

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

Results Consortium Limited

Review Report

November 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 provider'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 standards described in the approved programme documentation are set at levels that are consistent with these sector-recognised standards and the provider'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 provider's students are expected to be line with the sector-recognised standards defined in paragraph 342 of the OfS's regulatory framework. The review team also considers that the provider's academic regulations and policies will ensure that these standards are maintained. The review team considers that staff fully understand the provider'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>
S2	The provider ensures that students who are awarded qualifications have the opportunity to achieve standards beyond the threshold level that are reasonably comparable with those achieved in other UK providers.	Met	High	The review team, based on the evidence presented to it, determined that the standards set for students to achieve beyond the threshold on the provider's courses are reasonably comparable with those set by other UK providers. The review team considers that the standards described in the approved programme documentation and in the provider's academic regulations and policies should

				<p>ensure that such standards are maintained appropriately.</p> <p>The review team determined that the standards that will be achieved by the provider's students beyond the threshold are expected to be reasonably comparable with those achieved in other UK providers. The team considered that the provider's academic regulations and policies should ensure that standards beyond the threshold are maintained. Based on the detailed scrutiny of the evidence, the review team considers that staff at the provider fully understand the provider's approach to maintaining such standards and have opportunities for engagement with peers and external experts in teaching and assessment activities. The review team considers the provider's plans for maintaining comparable standards appropriate, well documented and understood by staff members.</p> <p>Therefore, the review team concludes, based on the evidence described above, that students who are awarded qualifications should 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>
S3	Where a provider works in partnership with other organisations, it has in place effective arrangements to ensure that the standards of its awards are credible and secure irrespective of where or how courses are delivered or who delivers them.	Met	High	<p>The review team concludes that, where the provider works in partnership with other organisations, it has 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. The partnership agreement with Pearson is clear and comprehensive, up-to-date and reflects the provider's regulations or policies for the management of partnerships. The provider is experienced at delivering Pearson programmes for its further education provision and has set out credible plans for ensuring that the strengths of the</p>

				existing further education processes are contextualised to the higher education environment and its specific requirements. Staff met by the team clearly understand their responsibilities for the maintenance of academic standards, working in compliance with the partnership agreement. The review team therefore concludes that this Core practice is met.
S4	The provider uses external expertise, assessment and classification processes that are reliable, fair and transparent.	Met	High	The review team concludes that the provider uses external expertise, assessment and classification processes that are reliable, fair and transparent. The provider has robust and credible policies and processes for ensuring the use of external expertise in the maintenance of academic standards. The information on assessment and classification within the programme specification is reliable, transparent and fair. Plans for the use of Pearson's external examiners and their reports are robust and credible. Appropriate subject-specific and independent external expertise is used at the programme approval stage, and at governance level there is a demonstrable depth of current external higher education expertise within the governing body. Programme documentation and policies on assessment procedures and annual monitoring processes ensure that regulations for assessment and classifications are fair, transparent and reliable. All staff understand their responsibility for ensuring that the external expertise is used to inform programme design. They are also fully aware of classification processes within programmes. The review team concludes therefore that this Core practice is met.
Q1	The provider has a reliable, fair and inclusive admissions system.	Met	High	The review team concludes that the provider has a reliable, fair and inclusive admissions system, because its policies and procedures are clear and comprehensive and are fully aligned to meet Pearson requirements. The information for

				<p>applicants is transparent, accessible and fit for purpose, and is consistent with the provider's policy and Pearson's expectations. The system includes ongoing review of the recruitment and admission processes and related information at senior level to ensure the system remains reliable, fair and inclusive and compliant with consumer protection obligations. The information within the programme documentation related to recruitment and admissions, and entry criteria is consistent and demonstrably promotes fairness and inclusivity. The provider has realistic recruitment plans and the admissions system is underpinned by guidance and support from key staff. All staff are fully aware of their respective roles and responsibilities linked to recruitment and admissions and are trained appropriately. The review team concludes, therefore, that this Core practice is met.</p>
Q2	The provider designs and/or delivers high-quality courses.	Met	High	<p>The review team concludes that the provider designs and delivers high-quality courses. Approved course documentation, utilising the Pearson-developed framework, indicates that the teaching, learning and assessment design enable students to demonstrate the intended learning outcomes, and the virtual learning environment and Student Hub will also make significant contributions to the delivery of high-quality programmes. Senior staff are fully aware of their responsibilities and are able to describe their vision for ensuring the design and delivery of courses are of high quality. They plan to further facilitate this by including current practitioners within programme design and delivery, and by engaging current practitioners. Academic and professional staff fully understand the policies and process, and future plans in place to support the design and delivery of higher quality programmes. All staff are able to articulate what 'high quality' provision means for the provider, signifying the development of</p>

				students' employability and transferable skills, along with relevant academic outcomes, and could show how the provision meets that definition. The review team therefore concludes that this Core practice is met.
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 provider has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. The provider has already appointed key academic staff to deliver the programme, and those appointed to date form a cohort of experienced and qualified higher education professionals, with current experience in college or university teaching. The provider's recruitment policies and processes are comprehensive and able to support the provider in recruiting appropriately qualified and skilled academic, management and professional support staff to deliver a high-quality academic experience. The staff induction process is detailed and managed and overseen by senior staff. The provider's plans for recruitment to the higher education curriculum area are robust and credible. Ongoing support is planned to ensure that staff get the training they require to undertake their roles and to develop further. The plans provide for an appropriate balance between teaching and professional support. At the time of the review meeting, the review team met with key academic and professional support staff already in post, who confirmed the relevance and appropriateness of their qualifications and experience to their roles, and the planned opportunities for further professional development. The review team concludes, therefore, that this Core practice is met.

Q4	The provider has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience.	Met	High	The review team concludes that the provider has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience. The review team assessed the facilities, and staffing structures, and are satisfied that online resources and access to the electronic library are well developed and in line with sector practice, that existing support staffing structures are appropriate, and that relevant staff understand their roles and responsibilities. The plans and processes in place to address ongoing requirements for increases in facilities and staffing are appropriately situated with senior managers and within academic governance arrangements. The review team is satisfied that these plans are credible and robust, and enable the provider to further develop the facilities, library resources, online support and staffing to enable students to have a high-quality academic experience, and to facilitate the delivery of successful academic and professional outcomes for students. The review team concludes, therefore, that this Core practice is met.
Q5	The provider actively engages students, individually and collectively, in the quality of their educational experience.	Met	High	The review team concludes that the provider has plans to actively engage students, individually and collectively, in the quality of their educational experience. The provider's policies and process require student representation within deliberative committees, and arrangements are in place for the election and training of student representatives. The plans for actively engaging individual students in the quality of their educational experience are comprehensive and inclusive. The approach to engaging students will, in the view of the review team, provide credible, robust and evidence-based approaches for engaging students, individually and collectively. Staff are fully aware of the policies and planned processes in place for engaging higher education students and explained the importance of

				engaging with the student voice to support a culture of continuous improvement. The review team is satisfied that the provider's plans for engaging students individually and collectively are realistic, credible and comprehensive. The review team concludes, therefore, that this Core practice is met.
Q6	The provider has fair and transparent procedures for handling complaints and appeals which are accessible to all students.	Met	High	The review team concludes that the provider has fair and transparent procedures for handling complaints and appeals which are accessible to all students. The provider's policies and staged procedures offer students a fair and transparent process for addressing both their complaints and appeals, which will deliver timely outcomes. Both policies have a four-stage process but with appropriate distinctions to highlight the differences in the potential outcomes from the two processes. All staff are fully aware of the policies and processes and are able to explain how they will work. Information on the policies and procedures is clearly set out within the student handbook and made available within the virtual learning environment. The provider's processes for student complaints and appeal are definitive, fair, transparent and accessible, and 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.	Met	High	The review team concludes that, where the 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. The provider has established experience of meeting its responsibilities to Pearson for its further education provision, and fully understands its roles and responsibilities in relation to further extending this partnership to the Higher National Diploma in Business & Management, using a standard Pearson partnership agreement, which is clear and

				comprehensive. Staff at all levels have established experience of working with Pearson and fully understand the particular additional responsibilities for quality to be addressed when delivering Pearson higher education programmes. The provider's planned arrangements for working in partnership are appropriate to ensure the delivery and assessment of a high-quality academic experience for its students. and the review team concludes, therefore, that this Core practice is met.
Q9	The provider supports all students to achieve successful academic and professional outcomes.	Met	High	The review team concludes that the provider supports all students to achieve successful academic and professional outcomes. The provider has comprehensive, robust and credible policies, processes and infrastructure in place to support students to successfully achieve positive academic and professional outcomes and progression. The policies, processes and plans signify the provider's focus on personal tutoring, progress monitoring of individual students and effective student support. Senior management has a clear vision to further develop support mechanisms for students working with relevant external organisations. Both academic and professional staff demonstrably understand their roles in supporting students to successfully achieve their expected outcomes. The team is satisfied that the provider's approach to supporting students is comprehensive, targeted to student needs and credible to realistically support students to achieve personally, academically and professionally. The review team concludes, therefore, that this Core practice is met.

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 November 2019, for Results Consortium Limited.

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: Dr Marie Stowell
Institution: University of Worcester
Role in review team: Institutional reviewer

Name: Dr Sarah Warnes
Institution: UCL School of Management
Role in review team: Subject specialist in Business and Management

The QAA Officer for the review was: Mrs Roshani Swift.

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 Results Consortium Limited

Results Consortium Limited (the provider) was established in 2002 as a private limited company, and its head office is in Southend-on-Sea. It currently offers a range of courses at Level 3 and below, along with Access courses in Business and Management, and Health and Social Care, from bases in London, Barking, and Northampton, which are not in the scope of this review. At the most recent review by Ofsted (October 2018), Results Consortium Limited was rated as 'good' overall.

The provider has three directors, who have delegated responsibility for the management of higher education from their Governing Body, which is constituted in alignment with the Committee of University Chairs Guidance on Higher Education Governance. The membership of the Governing Body includes independent members from the university sector, along with a Student Governor.

The provider plans to offer higher education provision in 2020, beginning with a Pearson-awarded Higher National Diploma in Business & Management offered from the Barking and Northampton campuses. At the time of the review, there were no higher education courses operational, and no enrolled higher education students. The only educational partnership for its higher education provision is with the awarding organisation, Pearson.

Results Consortium Limited and Pearson Education Ltd: Responsibilities

Results Consortium Limited plans to offer one Higher National programme that will 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 issue 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 students work
- giving feedback to students 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 are 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 does not have direct relationships with the students of a provider but does 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 provider does not offer a research degree programme. Therefore, the review team did not consider Q7 (where the provider offers research degrees, it delivers these in appropriate and supportive research environments).

To form its judgements about the provider's ability to meet the Core practices, the review team considered a range of evidence that was submitted prior to the review visit and evidence gathered at the review visit itself. To ensure that the review team focused on the principles embedded in the Core practices, and that the evidence it considered was assessed in a way that is clear and consistent with all other reviews, the team utilised 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.

The provider intends to run one Pearson HND in Business & Management programme and therefore sampling was not applicable.

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

Explanation of findings

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

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

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

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

The evidence the team considered

4 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Assessment Policy and Procedure
- b Assessment IV Procedure
- c Annual Review of Programme Policy
- d Pearson Higher Nationals Centre Guide to Quality Assurance and Assessment
- e Pearson Higher Nationals Business & Management Specification
- f Academic Board Code
- g Assessment Instruments
- h Programme Specification
Assignment briefs
- i A meeting with governors and senior staff
- j Two meetings with academic staff who will be directly 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:

- the review team did not consider any external examiner reports, third party endorsements or assessed student work as the provider has not yet begun to deliver the programme.

How any samples of evidence were constructed

6 The review team considered only one programme (HND in Business & Management), so further sampling of approved programme documentation was not applicable.

Why and how the team considered this evidence

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

8 The review team examined the provider's academic regulations, policies and procedures (Assessment Policy and Procedure; the Assessment IV Procedure; Annual Review of Programme Policy) to identify its approach to course and assessment design, classification and moderation, and to ensure that sector-recognised standards are consistent with relevant national qualification framework requirements within the awarding organisation's (Pearson's) Higher Nationals Centre Guide to Quality Assurance and Assessment and Higher Nationals Business & Management Specification.

9 The review team examined the provider's plans and policies (Assessment Policy and Procedure; the Assessment IV Procedure; Annual Review of Programme Policy; Academic Board Code; Pearson Higher Nationals Centre Guide to Quality Assurance and Assessment; and the Pearson Higher Nationals Business & Management Specification) to confirm its approach to maintaining sector-recognised standards to meet national qualification frameworks, by the adoption of Pearson's qualifications, which build in these national requirements.

10 The review team considered the Programme Specification, assessment instruments, and Assignment Briefs to test that the specified sector-recognised standards are consistent with Pearson's qualification frameworks.

11 The review team met with senior staff responsible for establishing the framework for the maintenance of academic standards, and with academic staff to test that they understand and apply the provider's approach to maintaining academic standards.

What the evidence shows

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

13 The provider's policy and processes (Assessment Policy and Procedure; the Assessment IV Procedure; Annual Review of Programme Policy) provide evidence that the standards that have been set for the provider's Pearson award are in line with sector-recognised standards. The provider has aligned its approach to course and assessment design, marking and moderation to that set out in the Pearson Higher Nationals Centre Guide to Quality Assurance and Assessment to be consistent with the relevant national qualification frameworks.

14 The provider's approach set out within its Assessment Policy and Procedures document requires assessment planning and feedback processes to ensure that sector-recognised standards are maintained. For example, the sample assessment instrument for the Level 4 'Business and the Business Environment' Unit and the criteria for a pass grade within the marking scheme require students to successfully achieve learning outcomes aligned to sector-recognised standards. The Internal Verification Policy requires programme leaders to ensure that staff involved in assessment and those nominated as unit internal verifiers are appropriately trained in the requirements of the internal verification procedure and on the use of standardised internal verification documentation. The review team saw evidence which illustrated how the policy was applied within the Assessment Instrument where there is an explicit requirement for the internal verifier to be identified. The planned approach detailed within the provider's Annual Review of Programme and Policy and Procedure is in line with Pearson's BTEC Higher National Centre Guide to Quality Assurance and Assessment and its Higher National Business & Management Specification which explicitly requires annual monitoring processes to ensure the maintenance of sector-recognised standards. This Policy includes procedures for a schedule of activities, including the requirement for programme leaders to report on the effectiveness of the internal verification processes and actions taken in response to external examiner feedback on quality and standards matters, including the confirmation of the maintenance of sector-recognised standards. The Academic Board Code requires the Board to ensure that sector-recognised standards at all levels are maintained. The review team found that these policies and procedures fully align with Pearson's academic framework and are sufficiently comprehensive and credible to enable the provider to ensure that standards of its Pearson programmes are consistent with the relevant national qualification frameworks.

15 The provider's HND Business & Management Programme Specification fully addresses the requirements set out within Pearson's Higher National Business & Management Specification. It includes the specific aims for the programme at Level 4 and 5, and associated credits and grading classifications to highlight the learning outcomes to be achieved at the different levels of study. The sample assignment tasks and assignment briefs for both the Business Environment Unit and the Marketing Essentials Unit clearly outline how set tasks require achievement of threshold-level outcomes in order to successfully gain a pass in these units. The Specification also highlights the plans for quality assurance processes to ensure the maintenance of sector-recognised standards. On reviewing these documents, the review team confirmed that the information within the provider's Higher Education Programme Specification and the assessment tasks and briefs are evidence of credible plans to ensure that sector-recognised standards can be consistently maintained. The review team concludes that the programme information provides evidence that the requirements of the provider's programme documentation fully ensure that sector-recognised standards are in line with national qualification frameworks.

16 Senior staff understand the institutional policies and procedures for maintaining sector-recognised standards and in meetings with the review team they were able to articulate clearly their plans for implementing them. In both meetings, academic staff were able to confirm their understanding of the programme specification and explained how they will ensure that programme design, delivery and assessment supports students to achieve the sector-recognised standards. They described how the design of the provider's HND in Business & Management ensures the achievement of learning outcomes, at a threshold level, in line with Pearson requirements and national qualifications frameworks. The review team was assured that the provider's staff with whom it spoke fully understand its approach to maintaining sector-recognised standards.

Conclusions

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

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

19 The review team considers that, based on the evidence scrutinised, the standards that will be achieved by the provider's students are expected to be in line with the sector-recognised standards defined in paragraph 342 of the OfS's regulatory framework. The review team also considers that the provider's academic regulations and policies will ensure that these standards are maintained. The review team considers that staff fully understand the provider'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.

20 The evidence underpinning this judgement reflects, with the exception of external examiners' reports, assessed students' work and third-party endorsements, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

21 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.

22 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

23 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Assessment Policy and Procedure
- b Pearson Higher Nationals Centre Guide to Quality Assurance and Assessment
- c Pearson Higher Nationals Business & Management Specification
- d Annual Programme Review
- e Programme Committee Meetings Policy
- f Academic Board
- g Board of Governors
- h Organisation Chart
- i Programme Specification
- j Sample Assignments
- k Assignment Briefs
- l Two meetings with senior staff
- m Two meetings with academic staff involved in assessment of students.

24 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:

- the review team did not consider any external examiner reports, third party endorsements or assessed student work as the provider has not yet begun to deliver the programme. The team could not meet with students to seek their views as none have been recruited yet.

How any samples of evidence were constructed

25 The provider only offers one programme, so no sampling was necessary.

Why and how the team considered this evidence

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

27 The review team considered the Pearson Higher Nationals Business & Management Specification, Pearson Higher Nationals Centre Guide to Quality Assurance and Assessment and the provider's Assessment Policy and Procedure in order to identify its approach to course and assessment design, marking and moderation requirements for awards and approaches to classification as the underlying basis for the standards of the award.

28 The review team considered the provider's plans for maintaining comparable standards, including the establishment of relevant internal review processes, oversight via annual monitoring processes and via the deliberative committee structure, to ensure that they are credible and evidence-based.

29 The review team examined approved course documentation in the form of the Programme Specification, Sample Assignments, Assignment Briefs alongside Pearson's specifications, standards and regulations to check that specified standards of the course beyond the threshold level will be reasonably comparable with those achieved in other UK higher education providers.

30 The review team met with senior staff and academic staff who will be involved in assessment to test that they understand and aim to apply the provider's approach to maintaining comparable standards.

What the evidence shows

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

32 Full alignment with the Pearson Higher National Enhanced Quality Assurance and Assessment Handbook and the specific Higher National Business & Management Specification has enabled the provider to ensure that standards set for its Pearson awards are comparable to other UK providers offering similar programmes. The provider's Higher Education Assessment Policy and Procedure details the processes for the maintenance of standards above threshold levels which enable it to maintain academic standards at the right level. The review team is satisfied that these arrangements are in place, and clearly identify the provider's approach in this respect.

33 The provider has established plans which include the use of external examiners to confirm that standards are achieved and are comparable with those achieved by other UK providers (Annual Programme Review, Programme Committee Meetings Policy). The provider has also established an Academic Board (Academic Board Code) and Governing Body (Governing Body Code) which, in this context, will provide ongoing monitoring of the achievement of academic standards beyond threshold levels. In this way, the provider plans to obtain regular assurance of the maintenance of academic standards beyond threshold levels.

34 The Programme Specification includes comprehensive details on the criteria for achieving a pass and higher grades, which include merits and distinctions, in line with

Pearson's regulations, which apply across all UK providers (Pearson Higher National Enhanced Quality Assurance and Assessment Handbook and the specific Higher National Business & Management Specification). The sample assignments for the Business Environment Unit and the Marketing Essentials Unit both provide clear descriptions for the achievement of different grades. The assignment briefs for unit 3 (Human Resources Management), unit 4 (Management of Operations) and unit 12 (Organisational Behaviour) also provide students with clear guidance on how to achieve grades beyond the threshold levels, including grade descriptors which explain in appropriate detail how this can be achieved. The Programme Specification and the sample assignments for Business Environment and Marketing Essentials provide robust evidence of the provider's approach to ensuring that students have the opportunity to obtain grades higher than a pass for their assignments. The review team concludes that the provider's approaches give students the opportunity to achieve standards beyond the threshold level, and that these are comparable with those of other UK providers.

35 In meetings the review team was able to confirm that all staff met are fully aware of the plans for maintaining academic standards. Senior staff demonstrated their commitment to maintaining standards and outlined the processes whereby they will maintain oversight of these. Academic staff were able to describe how they intend to deliver and assess to comparable standards and to provide students with opportunities to achieve at standards above threshold level. The review team was able to triangulate its understanding of the details within the units, including assessment criteria and grade descriptors which clearly distinguished between distinction, merit and pass grades to enable achievement at levels beyond threshold standards. The provider has established comprehensive procedures and robust and credible plans to ensure that students are able to achieve standards above threshold levels. The review team concludes that all staff understand the approach to maintaining standards comparable with those achieved in other UK providers.

Conclusions

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

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

38 The review team determined that the standards that will be achieved by the provider's students beyond the threshold are expected to be reasonably comparable with those achieved in other UK providers. The team considered that the provider's academic regulations and policies should ensure that standards beyond the threshold are maintained. Based on the detailed scrutiny of the evidence, the review team considers that staff at the provider fully understand the provider's approach to maintaining such standards and have opportunities for engagement with peers and external experts in teaching and assessment activities. The review team considers the provider's plans for maintaining comparable standards appropriate, well documented and understood by staff members.

39 Therefore, the review team concludes, based on the evidence described above, that students who are awarded qualifications should 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.

40 The evidence underpinning this judgement reflects, with the exception of external examiners' reports, students' views, assessed students' work, and third-party endorsements, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

41 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.

42 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

43 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Assessment Policy and Procedure
- b Pearson Enhanced Quality Assurance and Assessment Handbook
- c Pearson Higher Nationals Business and Management Specification
- d Programme Specification
- e Pearson Qualification approval forms
- f Academic Board Code
- g Governing Body Code
- h Governing Body and Academic Board CVs
- i Email from Awarding Body re Development of Resources
- j Two meetings with Senior Staff
- k One meeting with Professional Support Staff
- l Two meetings with Academic Staff.

44 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 provider
- the review team did not consider any external examiner reports or assessed student work as none was available yet, because delivery of the programme has not begun.

How any samples of evidence were constructed

45 The review team considered the only partnership (Pearson), so sampling of partnership documentation was not applicable.

Why and how the team considered this evidence

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

47 The review team considered the academic regulations and associated plans and policies (HE Assessment Policy, and Procedure and Programme Specification) to assess that the provider ensures that the standards of Pearson awards are credible and secure.

48 The review team assessed the partnership agreement between the provider and Pearson to identify the basis for the maintenance of academic standards, and to confirm their alignment with the provider's academic regulatory framework.

49 The review team met with senior staff, academic staff and professional support staff to identify how they plan to discharge effectively their responsibilities towards Pearson.

What the evidence shows

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

51 The provider's plans for delivery, evaluation and review of its Higher National Programmes within the Programme Specification fully reflect the Pearson Higher National Business & Management Specification. The provider has developed robust and credible plans within its policies and procedures to meet its responsibilities to Pearson for the delivery of its Higher National Business & Management programme.

52 The provider has established an Academic Board which includes members who are current higher education practitioners from other institutions with strategic and contemporary knowledge of academic partnership working, and this is supported with appropriate terms of reference to oversee its ongoing responsibility for the maintenance of academic standards at all levels. There were firm arrangements in place at the time of the review visit whereby the provider will appoint an appropriately qualified and experienced Centre Head to manage its responsibilities for its higher education provision by January 2020. The review team is satisfied that the provider has credible, reliable and evidence-based approaches in place to secure standards.

53 The provider has established experience in fulfilling existing responsibilities under its approval agreements with Pearson for its further education provision and has a policy which demonstrates how the strengths of this existing arrangement will be contextualised to its higher education course. At the time that the review team visited, the provider's documentary evidence demonstrated that the necessary additional approval from Pearson for offering Higher Nationals was at an advanced stage with just a final check on resources to be completed by the end of November 2019. The review team is able to conclude that the Pearson partnership arrangement will be operated in line with the relevant regulations and policies.

54 Academic and professional support staff who met the review team fully understand their responsibilities under the accountable organisation's approval agreement. Governors and senior staff articulated their vision for the delivery and development of their higher education provision generally, and, in particular, demonstrated that they have robust and credible plans to secure the standards of the Pearson provision. They confirmed that their

intentions were to take a considered approach by starting with just one programme with a maximum of 50 students each in its Barking and Northampton sites. They were able to demonstrate to the satisfaction of the review team their understanding of their responsibilities under the partnership standard for delivery of the academic standards of the curriculum, and how these will be discharged.

Conclusions

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

56 The review team concludes that, where the provider works in partnership with other organisations, it has 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. The partnership agreement with Pearson is clear and comprehensive, up-to-date and reflects the provider's regulations or policies for the management of partnerships. The provider is experienced at delivering Pearson programmes for its further education provision and has set out credible plans for ensuring that the strengths of the existing further education processes are contextualised to the higher education environment and its specific requirements. Staff met by the team clearly understand their responsibilities for the maintenance of academic standards working in compliance with the partnership agreement. The review team therefore concludes that this Core practice is met.

57 The evidence underpinning this judgement reflects, with the exception of external examiners' reports, assessed students' work and third-party endorsements, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

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

59 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

60 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 The provider's Higher Education Assessment Policy and Procedure
- b Annual Review of Programmes
- c Academic Board Code
- d Higher Nationals enhanced quality assurance and assessment handbook
- e BTEC Higher Nationals Business & Management Specification
- f Programme Specification
- g Governing Body CVs
- h Website
- i Virtual learning environment (VLE)/Student Hub
- j Assessment Instruments
- k Governing Body Code
- l Pearson UK BTEC higher National Qualification Approval Form 2017
- m Two meetings with senior staff
- n Two meetings with academic staff
- o A meeting with professional support staff.

61 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:

- the review team did not consider any external examiner reports or assessed student work as the provider has not yet begun to deliver the programme. Similarly, there were no review reports from professional, statutory and regulatory bodies (PSRBs). There were no concerns raised from the analysis of written evidence, and thus no meetings with external experts were necessary.

How any samples of evidence were constructed

62 The review considered only one programme, so no sampling of approved programme records and course approval records was necessary.

Why and how the team considered this evidence

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

64 Academic policies and processes, including the Assessment Policy and Procedure, the Annual Review of Programmes Procedure, the Higher Nationals enhanced quality assurance and assessment handbook and the Higher Nationals Business & Management Specification, to identify how and when external experts are engaged in the maintenance of academic standards and assessment processes.

65 Plans for engaging external expertise in maintaining academic standards, and in assessment processes within Assessment Instruments, to confirm that these are credible, robust and evidence-based.

66 HND Programme Specification, Assessment Policy and Procedure, and Governing Body Code to assess the reliability, fairness and transparency of assessment and classification processes, and to ensure that external expertise has been utilised in line with regulations and policies.

67 Meetings with senior, academic and professional support staff to test their understanding of the requirements for the use of external expertise, and the provider's assessment and classification processes within both the Programme Specification and the provider's policies and processes (HE Assessment Policy and Procedure, and Annual Review of Programme Policy), along with student access to online information in the form of the website and VLE/Student Hub.

What the evidence shows

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

69 The Pearson Higher National Enhanced Quality Assurance and Assessment Handbook and its BTEC Higher National Business & Management Specification both require the provider to use external experts in maintaining academic standards and to incorporate external reference points in the assessment and classification processes for its HND in Business (Business Management) programme. The provider plans to achieve this through its HE Assessment Policy and Procedure and its Programme Specification which demonstrably require the application of external reference points on sector-recognised standards in the assessment and classification requirements; and the use of external expertise to ensure that academic standards are maintained in line with Pearson's Higher Nationals Enhanced Quality Assurance and Assessment handbook and its BTEC Higher Nationals Business & Management Specification. The provider's Higher National Qualification Approval form confirms that its policy and procedures will explicitly address the Pearson requirements (Higher Nationals Enhanced Quality Assurance and Assessment Handbook; BTEC Higher Nationals Business and Management Specification) for standards of assessment and classification and the appointment of an independent Pearson external examiner for the provider's programme. The review team is satisfied that the provider has plans for involving external expertise to ensure that academic standards are maintained and that assessment and classification processes incorporate relevant external reference points.

70 The provider's Higher Education Assessment Policy and Procedure and its Annual Review of Programmes Policy and Procedure require the application of academic standards informed by external reference points and the use of independent external expertise to ensure that its programme meets Pearson requirements (Higher Nationals Enhanced Quality Assurance and Assessment Handbook; BTEC Higher Nationals Business and Management Specification). For example, the provider's Higher Education Assessment Policy and Procedure explicitly requires such engagement with external expertise, externally referenced assessment and classification requirements to be reliably, fairly and transparently implemented within its procedures. This policy (Higher Education Assessment Policy and Procedure) is supported further by the provider's Internal Verification Policy and Procedure which requires robust internal verification processes to confirm that external reference points are fully addressed when maintaining academic standards. The provider's Higher Education Assessment Policy and Procedure also require all the assessment briefs for its Pearson programmes to be prepared on the currently recognised Pearson Assignment Brief Templates, and that all grading requirements apply assessment and classification requirements within Pearson's BTEC Higher Nationals Business & Management Specification. This policy, along with the provider's Annual Review of Programmes Policy, requires that reports from Pearson-appointed external examiners are considered and fully actioned within the provider's internal annual programme review processes. The provider's Academic Board has overall responsibility for monitoring and ensuring that external examiner feedback and recommendations are fully actioned by programme leaders. The review team can confirm that the provider's academic policies and procedures fully facilitate the use of external expertise in the maintenance of academic standards and require external reference points to be incorporated within assessment and classification processes.

71 The provider's approval documentation and the Programme Specification for the HND in Business (Business & Management) detail the key features of assessment within the programme and clearly describe the necessary information on programme structure and qualification credit values. They also include the required information on grading, highlighting the criteria for pass, merit and distinction to fully incorporate Pearson's BTEC Higher National in Business Programme Specification. The Programme Specification also includes transparent information on the role of internal and external verification in ensuring that assessment and classification processes are met. The review team can confirm that programme documentation contain evidence that the provider's assessment and classification processes for its HND in Business (Business and Management) address Pearson requirements and are fair, reliable and transparent.

72 In meetings with senior staff, academic staff, and professional support staff, the review team was able to confirm that the provider's staff understand the importance of external expertise. All staff spoke in particular of the need to engage with external subject expertise, including employer-related experts on the design, teaching and assessment stages of programme delivery. They were able to describe how external experts were involved in supporting them to shape the design of the provider's Higher National Business programme to embed employability priorities and in the selection of specific units, such as Marketing Fundamentals, within the programme. Senior staff described the extent of the external expertise within the governing body and how this expertise has been, and will be, used in overseeing the provider in the delivery of its Higher National Diploma in Business (Business and Management). Academic and professional support staff were also able to discuss the detail of assessments and classification processes set out within the Programme Specification and policies, and confirmed that this information will also be made accessible electronically on the VLE/Student Hub and on the provider website. The review team confirms that staff are fully aware of the priority to engage external expertise in the design, delivery, assessment and review programmes and understand the provider's processes for assessment and classifications.

Conclusions

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

74 The review team concludes that the provider uses external expertise, assessment and classification processes that are reliable, fair and transparent. The provider has robust and credible policies and processes for ensuring the use of external expertise in the maintenance of academic standards. The information on assessment and classification within the Programme Specification is reliable, transparent and fair. Plans for the use of Pearson's external examiners and their reports are robust and credible. Appropriate subject-specific and independent external expertise is used at the programme approval stage, and at governance level there is a demonstrable depth of current external higher education expertise within the governing body. Programme documentation and policies on assessment procedures and annual monitoring processes ensure that regulations for assessment and classifications are fair, transparent and reliable. All staff understand their responsibility for ensuring that the external expertise is used to inform programme design. They are also fully aware of classification processes within programmes. The review team concludes therefore that this Core practice is met.

75 The evidence underpinning this judgement reflects, with the exception of external examiners' reports, students' views, assessed students' work, and third-party endorsements, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. Therefore, the review team has a high degree of confidence in this judgement.

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

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

77 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

78 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Academic Board Code
- b Access and Participation Statement
- c Equal Opportunities Policy Statement
- d Admissions Policy
- e Policy for Admissions Appeals
- f Equal Opportunities Statement
- g Pearson UK BTEC High National Qualifications Approval Form
- h Pearson BTEC Higher Nationals Guide to Quality Assurance and Assessment
- i Student Registration and Certification Policy
- j HND Business & Management Programme Specification
- k Student Protection Plan
- l Course and Tutorial Plan
- m The job description for the Admissions Manager
- n Higher National Business & Management Specification
- o Information for applicants to the HND Business & Management Programme
- p Provider's mapping of processes to consumer protection requirements
- q Website
- r VLE/Student Hub
- s Two meetings with senior staff
- t A meeting with professional support staff whose role will entail engagement with the admissions process
- u Two meetings with academic staff, including the academic Programme Leader who will be involved in recruitment and admissions systems.

79 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:

- the review team confirmed with the provider that it does not use recruitment agents. There were no admissions records to examine, as the provider has not yet recruited to this programme, and this also means that the review team was unable to assess students' views about the admissions process.

How any samples of evidence were constructed

80 The provider has only one programme, so no sampling of approved course documentation was necessary.

Why and how the team considered this evidence

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

82 The team considered the role of the Academic Board, alongside the provider's academic regulations, policies and procedures for the recruitment, selection and admission of students (Access and Participation Statement, Programme Admission Policy), the policy for admissions appeals, equal opportunities and inclusivity, and safeguarding in order to identify how the provider facilitates an inclusive, reliable and fair admissions system, and to test how it handles complaints and appeals. The review team also tested the policies to ensure that they were aligned with Pearson's requirements (Enhanced Quality Assurance and Assessment Handbook).

83 The team assessed the approach to the recruitment of students in the form of the Access and Participation Statement and the Programme Admission Policy, and the processes for dealing with student applications, including policies covering Programme Admission Appeals, Student Registration and Certification, Extenuating Circumstances and Equal Opportunities, in order to verify the credibility and robustness of the plans, and to ensure that admissions systems are reliable, fair and inclusive.

84 The team assessed how the provider intends to assure the currency and accuracy of information for applicants, and whether the information provided for applicants is transparent, inclusive and fit for purpose, and is consistent with the course information booklet, template offer letter and the BTEC Higher Nationals Business & Management Specification.

85 Approved course documentation, encompassing the Programme Specification and the website/VLE, to ensure their alignment both with Pearson requirements (Higher Nationals Business & Management Specification), and with the provider's own Course Information Booklet.

86 The review team met with senior staff to test their understanding of their responsibilities for ensuring appropriate systems are in place to ensure a fair, inclusive and reliable admissions experience. The review team also met with academic and professional support staff to test their understanding of how the process will work in practice and whether they can articulate how the provider's approach to inclusivity is manifest in the admissions process.

What the evidence shows

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

88 The provider's Higher Education Programme Admission Policy and Procedure details the procedure for admitting students. The Academic Board (Academic Board Code) has oversight of the admissions process and reviews the efficacy and suitability of the

process and criteria for the admission of students and the admissions policy and procedures to ensure they remain reliable, fair and inclusive.

89 The Admissions Policy and Procedure is comprehensive and reliable, because it includes detailed information on how admission decisions should be made, the definitions of the different types of offers and the opportunities for students to complain or appeal. All applicants whose profiles meet the admission criteria for a higher education programme will be offered a telephone, video or face-to-face interview, according to the applicant's preference, with the Programme Leader, or other tutor or manager, to assess their suitability (Admissions Policy and Procedure). Both the Access and Participation Policy and Admissions Policy and Procedure require the specific training of staff to give such advice and guidance to applicants. Outcomes of interviews will be recorded on the applications pro forma and submitted to a Results Admissions Panel. Admissions decisions are the responsibility of these panels, each consisting of the Programme Leader, at least two members of the programme team, and a member of the Programme Support Team. Students will be advised of the decision within 10 working days of the interview. Successful applicants will be required to provide evidence of the academic qualifications claimed in their application, for scrutiny by the Results Admissions Panel. In addition, where students are claiming recognition of prior learning (RPL) the Results Admissions Panel will consider the relevance, sufficiency, authenticity and currency of the evidence supplied, before making an admission decision (Admissions Policy and Procedure). Unsuccessful candidates will be offered a telephone feedback session, along with a clear written notification of their right to appeal and the process to be followed, under the Admissions Policy and Procedure and within the Higher Education Programme Admission Appeals process which provides for the establishment of a specific Admissions Appeals Panel to adjudicate, with a further appeal to the Director of Studies if necessary.

90 The provider also provides for successful and unsuccessful applications to be sampled to ensure ongoing fairness and inclusivity, and for the outcome of the review of the sample to be reported to the Academic Board to provide continuing assurance and oversight as to the effectiveness of admissions arrangements in promoting inclusivity. The Admissions Policy and Procedure underscores the provider's commitment to align with the Pearson Higher National Business & Management Programme Application and to recruit with integrity and in accordance with each applicant's qualifications. The provider's Equal Opportunities Statement supported by the Safeguarding Policy further ensures that there are specific processes in place to address any safeguarding concerns relating to admission. The review team concludes that these academic policies and procedures ensure that the provider's admission systems are reliable, fair and inclusive and fully aligned with Pearson requirements in terms of the Enhanced Quality Assurance and Assessment Handbook.

91 The provider is committed to providing information which meets students' requirements, and the review team was able to examine the new higher education website that is being developed to provide all applicants with detailed and relevant information about the provider and its facilities and the programme. The review team is satisfied that the breadth and depth of the information made available, encompassing detailed information about the provider and its facilities and courses, along with policies and procedures, programme specifications and fact sheets, provides a rich resource in this regard and is sufficiently transparent, accessible and fit for purpose to facilitate student access to information about the programme. There are also arrangements in place for a senior member of staff to check the currency and accuracy of information for applicants to assure compliance with consumer protection requirements, via a specific mapping exercise (Consumer Protection Law Guidance and Template). The provider's Programme Specification explicitly includes information on admissions which fully aligns with Pearson's requirements (Higher Nationals Business and Management Specification). Information for applicants in the Course Information Booklet is transparent, accessible, inclusive and fit for

purpose and the entry requirements are fully consistent with both the provider's policy and Pearson requirements in the Higher Nationals Business & Management Specification.

92 The aims within both the provider's Statement of Equal Opportunities and the Widening Access Statement reflect the provider's plans to target recruitment from under-represented groups. The terms and conditions for admissions clearly state what applicants can expect as students from their studies with the provider. The Student Registration and Certification Policy and Procedure, and the Course and Tutorial Plan have detailed information on student registration with Pearson. The provider's Higher National Business & Management Programme Specification includes information on general entry requirements and specific guidance on mathematics and English language in line with Pearson requirements in the Pearson Higher Nationals Business & Management Specification.

93 The provider's Higher Education Business Plan takes a considered approach to student recruitment with an initial focus on student communities within further education programmes offered by the provider. The Admissions Manager has specific responsibilities in this respect, both for providing staff training and professional development and acting as a source of expertise to address more complex admissions queries, as well as providing effective oversight of the whole admissions process on behalf of the Director of Studies and the Academic Board via the production of periodic reports. Plans in this regard include the identification of training needs which would empower admissions officers to deliver the admissions process and monitoring the capacity and capability of the team with regard to performance management, induction, training/development and appraisals.

94 Senior staff in meetings with the review team advised that the initial cohort will be primarily recruited from students on Level 3 Diplomas delivered by the provider, followed by steady growth over the next five years, as set out in the Business Plan. Senior staff were able to clearly explain the plans for the ongoing monitoring of information on recruitment and admissions at senior level to ensure the admissions systems are reliable, fair and inclusive. Senior staff know the requirements for student registration set out by Pearson and described how the relevant policies and systems in place would work to meet these requirements. Academic and professional support staff are fully aware of the recruitment plans and Corporate Strategy and how the admissions system is to be put into practice supported by relevant policies and procedures. They understand the significance of processes being fair and inclusive and all staff confirmed in meetings that they are fully committed to inclusivity and widening participation. Academic staff involved in admissions have a clear understanding of their role and the associated processes related to interviewing and decision-making and are aware of their responsibilities to implement systems with integrity and which support inclusion.

Conclusions

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

96 The review team concludes that the provider has a reliable, fair and inclusive admissions system, because its policies and procedures are clear and comprehensive and are fully aligned to meet Pearson requirements. The information for applicants is transparent, accessible and fit for purpose, and is consistent with the provider's policy and Pearson's expectations. The system includes ongoing review of the recruitment and admission processes and related information at senior level to ensure the system remains

reliable, fair and inclusive and compliant with consumer protection obligations. The information within the programme documentation related to recruitment and admissions, and entry criteria is consistent and demonstrably promotes fairness and inclusivity. The provider has realistic recruitment plans and the admissions system is underpinned by guidance and support from key staff. All staff are fully aware of their respective roles and responsibilities linked to recruitment and admissions and are trained appropriately. The review team concludes, therefore, that this Core practice is met.

97 The evidence underpinning this judgement reflects, with the exception of admissions records and students' views, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. Therefore, the review team has a high degree of confidence in this judgement.

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

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

99 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

100 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 The academic policies and regulations
- b Annual review of programmes policy
- c Academic Board Code
- d Governing Body Code
- e Programme Specification
- f Pearson UK BTEC higher National Qualification Approval Form
- g Pearson Enhanced Quality Assurance and Assessment Handbook
- h Higher Nationals Business & Management Specification
- i Peer Review Policy
- j Peer Review Form
- k Academic staff Approval Policy
- l Continuing profession development log
- m Business Plan
- n Corporate Strategy
- o Assessment Instruments
- p Schemes of work
- q Website
- r VLE/Student Hub
- s Two meetings with senior staff
- t Two meetings with academic staff.

101 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 provider
- the review team did not consider any external examiner reports, views of students or undertake any observations of teaching as programme delivery has yet to begin.

How any samples of evidence were constructed

102 As the review only encompassed one programme, no sampling of approved programme records and course approval records was necessary.

Why and how the team considered this evidence

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

104 The review team considered the provider's academic policies and processes, including Pearson Enhanced Quality Assurance and Assessment Handbook and the Higher Nationals Business & Management Specification to identify its approach to designing and delivering high quality courses.,

105 The review team examined approved course documentation including the Programme Specification, Assessment Instruments and Schemes of work, to test that course elements in relation to curriculum design and delivery, including learning, teaching and assessment approaches, are of high quality and will enable students to demonstrate the intended learning outcomes.

106 The review team had two meetings with senior staff to test their understanding of how they plan to ensure that processes are in place at provider level to enable the delivery of high-quality provision. The review team also met academic and professional staff who were involved in the design of the programme and will also be involved in the delivery when the programme is offered, to test their understanding of processes for course design and delivery.

What the evidence shows

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

108 The programme to be offered is a Pearson Higher National qualification in Business and Management, and the process for, and outcomes of, the selection of modules from the approved diet is explained within the Programme Specification as reflecting the strategic priorities of encouraging entrepreneurship, and building up skills and expertise to benefit the local economies. The provider's vision to ensure the design and delivery of high-quality courses is firmly articulated within its Corporate Strategy. It prioritises the plans for the next five years to ensure that higher education programmes are flexible, inclusive and provide opportunities for students to develop critical and analytical skills. The provider's business plan for higher education recognises this by signifying the need to ensure the staffing structure to support this vision, in terms of both numbers of staff and their qualifications. The provider's Programme Specification for the HND in Business & Management is comprehensive and clear in describing how the provider will deliver the programme and includes information on the plans for teaching, learning and assessment, including the engagement of guest speakers to directly engage students with practical aspects of business operation and management. The programme design and delivery aims to reflect both the needs of the students and the local economy as a whole.

109 The Higher Education Annual Review of Programme Policy ensures the quality of programmes are reviewed annually. For example, the policy provides for reviewing feedback

from academic and professional support staff on, among other areas, good practice within the different functions and also an update of whether the assessment processes were amended during the year. The Academic Board, as a priority, plans to put in place actions to ensure continuous improvement in academic performance, through continuous review of recruitment, retention and achievement. The Governing Body is primarily responsible for ensuring that the provider's policies and procedures are effective in achieving key institutional objectives.

110 The provider's higher education Assessment Policy and Procedure highlights that the Academic Board is responsible for the implementation and oversight of the assessment process. It requires students to be provided with clear assessment tasks, which enable them to provide appropriate evidence of achievement of outcomes. The Assessment Policy prioritises the need for a valid, reliable and inclusive assessment process designed to enable students to demonstrate the intended learning outcomes.

111 The assessment plans focus on specific assessment strategies linked to practical tasks, including case studies, reflective diaries and presentations. The sample assignment for the Marketing Essentials Unit, for example, requires students to prepare and deliver a presentation, produce a report and design a marketing plan for an organisation. The delivery of the programme is planned to be supported by a comprehensive virtual learning environment and Student Hub (VLE) specifically for higher education students. On this basis, the review team concludes that the teaching, learning and assessment design would enable students to demonstrate the intended learning outcomes.

112 The teaching and learning strategies within the Programme Specification are designed to develop students' employability and transferrable skills, and this is enabled by the careful selection of the modules to be delivered, and an emphasis on delivery which is based on 'real-life' and employment-related scenarios. The provider's detailed schemes of work clearly signpost delivery approaches, content, and learning outcomes to be covered and identify how students will be engaged through group and tutorial activity. The provider's schemes of work and sample assessment instruments have been carefully designed to incorporate plans for initial teaching sessions followed by planned formative and summative assessment periods to facilitate high quality learning and assessment experiences.

113 Academic staff have been and continue to be appointed against specific job descriptions and plans are in place to support all staff through a comprehensive peer review process, entailing an annual review meeting with the Programme Leader or other qualified member of staff. The effectiveness of the peer review process is planned to be monitored within the annual programme review by the Academic Board. Scheduled continuing professional development (CPD) activities are to be undertaken by all academic staff, including obtaining Higher Education Academy membership and attendance at external seminars (Academic Staff Approval Policy, Academic Staff Induction Checklist) to ensure the delivery of high-quality courses. The review team concludes that the provider has credible, robust and evidence-based approaches for designing and delivering high-quality courses.

114 Senior staff were able to explain to the review team how the initial design of the programme involved external practitioners and how they plan to involve current practitioners as guest speakers when the programme is delivered. They were able to explain how they intend to implement the strategic and business priorities for achieving high levels of student satisfaction, continued commitment to widening participation and driving integration with local partners to deliver the best employment outcomes. Academic and professional support staff described how the Higher National Business & Management Diploma programme was designed, and explained that specific units, such as Marketing Fundamentals, Financial Accounting, Entrepreneurship and Small Business Management, have been carefully selected to meet the priorities of the identified student market which includes those who plan

to set up businesses of their own. All staff were able to demonstrate a shared understanding of what a 'high-quality course' means for the provider. This is expressed in terms of the institutional priority for developing students' employability and entrepreneurial skills while also meeting the key academic outcomes. The review team is confident that staff spoken to know how to ensure courses are of high quality.

Conclusions

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

116 The review team concludes that the provider designs and delivers high-quality courses. Approved course documentation, utilising the Pearson-developed framework, indicates that the teaching, learning and assessment design enable students to demonstrate the intended learning outcomes, and the VLE and Student Hub will also make significant contributions to the delivery of high-quality programmes. Senior staff are fully aware of their responsibilities and are able to describe their vision for ensuring the design and delivery of courses are of high quality. They plan to further facilitate this by including current practitioners within programme design and delivery, and by engaging current practitioners. Academic and professional staff fully understand the policies and processes, and future plans in place to support the design and delivery of higher quality programmes. All staff are able to articulate what 'high quality' provision means for the provider, signifying the development of students' employability and transferable skills, along with relevant academic outcomes, and could show how the provision meets that definition. The review team therefore concludes that this Core practice is met.

117 The evidence underpinning this judgement reflects, with the exception of external examiners' reports, students' views, and observations of teaching and learning, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

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

119 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

120 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Academic staff Approval Policy
- b Academic staff Induction Checklist
- c Peer Review Policy
- d Peer Review form template
- e Continuing professional development (CPD) log
- f Training needs analysis
- g Training Needs Matrix
- h Business Plan, Organisation Chart & Student Protection Plan
- i Organisation Charts
- j Staff Listing
- k Corporate Strategy 2019-2024
- l Staff CVs
- m Job Descriptions of HE Lecturer and Programme Leader
- n Module Staffing, Job Description for Director of Studies, Organisation Chart
- o Job Description of Personal Tutor
- p Head of Digital Learning Job Description
- q Two Meetings with senior staff
- r Two Meetings with academic staff
- s One meeting with professional support staff.

121 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 provider
- the review team did not consider student views in relation to the suitability of academic and support staff, nor did they undertake any observations of teaching and learning, as the delivery of the programme has yet to commence.

How any samples of evidence were constructed

122 The review team considered all available staff CVs and job descriptions, so sampling was not necessary.

Why and how the team considered this evidence

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

124 The team considered the provider's policies in relation to the appointment (Academic Staff Approval Policy), induction (Academic Staff Induction Checklist) and development (Peer review process; CPD and Staff Development Log), and Training Analysis (Training Needs Analysis, Training Needs Matrix) of academic staff to assess whether these policies are likely to support achievement of a high-quality academic experience.

125 The plans for recruitment (Business Plan, Corporate Strategy) and the staffing structure of the provider (Organisation Charts, Staffing List) was examined to assess whether there are, or are likely to be, sufficient appropriately qualified and skilled staff to deliver a high-quality learning experience.

126 Job descriptions and CVs were examined to assess whether roles and posts are consistent with the planned staffing structure and to verify that staff already in post are appropriately qualified and skilled to perform the roles identified.

127 Meetings with senior staff, to describe and update on the plans for recruiting staff for the higher education programmes, academic and professional support staff to test that staff are appropriately qualified and skilled.

What the evidence shows

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

129 The provider has commenced the process of recruiting new staff, with a projected completion date of January 2020. The programme will be delivered by a cohort of experienced and qualified higher education professionals, with current experience in college or university teaching, and the team was able to verify this by reference to CVs, and in meetings with the academic team.

130 The provider's policy for approval of the appointment of staff sets out the responsibilities for shortlisting, interviewing, appointing and inducting staff in the form of an academic staff induction checklist. Shortlisting is undertaken by a human resource specialist against agreed job descriptions and all qualifications for short-listed candidates are checked prior to interview by a panel of senior staff. Following appointment, there is a detailed academic staff induction checklist in place, overseen by the Programme Leader and monitored by the Human Resources Manager. Annual teaching observations will be carried out by experienced staff under the Peer Review Policy and Peer Review Form, to seek assurance that staff are working at the right level, and display currency. The provider also has credible and realistic plans to provide academic staff with opportunities for professional development, including an expectation of achievement of Fellowship with the Higher Education Academy within the Academic Staff Approval Policy. The provider also has a

process for an annual peer review of higher education teaching leading to individual training needs analyses to support staff to develop their skills and contribute to the ongoing development of a high-quality academic provision.

131 The provider's organisation chart includes Board of Governors, Principal, and four senior roles leading on quality assurance, academic studies, marketing, and administration with appropriate staff within each of these functions. The Higher Education Business Plan details plans to initially recruit 10 staff who are appropriately qualified to deliver higher education and this is currently being addressed and targeted to be completed by the end January 2020. The recruitment process includes the identification of training needs, and the training matrix seen by the team provides evidence of effective institutional practices already in place. The team is satisfied that the current staffing structure and plans for further recruitment are robust and credible to support the provider in delivering high-quality learning experiences for students.

132 The job descriptions for Director of Studies, Programme Leader, lecturers and personal tutors demand that the skills and qualifications match the tasks and responsibilities expected from the roles. For example, the job description for lecturers require relevant academic qualifications, curriculum experience and prioritises the achievement of teaching qualifications once appointed for those who do not have these qualifications. By contrast, the Programme Leader, besides having academic and curriculum experience, also has to have the ability to lead and manage programmes and programme teams. The CVs of existing staff provide evidence that they hold appropriate qualifications and skills for the planned roles and have currency in teaching at Level 4 and above. The review team is satisfied that the provider's recruitment practices are appropriate to enable it to ensure that staff allocated to the respective roles are appropriately qualified to undertake them.

133 Senior staff in meetings updated the review team on the ongoing recruitment plans and confirmed that all staff are planned to be appointed by January 2020. Senior staff also confirmed that separate appointments will be made for staff who are to undertake personal tutor roles. Senior staff explained that they plan to have an appropriate balance of teaching and professional support staff across the roles to ensure a high-quality learning experience for students.

134 Academic and professional support staff confirmed the institutional practice of supporting new staff with mentors and gave examples of professional staff training on safeguarding and mental health awareness. They were also able to describe how the existing peer review process would work within higher education. The review team was able to test staff knowledge on staff recruitment processes in place, to assess staff qualifications, skills and experiences, and conclude that those met were appropriately qualified and skilled to perform their roles effectively.

Conclusions

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

136 The review team concludes that the provider has sufficient appropriately qualified and skilled staff to deliver a high-quality academic experience. The provider has already appointed key academic staff to deliver the programme, and those appointed to date form a cohort of experienced and qualified higher education professionals, with current experience

in college or university teaching. The provider's recruitment policies and processes are comprehensive and able to support the provider in recruiting appropriately qualified and skilled academic, management and professional support staff to deliver a high-quality academic experience. The staff induction process is detailed and managed and overseen by senior staff. The provider's plans for recruitment to the higher education curriculum area are robust and credible. Ongoing support is planned to ensure that staff get the training they require to undertake their roles and to develop further. The plans provide for an appropriate balance between teaching and professional support. At the time of the review meeting, the review team met with key academic and professional support staff already in post, who confirmed the relevance and appropriateness of their qualifications and experience to their roles, and the planned opportunities for further professional development. The review team concludes, therefore, that this Core practice is met.

137 The evidence underpinning this judgement reflects, with the exception of students' views, and observations of teaching and learning, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

138 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.

139 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

140 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Academic Board Code
- b Board of Governors Code
- c Business Plan
- d Photographs of Barking Campus
- e Organisation Chart
- f Corporate Strategy 2019 -2024
- g Website
- h VLE/Student Hub
- i Module Staffing, Job Description for Director of Studies, Organisation Chart
- j Central Administrator Job Description
- k Admissions Manager Job Description
- l Head of Digital Learning Job Description
- m Head of Administration Job Description
- n Two meetings with senior staff.

141 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 provider
- student views in relation to the suitability of facilities and student support were not available as delivery of the programme has not yet commenced.

How any samples of evidence were constructed

142 Delivery of the programme has yet to commence so no sample of students' views could be collected. The review team considered all available staff CVs and job descriptions, so sampling was not necessary.

Why and how the team considered this evidence

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

144 The review team considered the sufficiency of resources, including the Student Hub/ VLE, which provides access to electronic learning resources in the form of books and journals relevant to the course, and other learning resources.

145 The team considered the organisational structure and related job descriptions for management and professional support staff (Central Administrator Job Description; Admissions Manager Job Description; Head of Digital Learning Job Description) for the higher education programme to determine whether these are consistent with delivery of a high-quality academic experience.

146 Meetings with senior staff were used to check and confirm the progress in implementation of plans.

147 Direct assessment of the learning environment at Northampton, and the digital learning environment (Website, VLE/Student Hub), together with photographic evidence for the Barking campus was used to test whether these are likely to facilitate a high-quality academic experience.

What the evidence shows

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

149 The Business Plan and Corporate Strategy for the development of the higher education provision are focused, credible and realistic, being underpinned by the existing further education provision. The provider understands its responsibilities for delivering higher education provision and has already addressed the main requirements for a supporting infrastructure, with further realistic plans in place (Corporate Strategy) to further develop this across the duration of a five-year strategic plan. This includes additional provision of library resources, including electronic resources (e-books) and licenses, as well as further recruitment to dedicated higher education posts within the overarching student support infrastructure already in place for further education students.

150 The physical facilities on both campuses planned for the delivery of higher education programmes are appropriate to accommodate the planned student numbers and the provider's Business Plan identifies the need to address the proportionate increase in facilities as student numbers increase. The provider's Corporate Strategy, for example, prioritises the strategic objectives of achieving high levels of student satisfaction, continuous improvement in this experience and the development of targeted and digital support.

151 The provider also has suitable academic and corporate governance arrangements to ensure that there is ongoing review of the appropriateness of the facilities to enable students to have a high-quality academic experience. The Strategic Plan has a commitment to further create a state-of-the-art learning environment for students through innovative use of technologies and teaching methods. The team is satisfied that the provider's approaches and plans to support students are sufficiently credible and robust to enable a high-quality student academic experience.

152 All students will have access to a well-developed online library available through the VLE/Student Hub, together with a small higher education library facility at each campus. Accessibility is a key focus, with the necessary online resources including online lectures and free access to specific software through the VLE/Student Hub. The team was able to review the ongoing developments within the provider's website, providing current developments, blogs and the comprehensive developments within the VLE/Student Hub which supports students in developing academic skills, such as good academic practice and referencing. The VLE/Student Hub also includes policies and procedures covering the availability of student support services, including the library, careers advice and pastoral support. The review team can confirm that the provider's current and planned VLE, electronic resources and library facilities are appropriate and sufficient, and the developments planned will further support students in their studies.

153 The Principal and the Director of Studies undertake a number of key functions and have specific responsibilities at an institutional level in relation to the programmes, maintenance and upkeep of resources, and for the establishment of high-quality and timely student support as evidenced within the Organisation Chart and job descriptions. They are supported by a team of professional support managers and developers, including a Central Administration Manager, Admissions Manager and Head of Digital Learning, whose role is to develop services and curriculum and other relevant content which is made available to students through the VLE and Student Hub. The review team concludes that the existing organisational staffing structure and planned further appointments within the Business Plan with the appropriate qualifications and skills set out in job descriptions, including specific higher education personal tutors, will enable the provider to deliver a high-quality academic experience for its higher education students.

154 In meetings with the review team, senior staff explained how they planned to undertake their roles and responsibilities to support the development of a higher education experience for students. They provided examples of how they intend to support staff in performing their roles, which included providing all teaching staff with laptop computers for teaching purposes and access to online delivery. Senior staff also identified the plans for strategic development, with planned growth to accommodate and support the projected increase in student numbers over the course of the five-year strategic plan. Senior staff were also able to confirm the key priorities within the provider's Five-Year Corporate Strategy in this regard, including the scaling-up of e-resources to support different learning styles, and an overall policy of gradual planned and staged growth in the size of the provision. The review team concludes that the staff roles identified are consistent with the delivery of a high-quality learning experience.

155 The team reviewed physical and online facilities and resources for learning and student support and found that the teaching facilities in terms of rooms for lectures and seminar and private study areas are appropriate for ensuring a high-quality academic experience for planned student cohorts. The review team is satisfied that existing resources, including the specific developing digital learning environment, and future development plans outlined in the Business Plan and Corporate Strategy will enable the provider to offer a high-quality academic experience for its students.

Conclusions

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

157 The review team concludes that the provider has sufficient and appropriate facilities, learning resources and student support services to deliver a high-quality academic experience. The review team assessed the facilities and staffing structures, and is satisfied that online resources and access to the electronic library are well developed and in line with sector practice, that existing support staffing structures are appropriate, and that relevant staff understand their roles and responsibilities. The plans and processes in place to address ongoing requirements for increases in facilities and staffing are appropriately situated with senior managers and within academic governance arrangements. The review team is satisfied that these plans are credible and robust, and enable the provider to further develop the facilities, library resources, online support and staffing to enable students to have a high-quality academic experience, and to facilitate the delivery of successful academic and professional outcomes for students. The review team concludes, therefore, that this Core practice is met.

158 The evidence underpinning this judgement reflects, with the exception of students' views and third-party endorsements, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

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

160 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

161 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Academic Board Code
- b Governing Body Code
- c Programme Committees Policy
- d Student Representative election process
- e Annual Review of Programme Policy
- f Student Feedback Policy
- g Student satisfaction Survey for FE 2018-19
- h Learner approach policy
- i Session Feedback Policy
- j Two meetings with senior staff
- k Two meetings with academic staff
- l A meeting with professional support staff.

162 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:

- the review team did not consider the views of the students concerning the provider's engagement with them in relation to the quality of their student experience, or view any examples of the provider changing the learning experience as a result of student engagement, because delivery of the programme has yet not begun.

How any samples of evidence were constructed

163 As the provider only offers one programme, the HND in Business & Management, no sampling was necessary.

Why and how the team considered this evidence

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

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.

165 The team considered the policies, including the Codes for the Academic Board and Governing Body, terms of reference for Programme Committees, and election processes to assess how the provider plans to actively engage students in the quality of their educational experience.

166 The team considered the credibility, robustness and evidence-based nature of the provider's plans (Annual Review of Programme Policy, Student Feedback Policy, Student Satisfaction Survey, Learner Approach Policy, Session Feedback Policy) for engaging students individually and collectively in the quality of their education.

167 Meetings with senior staff, professional support staff and academic staff were held to seek assurance that they understand their role in relation to actively engaging students, individually and collectively, in the quality of their educational experience.

What the evidence shows

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

169 The provider has planned for robust student representation within its academic governance arrangements. The composition of both the Academic Board and Governing Body, as set out in their respective Codes of Conduct, includes the requirement for at least one higher education student member as a full member. The Higher Education Programme Committee Meetings Policy and Procedure makes explicit reference to plans to engage students actively in shaping their academic experience and the business of the Committee. The Programme Committees are planned to meet quarterly and will include two higher education student representatives for each cohort. Student representative election processes are set out in a detailed policy, and this provides for full and fair elections to be held early in each academic year, over a four-week period, followed by a tailored training programme for the elected individuals. The review team is satisfied that the provider's approach facilitates the collective engagement of higher education students in the quality of their educational experiences.

170 There are also detailed plans within the Student Feedback Policy to carry out student surveys, led and coordinated by the Director of Studies, who will ensure that feedback from students is fed into relevant Programme Committee meetings, the annual programme monitoring process and the Academic Board. The provider's approach to student surveys recognises the need to use different and timely communication methods to enable engagement with students on different study modes. In this respect, the provider's plans are informed by current approaches within its further education practice of using the online platform of the VLE/Student Hub and randomised telephone surveys to facilitate maximum student participation. Such feedback will be gathered from personal tutors' sessions, teaching sessions and student surveys, and reported through annual programme reviews, which are considered by the Academic Board which has responsibility for overseeing and monitoring all resulting actions. The review team concludes that the provider's plans to identify student views, individually and collectively, about their engagement in the quality of their educational experience are robust.

171 Senior staff in meetings with the review team were able to explain how student involvement within the Governing Body and the Academic Board would operate. Academic staff explained how student feedback would be collected after induction and at the end of modules, and followed up directly with students in classes. Professional support staff

confirmed that student representatives will be trained by the Director of Studies and were able to explain why current practices employed within its further education provision for engaging students are effective and how they would be contextualised for higher education. They discussed how the Higher Education Programme Committees would work and how students would be engaged as representatives. The review team is satisfied that staff are fully aware of the provider's plans, policies and procedures on student engagement.

Conclusions

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

173 The review team concludes that the provider has plans to actively engage students, individually and collectively, in the quality of their educational experience. The provider's policies and processes require student representation within deliberative committees, and arrangements are in place for the election and training of student representatives. The plans for actively engaging individual students in the quality of their educational experience are comprehensive and inclusive. The approach to engaging students will, in the view of the review team, provide credible, robust and evidence-based approaches for engaging students, individually and collectively. Staff are fully aware of the policies and planned processes in place for engaging higher education students and explained the importance of engaging with the student voice to support a culture of continuous improvement. The review team is satisfied that the provider's plans for engaging students individually and collectively are realistic, credible and comprehensive. The review team concludes, therefore, that this Core practice is met.

174 The evidence underpinning this judgement reflects, with the exception of students' views and evidence of impact of the provider's approach to student engagement, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

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

176 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

177 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Complaints Policy
- b Complaints Procedure flowchart
- c Student complaints standard forms
- d Student Academic Appeals Policy
- e Student Academic Appeals standard form
- f Pearson Higher Nationals Guide to Quality Assurance and Assessment
- g Website
- h VLE/Student Hub
- i Student Handbook
- j Complaints and Appeals flowchart
- k Two meetings with senior staff
- l Two meetings with academic staff
- m Meeting with professional support staff.

178 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:

- the review team did not consider any complaints and appeals. This is because the provider has not yet recruited any students or commenced delivering the programme.

How any samples of evidence were constructed

179 As there are no complaints and no appeals, sampling was not necessary.

Why and how the team considered this evidence

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

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.

181 The team considered the Higher Nationals Enhanced Quality Assurance and Assessment Handbook, policies and procedures: Student Complaints; Student Academic Appeals and its standard forms for student complaints and student academic appeals to confirm that these are fair and transparent, and accessible to all students.

182 Information available to students on complaints and appeals in the student handbook and on the website and VLE was reviewed to assess whether it is clear and accessible.

183 The team discussed with senior staff, professional support staff and academic staff the arrangements for processing complaints and appeals to test their understanding of these processes and their roles and responsibilities in implementing the processes.

What the evidence shows

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

185 The provider has designed and put into place a comprehensive procedure detailed within a structured Student Complaints Policy. This incorporates an informal stage, followed by three formal stages through which students can progress complaints and appeals, each of which has specified timescales for completion. This is clearly set out in a Complaints Procedure Flowchart made available to students, for ease of reference and transparency. The first stage (informal) is dealt with at programme level, while the second stage is a formal review involving a senior manager independent of the programme. The third stage is carried out by the Director of Studies, and from here complaints can be escalated to the fourth and final stage of the internal process to the Chief Executive Officer if the complainant remains dissatisfied. There is also formal provision within the Student Complaints Policy for the complainant to engage with the Office of the Independent Adjudicator (OIA) once the internal processes have been exhausted.

186 There is a similar process for academic appeals and a specific Academic Appeal Form which guides students through the process. The appeals process also covers four stages with Stage 1 involving the consideration of the appeal, Stage 2 formal conciliation, Stage 3 involving formal review by the Director of Studies and Stage 4 involving the Appeal Review Panel. The grounds for appeal are clearly laid down. The review team is able to confirm that the policies and processes in place for both complaints and appeals are comprehensive, fair and transparent, and accessible to all students, such as to deliver timely outcomes.

187 The provider has included the details of both the complaints policy and the appeals policy within the Student Handbook and the website and student hub on the VLE to ensure that students can readily access this information. Both of these information sources are appropriately detailed, and the introduction of a diagrammatic representation of the process in the form of the complaints and appeals flowchart augments this, and further demonstrates the commitment of the provider to the provision of clear and accessible information to all students. Information on complaints and appeals is also shared with the students as an integral part of the induction process. The review team can confirm that the information planned to be provided to students on complaints and appeal is detailed, clear and accessible to both potential and actual complainants.

188 Senior staff were able to discuss in detail the four stages of the complaints and appeal policies and explain how the four stages are planned to work. They highlighted that the priority will always be to resolve matters informally. Academic and professional support staff are also fully aware of the policies and confirm their awareness of the provider's priority to settle to address student concerns at the earliest stage possible. The review team can confirm that all staff are fully aware of the provider's policies and processes and are able to explain how the process is to be implemented.

Conclusions

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

190 The review team concludes that the provider has fair and transparent procedures for handling complaints and appeals which are accessible to all students. The provider's policies and staged procedures offer students a fair and transparent process for addressing both their complaints and appeals, which will deliver timely outcomes. Both policies have a four-stage process but with appropriate distinctions to highlight the differences in the potential outcomes from the two processes. All staff are fully aware of the policies and processes and are able to explain how they will work. Information on the policies and procedures is clearly set out within the student handbook and made available within the VLE. The provider's processes for student complaints and appeal are definitive, fair, transparent and accessible, and the review team concludes, therefore, that the Core practice is met.

191 The evidence underpinning this judgement reflects, with the exception of students' views and examples of complaints and/or appeals, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

192 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.

193 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

194 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Academic Board Code
- b Governing Body Code
- c Minutes of Governing Body
- d Programme Specification
- e Higher Nationals Enhanced Quality Assurance and Assessment Handbook
- f Higher Nationals Business & Management Specification
- g Annual Review of Programme Policy
- h Pearson UK BTEC Higher National Qualification Approval
- i Job Description of HE Lecturer, Job Description of Programme Leader
- j Job Description of Director of Studies
- k Two meetings with senior staff
- l Two meetings with academic staff
- m Meeting with professional support staff.

195 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 provider
- external examiner reports and students' views collected through internal and external surveys, module and course evaluations as the provider has yet to commence delivery of the programme.

How any samples of evidence were constructed

196 As there is only one partnership (Pearson) and one programme (HND Business & Management) under consideration, sampling was not necessary.

Why and how the team considered this evidence

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

198 The provider works in partnership with Pearson in the delivery of the intended HND programme, in line with the Higher Nationals Enhanced Quality Assurance and Assessment Handbook, the Higher Nationals Business & Management Specification and Programme Specification. The review team considered the academic policies and procedures underpinning this relationship to assess how the provider plans to assure the quality of its programme to Pearson's academic standards via the Annual Review of Programme Policy, and in the Academic Board Code and Governing Body Code.

199 The review team met with senior staff, academic staff and professional support staff to test that they understand their respective responsibilities to Pearson for upholding quality aligned to academic regulations and specifications.

What the evidence shows

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

201 The provider has existing and current experience of operating in partnership with Pearson for Level 3 provision set out in the Provider Submission and discussed with senior staff in meetings. The regulatory framework and Programme Specification for its Business & Management programme is fully aligned with Pearson's requirements within the Higher Nationals Enhanced Quality Assurance and Assessment Handbook and Higher Nationals Business & Management Specification. For example, the key assessment requirements within the Pearson regulations are addressed within the provider's Higher Education Assessment Policy and Procedure which highlight the aims of Pearson qualifications, details of the procedure and relevant staff roles and responsibilities, all operational aspects of the assessment processes relating to assignment setting, marking, grading, feedback recording, internal and external verification and conduct of Assessment Boards. Further, the Internal Verification policy and procedure provides detail on assessment, an internal verification schedule and verification processes for assessment briefs and assessment decisions. The academic governance arrangements also ensure that there is ongoing provider-level monitoring and oversight of these partnership arrangements in the terms of reference of the Academic Board and Governing Body. The review team can confirm that the provider's policy and procedures are fully and comprehensively aligned to meet the requirements under its partnership agreement with Pearson and plans are in place for the ongoing review of the operational processes within it.

202 The provider has effective arrangements in place to work with Pearson which include the requirement for an annual review engagement with the Pearson-appointed external examiner, as set out in the Annual Review of Programme Policy. The programme approval proposal addresses all of the standard conditions for delivery of the Pearson programmes as outlined in the partnership agreements, including proposed staffing, physical resources and internal verification arrangements. A Centre Head, to manage and report on the higher education programme, has already been identified. The review team is satisfied that the plans in place will enable the provider to deliver a high-quality academic experience in line with Pearson's requirements.

203 The provider has established monitoring arrangements for its partnership with Pearson, which are embedded within the terms of reference of key committees, including the Academic Board and the Governing Body. Specific reflection on the role and operation of the partnership is inbuilt within the Annual Review of Programme Policy. Operational responsibility is clearly set out in the job descriptions of key staff, principally the Programme Leader and the Director of Studies. The review team can confirm that the plans for the monitoring and review of the partnership are appropriate, credible and robust.

204 In meetings with senior staff, academic staff and professional support staff, the review team was able to confirm that each understand their respective roles and responsibilities under the Pearson approval proposal. Senior staff were able, in particular, to articulate how they intend to extend and contextualise existing practices around the employer panel and links with existing employers within the current further education provision to their higher education provision. The review team can confirm that staff are fully aware of their responsibilities under the Pearson partnership arrangements for the Higher National Diploma in Business & Management.

Conclusions

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

206 The review team concludes that, where the 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. The provider has established experience of meeting its responsibilities to Pearson for its further education provision, and fully understands its roles and responsibilities in relation to further extending this partnership to the Higher National Diploma in Business & Management, using a standard Pearson partnership agreement, which is clear and comprehensive. Staff at all levels have established experience of working with Pearson and fully understand the particular additional responsibilities for quality to be addressed when delivering Pearson higher education programmes. The provider's planned arrangements for working in partnership are appropriate to ensure the delivery and assessment of a high-quality academic experience for its students. and the review team concludes, therefore, that this Core practice is met.

207 The evidence underpinning this judgement reflects, with the exception of external examiners' reports and students' views, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. 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

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

209 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

210 The QAA review team assessed the evidence presented to it, both prior to and at the visit, to determine if the provider could meet this Core practice at a threshold level. The Quality and Standards Review Guidance for Providers Applying to Register with the Office for Students includes a matrix (Annex 4) which identifies key pieces of evidence that a provider may present and which the team should consider when making a judgement against this Core practice to ensure that the relevant outcomes are being delivered. The review team utilised 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 Assessment Policy and Procedure
- b Personal Tutor Policy and Procedure
- c Attendance and Engagement Policy and Procedure
- d Extenuating Circumstances Policy and standard documents
- e Reasonable adjustments Policy and Procedure
- f Safeguarding Policy
- g Student Handbook
- h Course and Tutorial Plan
- i Learner approach statement
- j Current Student tracking mechanisms
- k Students handbooks
- l Programme committees
- m Programme Specification
- n Assessment instruments
- o Schemes of work
- p Personal Tutorial Policy
- q Course and Tutorial Plan
- r Complaints policy
- s Business Plans
- t Student Hub/VLE
- u Corporate Strategy
- v Two meetings with senior staff
- w Two meetings with academic staff
- x Meeting with professional support staff.

211 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:

- the review team did not consider any evidence of the views of students concerning support or assessed student work as the provider has not yet started delivering this programme.

How any samples of evidence were constructed

212 As there is only one programme (HND in Business & Management) to review, sampling was not necessary.

Why and how the team considered this evidence

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

214 The provider's policies and plans for supporting students to achieve successful academic and professional outcomes (Assessment Policy and Procedure; Personal Tutor Policy and Procedure; Attendance and Engagement Policy and Procedure; Extenuating Circumstances Policy and standard documents; Reasonable adjustments Policy and Procedure and Safeguarding Policy) were examined to ascertain their completeness and robustness and to assess their likely effectiveness in identifying and monitoring the needs of individual students.

215 Provider approaches to support students in achieving academic and professional outcomes, including programme committees, Programme Specification assessment instruments, schemes of work, Personal Tutor Policy, Course and Tutorial Plan, student progress tracking arrangements, complaints policy, Course Handbook and policies on assessment feedback, were examined to ascertain how credible and robust they are.

216 Meetings with academic and professional support staff were used to test whether staff understand their responsibilities and to establish that they were appropriately skilled and supported. In meetings, senior staff discussed their plans for supporting students to achieve successful academic and professional outcomes.

What the evidence shows

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

218 The provider has a comprehensive Personal Tutor Policy and Procedure which requires all students to be allocated a personal tutor by the Programme Leader before they commence their study within the programme. The personal tutor system focuses on developing students personally, academically and professionally (Personal Tutor Policy and Procedure) with opportunities for them to engage in both individual and group tutorials (Course and Tutorial Plan). Each personal tutor is to be allocated no more than 10 students. The Student Handbook contains accessible and detailed information on the programme and highlights the support opportunities within learning and teaching strategies and methods.

219 The Programme Specification for the HND in Business & Management identifies learning and teaching strategies which aim to enable students to develop knowledge and employability skills, with tutorial sessions in addition to lectures to provide opportunities for group work, interaction with peers and one-to-one teaching support. During tutorials, students are given opportunities for teamwork and development of employability skills, including communication, presentation and reporting writing.

220 The provider considers students' ongoing attendance in sessions as important in supporting their success and has developed a Student Attendance and Engagement Policy and Procedure which requires the Programme Leader to establish monthly progress boards involving lecturers and personal tutors to review student progress, which then leads to individual action plans to enable satisfactory progress. The Assessment Policy and Procedure provides for the provision of formative and summative feedback, while the schemes of work provide for specific assessment periods within individual units. The Higher Education Extenuating Circumstances Policy and the linked template recording form provides students with definitions of what extenuating circumstances are. The Policy notes that the Academic Board is responsible for overseeing the process at provider level through a panel that considers and addresses the needs of students with specific extenuating circumstances. Additionally, the Higher Education Reasonable Adjustment Policy and Procedure directs the process for administering requests for reasonable adjustments and makes Programme Leaders responsible for the process and the Academic Board for the provider-level oversight. The Higher Education Programme Committee Meeting Policy and Procedure provides for Programme Committee meetings to include appropriate general student progression information within the open agenda while dealing with more specific issues in closed session to protect student-specific data.

221 The team saw evidence of established processes within current further education practice extended to higher education practice through the development of robust tracking of student attendance. The VLE engagement and assignment submission tracking arrangements generate dashboards for use by staff and students to monitor progress. The review team is satisfied with the approaches that the provider has put in place for student support infrastructure, and its plans to implement student support systems which are carefully contextualised to student needs. The team concludes that the provider's policy and approach to student support will facilitate successful academic and professional outcomes.

222 In meetings with the review team, all staff expressed the vision and principles set out within the Personal Tutor Policy to ensure that students feel 'valued and respected'. The provider-level Safeguarding Policy offers guidance and identifies key responsibilities under the Policy at all levels to ensure a safe learning environment. Senior staff were able to discuss their responsibilities for ensuring that the provider's policies and procedures are effective in supporting successful student outcomes. They explained how they intend to further invest in developing student support mechanisms through engaging with external project development teams, including members from the Career Services and the Job Centre. They were able to explain the key functions carried out by personal tutors. Academic staff met by the review team discussed how they evaluate student feedback from induction to the end of a module to inform the student support process. Professional support staff highlighted the plans for links with career services, and the focus on supporting student with CV-writing and interviews. All staff confirmed as a priority the support for students to build confidence and explained that deliberate steps have been taken to focus on employability skills. The review team can confirm that the plans for providing both academic and pastoral support are comprehensive, targeted and robust to enable the provider to support students in achieving their expected professional and academic outcomes, and that provider plans for staff to be appropriately skilled and supported in this regard.

Conclusions

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

224 The review team concludes that the provider supports all students to achieve successful academic and professional outcomes. The provider has comprehensive, robust and credible policies, processes and infrastructure in place to support students to successfully achieve positive academic and professional outcomes and progression. The policies, processes and plans signify the provider's focus on personal tutoring, progress monitoring of individual students and effective student support. Senior management has a clear vision to further develop support mechanisms for students, working with relevant external organisations. Both academic and professional staff demonstrably understand their roles in supporting students to successfully achieve their expected outcomes. The team is satisfied that the provider's approach to supporting students is comprehensive, targeted to student needs and credible to realistically support students to achieve personally, academically and professionally. The review team concludes, therefore, that this Core practice is met.

225 The evidence underpinning this judgement reflects, with the exception of students' views and assessed student work, the evidence described in the QSR evidence matrix. The provider has sufficient evidence of plans which are deemed by the team to be robust and credible and the team considers that the implementation of those plans will result in the intended outcome. Therefore, the review team has a high degree of confidence in this judgement.

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