

Academic Management Review Report 2019-20

Visit Details			
Academic Management Reviewer	Susan Hall		
AA Number	964572		
Reviewer email address	Susan.hall225@gmail.com		
Date of review visit	08/10/2020		
Time started	10:30		
Time completed	17:00		
Name and designation of people involved in the review	Professor Nurun Nabi (Head of Centre), Prof, Reza Joadat, Nabeel Nilar, Waseen Ahammed		

Essential Actions and Recommendations Review

Essential Actions from previous report

- 1. The centre should investigate how they can track student achievement at assessment criteria level.
- 2. Monitor the travel and tourism resources within the library.

Progress Made	Resolved?	
 Tracking systems at assessment criteria level have been developed. Additional subject specific resources have been provided by the centre. 	Yes	
Recommendations from previous report		
Progress Made	Resolved?	
	Choose an item.	





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1.Centre details and management

Quality Objective

1. Your organisational structure is clearly defined and complies with Pearson approval requirements.

Quality Measures	Details	Is there sufficient evidence that all quality processes are in place and effective?
1.1	Pearson centre approval and recognition requirements are complied with fully.	Yes
1.2	Approval to deliver BTEC Programmes must be gained prior to first teaching of the programme. There is an organisation chart, providing clear reporting relationships, which is communicated to all members of the organisation	Yes
1.3	Collaborative arrangements with additional sites, centres or organisations are approved by Pearson and appropriately recorded on Pearson systems, including: Approval must be sought before delivery for: Consortia Collaboration Exceptional Collaboration	Yes
1.4	Where delivery is via distance learning, that this has been approved by Pearson and the centre continues to adhere to the criteria outlined in Pearson's Distance Learning and Assessment (DSLA) policy	Yes

If 'No' for any quality measures above, an Essential Action is required* Recommendations may be made at any time		
Essential Action		
Recommendation		
Comments:		

Centre approval has been given for all programmes that are offered.

The Organisational chart was seen which had clear roles and responsibilities identified. Various committees are in place to monitor different aspects of the business. The management board meet on a monthly basis and processes are in place through the Quality Assurance & Enhancement Manual.

The centre has one site, and no subsites are used. The centre has expanded their facilities with seven additional rooms over the last twelve months.

The centre does not offer distance learning but are giving blended learning during Covid 19 pandemic.



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2. Student recruitment, registration and certification

2a. Audit of student records

The Reviewer must select a minimum of 3 students. If there are programmes that have claimed certificates, this must include at least one student who has been certificated.

Student 1 name	Roxana Andries	Programme	HND Health & Social Care
Enrolment date	04/11/2017	Registration date	13/03/2018
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	Yes
Accurate and timely certification process seen?	Yes	Issues identified?	No
Comments:	The application for the course was made in November 2017 but the centre recruits three times per year and therefore the student did not start their course until February 2018 and therefore the registration with Pearson took place within the time that is required. The student had 85.7% attendance. The assessment records were seen, and the units achieved were from the QCF qualification with internal verification took place in a timely manner.		

Student 2 name	Peter Daniel Gem	Programme	Computing
Enrolment date	06/01/2018	Registration date	13/03/2018
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	Yes
Accurate and timely certification process seen?	Yes	Issues identified?	No
Comments:	The application for the course was made in January 2018 and the student started their course in February 2018 and therefore the registration with Pearson took place within the time that is required. The student had 60.8% attendance. The assessment records were seen, and the units had been tracked at assessment criteria level. Internal verification took place in a timely manner.		





Student 3 name	Md Rafiquzzaman	Programme	Travel & Tourism
Enrolment date	24/09/2018	Registration date	16/10/2018
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	Yes
Accurate and timely certification process seen?	No	Issues identified?	No
Comments:	The application for the course was made in August 2018 but the enrolment date was September 2018 with the student starting the course one month later. Registration with Pearson took place in October 2018 which is within the time that is required. The student had 57.6% attendance, and this therefore meant that the student had to study units again, and therefore certification has not been claimed for the student. The assessment records were seen, and the units had been tracked at assessment criteria level. Internal verification took place in a timely manner.		

If extra students are required to be audited, please include them below:

Student 4 name	Elena Enache Rodica	Programme	Business
Enrolment date	24/09/2018	Registration date	15/10/2018
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	Yes
Accurate and timely certification process seen?	No	Issues identified?	No
Comments:	The application for the course was made in August 2018 but the enrolment date was September 2018 with the student starting the course one month later. Registration with Pearson took place in October 2018 which is within the time that is required. The student had 68.4% attendance. The assessment records were seen, and the units had been tracked at assessment criteria level with the student having a Pass grade profile, but a referral for one unit and therefore the certificate has not been claimed. Internal verification took place in a timely manner.		





Student 5 name	Agustina Aderonke Lashman	Programme	Health & Social Care
Enrolment date	25/02/2019	Registration date	23/03/2019
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	Yes
Accurate and timely certification process seen?	No	Issues identified?	No
Comments:	The application for the course was made in February 2019 with the student starting the course one month later. Registration with Pearson took place in March 2019 which is within the time that is required. The student had 87.4% attendance. The assessment records were seen, and the units had been tracked at assessment criteria level with the student having a Merit/Distinction grade profile. Internal verification took place in a timely manner.		

Student 6 name	Roxana Georgia Radu	Programme	Computing
Enrolment date	25/02/2019	Registration date	23/03/2019
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	Yes
Accurate and timely certification process seen?	No	Issues identified?	No
Comments:	The application for the course was made in February 2019 with the student starting the course and registration with Pearson taking place in March 2019 which is within the time that is required. The student had 93.1% attendance. The assessment records were seen, and the units had been tracked at assessment criteria level with the student achieving various grades according to the unit content. Internal verification took place in a timely manner. The student is still on programme.		





- **2.** Your administrative processes and procedures ensure that recruitment, registration and certification processes:
 - are accurate and timely.
 - are auditable.
 - reflect a student's course of study, time spent on programme and level of achievement.
 - provide safe and accurate certification.

Quality Measures	Details	Is there sufficient evidence that all quality processes are in place and effective?
2.1	The centre publishes information that is accurate and provides students with a basis for making an informed choice about enrolment decisions.	Yes
2.2	Suitable processes are in place to assure the integrity of student recruitment onto the centre's L4-7 provision. There is a robust student recruitment process that enables the centre to effectively review whether the applicant has a sufficient level of English language, where the applicant has English as a second language and has not studied the last two years of their education in English. Evidence which demonstrates how the English language requirement has been met is retained.	Yes
2.3	There is a student recruitment process that enables the applicant to discuss learning needs, additional help that might be required on programme, and takes account of progression aspirations.	Yes
2.4	There is a procedure for the timely and accurate registration of students that is operational and monitored and is compliant with awarding organisation and regulatory requirements.	Yes
2.5	There is a mechanism for checking the accuracy of student registrations and Pearson set registration caps, where applicable, are adhered to.	Yes
2.6	Accurate and up-to-date records of attendance are kept for every student, showing appropriate time spent on programme in relation to the qualification guided learning hours.	Yes
2.7	There is a procedure which ensures timely and accurate certification claims that are checked and verified against assessment records.	Yes
2.8	There is a procedure for checking certificates received against assessment records, prior to issue.	Yes
2.9	The centre will investigate and report to Pearson all inaccurate, early/late and fraudulent registrations or certification claims, via internal senior management.	Yes
2.10	The centre provides unit certification claims for students where appropriate.	Yes





If 'No' for	If 'No' for any quality measures above, an Essential Action is required* Recommendations may be made at any time		
Essential Action			
Recommendation			
Comments:			

The centre has detailed information on their web site which is accurate and easy to negotiate. The information for Healthcare Practice does indicate the placement hour requirements and this enables the students to make an informed choice about the time that would be needed to study the programme both within a learning environment but also within the vocational environment. The online application form requires the students to identify their qualifications. The admissions team reviews the application and documentation. The level of English is checked and if they have a Level 3 qualification or vocational experience the student will be accepted onto the course. The website does state the entry requirements for each of the courses. There is an inhouse English test should the centre be unsure if the student has the level of English required, which is a software package which can be accessed online.

All students are interviewed, and this enables the students to discuss their individual learning needs. The students can also be referred to the welfare officer for additional support and quidance. There is an area on the application form where the student can identify any additional needs that they may have, and relevant support would then be offered.

The registrations are completed in a timely manner from the evidence seen, and this has taken place within a month of each course starting. The centre recruits three times per year. The administration staff check the registrations to ensure that the information is correct.

Attendance records are electronic and are kept up to date from the information seen. This ensures that students attend the sessions although blended learning sessions are available this academic year.

The certificates are checked prior to being given to the students and the Quality Nominee would report inaccurate claims to Pearson.

Unit certification would be claimed for students that had not completed their full qualification.





3. Managing assessment and verification

- **3.** Your assessment strategy, processes and management underpin an assessment and internal verification system that:
 - confirms authenticity of student evidence.
 - delivers valid and reliable assessment outcomes.
 - follows Pearson regulations and requirements.
 - reflects national standards.
 - enables internal verification to drive and maintain assessment standards.
 - leads to the safe certification of student achievement.

Quality Measures	Details	Is there sufficient evidence that all quality processes are in place and effective?
3.1	All higher level qualifications have an accurate Programme Specification, as defined by the Quality Assurance Agency (QAA) Quality Code, centres should also adhere to Pearson's requirements for authenticity of student evidence.	Yes
3.2	There are clearly defined and structured Assessment Boards in place and assessment procedures that are operational and auditable at all assessment locations and for all assessors, units and students.	Yes
3.3	Assessment recording documentation is clearly understood by assessors and students and is used consistently across the centre and all assessment locations.	Yes
3.4	Assessment methodology leads to valid and reliable assessment outcomes against national standards, which are in line with regulatory and standards setting body requirements.	Yes
3.5	There is open and equal access to fair assessment for all students, including any students with particular needs.	Yes
3.6	The internal verification process is compliant with awarding organisation and regulatory requirements and ensures that: • assessment instruments are fit for purpose. • assessment outcomes are valid, reliable and to national standards.	Yes
3.7	There are processes for dealing with weaknesses in assessment, whether highlighted internally or externally.	Yes
3.8	The centre utilises the outcomes of Pearson's external monitoring to improve internal systems, processes and assessment.	Yes





If 'No' for any quality measures above, an Essential Action is required* Recommendations may be made at any time		
Essential Action		
Recommendation		
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Comments:

The programmes have accurate Programme Specifications that follow the QAA requirements, and they include a glossary of terms to support the students to understand the requirements of the command verbs to support their assessments.

The Assessment Boards are held, and the scope includes approval of previous minutes, matters arising, review of performance, progression monitoring, summary of the units. From the minutes that were made available detailed discussions take place for each of the subject areas.

The students submit their work through Turnitin, and this would check for plagiarism. Feedback is given through the Turnitin system. The achievement is tracked by assessment criteria level for the RQF qualification, which is in line with the Pearson requirements. Should a student require additional time for their submissions this would be identified at the interview stage, or through the welfare officer, or the student is able to apply for extenuating circumstances this would be reviewed at the Assessment Board.

The Internal Verification has taken place in a timely manner and each of the programmes and units have been verified. If there were weaknesses in assessment decisions identified the member of staff would be supported by the Internal Verifier, and the Head of Department would hold a meeting with the Assessor and standardisation sessions would be articulated. This would support the Assessor with their developmental needs. For new members of staff additional internal verification takes place to ensure that standards are being met. There is also an induction programme in place to support new members of staff.

The EE reports are reviewed, and any actions would be disseminated to staff through the Academic Boards and discussion with the programme team and Head of Department.

The centre ensures that their assignment briefs are fit for purpose by using the assignment checking service and the EE system. Some assessments have been changed due to using these services and this therefore indicates that the centre does utilise the external monitoring systems to improve their assessments.





4. Staff resources

- **4.** The delivery and assessment of your Level 4-7 qualifications is enhanced by an appropriate programme team that:
 - is appropriately qualified in the skill of teaching and assessment.
 - is vocationally competent to teach and assess the subject.
 - has sufficient time to effectively fulfil all aspects of the role.
 - views quality and improvement as an inherent part of their job role.
 - is supported by a formal programme of continuous professional development.

Quality Measures	Details	Is there sufficient evidence that all quality processes are in place and effective?
4.1	There are fit-for-purpose staff job descriptions providing details of duties for all roles.	Yes
4.2	Staffing on Level 4-7 programmes is continuously monitored in order to maintain adequate numbers of appropriately qualified and vocationally experienced personnel.	Yes
4.3	There is an effective recruitment and selection process which ensures the maintenance of adequate and appropriate staffing.	Yes
4.4	Teaching and assessing staff are given sufficient time for programme planning, delivery, assessment, verification and evaluation activities.	Yes
4.5	Any external experts who deliver and assess on programmes are familiar with the specification and able to conduct appropriate and accurate assessment.	Yes
4.6	There are suitable programmes of induction and development for the centre's L4 -7 provision for staff new to delivery and assessment.	Yes
4.7	There is an ongoing and formally recorded programme of continuous professional development for staff to ensure that knowledge, skills and qualifications are appropriate and up to date.	Yes





If 'No' for any quality measures above, an Essential Action is required* Recommendations may be made at any time		
Essential Action		
Recommendation		
Comments:		

Comments.

There are job descriptions in place which identify the roles and responsibilities across the centre. There are various roles in place that cover the administrative duties, governance and academic areas within the college. There are clear flow charts in place with lines of accountability shown.

The staffing levels are monitored and there has been an increase in the staff over the last twelve months. There has been an addition of four new part time members of staff employed by the centre this academic year. Mentors and Peer observations are in place to support new members of staff. When recruiting staff, the centre advertises using various mediums. Sufficient time has been given for the staff to plan their lessons, carry out assessment and the internal verification process. Full time members of staff are given 16 hrs teaching per week and therefore this gives additional time for the other activities.

The external experts do not carry out assessments they are guest speakers on the programmes. There is a set induction programme for staff and also the staff will be supported with the BTEC methodology through the Programme Managers.

CPD included internal workshops with 2-day trainings taking place internally. All part time and full-time staff are invited to the workshops and these take place each term and virtual training has also taken place whilst Covid 19 has been in place. CPD documentation is in place within the staff handbook.





5. Physical resources

- **5**. The provision of physical resources:
 - effectively support the delivery of your education programme(s) at Level 4-7.
 - ensure that there is subject specific and technical learning and assessment at Level 4-7.
 - ensure student and staff safety.

Quality Measures	Details	Is there sufficient evidence that all quality processes are in place and effective?
5.1	There are suitable specialist and general resources available that are sufficient for student volumes.	Yes
5.2	There are in place the necessary facilities and resources required by Pearson for the conduct of external assessment, where this forms part of a BTEC programme.	Yes
5.3	The centre monitors all resources regularly to ensure they are fit for purpose and safe to use.	Yes
5.4	The centre considers the sufficient provision of general and subject specific resources when planning the introduction of new programmes.	Yes
5.5	Where used, there are contractual agreements in place to ensure that external resources are available, fit for purpose, appropriate for the delivery of the programme and safe.	Yes
5.6	There are appropriate and fair access arrangements for all enrolled students regardless of ability, disability or other protected characteristics.	Yes





If 'No' for any quality measures above, an Essential Action is required* Recommendations may be made at any time		
Essential Action		
Recommendation		
Comments:	Comments:	

There are sufficient resources available with the classrooms over three floors of the building. The classrooms vary in size and range from 40 – 50 students, seven further classrooms have been obtained this academic year within the same building. There are sufficient resources for the student numbers as the centre has purchased additional resources for the travel and tourism sector. There are specialist rooms with a library, IT rooms and a common room with leisure activities for the students.

The resources are monitored by the Heads of Department to ensure that there are sufficient for the student numbers but also to ensure that they are fit for purpose. There is a learning resource committee in place where discussions would take place on any further resource requirements and the centre has also upgraded their computers during the last year.

External assessment could take place, but this is not a requirement of the courses that are offered at present, but the centre has the facilities for paper- based assessment and computer labs available for online assessment.

When new courses are planned the necessary resources are considered and discussed at the board meetings.

No external resources are used by the programmes.

There is a lift available for students with disabilities, which would then give access to all floors to enable the student to attend their classes. There are also disabled toilets. Support can also be offered to those that have additional learning needs and with blended learning taking place the centre is offering 1-1 support for students.





6. Assessment tracking, recording and reporting

Quality Objective

- 6. You record assessment decisions in a way that:
 - is clearly measured against recognised, regulated standards.
 - allows student progress to be accurately tracked.
 - allows the assessment process to be reliably verified.
 - provides clear evidence of the safety of certification.

Quality Measures	Details	Is there sufficient evidence that all quality processes are in place and effective?
6.1	All assessment records are stored securely and safely.	Yes
6.2	Up to date records of student achievement are maintained and are regularly reviewed and tracked accurately against recognised, regulated standards.	Yes
6.3	Assessment records are retained for centre and awarding organisation scrutiny for a minimum of three years following certification.	Yes
6.4	All current student evidence is available for centre and awarding organisation verification processes.	Yes
6.5	All current records of assessment feedback are available for awarding organisation verification processes.	Yes

If 'No' for any quality measures above, an Essential Action is required Recommendations may be made at any time		
Essential Action		
Recommendation		
Comments		

Comments:

The assessments are submitted through Turnitin and therefore they are stored securely, and password protected.

The student achievement is tracked at assessment criteria level following the previous AMR action.

The assessment records are being kept for three years following certification. Records were being kept for this length of time and records that were requested for the AMR were available.

Assessment feedback is on Turnitin and therefore available for verification purposes. Tracking documentation is in place and was seen for the students that were sampled.





7. Policies and procedures

- **7.** You have effective systems and procedures developed and agreed by managers, which cover Level 4-7 assessment processes and are:
 - regularly reviewed and updated.
 - readily available to all staff and students.
 - operational throughout the organisation.

Quality Measures	Details	Is there sufficient evidence that all quality processes are in place and effective?
7.1	 There are centre-wide quality assurance procedures for Level 4-7 provision, that: are supported by appropriate policies. are appropriate to centre size and the qualification requirements. are supported by senior managers and implemented by assessment and delivery teams manage and report on academic standards. include quality standards documentation and working practices suitable for higher education. embrace the precepts contained in the QAA Quality Code. have continuous compliance with our published policies, procedures and regulatory requirements. 	Yes
7.2	Policies and procedures are in place for managing: Equality and Diversity. Health and safety. Special consideration & reasonable adjustments. Recognition of prior learning. Assessment, internal verification. Student/staff malpractice, including plagiarism. Student appeals. Distance/flexible learning and assessment, if relevant Attendance and behaviour Adverse Occurrences (Student Protection Plan) Collaborations and /or Exceptional Collaborations There are appropriate and fair access arrangements for all enrolled students regardless of ability, disability or other protected characteristics	Yes
7.3	Centre policies and procedures are reviewed and evaluated annually, incorporating student feedback, improvement planning and actions, including actions arising from the Pearson Annual Programme Monitoring Review (APMR).	Yes
7.4	The accuracy and consistency of internal and external communications are effectively managed to ensure the timely dissemination of correct key messages to all stakeholders.	Yes
7.5	There is a means for ensuring all students and staff are aware of: • what constitutes an appeal and what is considered assessment malpractice.	Choose an item.





	 the related processes for instigating an appeal or investigating malpractice. the possible outcomes that may be reached. the consequences of both internal and external outcomes. the process that exists to enable students to make an appeal to Pearson. how the potential for any assessment malpractice informs programme planning and delivery. 	
7.6	There are robust systems for recording and managing all assessment appeals and malpractice, including plagiarism.	Choose an item.
7.7	There is a process for reporting serious assessment malpractice to Pearson.	Choose an item.

If 'No' for any quality measures above, an Essential Action is required Recommendations may be made at any time	
Essential Action	
Recommendation	
Comments:	

All the policies are in place and have been reviewed annually, the centre was aware that this was a Pearson requirement, and this has been stated within the Quality Assessment and Enhancement Manual.

The policies included health and safety, assessment, appeals and staff and student malpractice. Policies were contained within the staff and student handbook but also on the college website for the staff and students to access.

The students when they were interviewed were aware of plagiarism and stated that they had received support from the centre. They were aware that policies were available within the student handbook but if they wished to appeal against an assessment decision were likely to speak to the member of staff first, without going through an official appeal. Within the student handbook there was the appeals, complaints, disciplinary and assessment policies.

The quality assurance and enhancement manual had relevant policies contained within it and this was reviewed to ensure that they contained the most up to date policy. The centre keeps a spreadsheet that identifies the policies that have been reviewed and those that are planned. The Academic Board gives final approval for any changes to the policies. Any serious malpractice would be reported to Pearson by the Principal.





General Comments

The centre has an organised structure in place with roles and responsibilities given. The systems are in place to enable the students to be recruited on the correct course and the registration and certification processes are in place. The centre has expanded their facilities over the last academic year and also increased their staff to account for the additional numbers. Policies and procedures are in place and these are reviewed annually. All information that was requested was made available. The centre has adapted their delivery to blended learning, but the students still indicated that support would be offered by the centre should they need help with their assessments. Learning needs are able to be discussed and can also be indicated on the application forms and relevant support would then be offered to the student. It was clear from speaking to students that they had been supported whist the delivery methods had been changed for their course.

PEARSON USE ONLY		
Reporting Outcome		
No Actions required		
Name	Designation	Date
Haidar Kattan	Centre Quality Manager	26/10/2020

