitechapel. It did not visit the third campus as the College reported that no teaching was taking place there.

Why and how the team considered this evidence

196 As highlighted, all of the evidence submitted by the College 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 College'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.

197 The team considered the College's Learning Resources Strategy, Learning Resource Centre and IT Usage Policy, Personal Tutoring and Enabling Student Development Policy, Student Support and Reasonable Adjustments Policy, a sample support agreement plan and a statement on relocation, including future plans regarding the College estate and teach-out plans at its Whitechapel campus, to identify how the College's facilities, learning resources and student support services contribute to delivering a high-quality academic experience and to evaluate actions taken by the College to minimise the impact of any potential risk to the quality of the student experience arising from the College's relocation from its Whitechapel campus.

198 The team considered the College's statement on relocation, Learning Resource Centre and IT Using Policy, April 2019, the Personal Tutoring and Enabling Student Development Policy and the annual monitoring report for the HND in Business, to assess whether the College 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 and how this is monitored.

199 The team considered students' views expressed in the student submission, an analysis of student feedback covering HND provision in a Student Survey Report (January 2019) and in an HND Business annual programme monitoring report, Programme Committee Meeting minutes (October 2018) and Programme Committee Meeting minutes (June 2019), to identify students' views about facilities, learning resources and support services.

200 The team considered external examiner reports for the HND Business (June 2019), HND Health and Social Care (June 2019) and HND Hospitality Management (May 2019) to identify how awarding organisation assessors view the facilities, learning resources and student support services provided by the College.

201 The team undertook a tour of the facilities and learning resources at the Whitechapel and Upton Park campuses and considered 10 CVs for a range of teaching and professional support staff, to identify the College's facilities, learning resources and student support services.

202 The team considered the job descriptions for a lecturer and for the Work- Based Learning Co-ordinator, to determine whether the roles are consistent with the delivery of a high-quality learning experience.

203 The team met staff and students to (i) test whether staff are appropriately qualified and skilled and understand their roles and responsibilities; and (ii) assess students' views about facilities, learning resources and support services.

204 The team toured the facilities, learning resources and support services at Barclay Hall (Upton Park) and at the Whitechapel premises to test that these deliver a high-quality academic experience.

What the evidence shows

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

206 The Learning Resources Strategy makes clear the responsibilities of different post-holders, including the Principal's Executive Group, the Academic Board, Board of Directors, programme leaders, programme managers, and student representatives involved in resource monitoring, contributing to the delivery of a high-quality experience. The Learning Resource Centre and IT Usage Policy sets out what the College can offer students and what it expects of students using the resources and facilities provided. The Policy includes a guide to the Library and IT services for students. The Personal Tutoring and Enabling Student Development Policy explains the main responsibilities of personal tutors and students in support of the student academic experience and the Student Support and Reasonable Adjustments Policy describes procedures adopted by the College to enable students with disabilities and learning difficulties to participate on the same basis as other students. These include the establishment of a support agreement plan setting out the details of reasonable adjustments agreed.

207 The College's statement on relocation indicates that the rental of the Whitechapel site (Cavell Street) will expire at the end of 2020. While the site has been subject to redecoration and refurbishment, further refurbishment required by the College is not possible. Investment in the freehold purchase, development and refurbishment of the Barclay Hall campus (Upton Park) and in the long-term leasehold and refurbishment of the King's House Campus (Barking) reflects the College's intention to deliver educational provision from owned or leasehold facilities in the long-term. The College intends to recruit new students at Barclay Hall (HND in Business Entrepreneurship and Small Business Management and HND in Hospitality Management) and at King's House (HND in Healthcare Practice and HND in Social and Community Work). The team did not visit the Barking site as no teaching was taking place there at the time of the visit. Staff who met the team report that the purpose of the relocation is to provide facilities that can be better tailored to the College's needs for delivering the academic experience it wishes to provide for its students. The team was told that the College has recently started to deliver programmes in the evenings and at weekends, helping to maximise the use of facilities and providing another option for students to enable them to fit their study at the College around their other commitments.

208 The College's statement on relocation indicates that, while there will be no new student recruitment at Whitechapel, the College is committed to teaching out all students currently enrolled there. Plans to ensure that students are not affected by the relocation include some doubling-up of library and information technology resources. The review team considered that the plans were appropriate.

209 The Learning Resource Centre and IT Using Policy, April 2019, applicable to staff and students using Learning Resource Centre facilities, aims to inspire students by

connecting them to information and supporting them in meeting their learning and research needs. It refers to learning resources being available to learners 24 hours a day, seven days a week, through the provision of the virtual learning environment (VLE). The Policy includes a Learning Resources and IT Guide on accessing relevant learning materials. The College makes use of open access resources, where possible, on the VLE and is in the process of securing contracts to help with the provision of access to e-journals and e-books. Students who met the team were very positive about the way in which the VLE is used to provide generic information, course details and unit-specific materials.

210 The programme annual monitoring report for Business noted that a lack of library facilities and resources had been identified as a concern by HND Business students in 2016-17, leading to the provision of financial support to accommodate more facilities and more books for the library. Staff and students who met the review team confirmed that the book stock had been increased and library opening hours extended in response to feedback provided to the College. No current concerns were reported. Staff and students report that the Personal Tutoring and Enabling Student Development Policy is operating as planned and the draft Human Resources Strategy and Policy (July 2019) demonstrates the College's commitment to increasing staff capacity through the recruitment of more permanent staff and the further development of staff in support of the students' academic experience.

211 The student submission confirms that students agree that learning resources available to them meets their needs. In addition, the key findings, as stated in an end-of-term Student Survey Report received by the Principal's Executive Group, are that, overall, students view their learning experience as positive; that teaching staff are 'great and supportive' and the VLE meets students' learning expectations. The 911 students who participated in the survey mostly agree that they are able to access tutors on their units of study, that the library resources for their units are satisfactory and that they have been able to access IT resources for their units.

212 Programme Committee Meeting minutes (October 2018) indicate that students find that staff are supportive in resolving any teaching and learning-related issues promptly. In response to student feedback on classroom workstations, minutes indicate that the current situation was temporary, pending the relocation. Programme Committee Meeting minutes (June 2019) include references to student feedback concerning different teaching styles which can be confusing for students, breaks in teaching sessions being disruptive, difficulties in understanding the accents of some academic staff, and the need for more discipline and punctuality. The minutes also noted improvements made to library facilities in response to previous student complaints; a request for Excel to be updated, and Microsoft packages to be available for students.

213 External examiners have commented positively on resources available for course delivery. The HND Business external examiner visited the Barclay Hall premises and commented that the building was well appointed with very good facilities. External examiners have also commented positively on the support provided to students through the personal tutor system which is helping students to achieve.

214 The review team considered that the facilities, learning resources and student support services are appropriate and the CVs provided for the team confirm that staff are suitably qualified for the roles to which they have been appointed. The team's evaluation of CVs for a range of post-holders (including personal tutors, lecturers, programme leaders and professional support staff) confirm that these are consistent with the delivery of a high-quality learning experience.

215 The professional support job description was specifically focused on the appointee being required to develop good links with employers and to support student placement and

employability needs. The team's review of the job descriptions, coupled with their assessment of the staff CVs, confirm that these are consistent with the delivery of a high-quality learning experience.

216 Staff are clearly able to articulate the respective roles and responsibilities of both staff and students which are set out in the Personal Tutoring and Enabling Student Development Policy. The review team heard that personal tutors are qualified to a minimum of HND with good grades, are trained for their role and have timetabled one-to-one meetings with students. Staff report that teaching staff meet personal tutors regularly to ensure they understand the course content being covered and are well prepared to provide students with cross-module guidance and support where needed.

217 Students who met the team confirm that they are satisfied with the facilities, learning resources and support services provided by the College. Students enrolled at the Whitechapel campus report that they are clear that they can complete their current studies there. Students also confirm that they appreciate the support received from personal tutors and the way it has built their confidence in their ability to achieve. The personal tutor system is highly valued and well-embedded.

218 The review team visited current teaching facilities available to students and considers that these provide suitable learning spaces, learning resource facilities and social spaces that allow students to meet across programmes and deliver a high-quality academic experience.

Conclusions

219 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

220 The review team concludes that the College has sufficient and appropriate facilities, learning resources and student-support services to deliver a high-quality academic experience. This is because the team's analysis of the evidence, and the tours undertaken of the two sites where teaching is taking place, confirms that there are sufficient and appropriate facilities, learning resources and support in place to deliver a high-quality academic experience for the current programmes. The College reviews its resources and responds to student feedback regularly. Staff understand their respective roles in relation to student support and students greatly value the support available to help them achieve. The review team concludes, therefore, that the Core practice is met.

221 The evidence underpinning this judgement reflects all of the evidence described in the QSR evidence. 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

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

223 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

224 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it 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 Student submission
- b Minutes of Academic Team meeting, July 2019
- c 2017-18 Programme annual monitoring report, Business
- d HND Business external examiner report (June 2019)
- e Student survey report (September 2018)
- f Staff workshop activities on Engaging Students in Learning and Teaching
- g Student Engagement Group (SEG) Terms of Reference
- h Student Engagement Service Level Agreement (January 2018 to December 2019)
- i LCC Student Representative Handbook
- j Student Engagement and Employability Plan 2018-19
- k Learning, Teaching and Assessment Policy and Strategy (April 2019)
- l 2017-18 Programme annual monitoring report, Health and Social Care
- m 2017-18 Programme annual monitoring report, Hospitality Management
- n Academic Board minutes (March 2019 and July 2019)
- o Admission survey report (April 2019)
- p Report from the Head of Programmes to the Academic Board, July 2019
- q Minutes of Programme Committee meetings (October 2018, March 2019, June 2019)
- r Minutes of the Student Engagement Group (March 2019, November 2018, July 2019)
- s Minutes of the Principal's Executive Group (August 2019, July 2019, October 2018, February 2019, April 2019)
- t Minutes of the College Oversight Board, December 2018
- u National Student Survey outcomes
- v Student Engagement and Employability Report to the College Oversight Board, November 2018
- w Meeting with students including student representatives.

How any samples of evidence were constructed

225 The review team considered students' views expressed in internal and external surveys, and module and course evaluations for the current HNDs in Business, Health and

Social Care and in Hospitality Management.

Why and how the team considered this evidence

226 As highlighted, all of the evidence submitted by the College 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 College'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.

227 The team considered the Learning, Teaching and Assessment Policy and Strategy (April 2019), the Student Engagement Service Level Agreement (January 2018 to December 2019), the Student Engagement Group (SEG) Terms of Reference, LCC Student Representative Handbook, SEG minutes (March 2019, November 2018, July 2019), minutes of the Principal's Executive Group (August 2019, July 2019, October 2018, February 2019, April 2019), College Oversight Board (COB) minutes, December 2018, a Student Engagement and Employability Report to the COB in November 2018 and Academic Board minutes (March 2019 and July 2019, to identify how the College actively engages students, individually and collectively, in the quality of their educational experience.

228 The team considered the Student Engagement and Employability Plan 2018-19, minutes of the Student Engagement Group (March 2019, November 2018, July 2019) and staff workshop activities on Engaging Students in Learning and Teaching, to assess whether the College has credible, robust and evidence-based plans for engaging students, individually and collectively, in the quality of their educational experience.

229 The team examined the minutes of Programme Committee meetings (October 2018, March 2019, June 2019) and the HND Business external examiner report (June 2019), to identify examples of the College changing or improving provision as a result of student engagement.

230 The team considered the student submission, internal and external surveys including programme annual monitoring reports, a student survey report (September 2018), an admission survey report (April 2019) and National Student Survey outcomes, minutes of the College Oversight Board, the Principal's Executive Group, Academic Board, Programme Committees and Academic Team meetings and a report from the Head of Programmes to the Academic Board to identify where student survey outcomes are considered within the College.

231 The team met students to assess whether they are engaged in the quality of their educational experience.

What the evidence shows

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

233 The Learning, Teaching and Assessment Policy and Strategy (April 2019) states that the College fully engages students in the formulation of its learning and teaching strategy. The Policy and Strategy refer to student representation on the Principal's Executive Group and at Programme Committee meetings; the use of student surveys; tutorial support and reasonable adjustments for students with disabilities and additional needs; the use of plenary sessions in class to check on progress against assessment criteria and learning

outcomes; and the provision of Expected Answer Guidelines for each unit which are available through the VLE and give students an example of how to structure their assignments and the relevant content to be included. Lecturers are expected to enable debate, encouraging student participation and engagement within a class. There is a dedicated budget for student engagement. The Learning, Teaching and Assessment Policy and Strategy is clear and the budget for student engagement indicates the seriousness of the College's commitment to engaging students, individually and collectively, in the quality of their educational experience.

234 Student representatives are appointed through an application and election process and they are required to represent the student voice at committees and meetings, ensuring that students' opinions are heard and acted upon. They are appointed on an annual basis but may seek re-selection. They receive a handbook to support them in their work, and this year they received face-to-face training for the first time. Student engagement and student feedback are discussed in the College Oversight Board and the Principal's Executive Group and in other committees as appropriate.

235 The Student Engagement Group (SEG) is intended to improve the student experience, employability and student engagement in the College at all levels, overseeing student feedback mechanisms, student representation and engagement with alumni. It meets termly and reports to the Principal's Executive Group. Its Terms of Reference include forward planning and approval of student engagement activities; helping to improve student retention and progression rates; identifying improvements in student engagement activities and communicating such activities to staff and students; communication with internal and external stakeholders through marketing and social media; and facilitating and overseeing the appointment of student representatives.

236 The March 2019 SEG minutes include discussion of the end-of-term survey, particularly the drop-out and poor attendance of students. This suggested some explanatory sessions in advance of the start of a course to make students aware of, or be prepared for, the work required; an introductory session each semester to inspire students with examples of student success and progression to higher levels of study and employment; and the support of lecturers after the end of the course and before assessment submission to answer students' questions since personal tutors do not have the details for submission. A standardised submission structure to help students and staff was also suggested. Programme leaders were to be asked to discuss these suggestions and make recommendations. SEG Meeting minutes show active participation and engagement by student representatives in discussion of the quality of the student educational experience.

237 Consideration of the Academic Board minutes confirms that there is student representation but discussion arising from student contributions and the extent to which students participate outside of the 'student experience' agenda items is not always clear from the minutes. For example, at one Academic Board meeting, concerns expressed by some students about teaching staff being difficult to understand and taking too many breaks were raised but there was no indication of any discussion or response from the College in the minutes.

238 The Student Engagement and Employability Plan identifies objectives relating to 10 headings, namely developing staff and student capacity; employers' forum; student representatives; curriculum impact and engagement; work experience; careers; sports; trips; communications; and events. The Plan indicates that student representative elections have been held and student representatives are in place; students have worked on projects for which they have been paid; a Senior Student Engagement Officer to engage with external employers has been appointed (since April 2019); and student events have been held. Staff support for student engagement is managed through the Student Engagement and

Employability Plan and the need to ensure that staff can engage effectively with the predominantly mature learners the College attracts is recognised and supported by staff workshop activities on Engaging Students in Learning and Teaching.

239 The minutes of the October 2018 Programme Committee meeting recorded that the Head of Student Engagement and Employability had noted difficulties experienced in student representatives not attending meetings and events arranged for them, and discussions held with student representatives regarding a Student Representative Service Level Agreement. Subsequently, a Student Representative Service Level Agreement (January 2018 to December 2019) was developed and implemented in November 2018. The Agreement confirms the College's commitment to active student participation and partnership in shaping the quality of their educational experience, including student engagement and representation on the College Oversight Board, Academic Board and the Student Engagement Group. The Agreement includes a calendar of activities for the year to facilitate effective student representation as the calendar provides advance notice of time commitments.

240 In seeking to raise the profile of student representatives, the Student Representative Service Level Agreement states that the College will provide space for student meetings; lanyards to enable easy identification of student representatives; pre-arranged access to classes; free printing of 'You Said, We Did' posters to communicate changes made by the College in response to student feedback; and a Student Representative noticeboard for student information dissemination purposes. The Agreement refers to training for student representatives being provided and included in the College Continuing Professional Development Calendar. These changes have been implemented and student representatives are easily recognisable by a different coloured lanyard and some photographs of the representatives can be found on a noticeboard in the student common area. Student representatives are also paid for their time.

241 The October 2018 Programme Committee minutes note how the College has responded to students' requests in a 'You Said We Did' section of the minutes, including, for example, requests for (unspecified) classroom policies to be in the best interests of the students' learning experience, which were reported to have been shared with relevant parties in an academic team meeting, and enhancement of the students' learning experience, which had been agreed in line with programme committee meeting discussion; and the introduction of a new virtual noticeboard on the Student Portal to inform students of actions taken to address their comments. Student representatives at the October 2018 Programme Committee meeting suggested the need for early communication of timetabling information and noted that some staff members' language was not easy to understand.

242 The March 2019 Programme Committee meeting included a list of action points from the October 2018 meeting. This showed that the action had been completed but little detail was provided other than reference being made to development activities for tutors to improve their communication with learners and the issue being discussed in Academic Team and at Principal's Executive Group meetings. The March 2019 minutes indicate discussion of variability in teaching and some staff teaching failing to take account of all the assessment criteria in their teaching.

243 The June 2019 Programme Committee meeting minutes included student comments on differences in teaching delivery methods, breaks being disruptive and difficulties in understanding the accents of some academic staff, in addition to drawing attention to the need for Excel to be updated and Microsoft packages to be available to students. The June 2019 minutes also referred to a student-led teaching award which students indicated should measure the best teaching delivery and in-depth knowledge.

244 The College provides feedback to students on actions as a result of their feedback through 'You said We did' posters. As a result of student feedback, timetables are produced in advance of the academic year to give students sufficient time to make appropriate childcare arrangements or to negotiate a shift pattern at work to take account of their study time.

245 In addition to the formal course representative system, the College asks all students for feedback each term through regular surveys and programme annual monitoring. The Principal's Executive Group and programme committees discuss student survey reports. The National Student Survey is routinely discussed at high-level committees, including the College Oversight Board, Principal's Executive Group meetings and Academic Board. It is also referenced in Academic Team meetings and programme annual monitoring reports. The Head of Programmes also produces a report for the Academic Board.

246 Students and their representatives report that they feel confident that they can raise issues with College staff, both individually and collectively. They consider that the College listens to what they have to say and that it is responsive to students' needs and requests. Students are aware of the relocation plans and have been informed about the teach-out plans which have not negatively impacted their educational experience. Student representatives are pleased with the steps taken to raise their visibility within the College and the student body through the differently coloured lanyards provided for them.

Conclusions

247 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

248 The review team concludes that London Churchill College actively engages students, individually and collectively, in the quality of their educational experience. This is because the policies and procedures, and meetings with staff and students demonstrate that the College shows a commitment to capturing the student voice and encouraging participation in decision-making. The College commits to active student engagement through the Student Engagement and Employability Plan 2018-19; Learning, Teaching and Assessment Policy and Strategy; Student Engagement Service Level Agreement; and the Student Engagement Group. Student representatives are appropriately supported to undertake their role and students are confident that their views are heard and that they are effectively represented. The College has clear, robust and credible plans to implement and monitor its student engagement strategy and to ensure effective communication with students. The review team concludes, therefore, that the Core practice is met.

249 The evidence underpinning this judgement reflects all of 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

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

251 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

252 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it 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 2018-19 HND Programme Handbooks
- b Programme Annual Monitoring Reports
- c Complaints Process Flowchart
- d Log of Complaints 2017-18, Report to the Academic Board (November 2018)
- e Log of Appeals Received and Outcomes - 2017-18
- f Academic Appeals Policy and Procedure
- g Academic Board minutes
- h Programme Committee Minutes
- i Complaints Policy and Procedure
- j Information on the virtual learning environment and published information for potential and actual complainants and appellants on the College website
- k Sample of Complaints and Appeals for 2017-18
- l Meeting with students including student representative.

How any samples of evidence were constructed

253 The review team considered a random sample of complaints and appeals from 20 complaints and seven appeals received for 2017-18.

Why and how the team considered this evidence

254 As highlighted, all of the evidence submitted by the College 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 College'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.

255 The team considered the Complaints Process Flowchart, Complaints Policy and Procedure, Academic Appeals Policy and Procedure, 2018-19 HND Programme Handbooks,

a log of Complaints 2017-18, Report to the Academic Board (November 2018) and Log of Appeals received and outcomes 2017- 18, Programme Annual Monitoring Reports, Programme Committee Minutes and Academic Board minutes to identify the College's processes for handling complaints and appeals and to confirm that these are fair and transparent.

256 The team assessed published information for potential and actual complainants and appellants on the College website to establish whether it is clear and accessible to all students.

257 The team considered a random sample of complaints and appeals from different courses to test that they were dealt with in a fair, transparent and timely manner.

258 The team reviewed data for complaints and appeals in the Log of Complaints 2017-18 report to Academic Board, November 2018 and in the Log of Appeals Received and Outcomes - 2017-18 to identify levels of complaints and appeals overall, and by course, which may identify issues for further investigation under other core practices.

259 The team met students to identify students' views about the clarity and accessibility of the College's complaints and appeals procedures.

What the evidence shows

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

261 The College is responsible for having its own internal complaints and appeals processes before any issues are referred to Pearson/the Office of the Independent Adjudicator (OIA). It has developed policies to be applied and a flowchart outlining the complaints process is available in teaching rooms. The policies are not included in student programme handbooks; instead, there is a specific area on the virtual learning environment for all policies and procedures for staff and students to access. They are also available on the College's public website at <https://londonchurchillcollege.ac.uk/wp-content/uploads/2019/07/Complaints-Policy-and-Procedure-April-2019.pdf>. The complaints procedure includes provision for complaints about the College and its staff, as well as complaints about other members of the student body.

262 The formal complaints and appeals procedures work in three stages. The Registrar is responsible for assessing the initial complaint, and there is provision for a Complaints Panel to be established at stage 1 if the Registrar feels this is necessary. Stage 2 involves the Principal in the review of the previous decision for complaints and, for appeals, it involves the Quality Officer. Stage 3 students are referred to the OIA or Pearson. The College considers that its complaints and appeals procedures are transparent, effective and completed in a timely manner. The review team agrees that the College's approach to complaints and appeals, as outlined in its processes, are definitive, fair and transparent to students.

263 Many students choose to raise issues informally, through discussions with College staff. These are logged and reported as part of the complaints and appeals review processes. Annual reports on complaints and appeals are made to Programme Committees as part of annual monitoring and to the Academic Board. The reporting of informal complaints is systematic and the review team found that the College takes appropriate steps to fully consider all complaints, regardless of whether they become part of the formal process. The report on complaints and appeals considered by the Academic Board in November 2018 provided a good overview for the College to consider any lessons learned.

264 No specific complaints and appeals plans were provided. The review team noted that issues were generally resolved informally.

265 The log of complaints for 2017 to 2018 presented to the Academic Board in November 2018 shows that seven complaints were specific to the HND Business; seven were specific to the HND Health and Social Care; and one was specific to the HND Hospitality Management. Of the remaining five cases, one complaint related to all courses and course information was not applicable in four cases. Two complaints against teaching staff were made by students; one student complaint was made about other students; two students complained about the College; and one student complained about a support staff member. The report shows that 17 out of 20 complaints received were resolved informally, two proceeded to stage 1 and one complaint proceeded to stage 3 prior to resolution in line with the complaints policy and procedure.

266 The log of appeals records notes receipt of seven appeals. Five appeals related to the HND Health and Social Care (of which one was allowed). Of these, two were based on questioning academic judgement and dismissed; one was based on 'special needs' which had been taken into account and was therefore dismissed; the reason for one appeal was not disclosed and was dismissed; and one appeal (basis undisclosed) was resolved with the student being given a new resubmission window. Two appeals related to the HND Business (one was allowed on the basis of mitigating circumstances; and the second resulted in a completion of procedures letter being issued to the appellant). No appeals were received for the HND Hospitality Management. Data available to the team did not indicate timings involved from instigation of a complaint or appeal to the final outcome. Academic Board receives reports on complaints and appeals from the Registrar to identify any areas warranting attention in the light of complaints and appeals received.

267 Students who met the review team confirmed that they know where to find information about the complaints and appeals processes and who to go to if they wish to discuss a complaint or appeal. Generally, students choose to raise issues informally, through discussions with College staff. Students confirm that the processes are transparent, effective and completed in a timely manner.

268 The review team's analysis of complaints and appeals showed that cases are generally resolved informally and mostly relate to student behaviour in the case of complaints, or late mitigating circumstances in the case of appeals.

Conclusions

269 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

270 The review team concludes that the College engages in systematic monitoring of all formal and informal complaints and appeals, which was referenced in relevant committees and annual reports. Students have a good understanding of the process to submit a complaint or appeal, and the sample of complaints and appeals decisions seen by the team shows no discrepancies in the use of the policy. Complaints are related directly to student behaviour rather than College delivery, in the main, and are generally resolved informally. The review team concludes, therefore, that the Core practice is met.

271 The evidence underpinning this judgement reflects all of 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

272 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.

273 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

274 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it considered was assessed in 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 Student submission
- b Responsibilities checklist for providers with Pearson Education Ltd provision
- c Risk Register 2018-20 (updated January 2019)
- d HND Social and Community Work Approval Panel meeting minutes (July 2018)
- e Volunteering Agreement with Barts NHS Trust (December 2018)
- f Learning Teaching and Assessment Policy and Strategy
- g External examiner report for the HND Health and Social Care, July 2019
- h HND Health and Social Care Programme Handbook
- i Programme Annual Monitoring report for the HND Health and Social Care
- j External examiner report for the HND Health and Social Care, June 2018
- k Minutes of the July 2019 Academic Board meeting
- l Stakeholder Workshop notes (February 2018)
- m Work Experience Information Form and Booklet
- n HND Health and Social Care students' work placement report to the Academic Board (July 2019)
- o Pearson 2018-19 Academic Management Review (AMR) Report
- p 2019 National Student Survey
- q Work Experience Policy
- r Statement on Work Experience Arrangement (May 2018)
- s Collaborative Partnerships Policy
- t Student Engagement Group Minutes (November 2018)
- u Student Engagement Group and Work Based Learning meeting notes (July 2019)
- v Unit 4 specification - Personal and Professional Development on the HND in Health and Social Care (2017-18)
- w Work-based learning tracking sheet example
- x Workplace Visit Checklist
- y Progression and completion list for the Resubmit Board (September 2019)
- z Current work-based learning data (as at the time of the visit)
- aa Programme Design and Development Policy

- bb Telephone call with a representative of Barts NHS Trust
- cc Meetings with senior staff, with academic, professional and support staff and with students.

275 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:

- third-party endorsements as none are available for the provision on offer at the College.

How any samples of evidence were constructed

276 The review team focused on the HND Health and Social Care as this is the only HND course to include a mandatory work experience component in the course.

Why and how the team considered this evidence

277 As highlighted, all of the evidence submitted by the College 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 College'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.

278 The team considered the Pearson Academic Management Review report, the responsibilities checklist for providers with Pearson Education Ltd provision, Learning Teaching and Assessment Policy and Strategy, Work Experience Policy, Programme Design and Development Policy, and the Collaborative Partnerships Policy, to assess how the College ensures that courses are high quality, irrespective of where or how courses are delivered or who delivers them.

279 The team considered information and guidance relating to students' work experience, including the Unit 4 specification - Personal and Professional Development on the HND in Health and Social Care (2017-18); HND Health and Social Care Programme Handbook; Work Experience Information Form and Booklet; Workplace Visit Checklist, Statement on Work Experience Arrangement (May 2018) to test the effectiveness of the policies and procedures in ensuring high-quality work experience.

280 The team examined the HND Social and Community Work Approval Panel meeting minutes (July 2018), Stakeholder Workshop notes (February 2018), Risk Register 2018-20 (updated January 2019), and Pearson's 2018-19 Academic Management Review (AMR) Report to assess how the College ensures that courses are high quality, irrespective of where or how courses are delivered or who delivers them.

281 The team considered data on work experience completion including a current status report to the Academic Board on HND Health and Social Care students' work placements (July 2019), current work-based learning data (as at the time of the visit), and a progression and completion list for the Resubmit Board (September 2019), SEG Minutes (November 2018) and SEG and WBL meeting notes (July 2019) to identify the College's monitoring arrangements.

282 The team considered the student submission, the Programme Annual Monitoring report for the HND Health and Social Care and the 2019 National Student Survey, to assess

students' views about the quality of courses delivered in partnership.

283 The team considered the volunteering agreement with Barts NHS Trust (December 2018) and spoke to a representative of the Trust to test the effectiveness of arrangements in place for ensuring high-quality work experience.

284 The team considered external examiner reports for the HND Health and Social Care, June 2018 and July 2019 to identify the external examiner's views on the effectiveness of the arrangements made for students engaged in work experience with third parties.

285 The team considered information and guidance relating to students' work experience, including the Unit 4 specification - Personal and Professional Development on the HND in Health and Social Care (2017-18); HND Health and Social Care Programme Handbook; Work Experience Information Form and Booklet; Workplace Visit Checklist, Statement on Work Experience Arrangement (May 2018), held meetings with staff and students to establish whether staff, students and providers of work experience understand their responsibilities with regard to work experience where this forms part of course requirements and to test the effectiveness of arrangements in place for ensuring high-quality work experience.

What the evidence shows

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

287 The Pearson Academic Management Review report states that the College does not have any collaborative agreements. The responsibilities checklist for providers with Pearson Education Ltd provision indicates that the College is responsible for designing and implementing key quality assurance processes to ensure the quality of student learning opportunities where it is involved in managing relationships with other partner organisations (such as placement providers). The College has a clear understanding of its responsibilities to Pearson as the awarding organisation for Higher National programmes delivered by the College and has developed policies and procedures accordingly. These include the Learning Teaching and Assessment Policy and Strategy underpinning the delivery of a high-quality academic experience, the Programme Design and Development Policy, setting out the processes to be followed for new HND programmes, for which the College and Pearson have shared responsibilities, in addition to any programmes which are awarded by the College, and the Collaborative Partnerships Policy.

288 The Collaborative Partnerships Policy indicates that the Principal's Executive Group (PEG), in consultation with the Board of Directors (BoD), the College Oversight Board (COB) and the Academic Board, take full responsibility for the robust implementation and management of internal processes relating to collaborative provision. The Policy identifies guiding principles and responsibilities of the parties involved in different types of arrangements, namely study-centre, franchise and validated provision under the headings of programme design, approval and modification; recruitment; student engagement; assessment; and annual monitoring. While the College has a Collaborative Partnerships Policy, it does not have a plan which is specific to partnership work.

289 The Work Experience Policy opens with an affirmation of the value of practice in the education of students as a distinctive part of the College's strategy. It also states that the College undertakes due diligence with providers and takes reasonable steps to ensure that teaching experiences are relevant, valid and related to the outcomes of a programme. The Work Experience Policy sets out the procedure to be followed with regard to work experience placements and indicates that students are responsible for finding suitable work experience and work-based learning.

290 In addition to the policies mentioned above, the review team considered the Unit 4 specification - Personal and Professional Development on the HND in Health and Social Care (2017-18); HND Health and Social Care Programme Handbook; Work Experience Information Form and Booklet; Workplace Visit Checklist and a Statement on Work Experience Arrangement (May 2018). While College policies and processes state that support will be provided to students and supervisors during work experience, once the College has employer details, the review team noted variability in the management of work experience arrangements. Without the necessary work experience information, College staff are unable to verify the suitability of employers, carry out the workplace checklist, conduct a risk assessment, clarify responsibilities with employers, or provide support to students and supervisors. The review team therefore considers that the College's policies and procedures for student support are not fully implemented for all students and are not comprehensive in managing the risk to quality and the student experience (Q3 and Q9 also refer).

291 HND Social and Community Work Approval Panel meeting minutes (July 2018) indicate that the College had decided on a change in its strategy relating to collaborative partnerships following the termination of its partnership agreement with the University of Bedfordshire, and planned to build on its relationship with Pearson. Minutes of the July 2019 Academic Board meeting indicate that the College is in discussion with third parties to consider an academic partnership, notwithstanding its relationship with Pearson.

292 The Risk Register, under the heading of partnerships, collaboration and employability, identifies areas of high risk for the College, including not meeting awarding bodies expectations; not achieving adequate placements and work experience for students; and poor-quality assurance and enhancement arrangements. The Principal and Principal's Executive Group are identified as the responsible officer and oversight body respectively. The Principal's Executive Group also has oversight responsibility for quality assurance and enhancement arrangements, with the Head of Quality being identified as the responsible officer. The Head of Programmes and Academic Monitoring and Head of Student Experience are the responsible officers for ensuring the adequacy of placements and work experience arranged by students with oversight provided by the Academic Board. To mitigate the possibility of the College not meeting awarding organisation/body expectations and poor-quality assurance and enhancement arrangements, the Risk Register refers to 'A proactive and on-going enhancement of the curriculum as part of the strategy', to be demonstrated by enhancements being identified, communicated and delivered consistently and positive review reports. In the case of student placements and work experience, mitigation actions are to work to increase opportunities for students and increased employer engagement. It is too soon to show the impact of these mitigations for HND in Health and Social Care students, for whom completion of a minimum of 200 hours' work experience is a requirement of the course.

293 The report to the Academic Board shows that, of the six groups of students (190 students in total) with expected course end dates between March 2018 and June 2019, 69 had completed the course, 108 had work-based learning outstanding, 13 students had suspended their studies, transferred or left. Progression and completion board results clearly show which students have not completed the mandatory 200 hours but they state students have completed 16 units - making it unclear how students can be recorded as completing 16 units when one of those (Unit 4) requires completion of the 200 hours' work experience, which provides the basis of evidence for assessment of the unit. Consideration of the SEG minutes (November 2018) and SEG and WBL meeting notes (July 2019) shows that the issue of student work experience is kept under regular review.

294 The 2017-18 Programme Annual Monitoring report for the HND Health and Social Care notes the impact of some students' inability to gain 200 hours of work experience (required in unit 4) on expected completion rates for the course and indicates that the

College is looking to other organisations to help Health and Social Care students find work placements, thereby improving course completion rates to be more in line with expectations. The College's analysis of the 2019 National Student Survey shows an overall satisfaction score of 95.4% for Health and Social Care but fewer than 10 respondents replied to questions relating to practice placements.

295 The College is working with Barts Health Trust to offer volunteering experience to students as part of the HND Health and Social Care work experience (and HND Healthcare Practice). The volunteering agreement formalises the arrangement and the expectations of the College and the Trust. The agreement covers responsibilities relating to information delivery, the application process, training, supervision, and completion of the work experience booklet. It also states that a member of the College work-based learning team will visit a representative sample of not less than 20% of students at times agreed with the Trust, to confirm that activities are taking place as agreed. Every year, a Trust representative speaks to new student cohorts about the volunteering opportunities available. The review team was told that the College had initiated the contact with the Trust and that a good relationship had been established between the College and the Trust in the three years of working together and the parties involved were clear about what each party needs. The Barts NHS Trust representative, staff and students of the College all report that the arrangements are working well for all parties concerned.

296 The external examiner report for the HND in Health and Social Care, included as an annex in the course annual monitoring report for 2017-18, identified that the College needed to formalise a policy and procedure for managing late/non-completion of work experience. The external examiner report noted a lack of course leadership; inconsistent information being available for external examination; the outcome of confirmation of work experience hours not being made totally clear; and assessment decisions not always being fair and equitable in the case of referred assessment decisions. The July 2019 report for Health and Social Care identified that the assignment brief did not make it clear to students that completion of the 200 hours' work experience was necessary for completion of Unit 4.

297 The review team spoke to staff and students about the reasons behind the data presented to the team prior to, and during, the review visit showing that a high proportion of students do not complete the Unit 4 work experience component on the HND Health and Social Care and several do not complete work experience before the end of their academic units. Staff indicated that the requirement to complete 200 hours' work experience is made clear to students at interview and during the start of the programme and particularly within the delivery of Unit 4. The requirement to complete the 200 hours is specified in the programme handbook within the details for Unit 4. It is also made clear at the beginning of the Unit 4 specification that is made available to students. Staff report that they encourage students to complete their work experience at an early opportunity but recognise that some students may not be able to manage study and work experience at the same time given their other responsibilities. Furthermore, while staff know that students are sometimes working towards their work experience, students do not always provide them with their employer details, as required by the College. Staff report that progress is being made to ensure that students are aware of the importance of completion of the work experience unit and the review team noted that a tracking form is used to monitor progression towards completion of the 200 hours and was told that personal tutors meet relevant students regularly to complete this to ensure students are making progress towards completion. The evidence available to the team indicates that, while the College has policies and processes in place relating to students' work experience, these are not being implemented as intended and present a risk to the quality of the student experience.

298 Students who met the review team clearly understand the need to complete the work experience requirement to qualify for the HND in Health and Social Care and are aware of

efforts made by the College to increase employer engagement with a view to enabling students to secure more work placement opportunities and to support students with CV writing to help them to contact employers able to offer relevant work experience opportunities. Students also report, however, that students often have to juggle family, caring, work and study commitments with the attendant time pressures these bring.

Conclusions

299 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

300 The review team concludes that the College, working in partnership with its awarding organisation, does not have 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. This is because, although the external examiner reports indicate that the academic experience for students is of a high quality, the College does not have effective and comprehensive arrangements in place to ensure a high-quality work experience for those students for which this is a mandatory requirement of their programme (the HND in Health and Social Care), which therefore presents a risk to quality. Students do not always provide employers' details when they obtain work experience and some students are known to be undertaking work experience without appropriate contact with College supervisors to conduct the suitability checks, risk assessments and provide support, as outlined in the College's own policies. In addition, it is not clear how the College processes assessment results for Unit 4 - Personal and Professional Development on the HND in Health and Social Care, in order to record the assessment as not being completed. The review team concludes, therefore, that the Core practice is not met.

301 The evidence underpinning this judgement reflects all of 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

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

303 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

304 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the College 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 it considered was assessed in 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 Student submission
- b Programme annual monitoring report for HND Business
- c External examiner report on the HND Business, June 2019
- d Risk Register
- e Training Brief on Engaging Students in Learning and Teaching
- f Student Engagement and Employability Plan
- g Learning, Teaching and Assessment Policy
- h Student Support and Reasonable Adjustment Policy
- i Programme annual monitoring report for HND Health and Social Care
- j Programme annual monitoring report for HND Hospitality Management
- k Assessment and Progression Board minutes, March 2019
- l Minutes of the Academic Board, November 2018 and March 2019
- m Head of Programmes and Academic Monitoring report to the July 2019 Academic Board
- n Example of a support agreement plan
- o Four examples of an individual learning plan
- p Minutes of the College Oversight Board
- q 2019 National Student Survey
- r Personal Tutor and Enabling Student Development Policy
- s Minutes of the Board of Directors
- t Academic Risk Register
- u Student data on progression for 2016-2019
- v Minutes of the Principal's Executive Group
- w Student numbers by group for the period 2016-19
- x Attendance policy
- y Sample of assessed student work
- z Meetings with senior staff, with academic, professional and support staff and with HND students, including at least two student representatives and at least four who were not student representatives.

How any samples of evidence were constructed

305 The review team considered students' views expressed in internal and external surveys, and module and course evaluations for the current HNDs in Business, in Health and Social Care and in Hospitality Management; external examiner reports for these courses; and assessed student work for these courses.

Why and how the team considered this evidence

306 As highlighted, all of the evidence submitted by the College 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 their judgement regarding the providers' 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.

307 The team considered the Learning, Teaching and Assessment Policy; Personal Tutor and Enabling Student Development Policy; Student Support and Reasonable Adjustment Policy; Support Agreement Plan example; Student Engagement and Employability Plan; and Attendance policy; an external examiner's report on the HND Business, June 2019; programme annual monitoring reports for Business, Health and Social Care and Hospitality Management ; four examples of an individual learning plan; minutes of the Academic Board; College Oversight Board; Principal's Executive Group and Board of Directors; the Risk Register and Academic Risk Register; student data on progression for 2016-2019; student numbers by group for the period 2016-19; Assessment and Progression Board minutes, March 2019; and the Head of Programmes and Academic Monitoring report to the July 2019 Academic Board, to identify the College's approach to student support, including how it identifies and monitors the needs of individual students.

308 The team considered the College's plans to support students in achieving academic and professional outcomes, including the Training Brief on Engaging Students in Learning and Teaching, the Student Engagement and Employability Plan 2018-19, the use of guest speakers and student outcomes monitoring undertaken in programme annual monitoring reports, to assess whether it has credible, robust and evidence-based plans for ensuring that all students are supported to achieve successful academic and professional outcomes.

309 The team considered the student submission, students' views as presented in annual programme monitoring reports, Business, Health and Social Care, Hospitality Management, outcomes of the 2019 National Student Survey and a report by the Head of Programmes and Academic Monitoring report to the July 2019 Academic Board, to identify students' views about student support mechanisms.

310 The team considered student assessed work to test whether students are given comprehensive, helpful and timely feedback.

311 The team met students and staff involved in providing academic and non-academic support to test whether staff understand their responsibilities and are appropriately skilled and supported; to assess students' views about student support mechanisms; and to assess whether students who have made particular use of student support services regard those services as accessible and effective.

What the evidence shows

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

313 The College vision, mission and values commit to providing a good quality student experience to enable all students to reach their full potential. Key performance indicators (KPIs) include specific activities on employability, completion and attainment, and student satisfaction. The Learning, Teaching and Assessment Policy and Personal Tutor and Enabling Student Development Policy govern the College's approach to this Core practice.

314 All students are appointed a personal tutor to support them through their learning journey and there are at least two personal tutors for each programme. A lead personal tutor supervises tutoring operations and programme leaders ensure that systems operate effectively within their respective programmes. The external examiner for the HND Business, June 2019 confirmed that personal tutors are contributing effectively to enhancing student learning experiences. Personal tutors appear to be effective in improving student submission and pass rates. Individual learning plans are developed to track student progression and areas for improvement, as part of the personal tutor process. The College has a Student Welfare Office which provides chaplaincy and pastoral support and works with the mental health charity Mind to offer specialist mental health support for students who need it. The Welfare Officer supports students with additional needs. The Student Support and Reasonable Adjustment Policy enables applicants and students to identify any barriers to learning. The College Registrar completes a support agreement plan, where necessary, after interviewing students. The review team considered that these arrangements contribute to supporting student achievement.

315 The Academic Board, College Oversight Board, Principal's Executive Group (PEG) and the Board of Directors monitor the KPIs centrally and they are reported in programme annual monitoring reports (PAMRs). The Risk Register and Academic Risk Register also identify key areas for the College to monitor its performance in relation to this Core practice. The review team found that, although the College goes to great lengths to review student intake by different demographic characteristics, the PARMs do not show that a similar approach to student retention and attainment is routinely applied. The team received an analysis of student performance developed by the College in response to an enquiry from the Department for Education. The analysis shows that between 2016-17 and 2017-18, those aged between 30 and 39 were at the highest risk of dropping out, followed by those aged between 26 and 29. Those admitted with Level 2 qualifications only were also at high risk. The team saw no evidence of this being actively discussed and analysed in PEG meetings where the analysis had been tabled, nor how this information has influenced, or should influence, the support students with these characteristics receive. As such, the review team considered that the approach to student support was partial, creating a risk that students would not be adequately supported.

316 The review team has identified issues relating to inconsistencies in student records information pertaining to Health and Social Care students elsewhere in the report. The team found further examples of inconsistencies with regard to student numbers on the College's Business provision with one document indicating that 331 students were enrolled on the Business programme between September 2017 and April 2018 and another indicating that 255 students were enrolled on the same programme within the same time frame. Furthermore, these numbers did not correlate with the data provided in PAMRs. The data did not, therefore, provide the review team with an accurate reflection of the College's retention and attainment results.

317 The College regularly monitors student attendance, but the review team found a lack of concrete actions and sense of accountability to improve student attendance rates at the

College. Formal registers of student attendance are taken and uploaded onto the student portal system before each teaching session. Students who are absent must record the reason for absence on the student portal. Where there is non-attendance, a text is sent out and followed up at personal tutor sessions. The College has procedures to chase students for non-attendance, has a policy freely accessible to students on the virtual learning environment, and has mechanisms to de-register non-attending students through the Assessment and Progression Board. Potential reasons for low attendance figures for 2018 reported by the College to Academic Board (56% for Term 1 (January) and 55% for Term 2 (April)), including termly changes to academic timetables, were discussed by the Academic Board in November 2018. The Head of Programmes and Academic Monitoring report to the July 2019 Academic Board reported that the overall College attendance rate was 55%, with Hospitality Management and Business standing at 45%. From the 2019-20 academic year, students have received a timetable for the whole academic year two weeks before the start of term. The College has not put forward any other solutions to the issue of low attendance.

318 The Training Brief on Engaging Students in Learning and Teaching, provides a good overview of the differences to consider when teaching adult learners who have been out of education for some time. The Student Engagement and Employability Plan 2018-19 outlines specific measures the College is taking to promote positive employment outcomes for graduates, including the use of guest speakers to support the enhancement of student learning and arranging meetings with universities to discuss top-up possibilities to Level 6 for students. The College has an Alumni Officer who supports students to prepare for employment or further study. Destinations of Leavers from Higher Education survey (and now the Graduate Outcomes survey) is monitored through the PAMR process. The review team has noted elsewhere in the report that students' inability to complete 200 hours of work experience before completion of their academic studies on the HND Health and Social Care is problematic and considers that the plans to support students in achieving academic and professional outcomes are not credible or robust. The experience of students who have yet to complete work experience to qualify for the HND in Health and Social Care award raises questions about the College's support for the achievement of successful academic and professional outcomes for these students.

319 Students featured in the student submission attest to the supportive and inclusive environment fostered by the College which has enabled them to grow in confidence and achieve. They have been happy with the facilities, learning resources and support services available to them and appreciate arrangements made by the College for external employers to come to the College to speak to them about work experience opportunities as well as other activities available to develop their employability. The College reports that student feedback in the annual programme monitoring reports similarly confirm satisfaction with the student support available to them, including individual learner plans, field trips and live events in addition to the personal tutorial support and information on the virtual learning environment available to support them in their studies. However, the Head of Programmes and Academic Monitoring report to the July 2019 Academic Board notes that the College received lower scores than in the previous year for learning community: both staff and students; student feedback; learning opportunities and resources; and the course being challenging.

320 The review team evaluated a sample of assessed student work which showed that feedback to students is variable in its explanation of how to improve in the future. In some cases, it was clearly helpful, timely and comprehensive, whereas other feedback was less detailed and less relevant in helping students with future assessment. Staff are committed to supporting student achievement and report that the College is planning additional training for staff on assessment feedback in due course, and that all students are able to speak to markers or their personal tutor to receive additional feedback to develop their understanding of how they can improve. Staff comment on the need to raise the confidence of adult

learners to enable them to reach their potential, and the tutor system, welfare officer, and a friendly and accessible teaching staff enable this to happen. The review team noted the close relationship between personal tutors and teaching staff which enables an effective partnership to be established to support student outcomes. It was clear from the teaching observations undertaken and meetings with staff that they are passionate about providing a supportive experience, reflecting the nature of the student population and caring and work commitments students might have away from the College. The review team considered that staff understand their role in supporting student achievement.

321 Students who met the review team confirm that teaching and professional support staff at the College are supportive of students' needs and motivate students to achieve. The virtual learning environment provides students (and staff) with clear and transparent information pertaining to policies, assessment criteria and, through the student portal, their assessment results. Students report that they are satisfied with the assessment feedback they receive and with the additional help provided by personal tutors. As indicated earlier in this section, from the 2019-20 academic year, students have received a timetable for the whole academic year two weeks before the start of term. Students hope that this will better help them to plan childcare and employment commitments.

Conclusions

322 As described above, the review team considered all of the evidence submitted to form a judgement as to whether the College 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. Its conclusions, based on the evidence considered, are detailed below.

323 The review team concludes that the College does not support all students to achieve successful academic and professional outcomes. This is because, while it has appropriate mechanisms to support students who are engaged and fully committed to their programme and offers many opportunities for support, including the role of the personal tutor which is vital to this, enabling these students to achieve their academic and professional outcomes, there is a lack of concrete and timely action on attendance rates and timely completion of programmes, especially in relation to the HND in Health and Social Care, where failure to complete appropriate work experience means that students are not able to meet all of the requirements for their award. Coupled with this finding is that of the College's inability to produce definitive student data and evidence-based plans for ensuring that all students are supported to achieve successful academic and professional outcomes. The team questioned the ability of the data the College collects to effectively monitor student retention and achievement with a view to supporting all students to achieve successful academic and professional outcomes and to put in place robust plans to mitigate risks to students being unable to complete. Notwithstanding positive students' comments about their experience and the support available to them, the observations described above are consistent with the criteria for a 'does not meet' judgement, and the review team concludes that the College does not meet this Core practice.

324 The evidence underpinning this judgement reflects all of 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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