



Review for Educational Oversight: Handbook

March 2012

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First published September 2011, revised with supplementary information March 2012

ISBN 978 1 84979 479 4

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About educational oversight by QAA

Educational oversight by a designated body is a requirement for highly trusted sponsor status. The Quality Assurance Agency for Higher Education (**QAA**) has been appointed as a designated body for higher education **providers** by the UK Border Agency (UKBA).

Review for Educational Oversight has been developed for organisations seeking oversight by QAA. They reflect the core principles of QAA review processes. In line with QAA's mission, reviews are intended in part to contribute to the **enhancement** of UK higher education and to reinforce its reputation worldwide.

In applying for educational oversight applicants are agreeing to come within the scope of the QAA concerns scheme (or within the scope of the Protocol for managing potential risks to quality and academic standards in Scotland) and to cooperate with any investigations.¹ Providers should be aware that QAA is developing protocols with awarding bodies to share matters of concern regarding the management of quality with them as is deemed appropriate.

For the purposes of highly trusted sponsor status, only confidence **judgements** in the management of **academic standards** and management and **enhancement** of the **quality of learning opportunities** and reliance in **public information** are deemed as acceptable outcomes.

The process of **review** described in this handbook is called Review for Educational Oversight (REO) and starts in 2011-12. It focuses on independent colleges which provide higher education programmes in collaboration with awarding bodies.

About QAA

QAA's mission is to safeguard standards and improve the quality of UK higher education.

QAA's aims are to:

- meet students' needs and be valued by them
- safeguard standards in an increasingly diverse UK and international context
- drive improvements in UK higher education
- improve public understanding of higher education standards and quality.

QAA's values

Integrity

We always aim to be fair, objective and honest in our work, basing our judgements on sound **evidence**.

Professionalism

We set high professional standards in everything we do, providing relevant and effective services that are trusted by all with an interest in UK higher education.

¹ See: www.qaa.ac.uk/Complaints/concerns/Pages/default.aspx.

Accountability

Through safeguarding standards and driving improvements we fulfil our responsibilities. We consult on the development of our work and assess its impact, seeking to provide a high level of service and to be responsive to external demands.

Openness

We are open and approachable about the work we do, and how we do it, believing that this encourages trust and confidence. We publish full details of our review methods, as well as our reports on institutions. We are committed to communicating clearly and accessibly about all aspects of our work.

Independence

To fulfil our responsibilities we must be an independent voice in UK higher education, basing our work on expert, objective scrutiny and analysis.

A fuller account of QAA's purposes, values and standards is provided in Annex A.

QAA is committed to evaluating and monitoring its work in an open and reflective manner. It does this within the context of an evaluation policy. For further information please see the [website](#)

About this handbook

1 This handbook is intended primarily for staff working in independent colleges applying for educational oversight by QAA, and for Review for Educational Oversight (REO) teams. It is also intended to provide information and guidance for other staff working for independent colleges and for the independent colleges' awarding bodies. It is not intended for students (for whom QAA has produced separate guidance). Terms in **bold** are explained in full in the glossary in Annex J. Further information may also be found through the web links listed at the end of Annex J. In addition to this handbook, QAA will provide support for colleges and **reviewers** through **briefing** and training events.

Section 1: Key features of Review for educational oversight

2 This section gives an overview of Review for Educational Oversight (REO) including its aims, objectives and scope. A more detailed description of how REO works follows in Section 2. REO retains core features of all **QAA** reviews.

Aims

3 REO focuses on the **provider's** management of **academic standards**, the management and **enhancement** of the **quality of learning opportunities** provided for students, and **public information**, and assumes that the provider and its **awarding body/bodies** are already managing the provision effectively according to the expectations of the **Academic Infrastructure**² or **other external reference points** for awards not on one of the frameworks for higher education qualifications (see Annex I).

4 The term 'independent college' refers to a range of organisations, some operating for profit, including those with charitable status. This handbook refers to the whole range of independent colleges as 'providers'.

² For more information, see: www.qaa.ac.uk/AssuringStandardsAndQuality/Pages/default.aspx.

5 REO focuses on how providers carry out their delegated responsibilities within the context of their agreements with awarding bodies.

6 Providers typically work with a range of awarding bodies and/or awarding organisations, including higher education institutions. The awarding bodies retain responsibility for the academic standards of all awards granted in their names and for ensuring that the quality of learning opportunities offered through collaborative arrangements is adequate to enable students to achieve the academic standard required for their awards.

7 REO is conducted in an open and collegial way. Through discussion with staff and students and by scrutinising documents, review teams will make **judgements** about the effectiveness of the provider's procedures for managing academic standards and the management and enhancement of the quality of learning opportunities available to students. REO also contains a **conclusion** about the reliance of public information for which the provider is responsible.

8 As detailed below, QAA will publish a report at the end of the **review**. Working documents related to the review, which are not already in the public domain, are regarded as confidential and will only be disclosed to a third party when QAA believes the release is appropriate to comply with the law.

Section 2: Review for Educational Oversight - how it works

9 The purpose of this section is to state the aims and objectives of Review for Educational Oversight (REO) and describe how it operates. This is summarised in a timeline at the end of the section.

Overview

10 The emphasis of REO is on the effectiveness of the **provider's** procedures for managing **academic standards** and the management and **enhancement** of the **quality of learning opportunities** available to students. REO also contains a **conclusion** about the reliance of **public information** for which the provider is responsible. The **review** takes full account of the varying roles of awarding bodies and is sensitive towards differences in those roles between different providers. REO covers all aspects of a provider's management of its higher education provision.

Review teams

11 **QAA** appoints all review team members, including a **coordinator** who will liaise with the provider on behalf of the review team (see Annex G for more information about the role of the coordinator and review team).

12 There will normally be four members of the REO team: the coordinator and three **reviewers**. Providers and awarding bodies will have the opportunity to check **team** membership for **conflicts of interest**. Where a provider has more than 1,000 students and/or more than four awarding bodies associated with its higher education provision, QAA may consider including an additional reviewer. For providers with fewer than 100 students, the team will normally comprise of a coordinator and two reviewers. The **facilitator** will act as the key point of contact between the provider and the team both before and during the **visit**.

13 The review leads to **judgements** about the management of academic standards and the management and enhancement of the quality of learning opportunities and a conclusion about public information. Each REO report is published.

Role of students

14 The review seeks to identify students' views of their education both before and during the visit. The coordinator is responsible for discussing with the provider methods of obtaining a **student submission**, which is voluntary. The team will also expect the provider's **self-evaluation** to explain how it ensures that students' views inform the management of its higher education programmes.

15 Students will be invited to meet the coordinator at the **preparatory meeting**, and during the visit the team will meet at least one group of students.

Key features of REO

16 Below we have set out the key features of REO. They are listed under three headings:

- Preparing for REO
- The review visit
- After the review.

Preparing for REO

17 No later than 13 weeks before the review visit is scheduled to take place QAA will:

- notify the provider and its **awarding body/bodies** of the dates of the review
- invite the provider to attend a **briefing**. (Two members of staff, a student representative and a representative of the awarding body are also invited to the briefing. The briefing will contain further advice and guidance on preparing a self-evaluation and on helping students to prepare a submission)
- invite the provider to identify a facilitator no later than 12 weeks before the visit. (The facilitator needs to be a member of staff who has a thorough understanding of the provider's higher education provision. More information about the role of the facilitator is provided in Annex G, and in the glossary in Annex J.)

Self-evaluation

18 The **self-evaluation** is a key element of the review. It needs to be submitted to QAA seven weeks in advance of the review visit. The purpose of the self-evaluation is to describe the responsibilities that the provider has for the management of academic standards and the management and enhancement of the quality of learning opportunities and public information for its higher education provision, making reference to its agreements with awarding bodies, and the processes and procedures it has adopted for carrying out these responsibilities, as well as to provide a critical self-reflection on its approach. The self-evaluation needs to cover all aspects of the provider's higher education provision and needs to be fully referenced. The REO team will carry out a careful analysis of the self-evaluation prior to the review visit. Section 3 of this handbook provides further guidance on the self-evaluation. The briefing will also contain further advice on preparing a self-evaluation.

Preparatory meeting

19 Four weeks before the review a preparatory meeting is held at the provider between staff and students, representatives of awarding bodies (if agreed between the partners), and the coordinator. The purposes of the preparatory meeting are to discuss the arrangements for REO, to develop the agenda for the visit in the light of the provider's self-evaluation (and the student submission if one is made), and to identify further **evidence** for the provider to make available during the visit. It is also an opportunity for the coordinator to meet key staff and student representatives, clarify the process and provide an opportunity for staff and students to ask questions.

20 An indicative programme for a review preparatory meeting is provided in Annex C.

The review visit

21 The visit by the full team will normally take place over two consecutive days. It is designed to allow reviewers to scrutinise evidence on site, and to meet the provider's staff, students and other stakeholders. Reviewers do not observe teaching, but will consider evidence of how the provider assures the quality of teaching and other learning opportunities. Reviewers are responsible for summarising the evidence, which leads to their judgements. The role of the coordinator is one of leadership and facilitation. They support the team in making evidence-based judgements. Annex D provides an indicative programme for the review visit.

After the review visit

Provisional judgements and conclusion on public information

22 Within a week of the review visit the review team meets again, at an off-site location, to agree summaries of evidence and to make **provisional judgements (confidence, limited confidence or no confidence)** about:

- the provider's management of its responsibilities for academic standards
- the provider's management and enhancement of the quality of learning opportunities and
- a conclusion as to whether reliance can or cannot be placed on the accuracy and/or completeness of public information

23 A provisional **confidence** judgement will be made where:

- a provider is found to be effective in managing its responsibilities for delivering academic standards
- the prospects for academic standards and quality being maintained at current levels appear sound
- the provider has rigorous mechanisms for the management of its higher education programmes in accordance with the awarding body's/bodies' requirements.

24 A provisional **limited confidence** judgement will be made where:

- significant concerns exist about aspects of a provider's current or likely future management and enhancement of quality and/or delivery of the standards its higher education programmes

- significant concerns exist about aspects of a provider's current or likely future management of the quality of learning opportunities.

25 A provisional **no confidence** judgement will be made where:

- major concerns exist about significant aspects of a provider's current or likely future capacity to secure and maintain quality and/or deliver standards of its higher education programmes
- major concerns exist about significant aspects of a provider's current or likely future capacity to secure and maintain the quality of learning opportunities.

26 Judgements and conclusions will always be made with due reference to the delegated responsibilities from the awarding body/bodies to the provider.

27 Further details of the criteria for making judgements are set out in full in the glossary. Differentiated judgements can be made only where a team regards a provider's management of the standards and/or quality of the programmes of study of one awarding body to be substantially different from those of others.

28 On public information, the team will reach a provisional conclusion. This will be whether or not reliance can be placed on the accuracy and completeness of the information that the provider publishes about itself.

29 A conclusion that **reliance can be placed** on the accuracy and completeness of all of the public information that the provider is responsible for publishing will be reached where the provider:

- recognises all the information that it is responsible for publishing within the area under review
- has rigorous mechanisms for the management of these responsibilities, which ensure that the information it publishes is both accurate and complete
- has supplied evidence that this is the case.

30 A conclusion that **reliance cannot be placed** on the accuracy and completeness of all the public information that the provider is responsible for publishing will be reached where:

- a provider does not recognise all of the information that it is responsible for publishing, and/or
- does not have rigorous mechanisms for ensuring that this information is inaccurate and/or incomplete.

31 At the **provisional judgement meeting** the team will also identify **good practice** and provisional **recommendations**.

32 Recommendations for improving the provider's management of its higher education provision are categorised as **essential**, **advisable** or **desirable**, according to priority.

- **Essential recommendations** refer to issues which the review team believes are currently putting quality and/or standards at risk and hence require urgent corrective action.
- **Advisable recommendations** relate to matters that the review team believes have the potential to put quality and/or standards at risk and hence require preventative corrective action.

- **Desirable recommendations** relate to matters that the review team believes have the potential to enhance quality, build capacity and/or further secure standards.

33 When essential recommendations are made they are likely to be reflected in a provisional judgement of limited confidence or no confidence in either management of academic standards and/or management and enhancement of the quality of learning opportunities, and/or a conclusion that reliance cannot be placed on the accuracy and completeness of all the public information that the provider is responsible for publishing about itself.

34 The coordinator will inform the provider and its awarding body/bodies about the outcome of the provisional judgement meeting in writing within one week of the meeting. The letter will also be copied to UKBA. All judgements, good practice and recommendations remain provisional until the report is finalised. Should a second visit be agreed, the judgements are finalised at the conclusion of the second visit.³

35 For the purposes of highly trusted sponsor status, only confidence judgements in the management of academic standards and the quality of learning outcomes and reliance in public information are deemed as acceptable outcomes.

Draft report

36 The review team is responsible for writing a report of its findings. An early draft of the report provides the focus for the provisional judgement meeting. The next draft sets out the provisional judgements, good practice and recommended actions as described above, together with contextual information and supporting evidence.

37 Four weeks after the end of the visit, the coordinator will send a draft version of the report to the provider and its awarding body/bodies for comment. This gives the provider the opportunity to draw the review team's attention to any areas that it regards as inaccurate or incomplete and, if necessary, to submit additional evidence. Review teams will be able to consider only supporting evidence that was available at the time of the review visit. The review team will then agree whether or not any aspect of the report, including the provisional judgements, should be amended in response. When the judgements are finalised QAA will also inform UKBA.

38 If the review team finds that it has confidence in the provider's ability to manage its responsibilities for academic standards and the quality of learning opportunities, and concludes that reliance can be placed on the accuracy and completeness of public information, the provider will be asked at this stage to produce an **action plan** to accompany the report. If the review team makes a judgement of 'no confidence' or 'limited confidence', or if it reaches a conclusion of 'no reliance' on the provider's ability to manage its responsibilities, a second visit may be scheduled and the preparation of the action plan will be deferred.

Action plan

39 The action plan describes how the provider intends to take forward the reviewers' findings, and the effectiveness of the action taken will form part of the evidence base for any future review activity. The plan will also constitute a published record of the provider's commitment to developing its provision. A template for the action plan can be found in Annex E, with further guidance on how to complete it.

³ Details about second visits is published separately. Please note that an additional fee is payable for second visits.

Final report

40 Normally, once the review team has considered and responded to the provider's comments, it will confirm the judgements. QAA will set out these judgements in writing to the provider and the awarding body/bodies. QAA will also send a final version of the report to the provider and its awarding body/bodies. The final report will be published on the QAA website (12 weeks after the end of the visit).



Figure 1: Key stages of a review

Table 1: Indicative timeline for a review with a single visit ⁴

| Time +/- visit (in weeks) | Actions required |
|---|--|
| Preparation | |
| -13 (minimum) | <p>QAA notifies the provider of the proposed date for the visit.</p> <p>QAA asks the provider to identify the facilitator.</p> <p>QAA notifies the awarding body/bodies of the review of its partner provider.</p> <p>QAA invites provider, student representative and representative of awarding body/bodies to briefing.</p> |
| -12 | <p>Provider confirms the facilitator to QAA.</p> <p>Awarding body/bodies respond(s) to the provider about possible involvement in the preparatory meeting with the coordinator.</p> |
| -11 | <p>Provider sends copy of agreement(s) with awarding body/bodies concerning their participation in the review process to QAA.</p> <p>Coordinator contacts the provider to discuss the date, agenda and participants of the preparatory meeting and the student submission.</p> <p>QAA notifies the provider of the review team and the QAA officer responsible for the review.</p> <p>Provider checks the proposed team for conflicts of interests.</p> <p>Provider sends details of the proposed review team to awarding body/bodies.</p> |
| -10 | <p>Awarding body/bodies comment(s) to the provider on the proposed team membership.</p> <p>Provider organises the preparatory meeting and identifies provider participants, including staff and students.</p> <p>Provider sends details of the proposed preparatory meeting to the awarding body/bodies, coordinator and QAA if this has been agreed in advance.</p> <p>Provider reports potential conflicts of interest regarding team members to QAA.</p> |
| Self-evaluation | |
| -7 | <p>Provider submits the self-evaluation to QAA together with Annex B: Responsibilities checklist, and formal partnership agreement(s) with awarding body/bodies.</p> <p>Students forward their submission, if appropriate, to QAA.</p> <p>QAA officer and coordinator scrutinise the provider's self-evaluation, the partnership agreement(s) for higher education awards, and the student submission if provided.</p> <p>QAA informs the provider whether the self-evaluation is a suitable basis for the review.</p> <p>QAA officer asks the provider to revise the self-evaluation if it is not a suitable basis for the review.</p> |
| Analysis of the self- evaluation | |
| -5 | <p>Provider sends the self-evaluation and the optional student submission to each member of the REO review team and to the awarding body/bodies.</p> <p>Coordinator analyses the self-evaluation.</p> <p>Review team analyses the self-evaluation and the supporting evidence and</p> |

⁴ Please note that timings may be altered to take account of Christmas and Easter holidays.

| | |
|--------------------------------------|---|
| | <p>reports through QAA's Audit and Review Communication Service (ARCS; https://arcs.qaa.ac.uk), including suggestions for further evidence and the programme for the visit.</p> <p>Coordinator produces a summary of the team's analysis of the self-evaluation and sends it to the provider and awarding body/bodies as a basis for discussion at the preparatory meeting.</p> |
| Preparatory meeting | |
| -4 | <p>Coordinator chairs the preparatory meeting with the provider.</p> <p>Awarding body/bodies attend(s), if this has been agreed in advance with the provider (during week -12).</p> |
| -3 | <p>Coordinator sends the provider, its awarding body/bodies, the review team and QAA a letter confirming the arrangements for the visit.</p> <p>Coordinator sends a briefing note and allocates areas of responsibility to each review team member.</p> |
| -1 | <p>Provider assembles evidence in accordance with the team's requirements.</p> |
| Review visit | |
| 0 | <p>Coordinator leads/chairs the review visit.</p> <p>Review team conducts the visit.</p> <p>Provider takes part in the review visit.</p> <p>Awarding body/bodies take(s) part in the review visit in accordance with agreements with the provider made in advance (during week -12).</p> <p>Facilitator liaises with the review team on behalf of the provider.</p> <p>Coordinator offers an oral update on the progress of the review to the provider's facilitator at the end of the visit.</p> <p>Review team accompanies the coordinator to the oral update.</p> |
| Provisional judgement meeting | |
| +1 | <p>Coordinator chairs the provisional judgement meeting with the review team.</p> <p>Review team agrees summaries of evidence, provisional judgements, good practice and recommendations.</p> <p>Coordinator sends a letter, setting out the provisional judgements, to the provider, copied to the awarding body/bodies and/or awarding organisations. QAA will also send a copy of the letter to UKBA.</p> |
| Report writing | |
| +1 | <p>Review team drafts report text and posts it on ARCS (see glossary in Annex J).</p> <p>Coordinator collates and edits the text and sends the first draft report to the review team for comment and to QAA for editing.</p> |
| +2 - +3 | <p>Review team comments on draft one of the report.</p> <p>Coordinator prepares draft two of the report and submits it to QAA.</p> |
| Draft report to the provider | |
| +4 | <p>Coordinator sends the third draft of the report to the head of the provider and to the awarding body/bodies for comments and, if necessary, for the provision of further evidence. This report draft includes the action plan template.</p> <p>Provider checks the draft report for factual accuracy and identifies any additional evidence it needs to submit.</p> |

| | |
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| | Provider liaises with relevant staff to discuss and develop the action plan. |
| +5 | Awarding body/bodies send(s) any comment(s) on draft report to the provider to collate into one response to the coordinator. |
| +6 | Provider collates all comments on the draft report, including those from the awarding body/bodies, and sends one set of comments on factual accuracy to QAA, providing additional evidence if appropriate. |
| +7 | Coordinator and review team consider the provider's comments (and those of its awarding body/bodies) and any further evidence submitted and post responses to ARCS. Coordinator confirms judgements of confidence/conclusion on reliance and finalises draft four. |
| +8 - +9 | QAA confirms by letter to the provider and its awarding body/bodies, either that final judgements of confidence and a conclusion about reliance have been reached OR that a second visit is to take place. If no second visit is to take place: Awarding body/bodies contribute(s) to the development of the action plan, if this has been agreed in advance with the provider. Provider returns the completed action plan to QAA. |
| Report publication | |
| +12 | QAA publishes the report on its website. |

Section 3: Preparing a self-evaluation

41 **Self-evaluation** is a key feature of all **QAA** reviews. The self-evaluation is unlikely to be a single document but should contain a commentary and supporting **evidence**. This section provides more information and guidance on preparing a self-evaluation for REO.

42 The self-evaluation is a fundamental part of the **review** process. Its purpose is to:

- describe the **provider's** responsibilities for the management of its higher education provision, making reference to its agreements with the **awarding body's/bodies' and/or awarding organisations'** procedures
- provide the opportunity for critical self-reflection on the effectiveness of the processes and procedures the provider has adopted for discharging these responsibilities.

In simple terms, the self-evaluation explains:

- what the provider is doing
- why the provider is doing it
- how the provider is doing it
- how the provider knows that what it is doing works
- how the provider can improve what it is doing.

43 An effective self-evaluation is key to the provider gaining substantial benefit from REO and to the smooth running of the review. QAA therefore encourages providers to give due time and attention to preparing this document. The preparation of a self-evaluation is a major focus of the **briefing** that QAA will arrange for providers and their awarding bodies.

44 The self-evaluation should not involve the production of significant amounts of new material. All the evidence should be readily available and not specially written for the review. In managing their higher education provision, providers will have a range of policies, supported by procedures for implementing them and evidence that they are being carried out. Providers will also have processes for evaluating the effectiveness of these policies and procedures.

Scope

45 REO addresses all aspects of the provider's management of its higher education provision, and the self-evaluation should reflect this. It should therefore take the form of a **portfolio** of existing documents accompanied by a short commentary that signposts and contextualises the evidence contained within them and reflecting on the effectiveness of processes and procedures. The portfolio should as far as possible describe the provider's responsibilities, processes and procedures and give evidence for how they work. It may also include the provider's quality improvement plan. Further guidance on the composition of this portfolio is provided in Table 2 (page 13).

Structure

46 The self-evaluation should be structured in the following way:

- management of **academic standards**
- management and **enhancement** of the **quality of learning opportunities**
- **public information.**

It should also include an introduction to the provider, giving details of any agreements with awarding bodies. It is important to briefly describe the responsibilities that the agreement with its awarding bodies have conferred upon it and explain the processes and procedures that it has adopted for discharging them. The responsibilities checklist (see Annex B), completed separately for each awarding body the provider works with, should be submitted with the self-evaluation. A summary, identifying strengths and areas for development, and indicating what the provider is doing to enhance its provision is also useful.

Content

47 The self-evaluation should identify areas that will help the provider to develop its higher education provision for the benefit of its students. Providers should give careful consideration to ensuring that the management of academic standards, the management and enhancement of the quality of learning opportunities and public information can be addressed adequately by the review. The self-evaluation must provide sufficient evidence for the review **team** to evaluate the effectiveness of the provider's management of its higher education provision.

48 For reviews of provision located on the frameworks for higher education qualifications the main points of reference for assisting in developing the self-evaluation are contained within the **Academic Infrastructure**, particularly the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*. For qualifications on the Qualifications and Credit Framework (QCF)/National Qualifications Framework (NQF)/Credit and Qualifications Framework for Wales (CQFW)/Scottish Credit and Qualifications Framework (SCQF) the **other external reference points** as identified by the provider will be used. The review team will be interested to see examples that demonstrate how effective the provider's processes are in identifying areas for enhancing the experience of students.

49 The length of the self-evaluation depends on the provider's level of responsibility and the quality and comprehensiveness of existing written evidence.

50 Table 2 (below) is intended to give providers guidance on the structure and content of the self-evaluation. It should not be regarded as prescriptive, since providers have different responsibilities reflecting individual agreements with awarding bodies. QAA does not publish exemplars of such documents.

Table 2: Indicative structure of a self-evaluation for REO

| Sections | Suggested content (commentary) | Possible sources of evidence or references (portfolio) |
|----------------------------|---|---|
| 1 Introduction and context | <p>Brief contextual information on the provider:</p> <ul style="list-style-type: none"> • history, location, number of campuses, total enrolments, total higher education enrolments and a breakdown of full and part-time higher education enrolments, spread of provision across campuses, student numbers, staff supporting higher education (headcount and FTEs), management structure. <p>Partnership agreements, or memoranda of understanding or equivalent, with the awarding body/bodies:</p> <ul style="list-style-type: none"> • include summary of key characteristics of each partnership agreement and the arrangements with other awarding bodies; note any significant recent changes. <p>Recent developments in higher education at the provider:</p> <ul style="list-style-type: none"> • include summary of any recent developments, such as new building work, expansion or decrease in provision, significant changes to the academic structure and/or staffing. <p>Students' contribution to the review, including the submission:</p> <ul style="list-style-type: none"> • outline whether students sent QAA a submission and, if so, how it was prepared, for example, mention any facilities or guidance given by the provider to the student representatives. | <ul style="list-style-type: none"> • mission statement • prospectus • organisational diagrams of institution and quality management processes • retention, achievement and progression data tables (normally three years of figures) • higher education annual monitoring reports • provider's strategic plan • whole institution self-evaluation • partnership agreements with higher education institution(s) and/or awarding body/bodies |

| | | |
|---|--|---|
| <p>2 Analysis and evaluation of how higher education is managed</p> | <p>Management of academic standards</p> <ul style="list-style-type: none"> • How effectively does the provider fulfill its responsibilities for the management of academic standards? • How effectively are external reference points used in the management of academic standards? • How does the provider use external moderation, verification or examining to assure academic standards? | <ul style="list-style-type: none"> • quality assurance policy and manual • monitoring and review processes • admissions policy • accreditation of prior learning policy • student assessment policy • management structure • deliberative meeting structure • internal validation processes • provider and awarding body's/bodies' regulations for progression • action taken on receipt of external review or inspection reports • statistical records • programme specifications • student complaints and appeals processes • analyses by provider of student surveys • information for higher education staff |
| | <p>Management and enhancement of the quality of learning opportunities</p> <ul style="list-style-type: none"> • How effectively does the provider fulfill its responsibilities for managing and enhancing the quality of learning opportunities? • How effectively are external reference points used in the management and enhancement of learning opportunities? • How does the provider assure itself that the quality of teaching and learning is being maintained and enhanced? • How does the provider assure itself that students are supported effectively? • What are the provider's arrangements for staff development to maintain and/or enhance the quality of learning opportunities? | <ul style="list-style-type: none"> • quality assurance policy and manual • monitoring and review processes • resource policy • admissions policy • accreditation of prior learning policy • student support and guidance policy • teaching and learning strategy • management structure • meeting structure • staff development policy • staff development records • statistical records • programme specifications • analyses of provider student surveys • student complaints and appeals procedures |

| | | |
|---------------------------|---|---|
| | <ul style="list-style-type: none"> • How effectively does the provider ensure that learning resources are accessible to students and sufficient to enable them to achieve the intended learning outcomes? | |
| | <p>Public information</p> <ul style="list-style-type: none"> • How effectively does the provider's public information communicate to students and other stakeholders about the higher education it provides? • How effective are the provider's arrangements for assuring the accuracy and completeness of information it has responsibility for publishing? | <ul style="list-style-type: none"> • publishing policy and procedures for both electronic and paper-based information • notes of meetings discussing scrutiny and approval of public information • promotional material • mission statement • corporate plan • programme specifications • information for students |
| 3 Summary | <ul style="list-style-type: none"> • Strengths • Areas for development • Actions being taken currently to improve previously identified areas for development | |
| 4 Evidence and references | <ul style="list-style-type: none"> • Label and number evidence documents • Provide clear references in the text | |
| 5 List of documents | <ul style="list-style-type: none"> • Provide numbered master list | |
| 6 Annex B | <ul style="list-style-type: none"> • Complete one 'Responsibilities checklist' for each awarding body | |

Evaluative commentary

51 The commentary should reflect the provider's capacity for critical self-reflection on the effectiveness of its processes and procedures for managing higher education. A possible approach is to provide an opening statement containing an evaluation then qualify it with supporting evidence, for example:

There is a comprehensive staff development policy (1 Policies: doc 1i) and the provider offers a wide range of staff development activities which are recorded systematically (4 Staff development and training: doc 4ii). Although higher education and further education activities are planned in accordance with the differentiated requirements of both sets of staff, the analysis of the impact of higher education developmental activities on academic standards and the quality of learning opportunities is underdeveloped.

52 Such a statement would typically be followed by a clear indication of what is being done to address an area identified for development, for example:

The provider's Quality Manager and Human Resources Manager are currently reviewing the staff development policy. It will be strengthened by requiring higher education programme managers to conduct an annual evaluation of the impact of staff development and training on the standard and quality of higher education provision. This will serve to improve the planning and sharpen the focus of future events. The revised policy (2 Draft Policies: doc 2i) will be available from the start of the new academic year, supported by training for programme managers and briefings for staff (6 Minutes, Higher Education Development team meeting, 23/07/10, para 2).

Referencing

53 In order for the team to be able to operate efficiently, both in advance of and during the two days of the review, it is important to ensure that all evidence documents are clearly named and that there is an electronic numbered master list of documents. It is equally important to ensure that each document is clearly referenced to the appropriate text (preferably using hyper-text links) in the self-evaluation, using a consistent naming and numbering system and providing paragraph numbers and dates of minutes as appropriate.

Drafting

54 The provider may consider circulating the draft self-evaluation to higher education students, staff and awarding body representatives for comment as this widens the perspective and helps to keep colleagues informed and engaged in the process. QAA staff, coordinators, or **reviewers** involved in REO may not comment on the draft self-evaluation.

Submission

55 The self-evaluation should be sent to QAA's Reviews Group seven weeks before the start of the **visit**. One electronic copy and three hard copies are required, accompanied by an electronic portfolio of supporting evidence (see paragraph 45 and 53). Providers are asked to use a CD-ROM or data stick, with the self-evaluation as a Word file, and not to email individual files to QAA.

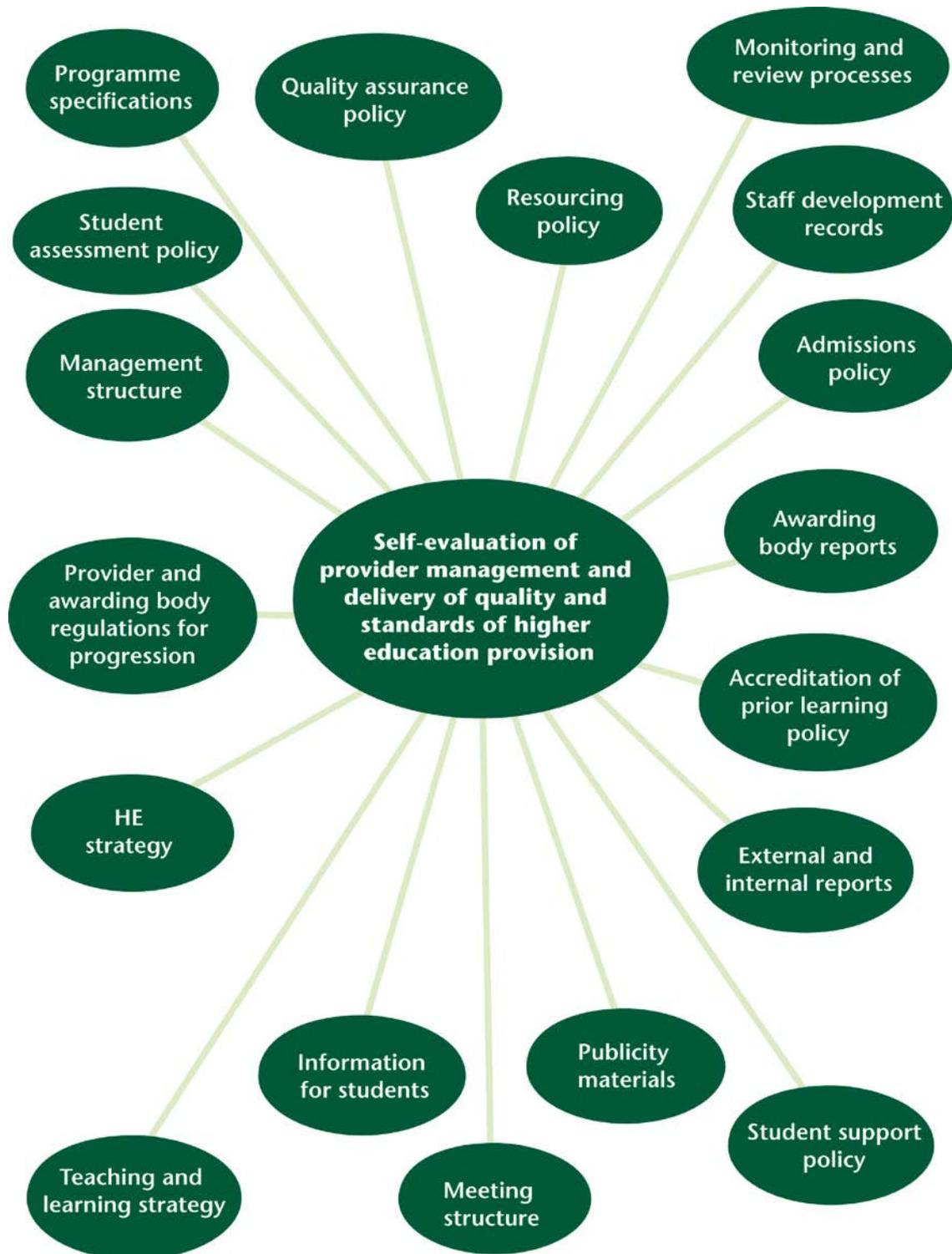
56 QAA will send a copy of the self-evaluation to the **coordinator** asking for an analysis and evaluation as to whether it forms an appropriate basis for the review. Once this has been agreed by the **QAA officer**, QAA will notify the provider and ask for copies of the self-evaluation to be sent to the team.

57 QAA may return the self-evaluation to the provider for further work if it does not enable the team to identify the provider's responsibilities and understand how these are discharged. In these circumstances, the QAA officer will advise the provider.

Advice

58 QAA will hold briefing events for all providers. These will include advice and guidance on preparing the self-evaluation. Once the coordinators have been appointed, providers should refer to their coordinators for advice.

Figure 2: Possible sources of evidence which informs the self-evaluation



Section 4: Role of awarding bodies/awarding organisations

59 This section provides guidance on how awarding bodies and/or awarding organisations may be involved in REO. It should be read with reference to the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, published by **QAA**, and in conjunction with the description of the **review** approach detailed in Section 2. More specific information about the role of higher education institutions is provided below.

60 REO assumes no preferred model for higher education provision, other than that it expects that any model must permit the **awarding body** and/or **awarding organisations** to assure itself about the standards and quality of the higher education provided by its collaborative partners. For further details of a higher education institution's responsibilities for its awards, see the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, published by QAA.⁵

61 REO is concerned with the way in which **providers** discharge their responsibilities within the context of their agreements with awarding bodies and/or awarding organisations. It is not concerned with how awarding bodies or awarding organisations manage their responsibilities for collaborative agreements.

62 To enable awarding bodies and/or awarding organisations to manage their responsibilities for their collaborative arrangements effectively, QAA will make sure that they are notified of any REO of a collaborative partner. Initial REO correspondence between QAA and providers is copied to the heads of the relevant awarding bodies and/or awarding organisations and/or their nominated contacts. Such correspondence will include confirmation of the dates of any meetings or **visits**, provisional outcomes of visits and draft **reports**. In addition, QAA encourages providers to copy all subsequent correspondence from QAA, and any responses to QAA, to their awarding body/bodies and/or awarding organisations.

63 Awarding bodies and/or awarding organisations may also wish to support their partners through REO by assisting, for example, with the preparation of the **self-evaluation** and by attending various REO events, including review visits. The extent of an awarding body's and/or awarding organisations involvement with REO should be decided in discussion between the partners, taking account of the provisions of the **partnership agreement** and at the discretion of the organisations involved in the collaborative arrangements. The participation of the awarding body may be considered against:

- the maturity of the relationship between the partners
- the extent of the responsibilities conferred on the provider by the awarding body
- the accuracy and completeness of existing written **evidence** about these responsibilities
- the number of collaborative partners that the awarding body has.

64 As soon as possible after the **briefing** event, but at least 11 weeks before the visit takes place, the provider and its higher education partner(s) should send to QAA details of their agreement(s), setting out the awarding body's/bodies' and/or awarding organisations involvement in the review process. This should be signed by representatives of each partner institution and should inform QAA of the extent of the involvement in REO agreed between the provider and each awarding body and/or awarding organisations.

⁵ Available at: www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/Code-of-practice-section-2.aspx.

65 REO **teams** will be pleased to meet awarding body and/or awarding organisations representatives at the appropriate stage of the process. QAA will invite awarding bodies and/or awarding organisations to the briefing, which will provide further guidance on their role. However, awarding bodies and/or awarding organisations are not required to attend the briefing, or any subsequent events. QAA will not make unreasonable requests for awarding body and/or awarding organisations involvement in this method which focuses on the responsibilities of providers. Annex B contains a responsibilities checklist which, once completed, should make clear whether responsibility for each item is taken by the provider or by the awarding body and/or the awarding organisations. This checklist should be completed and submitted with the self-evaluation.

The role of higher education institutions

66 QAA reviews the responsibilities of higher education institutions within collaborative agreements through the process of Institutional review. Nevertheless, higher education institutions are important stakeholders in REO for several reasons:

- they are identified in REO reports in association with those programmes which lead to their awards, including those awarded under licence arrangements with Edexcel
- REO reports will be used as a source of evidence for the review of a higher education institution's collaborative provision
- although **judgements, conclusions, recommendations**, identified **good practice** and **action plans** arising from REO are not addressed to the awarding body, they may have implications for its relationship with its provider partner.

Section 5: Role of students

67 This section provides guidance for **providers** on the involvement of students in REO. It should be read in conjunction with the description of the REO method in Section 2.

68 One of the aims of REO is to support providers in reviewing and improving for the benefit of students the management of their higher education provision. In considering providers' higher education provision, REO **teams** need to draw on students' views about their experiences as learners. Students are involved in the REO process in two principal ways: the preparation of an optional **student submission** and in meetings with the review team.

69 Before a **visit**, students have the opportunity to produce a student submission, which may take a variety of forms. The principle of the student submission, irrespective of its form, is that it should reflect the students' own views of their experiences as learners.

70 Teams will meet students during REO visits as a matter of course. The arrangements for organising these meetings are covered in Section 2.

71 **QAA** will provide further guidance to providers on the involvement of students during the **briefing** and training events in preparation for REO. Separate guidance documentation will be provided for students on QAA's website.

Annex A: QAA's mission, values and standards

QAA stands for the Quality Assurance Agency for Higher Education.

QAA's vision is:

to be the authority on UK higher education standards and quality.

QAA's mission is:

to safeguard standards and improve the quality of UK higher education.

QAA is committed to:

- the intrinsic worth of higher education
- the entitlements of students
- the public interest in higher education
- the importance of equality and diversity.

The intrinsic worth of higher education

We admire and support the research and teaching that takes place in universities and colleges across the UK. We respect the autonomy of UK universities and colleges, and believe that it fosters the diversity that is central to their success and international reputation. We also recognise that their primary role in maintaining academic standards and quality is vital to that autonomy. We rely upon their cooperation in our work, and in return provide valuable advice and support.

The entitlements of students

All students deserve a high quality learning experience. They have a right to a range of learning opportunities leading to a qualification that has recognised value and meets published national expectations. Students are our partners in quality assurance, and are experts not only on their own learning but also on issues of governance, policy and practice. We seek to harness that expertise in every aspect of our work.

The public interest in higher education

Students, their families and the wider public make a big investment in higher education. As well as helping students meet material aspirations and offering personal fulfilment, higher education enriches our society. We believe the public have a legitimate interest in ensuring standards are safeguarded and quality maintained, and that we have a duty to clearly communicate our work to a wide audience.

The importance of equality and diversity

We believe that equality and diversity should be promoted through the services we provide, and that in our work we should be supportive, fair, just and free from discrimination. The higher education sector should lead the way in valuing the diverse contributions of all its staff, students and partners, and in developing and sharing good practice in this area.

QAA's values are:

- integrity
- professionalism
- accountability
- openness
- independence.

Integrity

We always aim to be fair, objective and honest in our work, basing our judgements on sound **evidence**.

Professionalism

We set high professional standards in everything we do, providing relevant and effective services that are trusted by all with an interest in UK higher education.

Accountability

Through safeguarding standards and driving improvements we fulfil our responsibilities. We consult on the development of our work and assess its impact, seeking to provide a high level of service and to be responsive to external demands.

Openness

We are open and approachable about the work we do, and how we do it, believing that this encourages trust and confidence. We publish full details of our review methods, as well as our reports on institutions. We are committed to communicating clearly and accessibly about all aspects of our work.

Independence

To fulfil our responsibilities we must be an independent voice in UK higher education, basing our work on expert, objective scrutiny and analysis.

QAA's aims are to:

- meet students' needs and be valued by them
- safeguard standards in an increasingly diverse UK and international context
- to drive improvements in UK higher education
- to improve public understanding of higher education standards and quality.

More information about QAA is available on our website: www.qaa.ac.uk.

Annex B: Responsibilities checklist

One copy of this checklist should be completed for each awarding body and sent to QAA as part of the self-evaluation.

Provider:

Awarding body:

Please identify management responsibilities (or responsibilities for implementation within partnership agreements) using the checklist below. Where the provider is fully responsible (implementation is fully devolved) please mark the **provider** column, where the awarding body has full responsibility mark the **awarding body** column, where responsibility is shared or the provider implements under awarding body direction mark the **shared** column. Where responsibility is devolved to the provider or shared please give **documentary reference(s)** that show how this is managed or implemented. These may be available in the self-evaluation portfolio, or in documents presented subsequently or available during the visit.

| Item | Provider | Awarding body | Shared | Documentary reference(s) |
|---|----------|---------------|--------|--------------------------|
| 1 Identification of curriculum needs | | | | |
| 2 Strategic development of higher education | | | | |
| 3 Curriculum development | | | | |
| 4 Programme specifications and intended learning outcomes | | | | |
| 5 Setting assessments | | | | |
| 6 First marking of student assignments | | | | |
| 7 Moderation or second marking of assignments | | | | |
| 8 Giving feedback to students on their assignments | | | | |
| 9 Student recruitment and selection | | | | |
| 10 Monitoring student admission, retention and completion | | | | |
| 11 Reviewing and responding to annual monitoring reviews and module evaluations | | | | |
| 12 Quality review of higher education provision | | | | |
| 13 Provision for developing staff teaching and assessing skills at higher education level | | | | |
| 14 Provision for staff higher | | | | |

| | | | | |
|---|--|--|--|--|
| education subject updating and scholarship | | | | |
| 15 Monitoring the quality of higher education teaching and learning | | | | |
| 16 Student admission guidance and induction | | | | |
| 17 Academic tutorial/review and monitoring/academic guidance | | | | |
| 18 Library and learning resources available to students | | | | |
| 19 Guidance for progression | | | | |
| 20 Liaison with and involvement of employers | | | | |
| 21 Student appeal system | | | | |
| 22 Collecting and acting upon student feedback/opinion | | | | |
| 23 Programme and module information available to students | | | | |
| 24 Public information, for example, on web or in prospectus | | | | |
| 25 Procedures for ensuring the accuracy of public information | | | | |

Annex C: Indicative programme for a preparatory meeting

The agenda below is indicative and QAA considers it the minimum necessary to enable the provider, its awarding body/bodies and the coordinator to establish the requirements of the review. The coordinator, the provider and its awarding body/bodies may feel it appropriate to include additional items. In practice the programme for each provider may vary.

The coordinator should have the opportunity to meet a wider group of staff than those who will be involved directly, such as the facilitator. This typically happens during the early part of the day, although the coordinator will also expect to meet a smaller core team for the detailed planning. The coordinator will also want to hold a separate meeting with students. At the briefing QAA will give further guidance about who might attend the preparatory meeting.

It is important that providers prepare to discuss each item on the agenda by, for example, ensuring that they have up-to-date information available at the meeting. The preparatory meeting provides staff with a valuable opportunity to clarify their understanding of the review method.

Table 3: Indicative programme for a preparatory meeting

| Activity | Suggested participants |
|---|---|
| Overview of REO: <ul style="list-style-type: none"> • a standard presentation about the method • questions from staff | <ul style="list-style-type: none"> • the head of the provider or a representative and relevant members of the senior management team • staff responsible for managing higher education and/or heads of departments or sections providing higher education, other staff who deliver higher education • the provider's facilitator • awarding body representatives, if agreed in advance. |
| How the review will operate: <ul style="list-style-type: none"> • clarification of the scope of the review process • questions from provider staff • next steps | <ul style="list-style-type: none"> • staff responsible for managing higher education • the facilitator • awarding body representatives, if agreed in advance |
| The role of students: <ul style="list-style-type: none"> • introductions • purpose of the preparatory meeting • clarification of the REO method • scope of the review • questions from students | <ul style="list-style-type: none"> • students • students' representatives who may, for example, represent the students on their programme or year, or the higher education students |
| Detailed planning, including confirmation of the team's requirements for the visit: <ul style="list-style-type: none"> • questions arising from the initial analysis of the self-evaluation • confirmation that the statistical data is correct and accurate • the reviewers' requests for | <ul style="list-style-type: none"> • provider staff responsible for managing higher education • provider's facilitator • awarding body representatives, if agreed in advance |

| | |
|--|--|
| <p>information to date</p> <ul style="list-style-type: none"> • establishing the programme of review activities • clarification of the availability of evidence, including student work • 'housekeeping' arrangements • remaining questions from provider staff or awarding body representatives • next steps | |
| <p>End of meeting</p> | |

Annex D: Indicative programme for a review visit

Indicative programme for a first visit

Indicative programmes for a REO visit are set out below. They are provided here primarily to illustrate the balance between meetings with staff, students and other stakeholders, and the time that teams will spend scrutinising evidence in private. In practice, each visit will have a bespoke programme informed by several factors including the availability of staff and students, the involvement of awarding bodies and the topics/themes the team wishes to explore. The programme will be discussed at the preparatory meeting and confirmed by the coordinator before the visit.

Day one

| Time | Activity |
|------|--|
| 0845 | The team arrives at the provider's premises |
| 0900 | A brief presentation by the provider about its higher education provision |
| 0915 | The team develops a detailed work plan for the visit including questions for staff and students (team and facilitator) |
| 1100 | The team meets relevant staff to discuss the management of academic standards |
| 1200 | The scrutiny of evidence (team only) |
| 1300 | Lunch |
| 1400 | The second meeting with relevant staff, to discuss the management and enhancement of the quality of learning opportunities |
| 1500 | The team meets higher education students |
| 1600 | The further scrutiny of evidence (team only) |
| 1700 | A team meeting (team and facilitator) |
| 1800 | The team departs |

Day two

| Time | Activity |
|------|---|
| 0845 | The team arrives at the provider's premises The further scrutiny of evidence (team only) |
| 1000 | The third meeting with relevant staff, to discuss public information |
| 1100 | The further scrutiny of evidence (team only) |
| 1300 | Lunch |
| 1400 | The team summarises evidence and confirms that all areas have been addressed (team and facilitator) (there may be an additional meeting with staff to follow up any outstanding issues) |
| 1600 | The coordinator, with the support of the team, gives an oral update to the facilitator and the provider contact on the progress of the review and the need for any additional evidence |
| 1630 | End of visit The team departs |

Annex E: Guidance notes on completing the action plan

After a review, the provider will be asked to develop an action plan, set out in a format provided by QAA, describing how the provider plans to take action on the findings of the review. A template for the action plan can be found at the end of this annex.

Each row contains a separate point of good practice or a recommendation, each of which relates directly to the text of the report and echoes the wording of the good practice or recommendations identified in the report.

Each point of good practice and each recommendation must be 'SMART' (specific, measurable, achievable, realistic, and time-bound), so that it is capable of being acted upon. It must also be the responsibility of an individual or group, identified by title/role, and subject to an evaluation by a different individual or group to consider whether it has been effective in addressing the matter identified in the report.

The action plan forms part of the final published version of the report. It is important, therefore, that the action plan is completed by the provider, in consultation with its awarding body/bodies and signed by the head of the provider, in a timely fashion and returned to QAA by the given deadline.

The action plan, its implementation and its impact will form part of the evidence base for any future review activity. In the case of the review action plan, it will also constitute a published record of the provider's commitment to take forward the findings of REO.

Table 4: Deadlines for completion of action plans

| Number of weeks after the visit | Action |
|--|--|
| +4 weeks | The provider receives the draft report and action plan template. |
| +6 weeks | The provider liaises with relevant staff to develop the action plan. The awarding body/bodies contribute to the development of the action plan, if this has been agreed in advance with the provider. |
| +9 weeks | The provider returns the completed action plan to QAA, signed by the head of the provider. |
| +10 weeks | QAA appends the completed action plan to the final report and proofreads the document. |
| +12 weeks | QAA publishes the final report with the completed action plan on its website. |

The column headings in the action plan template are:

Good practice/Essential/Advisable/Desirable.

This column is completed by the coordinator and repeats precisely the wording of the good practice or recommendations identified in the conclusions of the report.

The following columns are completed by the provider in conjunction with its awarding body/bodies:

Action to be taken

Identify what the provider proposes to do in response to the good practice or recommendation. Actions should be specific. Actions such as 'maintain', 'enhance' or 'continue' are difficult to identify a target date for, and consequently may not be completed or evaluated effectively and are therefore best avoided.

Target date

Set dates for when the actions proposed in the previous column will be completed. The more specific the action, the easier it will be to set a realistic target date.

Action by

Identify the role of the specific person/committee who is responsible for ensuring that the action is taken by the target date and can be held accountable for this.

Success indicators

Identify how the provider and its awarding body/bodies will know when an action has been successfully undertaken. (If there is a specific action and a clear target date it will be easier to identify the success indicators.)

Reported to

Identify the role of the person/committee who will monitor the success of the action. A clear designation helps to maintain accountability and ensure successful completion of the action plan.

Evaluation

This column **must** be completed **before** returning the action plan to QAA. Identify the processes or evidence that will be used by the provider to evaluate the action taken and how the provider will consider whether it has been an appropriate means of addressing the matter identified in the report.

Due to the timescale for completing the action plan it is not expected that any actions will have actually been completed by this stage. Therefore, identify the anticipated sources of evidence that will show how successful the action has been and what the outcomes of the action are.

Action plan template

| [Participating provider] action plan relating to the Review for Educational Oversight of [Month / Year] | | | | | | |
|---|---|-----------------------------------|---|--|--|---|
| Good practice | Action to be taken | Target date | Action by | Success indicators | Reported to | Evaluation |
| In the course of REO, the team identified the following areas of good practice that are worthy of wider dissemination within the provider: | | | | | | |
| [EXAMPLE] <ul style="list-style-type: none"> the extent of employer engagement in the delivery and support of the programmes [paragraph number in the report] | [EXAMPLE] Establish employer forum and review annually Review and enhance mentor and workplace supervisor support packs annually | [EXAMPLE] July 2012 | [EXAMPLE] HE Coordinator with programme leaders | [EXAMPLE] Improved engagement with employers; positive evaluations from students on placements; regular communications between mentors and link tutors | [EXAMPLE] HE Forum Employer Forum | [EXAMPLE] Annual programme reviews; annual self assessment report; direct feedback from employers at Employer Forum; student feedback |
| Essential | Action to be taken | Target date | Action by | Success Indicators | Reported to | Evaluation |
| The team agreed the following areas where it is essential for the provider to take action: | | | | | | |
| [EXAMPLE] <ul style="list-style-type: none"> the programme descriptions in the higher education prospectus and online student handbook should be updated to reflect the current aims and outcomes | [EXAMPLE] Ensure all current programme documentation contains accurate information about the programme aims and learning outcomes; ensure all students receive copies | [EXAMPLE] November 2012 | [EXAMPLE] Programme leader | [EXAMPLE] All programme documentation contains accurate information | [EXAMPLE] HE Coordinator | [EXAMPLE] Student feedback evaluated by HE Forum |

| | | | | | | |
|--|--|--------------------|------------------|---|---------------------------------------|---|
| specified in the 2010-11 programme specification [paragraph number in the report]. | of updated information Institute annual checking and sign-off process to ensure all documentation is updated accurately | July 2012 | HE Coordinator | Annual checking process implemented effectively | Deputy Head (Curriculum); HE Forum | HE self assessment report evaluated by Senior Management Team |
| Advisable | Action to be taken | Target date | Action by | Success indicators | Reported to | Evaluation |
| The team agreed upon a number of areas where the provider is advised to take action: | | | | | | |
| <ul style="list-style-type: none"> [list areas of advisable action individually paragraph XX] | | | | | | |
| Desirable | Action to be taken | Target date | Action by | Success indicators | Reported to | Evaluation |
| The team agreed the following areas where it would be desired to take action: | | | | | | |
| <ul style="list-style-type: none"> [list areas of desirable action individually paragraph XX] | | | | | | |

Annex F: Public information about academic standards and the quality of learning opportunities

The purpose of this annex is to give providers and REO teams an indication of the types of information to be considered under the heading of public information.

Public information means information in the public domain about academic standards and the quality of learning opportunities. Some information will be published by awarding bodies on providers' behalf; some will be supplied by the provider and published by external organisations like Unistats or UCAS; and some will be published by the provider itself.

REO considers whether or not the provider has effective procedures for ensuring that the information that it is responsible for publishing about itself is accurate and complete. The indicative list below sets out the type of information about academic standards and the quality of learning opportunities that QAA would expect the provider to make available. It should be emphasised that this list is indicative only because different providers will have different responsibilities for publishing information according to their arrangements with awarding bodies. For more information on how review teams reach conclusions about the accuracy and completeness of this information, see the glossary (**Public information**).

REO teams will consider:

- general contextual information about the provider, for example:
 - mission statement
 - corporate plan
 - quality improvement plan
 - statement of quality assurance processes and procedures
 - learning and teaching, and assessment strategies for higher education
 - higher education strategy
 - information about agreements with awarding bodies
 - details of links with employers

- information about the academic standards and quality of programmes, for example:
 - prospectuses, programme guides or similar
 - programme specifications
 - student handbooks
 - module/unit guides
 - information about the provider's and/or its partners' procedures for programme approval, monitoring and review
 - details of accreditation from professional, statutory and regulatory bodies
 - results of internal student surveys
 - arrangements for assessment and external examination procedures
 - policies for student complaints, appeals and representations.

In drawing a conclusion on public information, REO is not concerned with:

- the accuracy and completeness of information that is not available to students or other external stakeholders, such as management information (although teams may be interested in providers' use of this kind of information in the management of academic standards and the management and enhancement of the quality of learning opportunities)
- auditing the accuracy of quantitative information
- information about the provider that is published by other organisations, such as awarding bodies.

Annex G: Role descriptions and person specifications

Role title: coordinator

Role purpose

The coordinator manages the review in each of the providers to which he/she is assigned. Key responsibilities include:

- leading a programme of reviews for QAA
- providing clear briefings to a wide range of provider participants on the REO method and participants' respective responsibilities
- discussing and agreeing with the provider the agenda that forms the basis of the review
- discussing and agreeing focused review activities with the provider and the reviewers to ensure effective use of time
- organising and coordinating review activities to ensure that the conclusion, recommendations and judgements are sound and evidence-based
- liaising effectively with all stakeholders through face-to-face, telephone, email and other written communications to ensure the smooth running of each review
- providing additional training for reviewers, if necessary
- making effective use of QAA's secure electronic folder system throughout the review to ensure that a full evidence base is available to reviewers and QAA staff in a timely manner and is archived promptly
- respecting protocols on confidentiality
- producing high quality reports that inform all stakeholders of conclusions, recommendations and judgements, where appropriate.

Person specification

Knowledge and understanding to include:

- current or recent knowledge and understanding of current issues affecting higher education providers
- awareness of current higher education teaching methods and curricula
- knowledge and understanding of the assurance of standards and quality
- awareness of the role of professional, statutory and regulatory bodies in programme accreditation
- experience of liaison with senior management and a range of staff at other levels.

Skills include ability to:

- manage small teams (with experience in either higher or further education or in other employment)
- work within tight timescales and to strict deadlines
- chair meetings
- communicate effectively in face-to-face interaction
- train others in methods of work
- produce clear and succinct reports on time
- use word-processing software
- communicate electronically, including emails, attachments and use of web mail
- be flexible and devise sound plans when situations change with little notice.

Role title: reviewer

Role purpose

Reviewers contribute to evaluating academic standards and the quality of higher education provision through a peer review process. They engage in a variety of activities designed to gather and analyse evidence so that they can arrive at considered conclusions, recommendations and judgements. These outcomes help the provider being reviewed to prepare an action plan to further enhance higher education provision.

Key responsibilities include:

- reading, analysing and preparing written commentaries of the self-evaluation submitted by the provider and any other documents sent in advance of a review
- adhering to the review schedule agreed between the provider and the coordinator
- participating in visits to the provider in order to gather, share, test and verify evidence
- drawing conclusions and making recommendations and judgements on the academic standards achieved and the quality of the learning opportunities provided
- recording evidence gathered from a variety of review activities and submitting this to the QAA secure folder in a timely fashion
- drafting sections of the report that are reference to evidence gathered during the review
- respecting protocols on confidentiality
- contributing to and commenting on, the review report, to agreed schedules and deadlines
- being available for the whole period of a review for which they have been selected and committing to complete all processes of a review once they have embarked upon it.

Person specification

Knowledge and understanding to include:

- current or recent experience, knowledge and understanding of higher education provision
- knowledge of, and familiarity with, the Academic Infrastructure and other external reference points, such as those of professional, statutory and regulatory bodies (for reviews requiring subject expertise) experience of providing higher education. In the case of industrially or professionally-based reviewers, familiarity with teaching and learning in higher education
- understanding of programme entry requirements and the ability to interpret progression statistics, including withdrawal, transfer and failure rates and destinations data
- familiarity with academic support strategies and the functions of academic tutorials
- experience of examining and/or verification procedures/processes (preferably including external examining or external verification)
- knowledge of the quality assurance processes employed by public and independent colleges of higher education
- familiarity with the standards of higher education awards in public and independent colleges of higher education in the UK.

Skills include the ability to:

- conduct meetings and interviews with staff
- conduct meetings with a range of current and former groups of students
- write succinctly and coherently
- meet tight timescales and deadlines
- work effectively as a member of a team
- work courteously and professionally
- maintain confidentiality
- communicate electronically, including emails, attachments and use of web mail.

Role title: facilitator

Role purpose

The facilitator ensures the smooth running of the review by acting as the single point of contact between the provider staff and the coordinator.

Key responsibilities include:

- providing effective liaison between the reviewers and the provider staff
- ensuring that the reviewers obtain accurate, timely and comprehensive information about the educational provision and the provider context
- helping the reviewers to come to a clear and accurate understanding of the structures, policies, priorities and procedures of the provider, and the nature of the provision under scrutiny
- ensuring that reviewers are provided with appropriate evidence to allow them to reach the conclusion, recommendations and judgements
- bringing additional information to the attention of the reviewers and correcting factual inaccuracy
- observing objectively
- communicating clearly with the reviewers and the subject provider
- respecting protocols on confidentiality
- establishing effective relationships with the coordinator and the reviewers, as well as with the provider staff
- participating in the provider's preparations for the review
- attending all meetings other than those with students and employers, or where judgements are discussed
- monitoring the pattern of review activities
- maintaining regular telephone and/or email contact with the coordinator to ensure that reviewers are receiving the information or documents that they need, particularly for off-site analysis.

Knowledge and understanding to include:

- thorough knowledge of the structure, policies, priorities, procedures and practices of the provider
- knowledge and experience of working in higher education at a senior level
- experience of quality assurance
- knowledge and understanding of REO.

Skills include the ability to:

- locate cogent information
- maintain confidentiality
- deal conscientiously with detail
- make accurate records of discussions
- meet exacting timescales and deadlines
- work effectively with reviewers
- continue to work effectively as part of the provider team after REO has been completed
- communicate electronically, using emails, attachments and web mail
- influence colleagues within their provider and take forward the action plan.

Annex H: QAA training and development policy for review team members

Introduction

This policy applies to reviews in any part of the UK.

QAA recognises that those selected to be review team members are drawn from a pool of highly qualified, experienced and well-respected personnel who already have skills in the core activities of review. In particular, they are selected for their highly developed and practised skills of written and oral communication, conduct of meetings, analysis and synthesis of a wide variety of information, and evaluation leading to sound judgement. Reviewer training seeks to build on these skills to assist review team members to apply them to a specific review process.

Policy on training and development

The training and development policy will be published. Its aim will be to ensure that review team members receive suitable training. This means training that:

- is appropriate
- is accessible and relevant
- is economical in the use of their time
- takes account of individual learning styles
- takes due account of prevailing legislation
- is relevant to all participants, irrespective of gender, age, ethnicity or disability
- enables them to hone and apply core skills that are essential for a QAA review.

What can reviewers expect of QAA?

Review team members can expect QAA to:

- provide an induction to the work of QAA, its mission, standards and values
- train them in specialist skills needed to carry out review work (this includes effective use of the electronic communications system set up to support reviews)
- assist them to develop sufficient confidence to undertake their first review
- provide training reference material to use after completion of training
- provide the QAA documents needed to conduct the reviews to which they are assigned
- add them to QAA's mailing list for receipt of relevant new QAA publications and information about QAA's work
- provide them with opportunities to contribute to the evaluation of the review methods in which they have participated.

Assuming successful completion of initial training, QAA will:

- provide review team members with feedback on their performance on their first review and, where appropriate, guidance on their further development
- encourage each team member to engage in the further development of his/her role as a reviewer
- take into account prior QAA review training and experience when training review team members to carry out QAA review methods that are new to them.

Benefits for institutions and other organisations subject to review

Adherence to this policy should provide the following benefits:

- confidence that review team members are properly trained to undertake review work professionally and confidently
- the consistent application of each review method
- consistency in the messages about the review method that the review team members take back to their institutions.

Annex I: Academic Infrastructure and other external reference points

In considering providers' management of its higher education provision, REO teams will be guided by the expectations of the Academic Infrastructure or other external reference points. The Academic Infrastructure is a set of nationally agreed reference points that inform and support the effective management of academic standards and quality in all higher education programmes. It is developed in collaboration with the higher education sector and published by QAA. It comprises the following:

- the two frameworks for higher education qualifications, which include descriptions of the levels of higher education qualifications. These are *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)* and *The framework for qualifications of higher education institutions in Scotland*
- the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, which consists of 10 sections and sets out precepts for different aspects of academic standards and quality for higher education providers
- subject benchmark statements, which relate mainly to bachelor's and honours degrees and describe the principles, nature and scope of a particular subject, the subject knowledge, the subject-specific skills and generic skills to be developed and the forms of teaching, learning and assessment to be expected, as well as setting the minimum (threshold) standard that is acceptable within that subject
- award benchmark statements, such as the *Foundation Degree qualification benchmark* which provides a description of the characteristics of a Foundation Degree
- the guidelines for preparing programme specifications, which guide providers in planning the intended learning outcomes of an academic programme.⁶

The *Code of practice* is concerned with the management of quality. The other three elements of the Academic Infrastructure give advice to institutions about setting academic standards. QAA also publishes a range of guidance documents that providers are encouraged to consult. These include guidelines on the accreditation of prior learning and on personal development planning, progress files and the *Higher Education credit framework for England*.

A more detailed description of the current version of the Academic Infrastructure is provided in the glossary in Annex J.

The Academic Infrastructure is currently being revised. From autumn 2011 it will begin to be replaced by the renamed UK Quality Code for Higher Education (the Quality Code).⁷ The new Quality Code will continue to serve the same purpose as the Academic Infrastructure and continue to make clear what is expected of all higher education providers, as well as providing guidance on good practice in setting and maintaining academic standards, assuring and enhancing academic quality, and providing information about higher education.

⁶ For more information about the four elements of the Academic Infrastructure, see: www.qaa.ac.uk/AssuringStandardsAndQuality/Pages/default.aspx.

⁷ See www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/changes-to-academic-infrastructure.aspx.

The Quality Code will be structured in three parts on:

- standards
- quality
- public information.

In 2011-12, where appropriate REO will be based on the Academic Infrastructure as currently defined, but providers should be aware of the intention to move to adopting the Quality Code and an agreed period of phasing-in new sections. Hence reviews conducted from 2012-13 onwards will be based on elements of any published section of the Quality Code if the published date for implementation by higher education providers has been reached. The implementation date will be stated as some time later than the initial publication, to provide transition time to ensure the effective adoption of each element of the Quality Code as it is published.

Some providers offer only qualifications which are aligned to the Qualifications and Credit Framework (QCF) or the National Qualifications Framework (NQF). In these cases they will be expected to provide evidence of the use the relevant other external reference points and guidance on good practice in setting and maintaining academic standards, in assuring and enhancing the quality of learning opportunities for students, and in providing public information about these qualifications. Where providers offer qualifications some of which are on the frameworks for higher education qualifications and others on the QCF/NQF, they will be expected to show how they use each set of relevant reference points for the purposes set out above. Reviewers will be interested to see whether providers find it useful to use some parts of the Academic Infrastructure for QCF/NQF qualifications to assist in their management of standards and quality.

In this handbook the term Academic Infrastructure also refers to other external reference points for QCF/NQF qualifications. The review process and the possible judgements are the same regardless of whether the Academic Infrastructure and/or other external reference points are used.

Programmes of study that fall within the scope of REO are referred to as 'higher education' in this handbook. The *Framework for Qualifications of the European Higher Education Area* (Bologna Framework) has generic qualification descriptors for each cycle, known as the 'Dublin descriptors'. These have been developed as a set and are intended to be read with reference to each other. They are primarily intended for use in the alignment of qualifications and hence national frameworks. National frameworks may themselves have additional elements or outcomes, and may have more detailed and specific functions. The frameworks for higher education qualifications align with the Dublin descriptors.

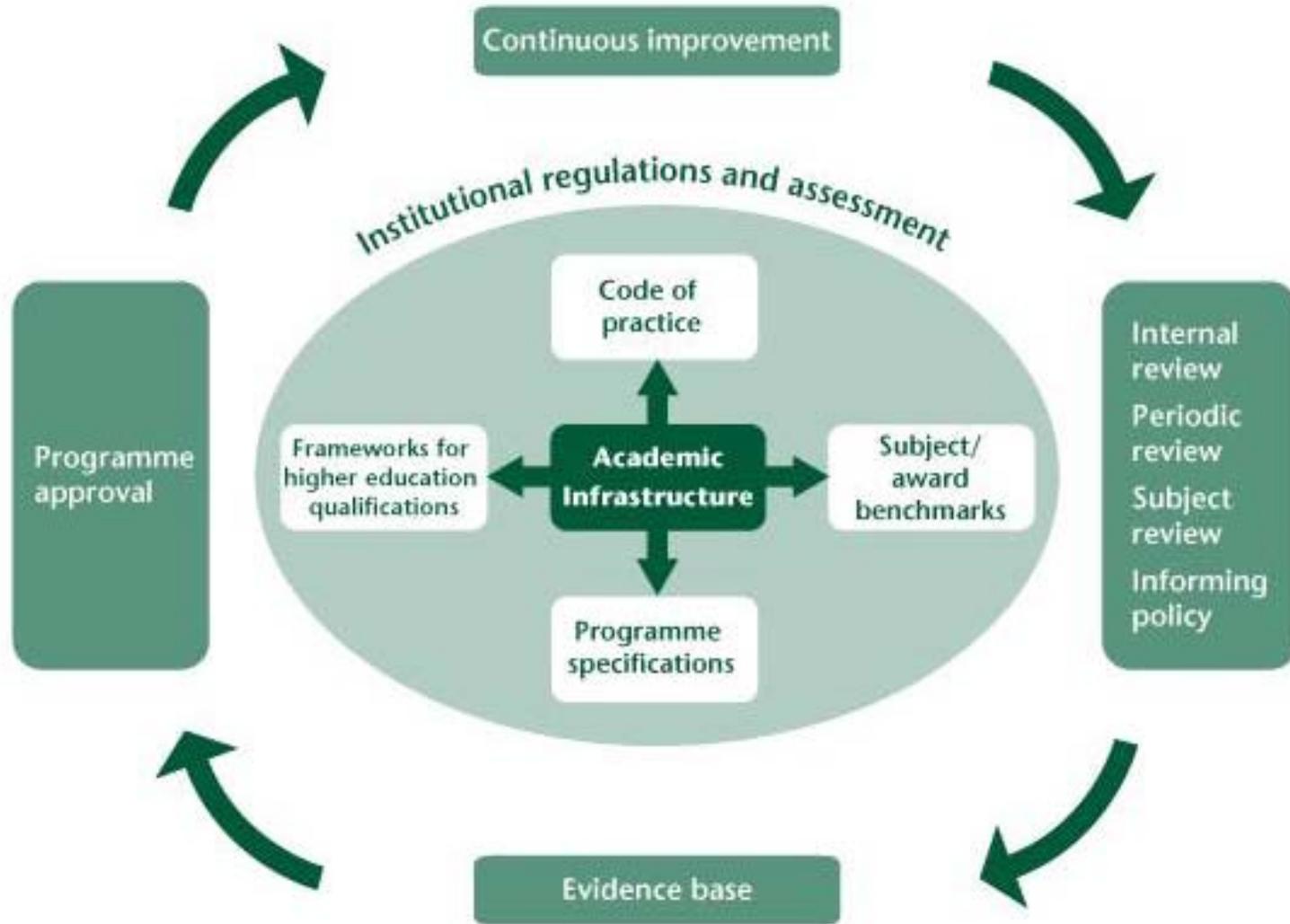


Figure 3: The relationship of the current Academic Infrastructure to the continuous improvement of the management of academic standards and quality in higher education

Table 5: Examples of the typical higher education qualifications at each level of the FHEQ and the corresponding cycle of the FH-EHEA⁸

| Main higher education qualifications | FHEQ level | Corresponding FEHEA cycle |
|---|------------|---|
| Doctoral degrees (eg PhD/DPhil, EdD, DBA, DCLinPsy)* | 8 | Third cycle (end of cycle) qualifications |
| Master's degrees (eg MPhil, MRes, MA, MSc) | 7 | Second cycle (end of cycle) qualifications |
| Master's degrees (integrated)** (eg MEng, MChem, MPhys, MPharm) | | |
| First degrees in medicine, dentistry and veterinary sciences (eg BM, BS, BDS, BVetMed, BVSc)*** | | |
| Postgraduate Diplomas | | |
| Postgraduate Certificate in Education (PGCE)**** | | |
| Postgraduate certificates | | |
| Bachelor's degrees with honours (eg BA/BSc Hons) | | |
| Ordinary bachelor's degrees | | |
| Professional Graduate Certificate in Education (PGCE)**** | | |
| Graduate diplomas | | |
| Graduate certificates | | |
| Foundation Degrees (FD) | 5 | Short cycle (within or linked to the first cycle) qualifications |
| Diplomas of Higher Education (DipHE) | | |
| Higher National Diplomas (HND) | | |
| Higher National Certificates (HNC)***** | 4 | |
| Certificates of Higher Education (CertHE) | | |

⁸ Please note that there is a separate framework for Scottish qualifications: the Scottish Credit and Qualifications Framework.

Annex J: Glossary and weblinks

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| <p>Academic Infrastructure</p> | <p>The Academic Infrastructure is a set of national reference points, agreed with higher education providers, relating to effective practice in the setting and management of academic standards and quality in higher education. It comprises:</p> <ul style="list-style-type: none"> • the <i>Code of practice</i> • the frameworks for higher education qualifications • subject benchmark statements • programme specifications. <p>Further information about the Academic Infrastructure and its four elements is available at: www.qaa.ac.uk/AssuringStandardsAndQuality/Pages/default.aspx.</p> <p>In addition there are publications offering guidance on various aspects of higher education provision including: guidelines on the accreditation of prior learning, progress files and personal development planning and the <i>Higher education credit framework for England</i>.</p> <p>The Academic Infrastructure is currently being revised and from autumn 2011 is being replaced by the UK Quality Code for Higher Education (Quality Code). The Academic Infrastructure is at the heart of the REO process. REO teams will draw upon it as a source of reference when considering providers' approaches to the management of their higher education provision. REO teams will ask providers about their use of the sections of the <i>Code of practice</i>, and self-evaluations should include an account of this, drawing attention to any resulting changes in practice that have taken place, any benefits accruing and any areas of difficulty encountered and how they have been addressed.</p> <p>Reviewers will also explore providers' use of relevant qualification and award descriptors and subject benchmark statements. As the large majority of subject benchmark statements apply to single subject honours degrees, their direct application by providers will not always be appropriate. However, such benchmarks provide an authoritative reference point, and reviewers are likely to be especially interested in whether, and if so how, they have been used to inform the development of programmes such as HNC, HND and Foundation Degrees.</p> <p>Programme specifications contain definitive information on the aims, intended learning outcomes and expected achievements of students, and reviewers will explore their accuracy and usefulness to students and staff. In particular, reviewers will wish to see how programme specifications make use of other reference points in the Academic Infrastructure to define expectations for teaching, learning, assessment and achievement. QAA publishes guidance for providers on the development of programme specifications.</p> <p>(See also Quality Code and Other external reference points.)</p> |
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| Academic standards | <p>Academic standards are defined as the level of achievement a student has to reach in order to achieve a particular award or qualification. There are nationally-agreed reference points for the academic standards of the various levels of higher education qualifications set out in the frameworks for higher education qualifications published by QAA. (See Academic Infrastructure.)</p> <p>An awarding body is responsible for the academic standards of all awards granted in its name. REO is concerned with how providers exercise any responsibilities they have for the academic standards of the awards that they deliver on behalf of their awarding bodies.</p> <p>REO considers academic standards against all aspects of the provider's higher education provision, leading to a judgement that is subsequently published. (See Judgements.)</p> |
| Action plan | <p>After REO, the provider will be asked to develop an action plan, set out in a format provided by QAA, describing how the provider plans to take action on the findings of the review. The action plan forms part of the final version of the report.</p> <p>QAA will monitor the implementation of the action plan through the next review, unless it follows a judgement of no confidence or a conclusion of no reliance at the review. For details of the follow-up to no confidence judgements or a no reliance conclusion, see Follow-up action. The action plan, its implementation and impact will, therefore, form part of the evidence base for any future review activity. It will also constitute a published record of the provider's commitment to take forward the findings of REO.</p> |
| Advisable recommendation | <p>REO reports will include recommendations about how a provider might improve the management of its higher education provision. Recommendations are categorised according to priority. Advisable recommendations relate to matters that the review team believes have the potential to put quality and/or standards at risk and hence require preventative corrective action.</p> |
| ARCS | <p>The Audit and Review Communication Service (ARCS) is QAA's secure web-based communication system through which review teams can communicate among themselves before and after review visits. Facilitators will have posting rights to the folder for their review. QAA will provide training on the use of ARCS for all REO team members.</p> |
| Awarding body | <p>Providers do not have powers to award higher education qualifications. They work with awarding bodies and/or one or more higher education institution(s), which retain responsibility for the academic standards of all awards granted in their name(s) and for ensuring that the quality of learning opportunities offered through collaborative arrangements are adequate to enable students to achieve the academic standard required for their awards. Although REO is not concerned with how awarding bodies discharge their responsibilities within these arrangements, awarding bodies are important stakeholders in the process. Further guidance on the involvement of awarding bodies in REO appears in Section 4.</p> |

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| Briefing | <p>The briefing is the first stage of the REO process. Its purposes are to describe REO in more detail, allow providers and awarding bodies to ask any questions about the method, and to give further advice and guidance on preparing a self-evaluation and on helping students to prepare a submission. Normally the briefing is also an opportunity for providers and awarding bodies to meet some coordinators and to talk to other providers who are preparing for REO.</p> |
| Conclusion | <p>REO teams are asked to reach a conclusion about the provider's management of its responsibilities for public information. The conclusion is whether or not reliance can be placed on the accuracy and/or completeness of the information that the provider publishes about itself. (See also Public information.)</p> |
| Confidence | <p>REO teams are required to make judgements about providers' management of academic standards and the quality of learning opportunities. The judgements are confidence, limited confidence or no confidence.</p> <p>A judgement of confidence will be reached where:</p> <ul style="list-style-type: none"> • a provider is found to be effective in managing its responsibilities for delivering academic standards • the prospects for academic standards and quality being maintained at current levels appear sound • the provider has rigorous mechanisms for the management of its higher education programmes in accordance with the awarding body's/bodies' requirements. <p>Such a judgement will be reached on the basis of evidence that the provider has sound structures and procedures for assuring and enhancing quality and the delivery of standards, that it is successful in managing them and that they are applied effectively to each higher education programme. This judgement will be accompanied by recommendations for actions that are considered advisable and/or desirable (but never essential); however, the overall judgement should not be seen as being qualified by such recommendations.</p> <p>A judgement of confidence is, therefore, an expression of belief in a provider's commitment and ability to identify and address any situation that potentially threatens the delivery of the standards of awards or the quality of student learning opportunities, or the provider's ability to meet its contractual obligations. This includes considering and addressing in a mature and engaged manner, through its own procedures and those of its awarding bodies, any recommendations contained in the report.</p> |
| Conflicts of interest | <p>Reviewers will not be eligible to be part of a team when a conflict of interest is identified. Conflicts include situations where:</p> <ul style="list-style-type: none"> • they have worked for the provider, or its collaborative partners during the last five years • they have undertaken external examining or consultancy work at the provider or its collaborative partners during the last three years |

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| | <ul style="list-style-type: none"> • they have recently made an application for a post at the provider • a close relative is working or studying at the provider • the provider is an institution where the reviewer himself/herself has studied for a higher education qualification (usually but not always deemed to present a conflict of interest). |
| Coordinator | <p>Coordinators are contracted by QAA to manage a number of REO reviews. They are selected for their experience of the management of higher education.</p> <p>The coordinator manages the review on behalf of QAA. He/she is responsible for guiding the provider on preparing its self-evaluation; chairing the preparatory meeting; discussing and agreeing the programme for the visit with the provider and the rest of the REO team; identifying the most effective way of engaging with students; discussing with awarding bodies their involvement in REO (if required); leading the team at the visit; editing REO reports; responding to any comments on the reports from the provider; and keeping in touch with the provider. A full description of the role is given in Annex G.</p> <p>The coordinator is the provider's first and main point of contact throughout the review process.</p> |
| Desirable recommendation | <p>REO reports may include recommendations about how the provider might improve the management of its higher education provision.</p> <p>Recommendations are categorised according to priority. Desirable recommendations relate to matters that the review team believes have the potential to enhance quality, build capacity and/or further secure standards.</p> |
| Enhancement | <p>For the purposes of REO, QAA uses the term enhancement to mean the continuous improvement of a provider's management of the learning experience of students on its higher education provision, for the benefit of students, and within the context of its agreement(s) with its awarding body/bodies.</p> |
| Essential recommendation | <p>REO reports may include recommendations about how the provider might improve the management of its higher education provision. Recommendations are categorised according to priority. Essential recommendations refer to issues which the review team believes are currently putting quality and/or standards at risk and hence require urgent corrective action.</p> <p>When essential recommendations are made at the end of the review, they will be reflected in a judgement of limited confidence or no confidence, and/or a conclusion that 'reliance cannot be placed on the accuracy and/or completeness of all the public information that the provider is responsible for publishing about itself'.</p> |
| Evidence | <p>REO is an evidence-based process. This means that review teams conduct their enquiries primarily by comparing evidence about the provider's management of its higher education provision with its own policies and procedures, the agreements it has with its awarding</p> |

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| | <p>body/bodies, and the expectations of the Academic Infrastructure and/or other external reference points.</p> <p>Evidence comes in a wide range of forms and will vary from provider to provider. It is likely to include formal agreements with awarding bodies, policies and procedures for the management of the student learning experience of higher education programmes, external examiners' reports, validation documents, data about the provider on the Unistats website (www.unistats.com), review and inspection reports of other organisations, and any information arising from meetings with staff and students.</p> <p>Some of this evidence, such as review reports by other organisations, will be available publicly. Other elements should be supplied by the provider as part of its self-evaluation or supporting evidence. There is guidance on developing the self-evaluation, including a list of supporting evidence, in Section 3 of this handbook. Once the team has read the self-evaluation, the coordinator may ask for more evidence to be available at the visit itself. The coordinator will confirm at the preparatory meeting, or at least three weeks before the visit, precisely what further evidence is required.</p> |
| Facilitator | <p>For the review the provider is invited to nominate a facilitator. The facilitator acts as a single point of contact between the provider and the coordinator, and through her/him the REO team. The facilitator's responsibilities include, in consultation with the coordinator, ensuring that reviewers have the relevant evidence to enable them to conduct the review (including when the team is off-site), bringing additional information to the attention of the reviewers and helping to clarify any matters of fact.</p> <p>In addition, the facilitator attends all review team meetings other than those with students and employers, or where judgements are discussed. The facilitator does not contribute to the review report or its judgements. Facilitators will be trained for the role alongside reviewers. For more information, see Annex G.</p> |
| Good practice | <p>Good practice is practice that the REO team regards as making a particularly positive contribution to the provider's management of academic standards and/or academic quality in the context of that particular provider, and which is worthy of wider dissemination within and/or beyond the provider.</p> <p>REO reports are likely to include features of good practice. QAA will disseminate good practice identified through REO in periodic publications.</p> |
| Higher education reviewed by REO | <p>REO is concerned with taught higher education programmes of study at levels 4, 5, 6, and 7 of <i>The framework for higher education qualifications in England, Wales and Northern Ireland</i>, and levels 7-11 on <i>The framework for qualifications of higher education institutions in Scotland</i>. It also applies to programmes at levels 4, 5, 6 and 7 on the Qualifications and Curriculum Framework and/or the National</p> |

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| | Qualifications Framework. REO does not apply to research degrees or to teacher and tutor education programmes. |
| No confidence | <p>REO teams are asked to make judgements about the provider's management of academic standards and quality. The judgements are confidence, limited confidence or no confidence.</p> <p>Where major doubts exist about significant aspects of a provider's current or likely future capacity to deliver, secure and maintain academic standards and/or the quality of learning opportunities, the provider will receive a judgement of no confidence. A no confidence judgement will be made with reference to what the awarding body/bodies require(s) of the provider. The report will identify the main areas of concern, discuss the means by which such a situation was able to arise and be sustained, and advise students and other stakeholders of the existence of failing or unsatisfactory academic standards or quality of provision. It will contain one or more recommendations considered essential and others considered advisable and/or desirable.</p> <p>A judgement of no confidence will reflect serious procedural inadequacies or implementation failures, and will be indicative of fundamental weaknesses in a provider's capacity to manage its responsibilities for the delivery of academic standards or for providing higher education of an appropriate quality. It will have serious implications for awarding bodies, which are likely to wish to take urgent action. A judgement of no confidence will trigger follow-up action.</p> |
| Other external reference points | <p>Other external reference points are the guidance or requirements provided by awarding bodies or other organisations, such as professional bodies, for qualifications which are aligned to the Qualifications and Curriculum Framework (QCF), the National Qualifications Framework (NQF), the Credit and Qualifications Framework for Wales (CQFW), or the Scottish Credit and Qualifications Framework (SCQF). These reference points and/or guidance can be similar in purpose to the Academic Infrastructure for qualifications on the frameworks for higher education qualifications. The other reference points will deal with good practice in setting and maintaining academic standards, in assuring and enhancing the quality of learning opportunities for students, and in providing public information about those qualifications. In these cases providers will be expected to show the review team evidence of the use of the other external reference points in the management of their higher education provision not on the frameworks for higher education qualifications. Where providers offer qualifications some of which are on the frameworks for higher education qualifications and others on the QCF/NQF, they will be expected to show how they use each set of relevant reference points. Reviewers will be interested to see whether providers find it useful to use some parts of the Academic Infrastructure for QCF/NQF/CQFW/SCQF qualifications to assist in their management of standards and quality.</p> <p>The review process and the possible judgements are the same regardless of the set(s) of external reference points used.</p> |

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| <p>Partnership agreement</p> | <p>Providers have formal partnership agreements, sometimes called memoranda of understanding, with their higher education institution awarding bodies, and many of these describe precisely the provider's responsibilities for any given higher education programme.</p> <p>These agreements will be very useful to REO teams in identifying the parameters of each particular review. Such agreements will form a key part of the provider's self-evaluation. Where an agreement does not identify the provider's responsibilities in detail, then it may be appropriate for the provider and the awarding body to provide further information, or for the awarding body to participate in the visit. Completion of the responsibilities checklist (see Annex B), which should be submitted with the self-evaluation, is an effective way of providing this information. Section 2 provides more information about this.</p> |
| <p>Peer review</p> | <p>REO is a peer review process. This means that the reviews are conducted by people with current or very recent experience of managing, developing, delivering and/or assessing higher education in institutions and/or providers. As a result, REO reports are based upon a working knowledge of UK higher education and, more specifically, an understanding of the challenges of managing higher education academic standards and quality effectively.</p> |
| <p>Preparatory meeting</p> | <p>Typically four weeks before a review visit, there is a preparatory meeting for the visit between provider staff, students and the coordinator. The purpose of the preparatory meeting is to develop the agenda for the visit and identify further evidence for the provider to supply to the team, based on an analysis of the provider's self-evaluation and the student submission. This meeting also gives the coordinator the opportunity for the provider to ask any questions. Awarding bodies may also attend this meeting.</p> <p>An indicative agenda for the preparatory meeting is provided in Annex C.</p> |
| <p>Provider</p> | <p>The term 'independent college' refers to a range of organisations, including some operating for profit, including those with charitable status.</p> <p>This handbook refers to the range of independent colleges as providers.</p> |
| <p>Provisional judgement meeting</p> | <p>REO teams meet around one week after the visit to agree summaries of evidence, to make provisional judgements, and to identify provisional good practice and recommendations. The coordinator will inform the provider about the outcome of the provisional judgement meeting in writing, usually within one week of the meeting. All judgements, good practice and recommendations remain provisional until the provider has had the opportunity to highlight any areas in the draft report that it regards as inaccurate or incomplete, and until the review team has finalised the report in response to the provider's comments. Occasionally, the judgements will remain provisional until the team has completed a second visit.</p> <p>All provisional judgements and conclusions are made with reference to what the awarding body/bodies require(s) of the provider.</p> |

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| Public information | <p>Public information is information about the academic standards and the quality of learning opportunities that is in the public domain. This includes information available to students and staff. In some cases the awarding bodies are responsible for publishing information on the providers' behalf; some public information will be provided by the provider and published by external organisations such as Unistats; and in other cases publication will be the direct responsibility of the provider.</p> <p>REO considers whether or not the information that the provider is responsible for publishing about itself is accurate and complete. An indicative list of this information is provided in Annex F. It should be emphasised that this list is indicative only because providers will have different responsibilities for publishing information according to their agreements with awarding bodies.</p> <p>A conclusion that reliance can be placed on the accuracy and completeness of all of the public information that the provider is responsible for publishing will be reached where the provider:</p> <ul style="list-style-type: none"> • recognises all the information that it is responsible for publishing within the area under review • has rigorous mechanisms for the management of these responsibilities, which ensure that the information it publishes is both accurate and complete • has supplied evidence that this is the case. <p>A conclusion that reliance cannot be placed on the accuracy and/or completeness of all the public information that the provider is responsible for publishing will be reached where:</p> <ul style="list-style-type: none"> • a provider does not recognise all of the information that it is responsible for publishing, and/or • there is evidence that this information is inaccurate and/or incomplete. |
| QAA | <p>The Quality Assurance Agency for Higher Education (QAA) was established in 1997 and is an independent body funded by subscriptions from UK universities and providers of higher education, and through contracts with the main UK higher education funding bodies.</p> <p>QAA's mission is 'to safeguard standards and improve the quality of UK higher education'. QAA does this by working with universities and other higher education providers to define academic standards and quality, and by carrying out and publishing reviews against these benchmarks.</p> |
| QAA officer | <p>Each REO is supported by a QAA officer called the review support officer. The QAA officer's role is to ensure that the process is applied in accordance with this handbook and that the provider meets its obligations to provide information in a timely manner. The QAA officer may attend the preparatory meeting and one or more days of a visit for monitoring purposes. The QAA officer does not take part in the review.</p> |
| Quality Code | <p>The UK Quality Code for Higher Education (Quality Code) will be phased in from autumn 2011 to replace the Academic Infrastructure.</p> |

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| | <p>The Quality Code will make clear what is expected of all higher education providers, as well as providing guidance on good practice in setting and maintaining academic standards, assuring and enhancing academic quality, and providing information about higher education. It will be structured in three parts, on standards, quality and public information. In 2011-12 REO will be based on the Academic Infrastructure as currently defined, but providers should be aware of the intention to move to adopting the Quality Code after its introduction and an agreed period of phasing-in new sections. Hence reviews conducted from 2012-13 onwards will be based on elements of any published sections of the Quality Code if the published date for implementation by higher education providers has been reached. The implementation date will be later than the publication date in order to allow time for the transition to, and effective adoption of, each element of the Quality Code as it is published.</p> |
| Quality of learning opportunities | <p>Quality of learning opportunities means the effectiveness of everything that is done or provided (the 'learning opportunities') by the provider to ensure that its students have the best possible opportunity to meet the intended learning outcomes of their programmes and the academic standards of the awards they are seeking.</p> <p>The review considers the quality of learning opportunities against all aspects of the provider's provision, leading to a judgement that is subsequently published. (See Judgements.)</p> |
| Recommendations | <p>REO reports will include recommendations for the provider about how it might improve the management of its higher education provision. Recommendations are for actions categorised as essential, advisable or desirable according to priority.</p> |
| Reports | <p>REO culminates in a report of the team's findings. Review reports will be published on QAA's public website.</p> <p>Providers and their awarding bodies will always be invited to provide comments on a draft report and to indicate any areas that they consider incomplete or inaccurate. The coordinator will provide further guidance on the procedures for making comments on reports.</p> |
| Review | <p>In this handbook 'review' means Review for Educational Oversight (REO). REO evaluates all aspects of the provider's management of its higher education provision and leads to judgements and a conclusion about the management of that provision within the context of the provider's agreement with its awarding body/bodies.</p> |
| Reviewer | <p>Reviewers are external peers with current or recent experience of managing, developing, delivering and/or assessing higher education in higher education institutions and/or providers. Reviewers are not employees of QAA, although they are paid for taking part in REO. Reviewers are trained specifically for the role by QAA. (See Annex H.)</p> |
| Self-evaluation | <p>REO is based on a self-evaluation prepared by the provider. The self-evaluation describes the responsibilities that the provider has for the management of its higher education provision and evaluates the effectiveness of the policies and procedures it has adopted for</p> |

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| | <p>discharging these responsibilities. An effective self-evaluation is key to the provider gaining substantial benefit from REO and to the smooth running of the review. QAA therefore encourages providers to give its preparation due time and attention. The preparation of a self-evaluation is a major focus of the briefing that QAA will arrange for providers and their awarding bodies.</p> <p>In order to limit the burden of the exercise, providers should as far as possible describe their responsibilities, processes and procedures with reference to a portfolio of existing documents, with any new material limited to a commentary that signposts and/or contextualises the existing material for the team.</p> |
| <p>Student submission</p> | <p>One of REO's aims is to support providers in reviewing and improving the management of their higher education provision for the benefit of students. Within this context, in developing their conclusions about the provider's provision teams need to draw on students' views about their experiences as learners. Teams will meet students at the visit as a matter of course. QAA will also invite students to prepare a submission before the visit, to help them make sure that students' views inform the arrangements for the visit.</p> <p>Student submissions may take a variety of forms, such as a summary of responses to recent student questionnaires or a written report of student focus groups. QAA will provide further guidance to students in a separate guidance note. The principle of the submission, irrespective of its form, is that it should reflect the students' own views of their experiences as learners. Providers may, however, have a valuable role to play in helping their students to prepare a submission, for example by sharing information with them. QAA will provide further guidance to providers during preparations for REO, and students will be invited to the briefing. After the briefing, coordinators will also have the responsibility of discussing with the provider how the provider might assist students to develop a submission for REO.</p> <p>The student submission is voluntary. If students are not able to make a submission, despite the best efforts of the provider and the coordinator, this will not prejudice the outcomes of REO.</p> |
| <p>Team</p> | <p>The review team normally comprises the coordinator and three reviewers. However, for providers with fewer than 100 full-time equivalent students there will be two reviewers. REO team selection will be made with reference to a provider's higher education provision. QAA will avoid known conflicts of interest.</p> <p>QAA will send brief details of proposed teams to providers and their awarding bodies not less than 11 weeks before the review visit, allowing the provider one week to draw QAA's attention in writing to any conflicts of interest they believe QAA has not identified.</p> |
| <p>Unistats</p> | <p>Unistats brings together authoritative, official information from universities and providers in the UK, in one place, in a way that is not available on any other website. It includes the results of the annual National Student Survey (NSS). The Higher Education Funding Council for England (HEFCE) owns the Unistats websites and has contracted</p> |

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| | the Universities and Colleges Admissions Service (UCAS) to manage the delivery and maintenance of these websites on its behalf. |
| Visit | <p>Each REO visit normally takes place over two consecutive days. The purpose of visits is to allow the review team to scrutinise evidence on-site, meet provider staff, students and other stakeholders (such as awarding bodies' representatives and employers, where appropriate), and consider the extent of the provider's engagement with the Academic Infrastructure or other external reference points. An indicative programme for a review visit is provided in Annex D.</p> <p>The coordinator will discuss and agree the programme for each visit with the provider beforehand. During the visit itself, it is helpful if the provider can make a room available as a workroom for the review team and a separate and larger room available for meetings.</p> |

Useful weblinks

QAA

www.qaa.ac.uk

Academic Infrastructure

www.qaa.ac.uk/AssuringStandardsAndQuality/AcademicInfrastructure/Pages/default.aspx

The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ):

www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/The-framework-for-higher-education-qualifications-in-England-Wales-and-Northern-Ireland.aspx

The framework for qualifications of higher education institutions in Scotland

www.qaa.ac.uk/AssuringStandardsAndQuality/Qualifications/Pages/Framework-for-HE-qualifications-in-Scotland.aspx

Code of practice

www.qaa.ac.uk/AssuringStandardsAndQuality/code-of-practice/Pages/default.aspx

Subject benchmark statements

www.qaa.ac.uk/AssuringStandardsAndQuality/subject-guidance/Pages/Subject-benchmark-statements.aspx

Programme specifications

www.qaa.ac.uk/AssuringStandardsAndQuality/subject-guidance/Pages/Programme-specifications.aspx

Guidelines on the accreditation of prior learning

www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/Guidelines-on-the-accreditation-of-prior-learning-September-2004.aspx

National Qualifications Framework

www.ofqual.gov.uk/qualifications-assessments/89-articles/250-explaining-the-national-qualifications-framework

Credit and Qualifications Framework for Wales

www.cqfw.net

Scottish Credit and Qualifications Framework

www.scqf.org.uk

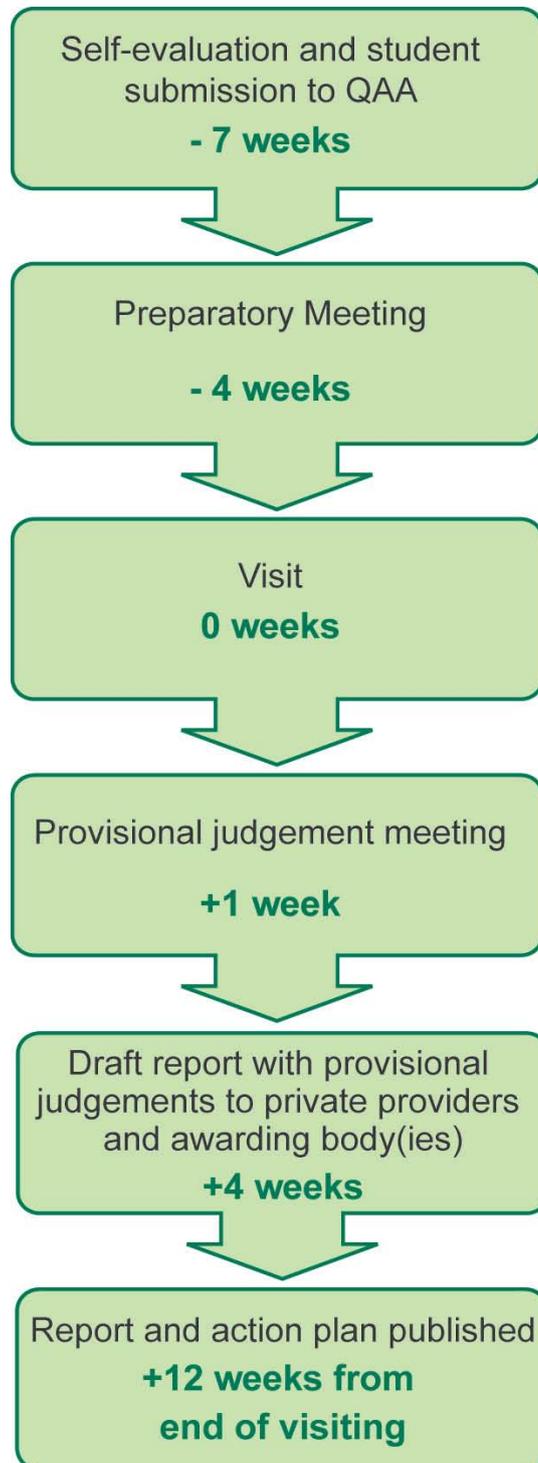
Student guides to REO

Embedded College Review for Educational Oversight (ECREO) student submission guidance

www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/ecreo-student-submission.aspx

A brief student guide to Embedded College Review for Educational Oversight

www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/ecreo-mini-guide.aspx



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