

Academic Management Review Report 2017-18

Visit Details	
Academic Management Reviewer	Gary Hargreaves
AA Number	900711
Reviewer email address	gary@eiat.org
Date of review visit	24/01/2018
Time started	9:00
Time completed	15:00
Name and designation of people involved in the review	Dim Lian (QN), Esther Hardy Registrar and Director of Student Services, Rama Surapaneni Head of Administration and Data Analyst Deputy Director of Administration (GUS), Strategic Operations Manage Recruitment (GUS), Mautis van Rooijen Principal, Rod Brazier VP Excellence and Student Success.

Essential Actions and Recommendations Review

Essential Actions from previous report

An action plan was developed to address recommendations and essential actions identified in the last Quality Management Review Report. Progress made on each action point is outlined in the action plan. These actions are being embedded in the College's academic activities. Pearson Centre Quality Manager, Haidar Kattan has been working closely with the College monitoring their progress of the action plan and visited the College on 23rd January 2018.

Essential Actions

2.2. Revise published student handbooks to ensure that accurate entry information is consistently applied across Centre programmes.

This has been completed and sent to Pearson and signed off by the governors.

2.3. Produce Individual Learning Plans for students.

Whilst this process has begun the use of different recording systems in the College have initially slowed down the effectiveness of the reporting and data entry – this after two days of investigation with the data team this seems to have been resolved but how effective the ILPs for students are in supporting students is yet to be determined.

2.1 Provided data on rejections from new recruitment process compared to old process.





Again, in theory this is possible, but it was not clear how the College was using this data, this doesn't seem to be accurately addressed in the action plan, as it mostly refers to student surveys.

3.1. Student Handbooks should be reviewed and standardised to include correct entry information and the completion of sufficient units per semester prior to progression.

Completed and signed off – although information on compensation for RQF needs to be clear to both staff and students, and also reflected in updating or relevant policies and operational committees e.g. exam boards

3.2. To conform to the QAA Quality Code (B6), you will need to develop and publish clear assessment regulations relating to BTEC higher level programmes. The regulations should include a code of practice on how re-submissions and late submission of student work is dealt with. Whilst this has been actioned there needs to be evidence of compliance by staff and students in meeting the College's stated assessment regulations (see also 3.1 above).

3.3. A programme of support, and records of the process for individual review meetings and targets must be implemented to address the achievement issues for students due to complete their programme in June 2017.

Whilst this has been actioned there needs to be more specific evidence of improvements that currently are not evident. The interventions of coaches and mentors is known to some student but does not appear to be Widley understood by the wider student body, more promotion and communication could improve student and staff awareness.

3.8 Tracking of learners and support sessions should be standardised and current support for learners for assignments reviewed to ensure all that there is a whole college approach.

Again, as with much of the gathering of data the impact and the improvement are yet to be fully determined, as is the coaching and mentoring noted above.

4.1 Utilise the Pearson Centre Guide to Assessment 2016/17 for L 4 to 7 to ensure that the role descriptors for Assessors and Verifiers are used to enhance current job descriptions and ensure that staff are aware of their responsibilities.

The assessment regulations have now been approved by the academic board.

Add tutoring functions to programme team member job descriptions.

There is evidence that all staff including part time attend and meetings including standardisation (see also 3.1 and 3.2 above).

6.2 Review tracking of learners for submission of assignments.

This is still work in progress and requires more targeted intervention and investigation as the variation in low to high retention and attendance is still evident as an issue.

Progress Made	Resolved?
There is still work to be done (see above) as much of the work has been initiated in theory this now needs to be demonstrate by practical and operative implementation.	No





Recommendations from previous report

2.1 Review the ICE document to when taking external exams as per comments in body of report.

Addressed in the action plan that now needs to be implemented in improvement plans.

2.1 Changing of tests on a frequent basis to ensure that tests are fair for all learners.

Addressed and demonstrated during the visit and by an unannounced visit by Sally Peacock Pearson Quality Manager.

- 2. The Pearson Centre Guide to Assessment 2016/17 should be provided for all members of programme teams and be utilised by Heads of School to develop consistent assessment practice across the Programme Teams. This was not specifically included in the action plan or evident during the visit although the centre is aware of the need to use current guidance documents to inform processes, procedures, functions e.g. committees and specifically assessment practices.
- 4.1 See 4.1 essential action above.
- 4.7 A Tutoring development programme should be delivered to address individual student development needs and to address poor assessment and achievement issues with students due to complete their programme in June 2017.

Coaches and mentors are in place and there is evidence from some students that this is proving effective, although the wider student community needs to be informed of the availability and access to these resources. Students who did use the coaches and mentors reported positively on the impact and improvements it made to their assessments.

- 6. The development of a Staff Handbook that includes extracted guidance from the 2016/17 Centre Guide to Quality Level 4 to 7 and 2016/17 Centre Guide to Assessment will provide support for programme teams. Covered to some extent above but is ongoing.
- 7. Establish an annual review of current policy with designated review personnel.

Again, ongoing and documents produced and sent to Pearson, full implementation is yet to be seen as organisational and staffing structures are relatively new.

Progress Made	Resolved?
Again, there is still work to be done (see above) as much of the work has been initiated in theory this now needs to be demonstrated by practical and operative implementation.	No





Centre Details			
Centre name	St Patricks International College		
Centre number	11191		
Principal / Head of Centre	Professor Maurits Van Rooijen		
Centre email address	info@St-Patricks.ac.uk		
Centre telephone number	+44 (0)20 7287 6664		
	il address or centre telephone number are incorrect, tact: <u>ukvqapproval@pearson.com</u>		
Quality Nominee	Dim Lian		
Quality Nominee email address	DLian@St-Patricks.ac.uk		
Quality Nominee telephone number	+44 (0)20 7287 6664		
	dress or telephone number are incorrect, update them on Edexcel Online		
Centre type	Private College		
Is this centre in its first year of delivery?	No		
Number of subsites at centre 1 although non teaching (Holborn)			
If subsites exist, please provide full address details	s of all subsites below:		
The College has a known subsite in Holborn for explace on this site.	nrolment and induction activities, no teaching takes		
Are there any collaborative, sub-contracting, partnership or consortia arrangements in place with other centres?			
Does the centre operate any distance learning?	No		
Does the centre operate any overseas provision?	No		
If collaborative, sub-contracting, partnership, consortia, distance learning or overseas arrangements exist, please provide full details below:			
Whilst the College has no colobrative partnership	s it is part of the Global University GUS Group.		





1. Centre details and management

	Quality Objective			
1. Your or requirement	rganisational structure is clearly defined and complies with Pea ents.	arson approval		
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	No		
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		





If 'No' for	If 'No' for any quality measures above, an Essential Action is required* Recommendations may be made at any time		
Essential Action	1.3 The implications and potential risks attached to the application of student loans should be made clear as part of the application process and prior to student registration and enrolment. 1.2 and 1.3 Outline the accountability, monitoring processes and Quality Assurance oversight of outsourcing of GUS, Agencies and the provisions of marketing, recruitment, admissions and induction activities on behalf of St Patricks.		
Recommendation	Outline the accounabilty and		
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- 1.1. The registered business address; the Sceptre Court address is now the main campus for the delivery of learning, assessment and verification.
- 1.2. Buchanon House Holborn through GUS provides recruitment, marketing induction, testing and the overall management of student applications. This also includes checking language and literacy skills and criteria required for funding and pre-entry assessment processes if required. Marketing recruitment and admissions continued to be managed by subcontracted organisations and Recruitment Agencies, the marketing materials provided for Agents contain accurate entry information. The College website programme information now clearly identifies entry criteria for all its Higher National programmes, discussions also confirmed this is explained to applicants when they attend the Holborn pre-entry interview. Pre-entry assessment records and initial application records were provided and discussed. Students are registered with Pearson prior to any claims for funding, this can cause issues if students are unsuccessful in obtaining a student loan, this should be made clear to students as a risk, especially as some students indicated that they gave up their jobs, only to be rejected for a student loan.

There is a current organisation chart, that identifies reporting relationships, this was supplied as hard copy and is available on the Centre Intranet.





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	Mhammed Mujahid Hussain KA38612	Programme	Business RQF Level 5
Enrolment date	30/10/2017	Registration date	02/11/2017
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	No
Accurate and timely certification process seen?	No	Issues identified?	Yes
Comments:	Registration confirmation report 2nd Nov on MIS records online, attendance record of 62%. Assessment records not clear, no submissions although intervention issues identified. Gathering this data on the first day was challenging.		

Student 2 name	Winifred Nsaja KA38875	Programme	Business RQF
Enrolment date	30/10/2017	Registration date	02/11/2017
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:	Attendance recorded as 94.4%, again the assessment records are incomplete, and late marking due to Turnitin cited as an issue and late submissions. Again, gathering this data on the first day was challenging. There may be inconsistency in recording assessment, and these processes and data recording require investigation to ensure that all staff are compliant and meeting the assessment requirements as per their own polices and aligned to BTEC requirements.		





Student 3 name	Rafael Vegas HC51757	Programme	Business Managemetn QCF
Enrolment date	19/10/2016	Registration date	02/11/2015
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?	Yes	Accurate and timely IV records seen?	No
Accurate and timely certification process seen?	No	Issues identified?	Yes
Comments:	Attendance 21% funding issues are noted for the lack of attendance.		

Student 4 name	Samule Banson HC51755	Programme	Business QCF
Enrolment date	19/10/2015	Registration date	03/11/2015
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:	Attendance 85%, Pass Merit and Distinction converted to %. Overview seen of IV and assessment, although the data is not transparent, it is essential to provide clear and timely assessment and IV records that are accessible by assessor, assessment teams and able to identify clear interventions and support.		





Student 5 name	Levi Elijah Jone KC93369	Programme	Hospitlaity QCF year 1
Enrolment date	10/10/2017	Registration date	02/11/2017
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:	Enrolment inaccurate but noted as a Person issue not centre. Attendance 82% but the MIS is somewhat clunky in recording progress and achievement.		

Student 6 name	Charlie Broad JG1843	Programme	1SE year 2
Enrolment date	06/03/2017	Registration date	
Timetable seen?	Yes	Accurate and complete attendance records seen?	Yes
Accurate and complete assessment records seen?		Accurate and timely IV records seen?	Yes
Accurate and timely certification process seen?	Yes	Issues identified?	No
Comments:	Registration dates not clear but they Pearson/Centre emails confirm within the required 4 weeks. Attendance 95% assessment is timely, there is evidence that the MIS and data is working on tracking and late submissions etc. #7 Lilian Dhliwayo HJ84854 H&SC enrolled 16th May 2016. Attendance 75% all other documentation evident. #8 Josephine Rebekah Gleason JK34736 enrolled 26th June 2017, attendance 91%, 5 units completed. No students certificated.		





- **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	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.	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 any quality measures above, an Essential Action is required* Recommendations may be made at any time		
Essential Action	2.1 The outsourcing of marketing and recruitment to GUS requires clear deliberative oversight and accountability on the part of in the structure of St Patricks Quality Assurance processes.	
Recommendation	Publish external reports on the website in their entirety. Student loans application processes and associated risks could be more transparent, in the case of the rejection of the student loan.	
_	transparent, in the case of the rejection of the student loan.	

- 2.1 The College's public information publishing procedures including the College website require senior management sign-off. The Marketing Department works with Senior Staff to ensure correct and accurate information are published on the website. The overarching statement about publishing public information (PIP) is set out in the College's Public Information Policy. The recruitment continues to be reviewed at the Holborn site, with unannounced visits. The outsourcing of marketing and recruitment to GUS could be a cause for concern as there is no clear oversight or accountability in the structure of St Patricks Quality Assurance processes, with marketing only 'loosely' (CED comment) working with senior staff from St Patricks. Furthermore, the College website is quite selective in publishing good news and practice, selecting sections of previous reports that are positive and neglecting to publish areas for concern, it would be far more transparent if the College published external reports on their website in their entirety.
- 2.2 That said the recruitment processes at Holborn site looks to be clear and robust and this was affirmed by students, although student loans and application and associated risks could be more transparent. The College adheres to its Recruitment, Selection and Admissions statement and, procedures for admissions appeals is published on the College website. The staged process allows progression to the next stage of recruitment if they pass the assessment of reading and writing. Failure at this stage results in immediate feedback and halts the admission process. If successful
- If successful, the next stage is Speaking & Listening assessment, implemented, designed, managed and administered by the Department of Academic Learning & Enhancement (DALE) operating independently of college. Responses are recorded and passed on to the College. Since the last AMR report there are procedures in ensure that questions are more random less predictable.
- 2.3 The next stage learners meet with Academic advisors provide course details entry requirements and explore learners background qualifications/achievements, and as part of a formalised academic interview. This then results one of the following outcomes; rejection, likely to be accepted, deferred to next academic session. Those accepted are assisted in the process of completing application for student finance. The College's recruitment process provides the opportunity for applicant to discuss their learning needs at the start of the recruitment process with the Course advisory team as well as during the academic interview. In addition, when on programme students are given the opportunity to discuss their needs and seek support from Mentors, Coaches, Heads of School and Registrar who is also director of student services.
- 2.4 The College has a designated individual, Academic Data Analyst for registration and certification of students with Pearson ensuring that regulatory requirements are fully followed. This was demonstrated by both the Academic Data Analyst, Deputy Director of Administration (GUS) and the QN and included the Pearson registration process, and randomly selected learners as part of the reporting process.





- 2. 5 There is a clear and accurate mechanism exists for checking the accuracy of student registration demonstrate during the visit (see 2.4).
- 2.6 The Registrar is responsible for ensuring that accurate and up to date attendance records are maintained, monitored and updated. In addition, the College has the Attendance Policy which clearly states the expectation and attendance requirement. Learners sampled had accurate information and with clear adherence to the attendance policy with an expectation of 80% average attendance.
- 2.7 The Academic Data Analyst is responsible for ensuring accurate certification claims are checked and verified against assessment records, and again demonstrated during the visit. Certificates photocopied, checked and signed on collection.
- 2.8 The certificates received against assessment records, is embedded and required and as this part of the process outlined in 2.7.
- 2.9 There are clear processes to ensure that errors are reported immediate to Pearson away. There are clear procedures for investigating and reporting inaccurate or fraudulent claims that would be initially investigated internally to the Senior Management Team, and then to Pearson if valid. To date, no such claims have been made.
- 2.10 The assessment teams are aware of the availability to all students of unit certification for those students who fail to meet the requirement of HNC or HND. The Academic Data Analyst follows the procedures required for unit certification, with lists of potential sent to the Heads of School for endorsement before the certificate claims are made. This should also include reference to assessment and final examination boards and incorporate compensation if applicable for RQF programmes.





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 QAA Quality Code, which includes clear 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.	No
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.	No
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	3.3 & 3.7 Improve the overall tracking and recording and monitoring of student assessment and progression and effective monitoring across the College.	
Recommendation	3.8 coaching and mentoring scheme has begun to impact on the overall support for some learners although this needs to be communicated and utilised by more students if the modest successes noted by students are to be replicated across the College	

- 3.1 The Course Handbooks clearly set out the programme specification. In addition, programme factsheets are published on the College's website. To identify plagiarism the College uses an online assignment submission linked to anti plagiarism software Turnitin. In addition, online submission requires student declaration and authenticate work, and include the assignment submission form (with declaration to sign) when submitting assessments. Online submission also date stamps submission identifying timely and late submission. These evident in samples of Course Handbooks, samples of programme factsheets, and Assignment Submission Forms.
- 3.2 The College has clearly outline teaching and learning and assessment strategy. Assessment procedures are mostly consistent and standardised across all programmes. New Assessment Regulations aligned to both QCF and RQF Pearson/BTEC requirements have been approved by the Academic Board meeting on 13th December 2017, and evident is said minutes.
- 3.3 The College uses current Pearson's templates and documentation for assessment and internal verification and are consistently applied across all programmes. The Assignments are marked online supported by Moodle platform linked to Turnitin. Written feedback is provided on-line, this includes opportunities for formative feedback, although students reported inconsistency in the availability and detail of some assessor feedback. Grade achievement and summaries are recorded on 'The 'Student Journey Through Performance'. The master sheet is maintained by the College's academic data analyst. There still seems to be variation in the tracking and recording of student progression and effective monitoring across the College. There is availability to provide assessment input and tracking but not all learner is not being monitored for outstanding assignments, or at least it inconsistent.
- 3.4 Whilst the College's Assessment Strategy and Assessment Cycle provides guidance on principles for the development of appropriate assessment methods for level 4-7 qualifications, there is little evidence that there are opportunities to share good practice in assessment or versification or moderation processes. Blocks on certification programmes are still in place and no further details or information about any progress on students submissions for the teach out in Fashion, SQA and Law as the project manager for these or further information was not available during the visit.
- 3.5. The Registrar confirmed during the visit that consideration is given to students with particular needs, following a request or a declaration made dependent on the nature of learning needs. For example, extra time can be given to students who are registered





dyslexic to submit their work. There are still issues with blocked programmes and the additional support needs and requirements of these students (see 3.4).

- 3.6 The Internal Verification (IV) processes are aligned to Pearson? BTEC requirements. The Heads of School are responsible for ensuring the internal verification process is applied consistently. Evidence includes an IV Process Flow Chart, the Assessment Cycle (indicated in 3.4) and Samples of IV sheets. As noted above there are still some programme blocks although some actions have been taken progress could not be determined during the visit.
- 3.7 The College has clear internal verification processes for both Assignment Brief and Assessed work, aligned and using Pearson template and documentation this is supplemented by the Term Management Process Model (TMPM). The Heads of School are responsible for developing an action plan in agreement with the Quality Assurance Manager in a case where the External Examiners identified issues with the assessment. The Heads of School ensure the Action plan is implemented. The Quality Assurance Manager monitors the process by signing off the action plan on completion. Whilst these are clear in principal on collecting on line data not all evidence could be easily located to demonstrate that these processes are effective, nor was there evidence of monitoring processes. Given that there have been significant and recent changes much of this is work in progress and the effectiveness and monitoring should be interrogated by the Quality Team with SMT oversight preferably soon and before External Examiners begin their visits.
- 3.8 Improvement has been made regarding the way in which the College utilises the external examiners' reports. There are now some college-wide procedures on action taken from the external examiners' reports (as in 3.7). Each school develops an action plan (where applicable) drawing from School's specific reports. The coaching and mentoring scheme has begun to impact on the overall support for some learners although this needs to be communicated and utilised by more students if the modest successes noted by students are to be replicated across the College





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 4.1 Audit student records and mointor and act on any gaps in assessment and IV			
Recommendation	4.2 The College should embark on a process of ensuring that staff are sufficiently qualified to teach at this level and direct their staff to appropriate qualification and training. It would be more effective to have cross department and programme teacher observation to ensure consistency and effectiveness of teaching and learning across the entire College.		





- 4.1 There is a clear management structure within Schools and the roles are clearly defined, and now evident in Job Descriptions. As indicted in previous parts of the report when auditing student records of there were gaps in assessment and IV of some students.
- 4.2 Heads of School in consultation with the Senior Management Team ensure the academic staff are appropriately qualified to undertake teaching responsibilities for level 4-5 programmes.

The College is committed to staff development, whilst the College sponsored a professional teaching qualification (Level 3 Certificate in Assessing Vocational Achievement) and all teaching staff underwent the training and successfully completed the qualification, course only provided limited vocational aspects of teaching and learning, and at level 3. Some staff whilst holding higher qualifications including doctorates are not operating effectively or communicating with students appropriately, incidents of teacher 'oppressive' behaviour and belittling students in the classroom who lack educational qualifications, or status or 'cultural capital' need addressing, curtailing, and actioned. It is recommended that the College embarks on a process of ensuring that staff are sufficiently qualified to teach at this level and direct their staff to appropriate qualification and training. Schools implement regular peer review and review by Heads of School through which teaching and learning strategies are improved which also enable personal development through peers on the job. Whilst this this peer observation is useful it would be more effective to have cross department and programme teacher observation to ensure consistency and effectiveness of teaching and learning across the entire College.

- 4.3 The Human Resources Department ensures the recruitment and selection process is followed. All positions for teaching staff are advertised. In addition, part of the selection process requires candidates to deliver 10-15minutes presentation that is evaluated. All references and qualifications are checked prior to appointment. Overall there is an effective staff recruitment and selection procedure in place, with records of induction, and mentoring of new team members.
- 4.4 Staff members are given sufficient time to carry out their academic responsibilities. In general, Lecturers with no management responsibilities are expected to teach 20 hours per week. Staff with management responsibilities within schools are given abatement.
- 4.5 On rare occasions, the College may require external experts to deliver and assess programmes. However, where this takes place, Heads of School ensure Induction Sessions are provided prior to undertaking any teaching and learning responsibilities. Assessments are then also moderated by a senior member of staff.
- 4.6 All new staff receive induction to ensure that they are familiar with the national standards and developments in teaching and learning and assessment at Level 4-5, and these are outlined in the College academic policies and procedures and academic activities across Schools. The College staff development strategy and staff development programmes are rolled out across Schools. Some examples have included; Certification in Assessing Vocational Achievement (Level 3); Level 4 Certificate in Teaching and Learning; Level 3 ADHD.
- 4.7. There were up to date records of CPD activity. The College encourages Staff members to undertake professional and personal development activities in line with the College's mission statement and strategic direction. Staff members record their personal and professional development activities in Staff Development Record (SDR).





5. Physical resources

Quality Objective

- **5**. There is adequate provision of physical resources that will:
 - support general learning and assessment at Level 4-7.
 - enhance 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	When used, external resources are contractually available, fit for purpose, appropriate 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	5.3 Heating is an issue across the entire building that requires action and widely reported and noted by students as an issue, and has an impact on effective learning and the overall teaching environment.		
C			

Comments:

Overview

The College has been re-purposed as an education College with a library and sufficient resources to support the learners on programme. Ground floor and 5th Floor have a lab for computing. The ground floor library has 14 PC's. The 3rd floor provides more classrooms and the location for student services and academic administration in one area. The 4th floor classrooms are complete with furniture and projection facilities. The 3rd floor includes a large staffroom. The second and 6th occupied by other businesses. Heating is an issue across the entire building and the heat is unbearable (too hot) and recognised as an area that requires action and widely reported and noted by students as an issue, and has an impact on effective learning and the overall teaching environment.





- 5.1 Subject-wise specialist and general hard copy resources are made available in the Library at Sceptre Court. In addition, the E-Library provision can be accessed from anywhere by Staff and Students.
- 5.2 Whilst there externally set assessments for RQF programmes, there are requirement to provide any additional resources.
- 5.3 The Heads of School and Programme Teams monitor teaching and learning resources required for each programme. The Heads of School report resource requirements to the Senior Management Team (SMT) through the Registrar who oversees the operation of the Library. The SMT authorise resource purchase, these include recent list of books requested for purchase.
- 5.4 New programme proposals are submitted to the Programme Development and Enhancement Committee (PDEC). The individuals/schools proposing a new programme are required to present resources requirement budgeting the new programme delivery. There is a clear Programme proposal approval flowchart, and documents also include Programme Proposal Pro-forma.
- 5.5 (NA)
- 5.6 Fair access arrangement are made for all enrolled students, providing opportunities to individuals with learning difficulties with sufficient evidence are reported to the Registrar.





6. Assessment tracking, recording and reporting

- **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	6.5 Review the effectivenes of assessment feedback and the consistently across all programmes.	
Comments:		

6.1 All assessment records are stored securely and safely in electronic format. The Academic Data Analyst operates the process for ensuring assessment records are updated and recorded accurately.

The Academic Data Analyst demonstrated security procedures during the visit. Turnitin is used to track achievement of assessment records on the Centre password protected Intranet system, audits indicate current time bound data is in place. There are some audit discrepancies in the records and these have been noted and actions are in place to resolve them (see earlier comments in the report).

- 6.2 The Academic Data Analyst with academic administrators attached to each School ensure records of student achievement are regularly reviewed, tracked and maintained in line with the recognised, regulated standards. Again, while records are mostly up to date, they do not appear to have been consistently audited by Heads of School or programme teams.
- 6.3 All assessment records are retained by Centre for the awarding body scrutiny, and for retained for the requisite three years.
- 6.4 All current student evidence is maintained on-line (Moodle platform) with the exception of manual projects required in Fashion and Computing Programmes. On-line marking of assignments evidences was available for view during the visit although not always current or complete. EE reports indicate that all paperwork is presented for EE visits and all evidence was available for the AMR visit.
- 6.5 Feedbacks records with learners' work are retained on-line on the College's VLE system (Moodle platform). EE QRF's have indicated that assessment feedback is not consistently effective across all programmes and would encourage that this is reviewed as part of the recommendations indicated above in this report.





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:	Yes
7.3	Centre policies and procedures are reviewed and evaluated annually, incorporating student feedback, improvement planning and actions.	Choose an item.
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. 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. 	Yes





7.6	There are robust systems for recording and managing all assessment appeals and malpractice, including plagiarism.	Yes
7.7	There is a process for reporting serious assessment malpractice to Pearson.	Yes

If 'No' for any quality measures above, an Essential Action is required Recommendations may be made at any time		
Essential Action		
Recommendation	QN would be expected to have more direct managerial involvement and oversight of the qualifications and Quality Assurance within the College and would normally be a member of Senior Leadership Team.	

7.1 The College has centre-wide quality assurance procedures for level 4-5 programme and these are outlined in the College Student Handbook and QAE Handbook, of pertinence and relevance are the sections related to TMPM-CQLC Process Models (academic standards). Reference and monitoring of centre-wide quality assurance procedures is made in meeting minutes of Academic Board and Senior Management Team. Public Information Policy requires regular monitoring of Programmes information including that on the College's website. Since the previous QMR visit Senior Personal in the organisation have changed and further improvements to quality assurance processes have been designed but the functionality and operation of the College quality systems have yet to fully tested to review and improvements across the organisation. There demonstrable evidence in the use of quality systems and the outcomes of key monitoring activities that are disseminated to programme teams, is currently ongoing and continues to be under review.

- 7.2 Policies and procedures are in place for;
- 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

All students are expected to meet the English Language requirement of entry to the programme, equivalent to IELTS 5.5.

7.3 The College now operates 'Governance Document Review and Approval Policy' drawing from recommendation set out in the 2016-17 AMR report include review and version control. Each School has reviewed and produced an action plan based on the 2017 NSS results. Student representatives present their feedback at Schools' Mid-Term Board Meeting usually held in teaching week 4 or 5. Heads of School are responsible for addressing issues brought by students in relevant comittees, and Governance Document Review and Approval Policy, 2017 NSS results, Samples of Schools' action plan on NSS results, SELT meeting minutes and Samples of Schools' Mid Term Board Meeting.





- 7.4 The College has a designated Quality Nominee for Pearson Programmes, however as noted earlier as all the work of St Patricks College is exclusively Pearson qualifications and as such the role of QN would be expected to have more direct managerial involvement and oversight of the qualifications and Quality Assurance within the College and would normally be a member of Senior Leadership Team.
- 7.5 The College has clear procedures for students to make academic appeals and take positive steps to prevent the occurrence of learner malpractice. Students are informed about academic malpractice and appeals in induction sessions. The appeal procedures are made available on the Schools' VLE. Heads of School assure that Assessors are made aware of the importance Pearson places upon Malpractice and procedures that exist for academic appeals. In addition, staff and students are made aware of the procedures for lodging complaints to OIA which is set out in the appeals procedures.
- 7.6 The is a robust system for recording and managing assessment appeals and instances of academic malpractice including plagiarism. In addition, the College now operates (from September 2017) a college-wide monitoring of academic appeals to ensure consistency in appeals decisions across Schools, evident in Master Spreadsheet for monitoring the Academic Appeals. It is planned that this will be reviewed annually.
- 7.7 In cases where learners are suspected of malpractice, Pearson confirms there is no requirement to inform then, unless the malpractice relates to external assessment. Currently, external assessment is not applicable to programmes delivered at the College. Matters regarding the academic malpractice/plagiarism are addressed and decisions taken at School level by Plagiarism panel. In unusual circumstances an individual case could be brought to the College's Complaints Committee for review and judgement. If staff malpractice is suspected, the Principal, as the Head of Centre is required to inform Pearson Investigating Team at the earliest opportunity. This is done by submitting a JCQ M2 (a) form, which can be downloaded from jcq.org.uk. The student handbook provides clear quidance on the penalties how the College deals and regards Plagiarism

General Comments

The College reported that in April 2017, the Interim Principal, Professor Richard Blackwell appointed in September 2016 left the College. He was replaced by a senior member of Global University Systems (GUS) group, Professor Maurits Van Rooijen. A new organisational structure has been included in the evidence folder. Whilst this inlcudes a Governance and Management Structure, and Academci Governing Structure, and a School Boards and Panels, these structures are not particularly clear or transparent. The position, influence and accountability of GUS in this structure is unclear, as are the terms of refence of committees, and the roles and responsibilities of key staff including the Quality Nominee (QN) and the outsourcing of Recruitment Deputy Director of Administration who handles all the College's data - both these posts are part of GUS and do not appear to be directly managed or clearly accountable to the St Patricks College. For example, all data records online have the header LSBF, not St Patricks technically making this information invalid as LSBF is not an approved BTEC centre.

Furthermore, as all the work of St Patricks College is exclusively Pearson qualifications and as such the role of QN would be expected to have more direct managerial involvement and oversight of the qualifications and Quality Assurance within the College and would normally be a member of Senior Leadership Team.





The College stated that "the recruitment of senior management is staged to ensure the best managerial continuity and retain the momentum of quality related enhancement. In January 2018, the Vice-Principal for Teaching Excellence and Student Success was appointed. In the new structure, the Principal, the Registrar, the Chief Operating Officer and VP for Teaching Excellence and Student Success serve as the College's Senior Management Team, acting in accordance with directions set by the Board of Governors". Again, whilst this may be worthy there is still no clear evidence that there is sufficient diligent oversight of Quality Assurance that is then demonstrable in the reporting structures outlined above.

The College also states that "The Board decided on its actions, including the appointment of a senior member of GUS as Principal to ensure a smooth progression of the quality enhancement process started under the previous interim principal. Key elements are to ensure the College can deliver on its historic mission - offering vocational education to considerable numbers of students who mostly have a severely disadvantaged background and who can benefit greatly from the educational experience. The Mission Statement and Vision can be found on the St Patrick's website: http://www.st-patricks.ac.uk/mission-andvision. As the strategic focus of the Board, the current management priority is to implement an action plan focused especially on continued improvements in recruitment/admissions processes and major initiatives to improve retention (attendance), progression, completion". If this is so, then it is recommended that the College provide data for its large number of students to indicate what improvements have been made in recruitment and admissions, attention, retention achievement and attendance. Despite assurances that things are improving the discussions with current students still has a legacy or dissatisfaction that whilst these may ne historical these students are still on programme and there was little evidence at the time pf the visit to ameliorate the situation although the appointment of a President of Student Council and elected course team representatives has begun to assist the processes including student representation in the College.

Reporting Outcome				
Actions Required				
Name	Designation	Date		
Sally Peacock	Head of Centre Management	08/03/2018		

