



**Embedded college review for  
educational oversight:  
Handbook**

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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 recognised as a designated body for higher education providers by the UK Border Agency (UKBA).

Reviews for educational oversight have 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 QAA concerns scheme's jurisdiction (or within the jurisdiction of the *Protocol for managing potential risks to quality and academic standards* in Scotland) and to cooperate with any investigations.<sup>1</sup>

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

The process of review described in this handbook is called Embedded college review for educational oversight (ECREO) and starts in 2011-12. It addresses the specific needs of providers that operate networks of colleges embedded on or near the campuses of two or more UK higher education institutions.

## 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.

**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

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<sup>1</sup> [www.qaa.ac.uk/Complaints/concerns/Pages/default.aspx](http://www.qaa.ac.uk/Complaints/concerns/Pages/default.aspx).

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 QAA website: [www.qaa.ac.uk](http://www.qaa.ac.uk).

## About this handbook

This handbook is intended primarily for staff working in **providers** applying for educational oversight by QAA, and for ECREO review teams. It is also intended to provide information and guidance for other staff working for partner higher education institutions (HEIs). It is not intended for students (for whom QAA has produced separate guidance). The terms in **bold** are explained in full in the glossary in Annex O. Further information may be found through the web links listed at the end of the glossary. In addition to this handbook, QAA will provide support for colleges and reviewers through **briefing** and training events.

## Key features of Embedded college review for educational oversight

- 1 Embedded college review for educational oversight (ECREO):
  - prioritises the interests of students
  - focuses on how the student learning experience is managed
  - acknowledges the shared responsibilities of awarding bodies and providers, and seeks to enhance these relationships
  - is an evidence-based peer review process
  - focuses on the providers' management of academic standards, their management and enhancement of the quality of learning opportunities provided for students, and on the public information they provide
  - assumes that the provider is already managing the provision effectively according to the expectations of the **Academic Infrastructure**, or other external reference points for awards not on the frameworks for higher education qualifications<sup>2</sup> (see Annex H)
  - ensures review teams are suitably qualified (see Annex M)
  - is based on a self-evaluation prepared by the provider
  - involves two **visits** to the provider and visits to its embedded colleges
  - results in published reports.

ECREO is an evidence-based **peer review** of all aspects of a provider's management of its responsibilities for **academic standards** and the **quality of learning opportunities**. ECREO focuses on how providers discharge any delegated responsibilities in their embedded college provision, within the context of their agreements with partner HEIs, if applicable.

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<sup>2</sup> [www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/The-framework-for-higher-education-qualifications-in-England-Wales-and-Northern-Ireland.aspx](http://www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/The-framework-for-higher-education-qualifications-in-England-Wales-and-Northern-Ireland.aspx) and [www.qaa.ac.uk/AssuringStandardsAndQuality/Qualifications/Pages/Framework-for-HE-qualifications-in-Scotland.aspx](http://www.qaa.ac.uk/AssuringStandardsAndQuality/Qualifications/Pages/Framework-for-HE-qualifications-in-Scotland.aspx).

2 ECREO is designed to benefit students through assuring and enhancing the quality of their higher education and improving the student experience. Students are central to, and are involved in, the whole process.

3 The scope of ECREO will include all higher education provision covered by *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and *The framework for qualifications of higher education institutions in Scotland*, and provision which is designed to prepare students for higher education programmes (normally at NQF Level 3). It will examine the provider's management of the academic standards of awards and the quality of learning opportunities for students offered through its embedded colleges, in the context of its collaborative agreements with partner HEIs. Partner HEIs may be awarding bodies for some or all of the provision, in which case the provider's discharge of its responsibilities under the collaborative agreements will be considered.

4 ECRO includes two visits to the provider's headquarters and visits to embedded colleges. The number of embedded college visits will be determined in a discussion at the preliminary meeting between the QAA officer and the provider, principally regarding the number of embedded colleges which want to issue confirmation of acceptance for studies (CAS).

5 ECREO is conducted in an open and collegial way. The approach is primarily concerned with the scrutiny of, and making **judgements** about, the effectiveness of the provider's systems and procedures for discharging its responsibilities in relation to academic standards and its management of the student learning experience, and with forming a conclusion about the public information providers produce. ECREO does not involve direct scrutiny at the level of an academic discipline, but does explore the effectiveness of quality management at institutional and programme levels.

6 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.

## Embedded college review for educational oversight - how it works

### Aims

7 The aims of ECREO are to:

- provide public assurance about the academic standards and quality of learning opportunities of higher education and preparatory provision, and the reliability of public information
- support providers in reviewing and enhancing the management of their higher education provision, for the benefit of students and within the context of their agreements with their awarding body/bodies where appropriate, in embedded colleges
- foster good working relationships between providers and their awarding body/bodies for the benefit of students
- provide public information.

## Scope

8 ECREO teams will make judgements on the provider's management of its responsibilities for the management of **academic standards, quality of learning opportunities** and **public information**.

- **Academic standards** refers to the level of achievement a student has to reach in order to achieve a particular award or qualification.
- **Quality of learning opportunities** considers the effectiveness of everything that is done or provided by the provider to ensure that its students have the best possible opportunity to meet the stated intended learning outcomes of their programmes and the academic standards of the awards they are seeking.
- **Public information** is information about the academic standards and quality of learning opportunities which is in the public domain. In some cases the publication of this information is the responsibility of awarding bodies, carried out on the providers' behalf; some will be provided by the providers and published by external organisations like **Unistats**; and for some the provider itself will be responsible for publication. Further details about public information can be found in Annex N.

9 ECREO examines the following main areas (based on the *Code of practice for the assurance of academic quality and standards in higher education*):

- the effectiveness of a provider's internal quality assurance structures and mechanisms for its embedded colleges, including how the provider and its embedded colleges regularly review the quality of programmes leading to the provider's awards (or those of partner HEIs) and the standards of those awards, and how the provider satisfies itself that the resulting recommendations are implemented satisfactorily
- the accuracy, completeness and reliability of the information that a provider publishes, or authorises to be published in its name, about the quality of programmes which lead to its awards (or those of partner HEIs), and the academic standards of those awards
- examples of the quality assurance and academic standards processes established by the provider (and its partner HEIs where appropriate), as operated by the provider and its embedded colleges, in order to demonstrate the validity and reliability of the information being generated for the provider (and its partner HEIs where appropriate).

10 In examining these areas, review teams focus in particular on:

- the provider's strategic approach to its embedded colleges and their provision, including processes for selection and approval of, and the formal arrangements for, collaborative links with the colleges and with its partner HEIs where appropriate
- internal quality assurance reviews of embedded provision and their outcomes, including reviews of the colleges' links with the partner HEIs
- the use made of external reference points in collaborative provision, including the Academic Infrastructure and its successor the Quality Code
- publicly available information about the quality of programmes and the academic standards of awards gained through study at embedded colleges
- the provider's internal systems for the management of information, and their contribution to its effective oversight of quality and of academic standards in its embedded college provision



- the development, use and publication of programme specifications in embedded college provision
- the academic standards of these programmes
- the learning experience of students within embedded colleges
- the role of the provider in assuring the quality of teaching staff in embedded colleges, which may include criteria for the appointment of teaching staff and the ways in which teaching effectiveness is appraised, improved and rewarded
- the role of the provider in supporting embedded colleges to undertake quality enhancement; that is, to take deliberate steps at institutional level to improve the quality of learning opportunities.

## Review teams

11 There will normally be four members of an ECREO team: three reviewers and a review secretary. 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 partner HEIs within its higher education provision, or more than three embedded colleges, QAA may consider the inclusion of additional reviewers.

12 QAA reviewers and review secretaries are peers drawn from the HE sector. They are trained by QAA. The role descriptor and person specification of reviewers and review secretaries is located at Annex L.

13 Each ECREO is coordinated by a **QAA officer**. Before and during the preliminary meeting this officer provides advice to the provider on the process and works with the review team on the initial analysis of documentation. The officer will normally participate in some of the visits to embedded colleges. It is the responsibility of the QAA officer to make sure that the review team's findings are supported by adequate and identifiable evidence, and that the review report provides information in a succinct and readily accessible form.

## Facilitator

14 The **facilitator** ensures the smooth running of the review by acting as the single point of contact between the provider, the embedded colleges, the partner HEIs, the QAA officer and the review team. The facilitator may wish to work closely with a colleague from each of the embedded colleges in preparing and coordinating the visits to embedded colleges. Annex L provides more detail about the role of the facilitator.

## Information sources

15 Wherever possible information should be provided for the review team in electronic format and should be existing documentation. The following sources of information will provide important evidence for the team:

- the provider's self-evaluation
- the provider's register of its embedded college provision
- information relating to its partner HEIs
- QAA reports on the provider and its partner HEIs and other relevant bodies, including professional, statutory or regulatory bodies (PSRBs)
- information (written or oral) acquired during and after the visits to embedded colleges.

## Role of students

16 Students' views of their education are a key information source for review teams. Student representatives are invited to attend the preliminary meeting in order to achieve a shared understanding of the review, and particularly to address the importance of learning about the experience of students. In addition to attending the preliminary meeting, the QAA officer will have a separate meeting on the same day with student representatives in order to discuss and clarify any matters arising.

17 During the preliminary meeting the QAA officer will discuss with the provider and with student representatives options for a student submission. A student submission is voluntary and the lack of a student submission will not prejudice the outcome of the review. Separate submissions may be produced by individual embedded colleges.

18 Confidential meetings with a representative group of students during the initial visit to the provider and during visits to embedded colleges will be an important part of the evidence base. Given the importance of meeting students during the initial visit and the visits to embedded colleges, providers will want to think carefully about the timing of the review.

19 The review team will expect the provider's self-evaluation to explain, with evidence, how it ensures that students' views inform the management of its higher education programmes, centrally and in its embedded colleges.

20 QAA will provide further guidance to providers on the involvement of students during the briefing events in preparation for ECREO. Separate guidance documentation will be provided for students on QAA's website (see web links at the end of Annex O).

## Preparing for ECREO

At least 14 weeks before the review visit is scheduled to take place, QAA will:

- notify the provider and its partner HEI(s) of the dates of the review
- invite the provider to attend a **briefing** (up to six staff and students may attend). 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 (he/she 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 the glossary and in Annex L).

## Preliminary meeting

21 The preliminary meeting is held at the provider's headquarters between staff and students, representatives of partner HEIs (as invited by the provider) and the QAA officer. This will take place no later than 12 weeks before the initial visit of the review team to the provider's headquarters.

22 The purposes of the preliminary meeting are to discuss the arrangements for the ECREO visits and the number, timing and arrangements for embedded college visits. It is also an opportunity for the QAA officer to meet key staff and student representatives, clarify

the process and provide an opportunity for staff and students to ask questions. Provisional dates for a second visit<sup>3</sup> are also agreed.

## Self-evaluation

23 The **self-evaluation** is a key element of ECREO. It needs to be submitted to QAA eight weeks in advance of the initial visit to the provider. The purpose of the self-evaluation is to describe the responsibilities that the provider has for the management of academic standards, quality of learning opportunities and public information of 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 be fully referenced. Providers should send their self-evaluation to QAA eight weeks before the visit. The ECREO team will carry out a careful analysis of the self-evaluation prior to the review visit. Annex G of this handbook provides further guidance on the self-evaluation for ECREO. The briefing (see below) will also contain further advice on preparing a self-evaluation.

## Review visits

24 There are three parts to the review visit: an initial team visit to the provider, visits to embedded colleges and a review visit to the provider.

### The initial team visit and the review visit to the provider

25 Two visits will be made to the provider's headquarters: an initial team visit before any visits to the embedded colleges, and the review visit. Both will normally involve all members of the review team and the QAA officer. The amount of time between the two visits will be determined by the logistics of visiting the embedded colleges.

26 The first visit to the provider normally takes place over three consecutive days. It is designed to allow reviewers to scrutinise evidence on site, to meet the provider's staff, students and other stakeholders, and to consider the extent of the provider's quality assurance framework. Annex E provides an indicative programme for the initial team visit.

27 The review visit to the provider will take place after the visits to embedded colleges. It will normally last for two days, and will give an opportunity for the team to explore with the provider any matters where there is incomplete information or uncertainty. The final part of the review visit will be a private team meeting at which members will arrive at conclusions and judgements.

### Visits to embedded colleges

28 During the interval between the initial team visit and the review visit to the provider, members of the review team will visit each of the provider's embedded colleges on dates agreed with the QAA officer at the preliminary meeting. To ensure consistency it is likely that the review secretary will attend each visit to an embedded college. Annex F provides further information.

29 QAA does not require self-evaluations for each embedded college. However, for each embedded college to be visited QAA will require (if not already provided):

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<sup>3</sup> Details about second visits will be published separately. Please note that an additional fee is payable for second visits.

- the most recently signed formal agreement(s) between the partner HEI(s) and the provider at institutional and programme levels
- the reports of the processes through which the provider and the partner HEI(s) approved the embedded college relationship and arrangements for the management of academic standards and the management and enhancement of the quality of learning opportunities and public information.

For higher education and preparatory programmes delivered at the embedded college QAA will require:

- the most recent annual and periodic review reports held by the partner HEI(s), together with the report of the most recent programme or provision approval
- the two most recent reports from external examiners (or equivalents) with responsibilities for the relevant programmes or provision included in the sample, together with the information that satisfied the provider and its partner HEIs that the points made by the external examiners have been addressed.

This information should be sent to QAA at the same time as the self-evaluation.

## Role of partner HEIs

30 Providers have a close contractual relationship and, in the form of embedded colleges, normally a location on the campus of at least one HEI: the partner HEI. In terms of the division of responsibilities for the management of academic standards, the management and enhancement of the quality of learning opportunities, and the provision of public information, QAA recognises that the nature of the relationship between the provider and the individual partner HEI may vary. The self-evaluation should explain all such arrangements.

31 Review team visits to embedded colleges will include a meeting with representative staff of the partner HEI(s).

32 ECREO assumes no preferred awarding model for higher education provision, other than that it expects that any model must permit any awarding body to assure itself about the standards and quality of its provision, however or wherever delivered. Embedded college provision may lead to the awards of the provider and/or an external awarding body (for example the partner HEI where a college is embedded). Where external awarding bodies are involved, ECREO will consider how the provider discharges its responsibilities within the context of its agreements with partner HEIs. ECREO is not concerned with how awarding bodies manage their responsibilities for collaborative arrangements.

33 Initial ECREO correspondence between QAA and providers is copied to the heads of the relevant partner HEIs 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 to and from QAA to their partner HEIs.

34 Partner HEIs may also wish to support their providers through ECREO by assisting, for example, with the preparation of the self-evaluation and by attending various ECREO events, including briefings, preliminary meetings, and review **visits**. The extent of a partner HEI's involvement with ECREO should be decided in discussion between it and the provider, taking account of the provisions of the **partnership agreement**. The participation of the partner HEI(s) should be considered in relationship to: the maturity of the relationship between the partners; the extent of the responsibilities which the partner HEI(s) has/have

conferred on the provider; and the accuracy and completeness of existing written evidence about these responsibilities.

35 QAA will invite all partner HEIs to the preliminary meeting, which will provide further guidance on the role of partner HEIs.

## Judgements

36 On the final day of the review visit to the provider the review team will form judgements about the provider's management of its responsibilities for academic standards, the management and enhancement of the quality of learning opportunities, and the provider's procedures for ensuring the accuracy and completeness of the information it is responsible for publishing. The judgements are **confidence**, **limited confidence** or **no confidence**<sup>4</sup>.

- Where a provider is found to be effectively managing its responsibilities for the delivery of the academic standards and the quality of its higher education provision in embedded colleges, the prospects for the future continuation of this appear good, and it has rigorous mechanisms for the management of its higher education programmes in accordance with awarding bodies' requirements, the provisional judgement will be **confidence**.
- Where significant concerns exist about aspects of a provider's current or likely future management of quality and/or delivery of the standards of its higher education programmes in embedded colleges, the provisional judgement will be **limited confidence**.
- 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 in embedded colleges, the provisional judgement will be **no confidence**.

37 Judgements and conclusions will always be concerned only with the responsibilities of the provider as set out in the partner agreement(s).

38 Differentiated judgements can be made where a team regards a provider's management of the academic standards and/or quality of the programmes of study of one embedded college to be different from those of another/others. Further details of the criteria for making **judgements** are set out in the glossary in Annex O.

39 The team also concludes whether or not reliance can be placed on the accuracy and/or completeness of the information that the provider publishes about itself.

- Where a provider recognises all the information it is responsible for publishing within the area under review, has rigorous mechanisms for the management of these responsibilities to ensure that the information it publishes is both accurate and complete, and has evidence that this is the case, then the conclusion will be that **reliance can be placed on the accuracy and completeness** of all the public information that the provider is responsible for publishing.
- Where a provider does not recognise all the information it is responsible for publishing and/or where there is evidence that this information is inaccurate and/or incomplete, then the conclusion will be that **reliance cannot be placed on the**

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<sup>4</sup> 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.

**accuracy and/or completeness** of all the public information that the provider is responsible for publishing.

40 The team will also identify **good practice** and provisional **recommendations**. 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 important matters that the team believes are currently putting quality and/or standards at risk and require urgent corrective action.
- **Advisable** recommendations refer to matters that the team believes have the potential to put quality and/or standards at risk and require preventative corrective action.
- **Desirable** recommendations refer to matters that the team believes have the potential to enhance quality, build capacity and/or further secure standards.

41 When essential recommendations are made they are likely to be reflected in a judgement of limited confidence or no confidence in academic standards and/or quality of learning opportunities, 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.

42 The QAA officer will inform the provider and its partner HEI(s) in writing about the outcome of the judgement meeting within two weeks of the end of the review visit. All judgements, good practice and recommendations remain provisional until the report is finalised. A judgement of limited or no confidence, or non-reliance on public information, will trigger a second visit. Should a second review visit be required, the judgements will be finalised at the conclusion of the second visit.

## Reporting

43 The review team, with the QAA officer, will produce a report of its findings. The main body of the report will cover the provider's overarching roles in the management of academic standards and quality of learning opportunities. A separate brief annex for each embedded college will note any findings specific to that institution.

44 Six weeks after the end of the visit, the QAA officer will send a draft version of the report to the provider for comment. The provider is responsible for sharing this draft with its partner HEI(s) and embedded colleges. The draft gives the provider the opportunity to draw the team's attention to any areas that it regards as inaccurate or incomplete and, if necessary, to submit additional evidence. Teams will be able to consider supporting evidence only if it had been available at the time of the review visit. The team will consider the provider's comments and any supporting evidence as it finalises its draft report.

45 If the 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.

46 If the team has limited or no confidence in either academic standards or the quality of learning opportunities, or both, or considers that reliance cannot be placed on the accuracy and/or completeness of the information that the provider publishes, a second visit may take place, and the preparation of the action plan is deferred.

## **Action plan**

47 The action plan describes how the provider intends to take forward the reviewers' findings. 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 in embedded colleges. The action plan will address issues in specific colleges where necessary. A template for the action plan can be found in Annex J, with further guidance on how to complete the plan.

48 The provider is required to take action immediately regarding any inaccuracy identified in the provider's public information, and to provide evidence of the effectiveness of the action taken at the time it sends QAA the action plan for publication in the review report.

## **Final stages of reporting**

49 Normally, once the 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 partner HEI(s), and will also send a final version of the report to the provider and its awarding body/bodies. The final report is subsequently published on the QAA website 15 weeks after the end of the review visits.

## **Follow-up action for judgements of limited or no confidence**

50 Where a review team makes a judgement of limited confidence or no confidence in academic standards and/or the quality of learning opportunities, and/or concludes that reliance cannot be placed in the accuracy and/or completeness of published information, the report will be published and QAA will carry out a programme of follow-up activity to address the area of the review related to the failing judgement.

51 Throughout this follow-up process QAA will require progress reports at regular intervals, indicating how the relevant recommendations are being addressed. The progress reports should be drawn up by the provider (jointly with external awarding bodies where relevant), and agreed in advance with the embedded college(s) and with student representatives. When the provider indicates that the action plan has been completed and implemented successfully, or a maximum time limit of 18 months has expired, QAA will arrange a follow-up visit to the provider by the Head of Educational Oversight and a QAA officer. They will decide whether the action plan has been completed and concerns addressed such that the original failing judgement can be amended, and will make a recommendation to the QAA Board. If this is accepted, the judgement will be changed and the review signed off, and this will be indicated on the QAA website. At this stage use of the QAA logo will be permitted.

52 If, at the maximum time limit, there remain concerns about the effectiveness of the provider's remedial action, QAA will report this to UKBA. QAA will also use its discretion to decide whether the matter is of sufficient importance to warrant a further separate focused review, with a published report.

## **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
- drive improvements in UK higher education
- improve public understanding of higher education standards and quality.

More information about QAA is available on our website: [www.qaa.ac.uk](http://www.qaa.ac.uk).

## Annex B: Responsibilities checklist

One copy of this checklist should be completed for each embedded college and sent to QAA with the self-evaluation. Please identify who is responsible for managing or providing the following by putting a cross in each applicable box. If possible please indicate the document where the allocation of responsibilities is defined.

Item	Provider	Partner HEI	Embedded college	Document reference
1. Identification of local 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 assessments				
7. Second marking of assessments				
8. Moderation of assessments				
9. Giving assessment feedback to students				
10. Management of assessment boards				
11. Student recruitment and selection				
12. Monitoring student admission, retention and achievement				
13. Reviewing and responding to annual monitoring reviews and module evaluations				
14. Periodic review of higher education provision				
15. Appointment and appraisal of staff				
16. Staff development for learning, teaching and assessment				
17. Staff development for academic currency and scholarship				

Embedded college review for educational oversight: Handbook

18. Observation of teaching and learning				
19. Student admission and induction				
20. Guidance and support (academic and personal) for students				
21. Library and learning resources available to students				
22. Student appeals system				
23. Students complaints system				
24. Collecting and acting upon student feedback and opinion				
25. Programme and module information available to students				
26. Providing public information on web or in prospectus				
27. Managing the accuracy of public information				

## Annex C: Embedded college review for educational oversight timeline

Week	Activity	Who
At least 14 weeks before the initial team visit	QAA informs provider and partner HEI(s) of dates of the initial team visit and the review visit to provider	QAA following consultation with provider
At least 12 weeks before the initial team visit	Preliminary meeting	QAA officer Provider Student representatives Partner HEI staff responsible for managing relationship with provider <sup>5</sup>
Eight weeks before the initial team visit	Provider's self-evaluation and the student submission are submitted to QAA	Provider Student representatives
Initial team visit	Initial team visit to provider (normal duration three days)	Provider Student representatives QAA officer Review team
Interval between initial team visit and review visit (minimum four weeks)	Visits to embedded colleges	Review team Embedded college staff and students HEI staff
Review visit	Review visit to provider (normal duration two days)	Provider Student representatives QAA officer Review team
Two weeks after review visit	Key findings letter to provider and UK Borders Agency	QAA officer
Six weeks after review visit <sup>6</sup>	Draft report to provider for comments on factual accuracy	QAA officer
Ten weeks after review visit	Provider submits comments on factual accuracy to QAA and supporting evidence	Provider
Eleven weeks after review visit	Receipt of provider's action plan	Provider
Fifteen weeks after review visit	Review report published at <a href="http://www.qaa.ac.uk">www.qaa.ac.uk</a>	QAA

<sup>5</sup> Optional.

<sup>6</sup> If a second visit is agreed the following dates will be altered to allow for the second visit.

## Annex D: An indicative agenda for a preliminary meeting

The preliminary meeting is held at the provider's headquarters between staff and students, representatives of partner HEIs (as invited by the provider), and the QAA officer. This will take place no later than 12 weeks before the initial visit of the review team to the provider's headquarters.

The purposes of the preliminary meeting are to discuss the arrangements for the ECREO visits and the number, timing and arrangements for embedded college visits. It is also an opportunity for the QAA officer to meet key staff and student representatives, clarify the process and provide an opportunity for staff and students to ask questions.

**Table 1: Indicative agenda for a preliminary meeting**

Time	Agenda	Attendees
10.00 - 13.00	Introductions	<ul style="list-style-type: none"> <li>• provider staff</li> <li>• student representative(s)</li> <li>• representatives from partner higher education institutions</li> <li>• QAA officer</li> </ul>
	Brief outline of the process by the QAA officer: <ul style="list-style-type: none"> <li>• key dates, including notification of outcome to UKBA and the timescale for publication of the report</li> <li>• information digest</li> </ul>	
	Scope of the ECREO: <ul style="list-style-type: none"> <li>• programme arrangements of provider</li> <li>• partner higher education institutions</li> </ul>	
	Student involvement in the process, including the student submission	
	Preparation of the briefing paper and supporting documentation	
	Visits to embedded colleges	
	Operational aspects of the review: <ul style="list-style-type: none"> <li>• initial team visit: structure and conduct</li> <li>• embedded college visits: number, selection, structure and conduct</li> <li>• review visit: structure and conduct</li> <li>• information provision (hard copy and electronic) during the visits</li> <li>• practical issues: rooms, photocopying, computer access, hotels</li> </ul>	
	Structure of the review report: <ul style="list-style-type: none"> <li>• findings</li> <li>• judgements</li> <li>• recommendations and features of good practice</li> <li>• conclusion on public information</li> </ul>	
	Any other questions	

In addition, there will be a separate meeting with student representatives to discuss student involvement in the process, including the student submission.

## Annex E: Initial team visit to the provider

The initial team visit, involving the full review team, will normally take place over three consecutive days. It will include meetings with senior staff of the provider, heads of embedded colleges, representatives of HEI partners, and students (where possible).

During this visit the review team will expect to gain a sound understanding of the provider and its approach to the management of academic standards and the quality of learning opportunities in its embedded colleges. In meetings with staff (and where possible, students) the team will explore and seek to clarify matters outlined in the self-evaluation, and will consider some of the documentary evidence cited there as references. Meetings will also offer an opportunity for the provider to update the team on recent developments and changes, in the provider and its embedded colleges, and to raise with the team any other matters that would be particularly worthy of exploration by the team during the embedded college visits and the review.

From its meetings and its study of the documents made available to it by the institution, the team will consider its detailed lines of enquiry for the visits to embedded colleges. These will be discussed with the facilitator and other staff of the provider at the conclusion of the visit. The team may also request additional documentation to be made available before the embedded college visits, or before the review visit to the provider. This documentation is normally made available to the team electronically, by internet access where possible. Any request for additional documentation will be limited to no more than is needed to inform the specific enquiries that the team will be undertaking.

### Indicative programme for an initial team visit to a provider

#### Day 1

Time	Activity
1200	Review team arrives at hotel
1300	Review team arrives at provider's centre
1315	Review team meeting (including working lunch)

#### Day 2

Time	Activity
0830	Review team arrives
0900	Review secretary's meeting with provider's contact
0930	Meeting with head of provider
1030	Review team meeting
1100	Meeting with student representatives (if appropriate)
1200	Review team meeting
1230	Lunch
1300	Meeting with a representative group of embedded college heads
1430	Review team meeting
1530	Meeting with provider's senior staff responsible for management of standards and quality in embedded college provision
1700	Review team meeting

**Day 3**

Time	Activity
0830	Review team arrives
0900	Review secretary's meeting with provider's contact
	Review team meeting and reading of documentation
1230	Lunch
1330	QAA officer and review secretary meet with provider's contact (and other staff as appropriate) to discuss programmes for visits to embedded colleges and review visit

## Annex F: Visits to embedded colleges

Visits to embedded colleges are normally undertaken by two reviewers and the review secretary (or QAA officer). These visits will enable the review team to come to a view on the reliability of the evidence on which the provider satisfies itself that the academic standards of all awards and credits are secure and that the quality of learning opportunities are appropriate at the embedded college. The facilitator is responsible for putting in place the arrangements for the visit(s) (including the meeting with partner HEI staff) to the embedded college(s) and to ensure that relevant documentation is available to the review team.

The visits will also provide information on:

- how the provider is making use of relevant aspects of the Academic Infrastructure (or the Quality Code) and other external reference points in its higher education provision
- the provision of information to students studying through embedded colleges, and how feedback from students on their experience as learners is collected, analysed, and used by the college and the provider
- the part played by students in the quality management of provision leading to their awards
- how the provider and the college ensure the accuracy of information published about the quality of higher education and preparatory provision associated with the awards and the academic standards of those awards and credits, including programme specifications
- matters relating to staff development and support undertaken by the provider and the college, as they apply to higher education and preparatory provision;
- how the provider is supporting embedded colleges in addressing enhancement: that is, taking deliberate steps at institutional level to improve the quality of learning opportunities.

Each visit to an embedded college will normally last a day and a half, and will typically involve meetings with:

- senior managers of the embedded college, to assist the review team to understand the overall and strategic management of the link from the college's perspective
- student members of staff-student consultative liaison committees (or equivalent bodies) for students studying for higher education or preparatory qualifications, and (if available) students that have recently progressed to the partner HEI from the embedded college
- members of the embedded college's staff supporting and delivering the higher education and preparatory provision
- a meeting with partner HEI staff (to include link tutors (or equivalent) and senior staff responsible for managing collaborative provision).

Where the review team has selected a sample of programmes the composition of the latter two meetings should be drawn from those areas, bearing in mind that the number of participants in each meeting should be no more than eight.

The meeting with students during the visits to the embedded colleges is designed to help the team understand, from a student's perspective, the role of the provider (and its partner HEIs) in supporting the provision of learning opportunities.



Discussions might include:

- the accuracy and reliability of information provided to students about the programmes
- how feedback from students is used
- whether students are able to contribute to the management of the quality of the programmes
- the extent to which the provider interacts directly with students
- the academic and personal support available to students on the programmes
- the students' view of the suitability of the learning resources available to them.

The meeting with members of the embedded college's teaching and support staff involved in delivering and supporting the programmes is designed to help the team to understand the role of the provider (and the partner HEI) in maintaining academic standards and assuring and enhancing the quality of learning opportunities. The discussions might include:

- arrangements for the delivery, support and assessment of the programmes
- guidance, support and feedback to the embedded college's staff on maintaining standards and the assurance and enhancement of quality
- management and development of staff teaching the programmes
- how requirements for learning resources are specified, provided and monitored.

The meetings will generally last up to 1.5 hours. The exact timings of the meetings will be discussed with the provider; where staff and/or students are only available at certain times the review team will endeavour to meet the relevant groups at the most convenient times for the participants.

Enquiries will focus on how the provider's procedures for the management of standards and quality are put into practice in the college, paying special attention to the effectiveness of the provider's reviews of the embedded college relationship, the provision, and the academic standards of awards and credits.

While the review team will not undertake any tour of the facilities and do not observe teaching it will want to understand how the provider monitors these learning opportunities. The review team will need a room for its private team meetings and, preferably, a separate room for meeting colleagues

## Indicative programme for a visit to an embedded college

### Day one

Time	Activity
1400	Review team arrives at the college and meets with facilitator
1415	Optional brief presentation by the college about its higher education and preparatory provision
1430	Private team meeting: team develops a detailed work plan for the visit including questions for staff and students (team and facilitator)
1530	Team meets senior staff to discuss the management of academic standards and quality
1630	Private team meeting: summarise meeting outcomes; revise agendas if necessary; read evidence
1730	Team departs

## Day two

<b>Time</b>	<b>Activity</b>
1015	Private team meeting: summarise meeting outcomes; revise agendas if necessary; read evidence
1100	Team meets teaching and support staff who deliver higher education and preparatory programmes
1230	Lunch
1315	Team meets with partner HEI staff (to include link tutors (or equivalent) and senior staff responsible for managing collaborative provision)
1415	Private team meeting: summarise meeting outcomes; revise agendas if necessary; read evidence
1500	Team's closing meeting with facilitator; requests for further information if necessary
1530	Team departs

The programme will be discussed at the preliminary meeting and confirmed by the QAA officer before the visits.

## Annex G: Preparing a self-evaluation

This section provides more information and guidance on the preparation of the self-evaluation for ECREO.

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 partner HEI's/HEIs' 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 its actions are effective
- how the provider can improve on these actions.

An effective self-evaluation is key to the provider gaining substantial benefit from ECREO 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.

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 should have a range of policies, supported by procedures for implementing them and evidence that they are being carried out. Providers should also have processes for evaluating the effectiveness of these policies and procedures.

### Scope

ECREO 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 reflects 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 below.

### Structure

The self-evaluation should be structured according to:

- academic standards
- quality of learning opportunities
- public information.

It should also include an introduction to the provider, giving details of any agreements with external awarding bodies where appropriate. Where external awarding bodies are involved, the provider should describe any responsibilities that they have conferred upon the provider and explain the processes and procedures that have been adopted for discharging them. A summary, identifying strengths and areas for development, and indicating what the provider is doing to improve its provision, is also useful.

## Content

Providers should give careful consideration to ensuring that all three key aspects of provision (academic standards, 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.

Important points of reference for assisting in developing the self-evaluation are contained within the Academic Infrastructure<sup>7</sup> and its successor the Quality Code<sup>8</sup> published by QAA, particularly the *Code of practice for the assurance of academic quality and standards in higher education*<sup>9</sup> or other external reference points. Providers will usually find that their internal quality assurance systems and processes reveal the areas that might benefit from scrutiny by the review team. The review team will be interested to see examples that demonstrate how effective the provider's processes are in identifying areas for improving the experience of students in embedded colleges.

The length of the self-evaluation depends on variables such as the number of embedded colleges, the range of awarding responsibilities involved in the provision, the provider's and the colleges' levels of responsibility, and the quality and comprehensiveness of existing written evidence. For example, where the provider is the only awarding body, the provision is small, and the provider feels confident in relying on a portfolio of existing evidence about the management of its higher education provision, it may be able to restrict the self-evaluation to as little as six sides of A4.

The table below gives 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. A diagram showing the range of evidence that could be used is provided below. Where providers have already sent QAA documents in support of their application for ECREO, these need not be sent again but reference to the application should be given.

Throughout its self-evaluation, the provider should clearly distinguish:

- the ways in which it meets the requirements of all partner HEI's involved in its embedded college provision
- any variations between embedded colleges in its arrangements for the management of academic standards, the quality of learning opportunities and public information.

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<sup>7</sup> <http://www.qaa.ac.uk/AssuringStandardsAndQuality/AcademicInfrastructure>.

<sup>8</sup> <http://www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/changes-to-academic-infrastructure.aspx>.

<sup>9</sup> <http://www.qaa.ac.uk/AssuringStandardsAndQuality/code-of-practice>.

**Table 2: Indicative structure of a self-evaluation for ECREO**

<b>Sections</b>	<b>Suggested content (commentary)</b>	<b>Sources of evidence or references (portfolio)</b>
<p>1 Introduction and context</p>	<p>Brief contextual information on the provider:</p> <ul style="list-style-type: none"> <li>• history, location, number of embedded colleges, total enrolments, total higher education enrolments and a breakdown of full and part-time higher education enrolments, spread of provision across embedded colleges, student numbers, staff supporting higher education (headcount and FTEs), management structure.</li> </ul> <p>Partnership agreements, or memoranda of understanding or equivalent, with partner HEIs:</p> <ul style="list-style-type: none"> <li>• include summary of key characteristics of each partnership agreement and the arrangements with partner HEIs;</li> <li>• note any significant recent changes.</li> </ul> <p>Recent developments in higher education at the provider and/or embedded colleges:</p> <ul style="list-style-type: none"> <li>• 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.</li> </ul> <p>Students' contribution to the review, including the submission:</p> <ul style="list-style-type: none"> <li>• 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).</li> </ul>	<ul style="list-style-type: none"> <li>• mission statement</li> <li>• prospectus</li> <li>• organisational diagrams of institution and quality management processes</li> <li>• retention, achievement and progression data tables (normally three years of figures)</li> <li>• annual monitoring reports</li> <li>• provider's strategic plan</li> <li>• whole institution self-evaluation</li> <li>• partnership agreements with partner HEIs</li> </ul>

<p>2 Analysis and evaluation of how higher education is managed</p>	<p><b>Academic standards</b></p> <ul style="list-style-type: none"> <li>• How are responsibilities for managing and delivering higher education standards delegated within the management structure and what reporting arrangements are in place?</li> <li>• What account is taken of the Academic Infrastructure or other external reference points?</li> <li>• How does the provider ascertain that its requirements, and those of any external awarding bodies, are fulfilled?</li> <li>• What are the provider's arrangements for staff development to support the achievement of appropriate academic standards?</li> </ul>	<ul style="list-style-type: none"> <li>• quality assurance policy</li> <li>• monitoring and review processes</li> <li>• admissions policy</li> <li>• accreditation of prior learning policy</li> <li>• student assessment policy</li> <li>• management structure</li> <li>• meeting structure</li> <li>• internal validation and review processes</li> <li>• provider and any partner HEIs' regulations for progression</li> <li>• action taken on receipt of external review or inspection reports</li> <li>• statistical data</li> <li>• programme specifications</li> <li>• student complaints and appeals processes</li> <li>• analyses by provider of student surveys</li> <li>• information for higher education staff</li> </ul>
	<p><b>Quality of learning opportunities</b></p> <ul style="list-style-type: none"> <li>• How are responsibilities for managing the quality of learning opportunities for higher education programmes delegated within the management structure and what reporting arrangements are in place?</li> <li>• How does the provider ascertain that its requirements, and those of any external awarding bodies, are fulfilled, so as to ensure that students receive appropriate learning opportunities?</li> <li>• What account is taken of the Academic Infrastructure or other external reference points?</li> <li>• How does the provider ascertain that the quality of teaching and learning is being maintained and enhanced?</li> <li>• How does the provider ascertain that students are supported effectively?</li> <li>• What are the provider's</li> </ul>	<ul style="list-style-type: none"> <li>• quality assurance policy</li> <li>• monitoring and review processes</li> <li>• resource policy</li> <li>• admissions policy</li> <li>• accreditation of prior learning policy</li> <li>• student support and guidance policy</li> <li>• teaching and learning strategy</li> <li>• management structure</li> <li>• meeting structure</li> <li>• staff development policy</li> <li>• staff development records</li> <li>• statistical records</li> <li>• programme specifications</li> <li>• analyses of student surveys</li> <li>• use of student representation</li> <li>• student complaints and appeals procedures</li> </ul>

	<p>arrangements for staff development to maintain and/or enhance the quality of learning opportunities?</p> <ul style="list-style-type: none"> <li>• How does the provider ensure the sufficiency and accessibility of the learning resources the students need to achieve the intended learning outcomes for their programmes?</li> </ul>	
	<p><b>Public information</b></p> <ul style="list-style-type: none"> <li>• What information is the provider responsible for publishing about its higher education?</li> <li>• What arrangements does the provider have to assure the accuracy and completeness of information that it has responsibility for publishing?</li> <li>• How does the provider know that these arrangements are effective?</li> </ul>	<ul style="list-style-type: none"> <li>• publishing policy and procedures for both electronic and paper-based information</li> <li>• notes of meetings discussing scrutiny and approval of public information</li> <li>• promotional material</li> <li>• mission statement</li> <li>• corporate plan</li> <li>• programme specifications</li> <li>• information for students</li> </ul>
3 Summary	<ul style="list-style-type: none"> <li>• strengths</li> <li>• areas for development</li> <li>• actions being taken currently to improve previously identified areas for development</li> </ul>	
4 Evidence and references	<p>Label and number evidence documents</p> <p>Provide clear references in the text</p>	
5 List of documents	Provide numbered master list	
6 Annex B	Complete one 'Responsibilities checklist' for each awarding body	

## Evaluative commentary

Commentary in section 2 of the evaluation 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 that 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.

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**

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 labelled and that there is a numbered master list of documents. It is equally important to ensure that each document is clearly referenced to the appropriate text in the commentary, using the same labelling and numbering system and providing paragraph numbers and dates of minutes as appropriate.

## **Drafting**

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, or reviewers involved in the review may not comment on the draft self-evaluation.

## **Submission**

The self-evaluation should be sent to the Logistics and Deployment team at QAA eight weeks before the start of the visit. One electronic copy and three hard copies are required, accompanied by an electronic portfolio of supporting evidence. Where only hard copy of the portfolio exists, three hard copies should be provided. 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.

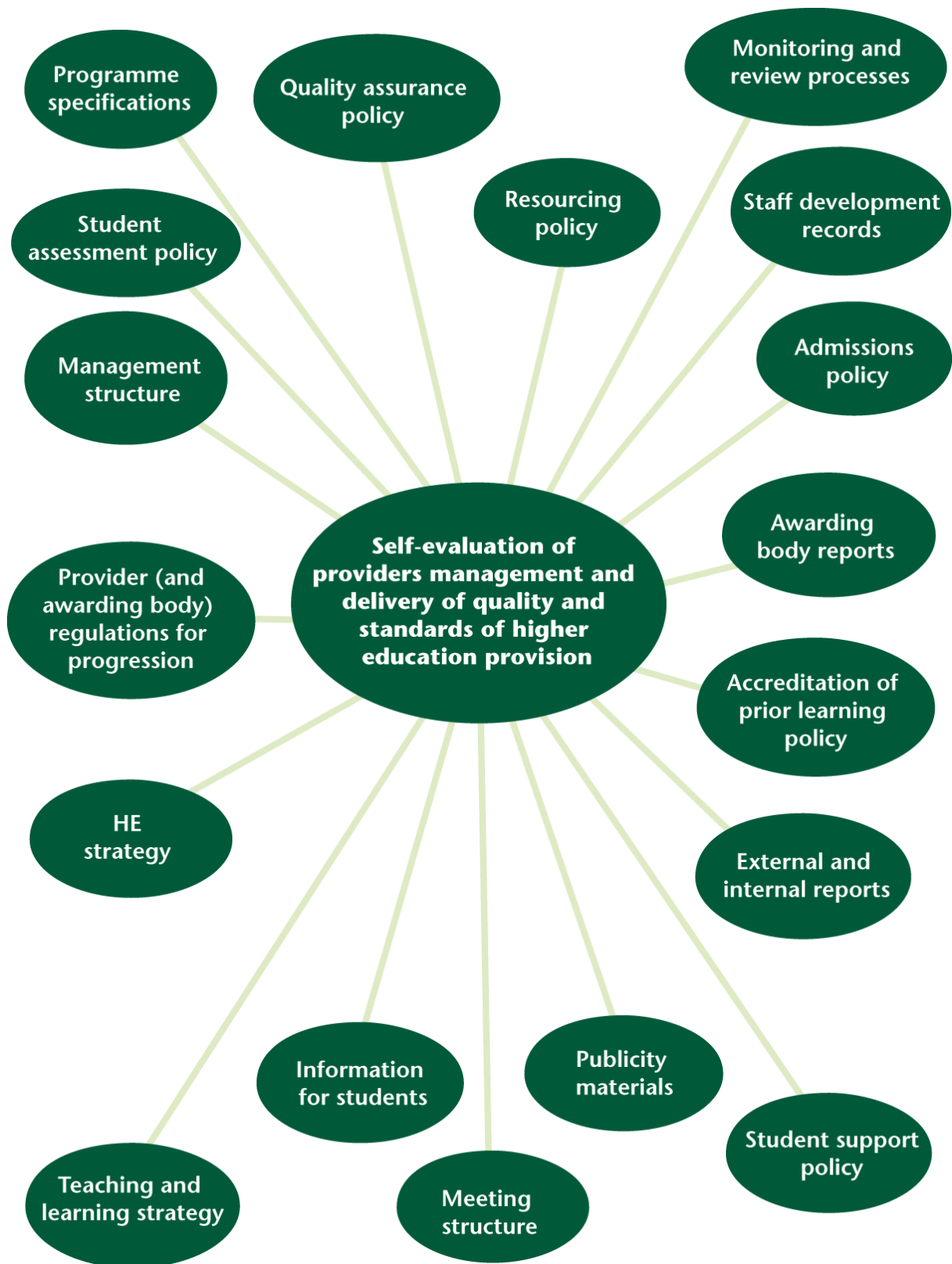
QAA may return the self-evaluation to the provider for further work if it does not enable the team to identify the provider's responsibilities and understand how these are discharged. In these circumstances, the QAA officer will advise the provider.

## **Advice**

QAA will hold a briefing event for providers. These will include advice and guidance on preparing the self-evaluation. Providers may also refer to the QAA officer for advice.



Figure 1: Possible sources of evidence which informs the self-evaluation



## Annex H: Academic Infrastructure and other external reference points

In considering providers' management of its higher education provision, ECREO 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.<sup>10</sup>

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 O.

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).<sup>11</sup> 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.

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<sup>10</sup> For more information about the four elements of the Academic Infrastructure, see: [www.qaa.ac.uk/AssuringStandardsAndQuality/Pages/default.aspx](http://www.qaa.ac.uk/AssuringStandardsAndQuality/Pages/default.aspx).

<sup>11</sup> See [www.qaa.ac.uk/Publications/InformationAndGuidance/Pages/changes-to-academic-infrastructure.aspx](http://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 ECREO 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), the National Qualifications Framework (NQF), Credit and Qualifications Framework for Wales (CQFW)/Scottish Credit and Qualifications Framework (SCQF). 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 improving 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/CQFW/SCQF, 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/ CQFW/SCQF 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/ CQFW/SCQF 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 ECREO 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.

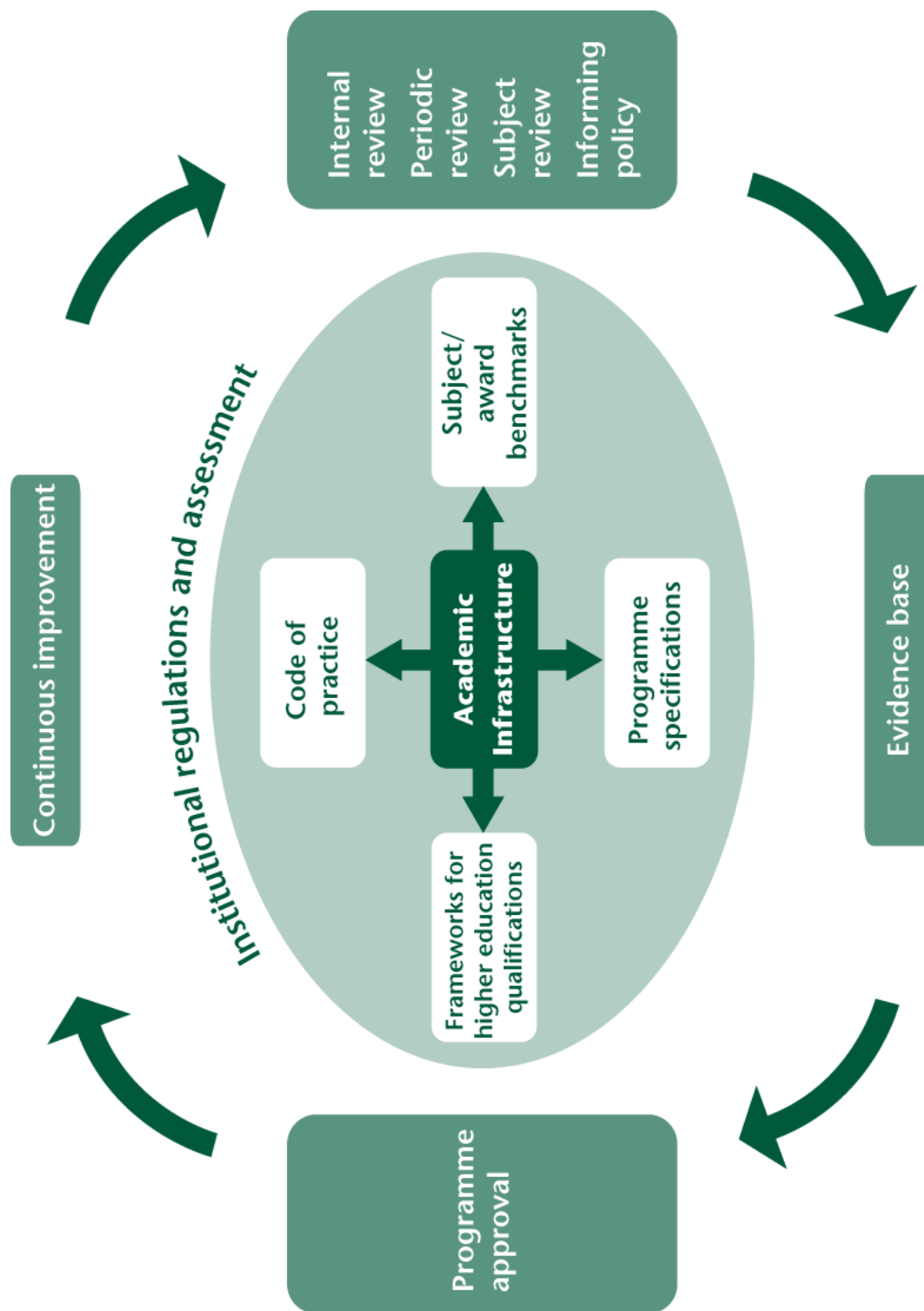


Figure 2: The relationship of the current Academic Infrastructure to the continuous improvement of the management of academic standards and quality in higher education

ECREO is concerned with taught higher education programmes of study within the FHEQ (or FHEQS in Scotland), but not teacher and tutor education programmes. The following table gives details of the relevant levels on *The framework for higher education qualifications in England, Wales and Northern Ireland*.

**Table 3: Examples of the typical higher education qualifications at each level of the FHEQ and the corresponding cycle of the FH-EHEA<sup>12</sup>**

Main higher education qualifications	FHEQ level	Corresponding FEHEA cycle
Doctoral degrees (eg PhD/DPhil, EdD, DBA, DClInPsy)*	8	Third cycle <b>(end of cycle)</b> qualifications
Master's degrees (eg MPhil, MRes, MA, MSc)	7	Second cycle <b>(end of cycle)</b> 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)	6	First cycle <b>(end of cycle)</b> qualifications
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)		

<sup>12</sup> Please note that there is a separate framework for Scottish higher education qualifications: *The framework for qualifications of higher education institutions in Scotland*.

In addition to higher education provision, ECREO covers preparatory programmes at NQF Level 3 which students take in order to enter higher education at Level 4. The key frame of reference for Level 3 programmes is the Northern Ireland Credit Accumulation and Transfer Scheme (NICATS) descriptor of a Level 3 qualification (see Annex K).

## **Annex I: Indicative structure of the review report**

### **Summary**

- The judgements
- Features of good practice
- Recommendations
- Comment on published information

### **Introduction and background**

This section sets the context for the review, and briefly considers recent developments. It will comment on actions taken in response to any recent external review or inspection.

### **Main report**

#### **Structures and procedures for managing academic standards and quality**

This section analyses and evaluates the effectiveness of the providers' processes for ensuring that academic standards of its provision are secure, and that appropriate learning opportunities are provided so that students can achieve the defined academic standards.

#### **Written agreements with partners**

#### **The provider's arrangements for approval, monitoring and periodic review of its provision**

#### **External participation in quality assurance processes**

#### **Assessment of students**

#### **Certificates and transcripts**

#### **Use of the Academic Infrastructure and other external reference points**

#### **Use of management information: statistical data**

#### **Use of management information: student feedback**

#### **Review and accreditation by external agencies**

#### **Student participation in quality assurance**

#### **Admissions policy and processes**

#### **Other modes of study**

#### **Resources for learning**

#### **Academic guidance and personal support for students**

#### **Assuring the quality of teaching staff: appointment; appraisal; support and development**

#### **Links between research or scholarly activity and learning opportunities**

**Public information**

This section provides a commentary on the reliability, accuracy and completeness of public information about provision in embedded colleges. It also reports students' views about the accuracy and usefulness of the public information available to them.

**Overall conclusion on the management of academic standards**

**Overall conclusion on the management of the quality of learning opportunities**

**Overall conclusion on published information**

**Recommendations and features of good practice**

**Annexes**



## Annex J: Guidance notes for 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 below.

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 conclusions of the report.

Each point of good practice and each recommendation must be 'SMART' (specific, measurable, achievable, realistic, 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 partner HEIs where appropriate, 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 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.

Deadlines for completion of action plans:

<b>Number of weeks after the visit to the provider</b>	<b>Review timeline</b>
+6 weeks	The provider receives the draft report and action plan template
+6 - +8 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
+8 weeks	<b>The provider returns the completed action plan to QAA, signed by the head of the provider</b>
+11 weeks	QAA appends the completed action plan to the final report and proofs the document
+15 weeks	QAA publishes the final report with the completed action plan on its website

The column headings in the action plan template (below) are:

**Good practice/Essential/Advisable/Desirable recommendation.**

This column is completed by the QAA officer 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 bodies where appropriate:**

**Action to be taken**

Identify what the provider proposes to do in response to the good practice or recommendation identified in the report and listed by the QAA officer in the action plan.

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 person (role) or committee responsible for ensuring that the action has been taken by the target date. This is important to ensure accountability.

**Success indicators**

Identify precisely how the provider and its awarding bodies will know when an action has been successfully undertaken.

**Reported to**

Identify the person (role) who will monitor the success of the action. This may be an individual or a committee. 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 actions and how the provider will consider whether the action taken was appropriate in order to address 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 which 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 Embedded college 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 ECREO, the team identified the following areas of <b>good practice</b> that are worthy of wider dissemination within the provider.						
<p><b>[EXAMPLE]</b></p> <ul style="list-style-type: none"> <li>The extent of employer engagement in the delivery and support of the programmes [paragraph number in the report].</li> </ul>	<p><b>[EXAMPLE]</b></p> <p>Establish employer forum and review annually</p> <p>Review and enhance mentor and workplace supervisor support packs annually</p>	<p><b>[EXAMPLE]</b></p> <p>July 2012</p>	<p><b>[EXAMPLE]</b></p> <p>HE Coordinator with programme leaders</p>	<p><b>[EXAMPLE]</b></p> <p>Improved engagement with employers; positive evaluations from students on placements; regular communications between mentors and link tutors</p>	<p><b>[EXAMPLE]</b></p> <p>HE Forum</p> <p>Employer Forum</p>	<p><b>[EXAMPLE]</b></p> <p>Annual programme reviews; annual self assessment report; direct feedback from employers at Employer Forum; student feedback</p>
Essential	Action to be taken	Target date	Action by	Success Indicators	Reported to	Evaluation
The team agreed the following areas where it is <b>essential</b> for the provider to take action:						
<p><b>[EXAMPLE]</b></p> <ul style="list-style-type: none"> <li>The programme descriptions in the HE prospectus and online student handbook should be updated to reflect the current aims and outcomes specified in the</li> </ul>	<p><b>[EXAMPLE]</b></p> <p>Ensure all current programme documentation contains accurate information about the programme aims and learning outcomes; ensure all students receive copies</p>	<p><b>[EXAMPLE]</b></p> <p>November 2012</p>	<p><b>[EXAMPLE]</b></p> <p>Programme leader</p>	<p><b>[EXAMPLE]</b></p> <p>All programme documentation contains accurate information</p>	<p><b>[EXAMPLE]</b></p> <p>HE Coordinator</p>	<p><b>[EXAMPLE]</b></p> <p>Student feedback evaluated by HE Forum</p>

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
<b>Advisable</b>	<b>Action to be taken</b>	<b>Target date</b>	<b>Action by</b>	<b>Success indicators</b>	<b>Reported to</b>	<b>Evaluation</b>
The team agreed upon a number of areas where the Provider is <b>advised</b> to take action:						
<ul style="list-style-type: none"> <li>[list areas of advisable action individually paragraph XX]</li> </ul>						
<b>Desirable</b>	<b>Action to be taken</b>	<b>Target date</b>	<b>Action by</b>	<b>Success indicators</b>	<b>Reported to</b>	<b>Evaluation</b>
The team agreed the following areas where it would be <b>desired</b> to take action:						
<ul style="list-style-type: none"> <li>[list areas of desirable action individually paragraph XX]</li> </ul>						

## **Annex K: Level 3 Qualification descriptors**

For the purposes of ECREO, preparatory or access programmes for entry to higher education are located at Level 3 in the National Qualifications Framework (NQF). ECREO reviewers will use, as their key frame of reference for academic standards of awards, the Level 3 descriptor developed through the Northern Ireland Credit Accumulation and Transfer Scheme (NICATS). The holder of a Level 3 qualification holder will be able to:

- apply knowledge and skills in a range of complex activities demonstrating comprehension of relevant theories
- access and analyse information independently and make reasoned judgements, selecting from a considerable choice of procedures, in familiar and unfamiliar contexts
- direct their own activities, with some responsibility for the output of others.

## **Annex L: Role descriptions and person specifications**

### **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 QAA officer
- 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 QAA officer.

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 QAA officer 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 QAA officer 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 ECREO.

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 ECREO has been completed
- communicate electronically, using emails, attachments and web mail
- influence colleagues within their provider and take forward the action plan.



## **Annex M: 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 N: Public information about academic standards and the quality of learning opportunities

The purpose of this annex is to give providers and ECREO 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.

ECREO 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**).

ECREO 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, ECREO 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 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 O: Glossary and weblinks

<p><b>Academic Infrastructure</b></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"> <li>• the <i>Code of practice</i></li> <li>• the frameworks for higher education qualifications</li> <li>• subject benchmark statements</li> <li>• programme specifications.</li> </ul> <p>Further information about the Academic Infrastructure and its four elements is available at:  <a href="http://www.qaa.ac.uk/AssuringStandardsAndQuality/Pages/default.aspx">www.qaa.ac.uk/AssuringStandardsAndQuality/Pages/default.aspx</a>.</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 ECREO process. ECREO teams will draw upon it as a source of reference when considering providers' approaches to the management of their higher education provision. ECREO 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 <b>Quality Code</b> and <b>Other external reference points</b>.)</p>
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<p><b>Academic standards</b></p>	<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 <b>Academic Infrastructure</b>.)</p> <p>An awarding body is responsible for the academic standards of all awards granted in its name. ECREO 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>ECREO considers academic standards against all aspects of the provider's higher education provision, leading to a judgement that is subsequently published. (See <b>Judgements</b>.)</p>
<p><b>Action plan</b></p>	<p>After ECREO, 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.</p> <p>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 ECREO.</p>
<p><b>Advisable recommendation</b></p>	<p>ECREO 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 refer to matters that reviewers believe have the potential to put quality and/or standards at risk and require preventative corrective action.</p>
<p><b>Briefing</b></p>	<p>The briefing is the first stage of the ECREO process. Its purposes are to describe ECREO 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 QAA officers and to talk to other providers who are preparing for ECREO.</p>
<p><b>Conclusion</b></p>	<p>ECREO 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 which the provider publishes about itself and the programmes it delivers. (See also <b>Public information</b>).</p>
<p><b>Confidence</b></p>	<p>ECREO 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</p>

	<p>no confidence.</p> <p>A judgement of confidence will be reached where:</p> <ul style="list-style-type: none"> <li>• a provider is found to be effective in managing its responsibilities for delivering academic standards</li> <li>• the prospects for academic standards and quality being maintained at current levels appear sound</li> <li>• the provider has rigorous mechanisms for the management of its higher education programmes in accordance with the awarding body's/bodies' requirements.</li> </ul> <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>
<p><b>Conflicts of interest of review team members</b></p>	<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"> <li>• they have worked for the provider, or its collaborative partners during the last five years</li> <li>• they have undertaken external examining or consultancy work at the provider or its collaborative partners during the last three years</li> <li>• they have recently made an application for a post at the provider</li> <li>• a close relative is working or studying at the provider</li> <li>• 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).</li> </ul>
<p><b>Desirable recommendation</b></p>	<p>ECREO 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 refer to matters that review team believes have the potential to enhance quality, build capacity and/or further secure standards.</p>
<p><b>Embedded college</b></p>	<p>Embedded colleges are normally located on the premises of the partner higher education institution. The number of embedded colleges to be visited between the first and final team visits to the provider will be</p>

	determined by the number for which the provider wishes to be able to issue confirmations of acceptance for studies (CAS) and/or the number for which it will act as the issuer of CAS.
<b>Enhancement</b>	For the purposes of ECREO, 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 partner HEI(s).
<b>Essential recommendation</b>	<p>ECREO 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 that the review team believes are currently putting standards and/or quality at risk and that 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>
<b>Facilitator</b>	<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 QAA officer, and through her/him the ECREO team. The facilitator's responsibilities include, in consultation with the QAA officer, 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.</p> <p>Facilitators will be trained for the role alongside reviewers. A full description of the role is given in Annex L.</p>
<b>Good practice</b>	<p>Good practice is practice that the ECREO 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>ECREO reports are likely to include features of good practice. QAA will disseminate good practice identified through ECREO review in periodic publications.</p>
<b>Judgements</b>	ECREO teams are asked to make judgements about the provider's management of academic standards and the quality of learning opportunities. The judgements are confidence, limited confidence or no confidence. These are defined elsewhere in this glossary.

	<p>Judgements on academic standards and quality of learning opportunities may be differentiated. For example, should the team regard a provider's management of academic standards and/or the quality of learning opportunities of the programmes of one awarding body to be below the required threshold, a judgement of limited or no confidence would be awarded only for that provision.</p>
<p><b>Limited confidence</b></p>	<p>ECREO review teams are asked to make judgements about the provider's management of academic standards and the quality of learning opportunities. The judgements are confidence, limited confidence or no confidence.</p> <p>Where significant doubts exist about aspects of a provider's current or likely future delivery and management of academic standards and/or the quality of learning opportunities of its higher education programmes, the provider will receive a judgement of limited confidence. Such a judgement will indicate how widespread the doubts are and which aspects of the provider's management of academic standards and/or quality of learning opportunities has given particular cause for concern. Reviewers will make reference to partner HEIs' requirements when reaching such judgements, which are likely to have implications for the partner HEIs. Such judgements will be accompanied by one or more recommendations considered essential and, almost certainly, others considered advisable and/or desirable. A judgement of limited confidence will necessitate follow-up action.</p>
<p><b>No confidence</b></p>	<p>ECREO 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 the awarding body requirements 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 necessitate follow-up action.</p>



<p><b>Other external reference points</b></p>	<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 improving 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/ CQFW/SCQF, 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>
<p><b>Partner HEI</b></p>	<p>Providers have a close contractual relationship with, and (in the form of embedded colleges) are usually located on the campus of, at least one higher education institution: the partner higher education institution. In terms of the division of responsibilities for the management of academic standards, the management and enhancement of the quality of learning opportunities, and public information, QAA recognises that the nature of the relationship between the provider and the partner HEI may vary.</p>
<p><b>Partnership agreement</b></p>	<p>Providers have formal partnership agreements, sometimes called memoranda of understanding, with their higher education institution awarding bodies. Many of these describe precisely the provider's responsibilities for any given higher education programme.</p> <p>These agreements will be very useful to ECREO 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 Annex B: Responsibilities checklist, which should be submitted with the self-evaluation, is an effective way of providing this information.</p>
<p><b>Peer review</b></p>	<p>ECREO 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</p>

	<p>institutions and/or providers. As a result, ECREO reports are based on a working knowledge of UK higher education and, more specifically, the challenges of managing higher education academic standards and quality effectively.</p>
<b>Preliminary meeting</b>	<p>Typically 12 weeks before a review visit starts there is a preliminary meeting for the visit between provider staff, students and the QAA officer. The purpose of the preliminary 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. It also gives the QAA officer the opportunity to clarify the method and arrange the provisional date for a second visit, and for the provider to ask any questions. Awarding bodies may also attend this meeting. An indicative agenda for the preliminary meeting is provided in Annex D.</p>
<b>Provider</b>	<p>The provider is the organisation applying for educational oversight from QAA. Providers have a close contractual relationship with more than one partner higher education institution. The provider may issue confirmation of acceptance for studies (CAS) on behalf of its embedded colleges, or embedded colleges may issue them. A provider conducts its central functions from a separate headquarters or from one or more of its embedded colleges. The QAA officer will agree with the provider at the preliminary meeting the timing of and location for the first and final team visits.</p>
<b>Provisional judgement meeting</b>	<p>ECREO teams agree summaries of evidence, make provisional judgements, and identify provisional good practice and recommendations at the end of the review visit. The QAA officer will inform the provider about the outcome of the provisional judgement meeting in writing, usually within two weeks of the review visit.</p> <p>All judgements, identified features of 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 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 review. All provisional judgements and conclusions are made with reference to awarding body requirements of the provider.</p>
<b>Public information</b>	<p>Public information is information about the academic standards and 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>ECREO 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 N. It should be emphasised that this list is indicative only because providers will have different responsibilities for publishing information according to their</p>

	<p>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"> <li>• recognises all the information that it is responsible for publishing within the area under review</li> <li>• has rigorous mechanisms for the management of these responsibilities, which ensure that the information it publishes is both accurate and complete</li> <li>• has supplied evidence that this is the case.</li> </ul> <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"> <li>• a provider does not recognise all of the information that it is responsible for publishing, and/or</li> <li>• there is evidence that this information is inaccurate and/or incomplete.</li> </ul>
<b>QAA</b>	<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>
<b>QAA officer</b>	<p>Each ECREO is supported by a QAA 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 attends the preliminary meeting and all review meetings, and may attend a number of embedded college visits.</p>
<b>Quality Code</b>	<p>The UK Quality Code for Higher Education (Quality Code) will be phased in from autumn 2011 to replace the Academic Infrastructure. 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 ECREO 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</p>

	as it is published.
<b>Quality of learning opportunities</b>	<p>Quality of learning opportunities considers 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 stated 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. For more information, see <b>Judgements</b>.</p>
<b>Recommendations</b>	<p>ECREO reports will include recommendations for the provider about how it might improve the management of its higher education provision. Recommendations are categorised as essential, advisable or desirable according to priority. These terms are defined elsewhere in this glossary.</p>
<b>Reports</b>	<p>ECREO culminates in a report of the team's findings. Review reports will be published on QAA's public website.</p> <p>Providers and their partner HEI(s) will always be invited to provide comments on a draft report and to indicate any areas that they consider incomplete or inaccurate. The QAA officer will provide further guidance on the procedures for making comments on reports.</p>
<b>Re-review</b>	<p>Re-review is the process of review undertaken after a no confidence judgement or a conclusion of no reliance on the accuracy and/or completeness of public information. It is undertaken six months after the publication of the original report. It will take a similar format to the first review and look at the actions taken since then. Re-reviews are optional and providers must pay a separate fee for re-review.</p>
<b>Reviewer</b>	<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 ECREO. Reviewers are trained specifically for the role by QAA. QAA's policy on the training and development of reviewers can be found in Annex M.</p>
<b>Self-evaluation</b>	<p>ECREO 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 discharging these responsibilities. An effective self-evaluation is key to the provider gaining substantial benefit from ECREO and to the smooth running of the review. QAA therefore encourages providers to give its preparation due time and attention.</p> <p>The preparation of a self-evaluation is a major focus of the briefing that QAA will arrange for providers and their awarding bodies. 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</p>

	<p>for the team. The existing material could comprise the whole provider self-evaluation and the whole provider quality improvement plan.</p>
<b>Student submission</b>	<p>One of ECREO'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, review 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 ECREO, and students will be invited to the briefing. After the briefing, the QAA officer will also have the responsibility of discussing with the provider how the provider might assist students to develop a submission for ECREO.</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 QAA officer, this will not prejudice the outcomes of ECREO.</p>
<b>Team</b>	<p>The review team normally comprises the QAA officer, four reviewers and a review secretary. However, for providers with fewer than 100 full-time equivalent students, there will be two reviewers. ECREO team selection will be made with reference to a provider's higher education provision. QAA will avoid known <b>conflicts of interest</b> (see separate entry).</p> <p>QAA will send brief details of proposed teams to providers and their awarding bodies not less than nine weeks before the review visit, allowing the provider one week to draw to QAA's attention in writing any conflicts of interest they believe QAA has not identified.</p>
<b>Unistats</b>	<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 the Universities and Colleges Admissions Service (UCAS) to manage the delivery and maintenance of these websites on its behalf.</p>
<b>Visits</b>	<p>The review will commence with an initial team visit of up to three days to the provider's headquarters, followed by a visit to each embedded college and a review visit to the provider's headquarters.</p> <p>The purpose of visits is to allow the team to scrutinise evidence on site, meet provider staff, students and other stakeholders (such as awarding</p>

	<p>bodies' representatives and employers, where appropriate), and consider the extent of the provider's engagement with the Academic Infrastructure or Quality Code. An indicative programme for a review visit is provided in Annex E.</p> <p>The QAA officer will discuss and agree the programme for each visit with the provider beforehand. During the visits, it is helpful if the provider can make a room available as a workroom for the team, and a separate and larger room available for meetings.</p>
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## Useful weblinks

### Further and higher education

#### QAA

[www.qaa.ac.uk](http://www.qaa.ac.uk)

#### Edexcel

[www.edexcel.org.uk/home](http://www.edexcel.org.uk/home)

#### SQA

[www.sqa.org.uk](http://www.sqa.org.uk)

#### Academic Infrastructure

[www.qaa.ac.uk/AssuringStandardsAndQuality/AcademicInfrastructure](http://www.qaa.ac.uk/AssuringStandardsAndQuality/AcademicInfrastructure)

#### *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](http://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](http://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](http://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](http://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](http://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](http://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](http://www.ofqual.gov.uk/qualifications-assessments/89-articles/250-explaining-the-national-qualifications-framework)

#### Credit and Qualifications Framework for Wales

<http://wales.gov.uk/topics/educationandskills/qualificationsinwales/creditqualificationsframework/?lang=en>

#### Scottish Credit and Qualifications Framework

<http://www.scqf.org.uk>

See also the links given under **Academic Infrastructure** in the glossary above.

## **Student guides to ECREO**

The following publications are being prepared for students:

*Student involvement in ECREO: ECREO and the student submission*  
*A brief student guide to REO*

They will be available on the QAA website from the end of September 2011.



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