

Title of policy: Consolidated Appeals Procedure	
<p>Policy statement (summary of main points)</p> <p>This document sets out the procedures for consideration of an appeal made by a higher education provider (henceforth 'provider') against a Quality Assurance Agency for Higher Education (QAA) review team's judgements or conclusions</p>	
<p>Strategic aim of the policy</p> <p>To safeguard the robustness and fairness of QAA's review methods</p>	
<p>Link to other policies/procedures and guidelines</p> <p>Higher Education Review (HER) Higher Education Review (Plus) (HER Plus) Institutional Review, England and Northern Ireland (IRENI) Review for Educational Oversight (REO) Embedded College Review for Educational Oversight (ECREO) Recognition Scheme for Educational Oversight (RSEO) Review of College Higher Education (RCHE) Institutional Review (Wales) Enhancement-led Institutional Review (ELIR, Scotland)</p>	
Owned by Mara Goldstein, Head of Governance	Date: December 2013
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For further information contact	Mara Goldstein, Head of Governance

Consolidated Appeals Procedure

Approved by the Board 13 December 2013
Effective from 1 January 2014

Introduction

1 This document sets out the procedures for consideration of an appeal made by a higher education provider (henceforth 'provider') against a QAA review team's judgements or conclusions following a review conducted under the following review methods:

- Higher Education Review (HER)
- Higher Education Review (Plus) (HER Plus)
- Institutional Review, England and Northern Ireland (IRENI)
- Review for Educational Oversight (REO)
- Embedded College Review for Educational Oversight (ECREO)
- Recognition Scheme for Educational Oversight (RSEO)
- Review of College Higher Education (RCHE)
- Institutional Review (Wales)
- Enhancement-led Institutional Review (ELIR, Scotland).

2 The procedure outlined in this document comes into effect for all reviews where judgements have been confirmed on or after **1 January 2014**.

Making an appeal

3 QAA distinguishes between complaints and appeals. A complaint is an expression of dissatisfaction with services we provide or actions we have taken. QAA has a separate complaints procedure. Appeals are challenges to specific decisions, in specific circumstances, and are handled through this procedure.

4 Where an appeal contains matters which properly fall within the complaints procedure, the Independent Reviewer or the Appeals Panel may refer those matters to be considered under the complaints procedure.

5 Appeals are made in writing by the head of the provider concerned. They are addressed to the Head of Governance, QAA, Southgate House, Southgate Street, Gloucester GL1 1UB. Oral appeals are not accepted. An appeal must be lodged within one month of the receipt of the review team's report, as specified in Annex 1. Receipt of an appeal is acknowledged within three working days.

6 A provider making an appeal must nominate a contact person for liaison with QAA. The QAA contact person will normally be the Head of Governance, who will keep the provider informed of progress on a regular basis.¹ The appeals process will normally be completed within three months of QAA receiving the appeal.

7 An appeal may be lodged if, and only if, the review team's judgements or conclusions are any of those specified in Annex 2 ('the appealable judgements').

¹ All references to the Head of Governance in this procedure may include any person nominated to act on their behalf.

8 An appeal can be lodged on either or both of the following grounds.

a. Procedure

That there was a procedural irregularity in the conduct of the review such that the legitimacy of the decisions reached is called into question. Examples include the review team: failing to carry out agreed procedures; reaching decisions which are disproportionate; failing to take account of relevant information or taking account of irrelevant information; or exceeding its powers.

b. New material

There is material that was in existence at the time the review team made its decision which, had it been made available before the review had been completed, would have influenced the judgements of the team, and in relation to which there is a good reason for it not having been provided to the review team.

9 The provider should set out in the appeal the ways in which it considers the review to be flawed based on the grounds of appeal set out in paragraph 8 above. In so doing, the provider should explicitly identify the alleged deficiencies that led to the judgement.

Conflicts of interest

10 The Independent Reviewer and the members of the Appeals Panel (paragraphs 14 and 18 below) are experienced reviewers who have had no prior involvement in the particular review, drawn from a list of reviewers maintained for this purpose.

11 The provider will be given the opportunity to review the list and raise objections to any individual reviewer on the grounds that the reviewer's involvement in the appeal would give rise to a perceived conflict of interest. Any such objections should be communicated to the Head of Governance within seven working days of the list being sent to the provider.

12 The Head of Governance may either accept the objections and allocate a different reviewer from the list or refer the objections to the Chair of the QAA Board.

13 The Chair will consider any objections raised by the provider referred to them by the Head of Governance and decide whether these are to be taken into account when selecting an Independent Reviewer or the members of the Appeals Panel.² The Chair's decision shall be final, and there is no appeal from, or review of, the Chair's decision.

Initial consideration of an appeal

14 Upon receipt of an appeal, the Head of Governance will refer it for preliminary consideration by an Independent Reviewer.

15 The Independent Reviewer will consider the review team's final report, the appeal lodged by the provider, and any submission made to the review team by the

² All references to the Chair of the QAA Board in this procedure may include any member of the QAA Board nominated to act on their behalf.

provider after the draft report. The Independent Reviewer may seek advice on the operation of this procedure from the Head of Governance.

16 The Independent Reviewer may reject an appeal only where they decide there is no realistic prospect of the appeal being upheld. The Independent Reviewer will outline their reasons for rejecting the appeal. In all other cases, the Independent Reviewer will refer the appeal to the Appeals Panel.

17 Where the Independent Reviewer rejects an appeal, the provider will be notified in writing of this decision and the reasons for the appeal being rejected. There is no appeal from, or review of, the Independent Reviewer's decision.

The Appeals Panel

18 Where the Independent Reviewer has referred an appeal to the Appeals Panel, the Head of Governance will convene an Appeals Panel to consider the appeal. The Appeals Panel will consist of three experienced reviewers.

19 Administrative support to the Appeals Panel is provided by QAA officers who have no operational involvement in the review programme or any prior involvement in the particular review.

20 The Appeals Panel may at any stage of the process seek advice on the operation of this procedure from the Head of Governance who may, if they consider it necessary, seek external legal advice.

Response to the appeal

21 In order to assist an Appeals Panel in its work, the Head of Governance, acting on the Appeals Panel's behalf, will ask the Coordinator or QAA officer with responsibility for the review (usually the Assistant Director who supported the review) to respond to the appeal. The QAA officer will coordinate a response on behalf of the review team, including comments on any suggestion of procedural deficiency in the conduct of the review and on any other matters raised in the appeal.

22 QAA will make available to the provider the response received in accordance with paragraph 21 at least 10 working days before the date fixed for the Appeals Panel. The provider may comment in writing on that response and those written comments will also be considered by the Appeals Panel. The provider's response should be received by the Head of Governance at least five working days before the date fixed for the Appeals Panel.

23 The Appeals Panel may at any stage of the process request further information or clarification from the provider and/or the QAA officer. A copy of any such information or clarification shall be provided to the other party who shall have the right to comment on it.

Documents for the Appeals Panel

- 24 The documents considered by the Appeals Panel will include:
- a. the review team's report
 - b. the appeal
 - c. the response as described in paragraph 21
 - d. any comments received from the provider on the response provided to the Appeals Panel, as provided for in paragraph 22.

25 The Appeals Panel will not consider any document that has not been identified to and provided to the provider in advance of the Appeals Panel meeting to consider the documents.

26 The Appeals Panel will normally reach a decision on an appeal without the need for a meeting with the provider. The Appeals Panel may, however, at its absolute discretion, invite senior members of the provider to a meeting in exceptional circumstances where the Appeals Panel considers that there are issues which require further clarification. The procedure at the meeting will be entirely at the Appeals Panel's discretion. There will be no right to legal representation at such a meeting.

Decisions of the Appeals Panel

27 The Appeals Panel will focus on the process and conclusions that led to the appealable judgements.

28 The Appeals Panel shall uphold the appeal if it concludes on the balance of probabilities that:

- a) there was a procedural irregularity in the conduct of the review such that the legitimacy of the decisions reached is called into question; and/or
- b) there is material that was in existence at the time the review team made its decision which, had it been made available before the review had been completed, would have influenced judgements of the team, and in relation to which there is a good reason for it not having been provided to the review team.

29 Otherwise, the Appeals Panel shall reject the appeal and shall determine that the judgements of the review team shall be confirmed.

30 Where the Appeals Panel upholds the appeal it may do all or any of the following:

- a) set aside the affected review
- b) set aside any affected judgements
- c) direct that a new review is carried out by a new review team
- d) direct that the original review team reconsiders its judgements in the light of the new materials
- e) specify the scope of any new review
- f) specify that the scope of any new review shall be decided by QAA in consultation with the provider.

31 The Appeals Panel shall give reasons for its decision.

32 The decision of the Appeals Panel is final. There is no appeal from, or review of, the Appeals Panel's decision.

33 The Head of Governance will communicate the outcome of the Appeals Panel's consideration of an appeal to the head of the institution, normally within seven working days of the date of the Appeals Panel.

34 Once the appeal procedure is completed, and any consequent amendments to the report have been made, the report is published.

Annex 1

The version of the report upon which an appeal can be based

Review method	Version of report
Higher Education Review (HER) and Higher Education Review (Plus) (HER Plus)	The second draft report, received following consideration of the provider's comments on the first draft report
Institutional Review, England and Northern Ireland (IRENI) and Review of College Higher Education (RCHE)	The second draft report and evidence base received, following consideration of the provider's comments on the first draft report and evidence base
Educational oversight review methods: Review for Educational Oversight (REO), Embedded College Review for Educational Oversight (ECREO), Recognition Scheme for Educational Oversight (RSEO)	The finalised report, received following consideration of the provider's comments on the draft (draft four), or where a second visit is agreed, the report received following the second visit
Institutional Review (Wales)	The second draft report and evidence base, received following consideration of the provider's comments on the first draft report and evidence base
Enhancement-led Institutional Review (ELIR, Scotland)	The final text versions of the Outcome Report and Technical Report, received following consideration of the provider's comments on the first draft reports

Annex 2

Judgements or conclusions which can be appealed

Review method	Appealable judgements
<p>Higher Education Review (HER) and Higher Education Review (Plus) (HER Plus)</p>	<p>The setting and maintenance of the threshold academic standards of awards 'requires improvement to meet UK expectations'</p> <p>The setting and maintenance of the threshold academic standards of awards 'does not meet UK expectations'</p> <p>The maintenance of the threshold academic standards of awards offered on behalf of degree-awarding bodies and/or other awarding organisations 'requires improvement to meet UK expectations'</p> <p>The maintenance of the threshold academic standards of awards offered on behalf of degree-awarding bodies and/or other awarding organisations 'does not meet UK expectations'</p> <p>The quality of student learning opportunities 'requires improvement to meet UK expectations'</p> <p>The quality of student learning opportunities 'does not meet UK expectations'</p> <p>The quality of the information produced by the provider about its provision 'requires improvement to meet UK expectations'</p> <p>The quality of the information produced by the provider about its provision 'does not meet UK expectations'</p> <p>The enhancement of student learning opportunities 'requires improvement to meet UK expectations'</p> <p>The enhancement of student learning opportunities 'does not meet UK expectations'</p>
<p>Institutional Review, England and Northern Ireland (IRENI) and Review of College Higher Education (RCHE)</p>	<p>Academic standards 'do not meet UK expectations for threshold standards'</p>

	<p>The quality of student learning opportunities 'requires improvement to meet UK expectations'</p> <p>The quality of student learning opportunities 'does not meet UK expectations'</p> <p>The quality of the information produced by the institution about its learning opportunities 'requires improvement to meet UK expectations'</p> <p>The quality of the information produced by the institution about its learning opportunities 'does not meet UK expectations'</p> <p>The enhancement of student learning opportunities 'requires improvement to meet UK expectations'</p> <p>The enhancement of student learning opportunities 'does not meet UK expectations'</p>
<p>Educational oversight review methods: Review for Educational Oversight (REO), Embedded College Review for Educational Oversight (ECREO), Recognition Scheme for Educational Oversight (RSEO)</p>	<p>Limited confidence in academic standards</p> <p>No confidence in academic standards</p> <p>Limited confidence in the quality of learning opportunities</p> <p>No confidence in the quality of learning opportunities</p> <p>Reliance cannot be placed on the accuracy and/or completeness of information published by the provider about itself (excluding RSEO)</p>
<p>Institutional Review (Wales)</p>	<p>Academic standards 'do not meet UK expectations for threshold standards'</p> <p>The quality of student learning opportunities 'requires improvement to meet UK expectations'</p> <p>The quality of student learning opportunities 'does not meet UK expectations'</p>

	<p>The quality of the information provided by the institution 'requires improvement to meet UK expectations'</p> <p>The quality of the information provided by the institution 'does not meet UK expectations'</p> <p>The enhancement of student learning opportunities 'requires improvement to meet UK expectations'</p> <p>The enhancement of student learning opportunities 'does not meet UK expectations'</p>
<p>Enhancement-led Institutional Review (ELIR, Scotland)</p>	<p>Overarching judgements:</p> <p>The institution's arrangements for managing academic standards and enhancing the quality of the student learning experience are 'not effective'</p> <p>The institution's arrangements for managing academic standards and enhancing the quality of the student learning experience have 'limited effectiveness'</p>