

Academic Management Review Report 2016-17



Visit Details	
Academic Management Reviewer	Victoria Dow
AA Number	900823
Reviewer email address	victoria@dowdesign.co.uk
Date of review visit	21/02/17
Time started	10:00
Time completed	15:00
Name and designation of people involved in the review	Farook Mir, Principal Farzeen Heesambee Office administrator

Essential Actions and Recommendations Review	
Essential Actions from previous report	
<p>6.2 'Define a procedure for each unit tutor to track student achievement for each unit-on a centrally-held single tracker (e.g. staff-only platform on Moodle) so there is only one definitive version. Monitor implementation of the procedures by checking records are up-to-date and accurate against the work submitted by students'</p> <p>6.2 'Administrator to derive from the unit tracker records a record showing the grades achieved by each student in each unit to present to the exam board meeting for formal sign-off prior to submission to Pearson.'</p> <p>7.1 Develop internal policies and procedures in relation to BTEC assessment to accommodate the actions and recommendations highlighted in the AMR Monitoring report 13 May 2016</p>	
Progress Made	Resolved?
<p>All essential actions levied by the AMR in 2015-16 were followed through during an interim centre visit conducted by Sally Peacock and Stacy Venables on June 13 2016</p> <p>The centre's block has been consequently lifted and Anglo Skills have since claimed L7, L4 and L3 (CYPWF) certificates; Anglo Skills has also been granted Direct Claims Status (DCS) for L3 Diploma Childcare Young Peoples Workforce (CYPWF). This status has been evidenced through the SV's report dated 15/11/16</p>	Resolved
Recommendations from previous report	
None levied	
Progress Made	Resolved?
None levied	Resolved

1. Centre details and management

Centre Details	
Centre name	Anglo Skills College
Centre number	23229
Principal / Head of Centre	Farook Mir
Centre email address	principal@angloskillscollege.co.uk
Centre telephone number	0115 9483339
If the Principal / Head of Centre name, centre email address or centre telephone number are incorrect, please instruct the centre to contact: ukvqapproval@pearson.com	
Quality Nominee	Farook Mir
Quality Nominee email address	principal@angloskillscollege.co.uk
Quality Nominee telephone number	07753102166
If the Quality Nominee name, email address or telephone number are incorrect, please instruct the centre to 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
If subsites exist, please provide full address details of all subsites below:	
Are there any collaborative, sub-contracting, partnership or consortia arrangements in place with other centres?	Yes
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:	
Anglo Skills College has a collaboration with Pathway Direct who is a prime contractor working in partnership with different organisations to run SFA funded courses within the UK.	

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	Collaborative arrangements with other sites, centres or organisations are approved by Pearson and appropriately recorded on Pearson systems, including: <ul style="list-style-type: none"> • Subsites. • BTEC consortia. • Sub-contracting. • Other collaborative partnerships. 	Yes
1.3	There is an organisation chart, providing clear reporting relationships, which is communicated to all members of the organisation, ensuring that they understand what their responsibilities are and know to whom they are accountable.	Yes

If 'No' for any quality measures above, an Essential Action is required*	
Recommendations may be made at any time	
Essential Action	None
Recommendation	1.3 Maintain the naming of Pearson BTEC in relation to all roles, responsibilities and lines of accountabilities relating to BTEC qualification delivery and assessment.
Comments:	
<p>1.1 Anglo Skills College has been approved since 2012, initially for BTEC HND/C Business and from 2014 for BTEC L7 Certificate in Strategic Management and Leadership. In 2015 ASC was approved to deliver BTEC L3 Business and Childcare Young Peoples Workforce (CYPWF), the approval documentation being provided for confirmation.</p> <p>1.2 Collaboration, with Pathway Direct, is in the form of funding support for ASC's approved BTEC L3 Business and Childcare Young Peoples Workforce (CYPWF). This arrangement has been discussed with the Principal and affirmed through sight of sub-contractual documentation. The Pearson SV's confirmation of Direct Claims Status (DCS) verifies the rigour underpinning ASC's BTEC L3 CYPWF qualification management and delivery.</p> <p>1.3 ASC's office administrator provided a working Organisation chart which defined clear roles, academic/administrative responsibilities and lines of accountability. This did not make any reference to Pearson BTEC. This requirement was discussed during the AMR visit and a revised copy was provided on the day.</p> <p>The recommendation is levied to ensure chart retains this reference in the event of staff changes and administrative annual updating.</p>	

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	Naila Hussain	Programme	L3 CYPWF
Enrolment date	09 12 15	Registration date	14 03 16
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:	<p>Timetable was deemed fit for purpose and records confirm 100% attendance.</p> <p>Assessment and IV records have been scrutinised.</p> <p>Certification claim was confirmed as timely and no issues were identified in the paperwork provided for AMR scrutiny, albeit there was a slight delay in the registration date (from the enrolment date) though nothing detrimental in respect of making progress.</p>		

Student 2 name	Daiva Norkuviene	Programme	Pearson HNC Business
Enrolment date	16 09 14	Registration date	01 10 14
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:	<p>Timetable was deemed fit for purpose and records confirm 100% attendance.</p> <p>Assessment and IV records have been scrutinised.</p> <p>Certification claim was confirmed as timely and no issues were identified in the paperwork provided for AMR scrutiny.</p> <p>Enrolment and exit letters were sampled as additional evidence to support the sampling process.</p>		

Student 3 name	Yijun Ge	Programme	L7 Certificate in Strategic Management and Leadership
Enrolment date	21 01 15	Registration date	
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:	<p>Timetable was deemed fit for purpose and records confirm 95% attendance.</p> <p>Assessment and IV records have been scrutinised.</p> <p>Claim for Certificate of Achievement (CoA) was confirmed in the context of managing visa permissions; the student had studied elsewhere (prior to ASC) and to study to completion would have rendered her position as illegal. ASC's office administrator provided a copy the centre's end-letter to the student explaining the position with her visa and the intention to claim the CoA as the best outcome in meeting progression aspirations.</p>		

Student 4 name	Hana Almabrok Almadhom	Programme	HND Business
Enrolment date	01 10 15	Registration date	01 11 15
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?	N/A	Issues identified?	No
Comments:	<p>Timetable was deemed fit for purpose and records confirm 100% attendance.</p> <p>Assessment and IV records have been scrutinised.</p> <p>Current student on Pearson roll with certification not yet due.</p>		

2b. Quality Objective		
<p>2. Your administrative processes and procedures ensure that recruitment, registration and certification processes:</p> <ul style="list-style-type: none"> • 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	Suitable processes are in place to assure the integrity of student recruitment onto the centre's L4 -7 provision.	Yes
2.2	The centre publishes information that is accurate and provides students with a basis for making an informed choice about enrolment decisions.	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 us 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	None
Recommendation	No recommendations levied as all quality measures are in place and proven to support QO.2 objectives.
Comments:	
<p>2.1 Scrutiny of personal ID, visas, qualification certification to date, English language proficiencies, subject knowledge and information relating to previous experiences(s) is integral to the initial stage of ASC's recruitment process.</p>	

When/if students move to a formal interview stage, after the scrutiny process, they are given a 2nd assessment for suitability of enrolment on to subject- specific BTEC programmes.

2.2

All prospective students are provided with ASC's current prospectus and referred to the centre's website for programme specific information, unit details, entry requirements, fees and assessment guidance; the breadth of information and guidance allows students to make informed decisions prior to enrolment.

2.3

The recruitment process involves a face to face interview with specialist tutors and staff who are authorised to establish any special learning needs and support needed to meet individual progression aspirations.

2.4

Integral to ASC's registration policy is the requirement for all learners to be registered within 30 days of enrolment with international students being registered once external confirmations (visas) have been confirmed. Online enrolment and 1st date on timetabled attendance was made readily available for scrutiny as part of the AMR process and for the purpose of sampling. Hard copies are confirmed as being held in safe and secure storage, with access facilitated by the office administrator during the AMR visit. Any students beginning their programme of study outside ASC's September/October intake for November 1st registration dates would be the subject of special application for late registration being made directly to Pearson (still within 30 days of enrolment). The Registration policy is annually updated and available online for internal and external scrutiny.

2.5

All registrations are confirmed, in person, as being checked by the office administrator prior to submission to Pearson.

2.6

Attendance sheets are subject to sign-in/sign-out by all registered ASC students studying BTEC qualifications; this process identifies the time-spent in direct class contact and on independent learning.

2.7

Assessment records are subject to internal scrutiny prior to any certification being claimed; students attend a formal, in-person, programme review with their specialist tutor and programme team prior to the issue of any qualification certification.

2.8

The office administrator is responsible for checking unit assessment tracking documentation prior to any certification claims made to the awarding body and on receipt (of certificates) prior to issue to students, underpinning a safe and secure certification process.

2.9

ASC's senior management team (SLT) is wholly responsible for investigating and reporting any/all inaccuracies in early/late and fraudulent registrations and certification claims with this line of accountability made clear during discussions with the Principal.

2.10

The system is in place for learners to claim unit credit achievements where the full qualification is not being certificated. The process was verified during the AMR sampling of a learner who was leaving the UK before completion of studies.

3. Managing assessment and verification

Quality Objective		
<p>3. Your assessment strategy, processes and management underpin an assessment and internal verification system that:</p> <ul style="list-style-type: none"> • 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 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: <ul style="list-style-type: none"> • 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	None
Recommendation	No recommendations levied as all quality measures are in place and proven to support QO.3 objectives.
Comments:	
<p>3.1 There is evidence of a Programme Specification for each HN qualification; this being a mandatory condition of Pearson Qualification Approval (endorsed in sampled approval confirmations). All Programme specifications are endorsed as including policy references to plagiarism and malpractice declarations and authentications.</p>	

3.2

Assessment policy procedures have been evidenced as part of the AMR process; access to recording documentation, for audit, being facilitated by the office administrator. The standardised procedures have been ratified for all assessors and students across all BTEC programmes and through the DCS status levied for BTEC L3 Diploma in CYPWF if assessment takes place off-site.

3.3

Assessment recording documentation is clear to all assessors and the process for completion is standardised across all programmes, through the sharing of good practice between assessors and through the scrutiny of IQA policy procedures.

3.4

Scrutiny of ASC scheduled (minuted) assessment boards confirms procedures are in place for all programme assessors and verifiers to confirm valid and reliable outcomes are in line with regulatory and national standards.

The office administrator provided access to tracking files to confirm that all student achievements are accurately mapped against unit grading descriptors and the subject of rigorous internal and external scrutiny.

The Assessment Boards are chaired by an impartial, experienced external to ASC, attended by the Programme teams and, where available, the Pearson external examiner. All assessment grades are scrutinised, confirmed and mitigating circumstances are agreed, affirming reliable assessment procedures are in place to meet regulatory and awarding body requirements.

3.5

ASC operates strict policy procedures to manage and support equal access to fair assessment, in accordance with Pearson regulatory requirements and stakeholder expectations. All relevant policies have been made available to view in support of the AMR process.

ASC offers EAL and SEN support to students assessed as having special learning needs.

3.6

Scrutiny of IQA documentation confirms internal verification of assignments, before issue, to ensure fitness for purpose and internal verification of assessment decisions to ensure validity and decisions are commensurate with national standards.

3.7

IQA procedures ensure timely actions in dealing with any weaknesses emerging from internal and external verification; this is implemented through assessment scrutinies described by the QN and endorsed through sampling of IQA documentation.

3.8

The QN/Principle affirmed active engagement with Pearson external monitoring explaining that Programme reviews and assessment meetings provide a platform for communicating recommendations and defining lines of accountability, for subsequent implementation.

4. Staff resources

Quality Objective		
<p>4. The delivery and assessment of your Level 4-7 qualifications is enhanced by an appropriate programme team that:</p> <ul style="list-style-type: none"> • 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 to assure that staff are in step with national standards, business trends and developments in teaching, assessment and learning.	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	None
Recommendation	No recommendations levied as all quality measures are in place and proven to support QO.4 objectives.
Comments:	
<p>4.1 All ASC staff has job descriptors which detail roles and responsibilities relating to delivery, assessment and any administrative or pastoral support tasks.</p> <p>4.2 IQA meetings are appropriately scheduled to monitor L4-7 (and all staff) competencies and to ensure sufficiency in relation to current and planned cohort sizes. The QA manual includes meeting schedules and minutes are recorded online for ready access in support of the AMR process.</p>	

4.3

ASC operates appropriate recruitment processes underpinned by procedural policies to check skills, competencies, qualifications and experience in delivering specialist qualifications.

4.4

Sampled assessment schedules are deemed to meet individual staff needs in support of programme planning, assessment verification and evaluation. Sampling of schemes of work, assessment and verification plans and programme evaluation meeting schedules confirm appropriate support for staff is in place.

4.5

External parties are sometimes involved in delivery and assessment, because of their specialist expertise. The Principle detailed the tailored induction activities in place to ensure all staff are familiar with programme specifications and are facilitated to be able to conduct appropriate and accurate assessment practice.

4.6

A tailored induction process is followed by a programme of regular staff meetings to introduce, to share good practice and to monitor ongoing awareness of national standards, business trends and developments in relation to specialist BTEC programme delivery and assessment.

4.7

Sampling a range of CPD activities available, through ASC, confirms ongoing centre support for all staff in respect of updating knowledge, skills and qualifications; these included Standardisation activities, centre-based IQA training and Pearson LIV training events (attendance being confirmed through emails logged on the office administrator's system and available for recall in the staff-share).

5. Physical resources

Quality Objective		
<p>5. There is adequate provision of physical resources that will:</p> <ul style="list-style-type: none"> • 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 the required 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

<p>If 'No' for any quality measures above, an Essential Action is required*</p> <p>Recommendations may be made at any time</p>	
Essential Action	None
Recommendation	5.3,4 Add the name, role and line of accountability to ASC's Organisation chart for a member of staff with dedicated responsibility for correlation of ongoing maintenance needs and any necessary updating of resource requests made to the SLT.
Comments:	
<p>5.1 Scrutiny of ASC's resource inventory confirmed sufficiency of specialist and general resources available to student cohorts across all BTEC programmes of study.</p> <p>5.2 External assessment does not take place in relation to any qualifications in ASC's current Pearson BTEC portfolio.</p> <p>5.3 Regular resource checks are carried out by individual BTEC teams (see recommendation 5, 3 for correlation of information by an individual). There is a PAT system in place to ensure health and safety of all electronic equipment.</p> <p>5.4</p>	

Where a new programme delivery is planned or there is an amendment to resources required to support a change in Pearson BTEC programme specification and/or guidance, all current resources are scrutinised for sufficiency and appropriateness of purpose (see recommendation 5.4 for correlation of information relating to programme needs by a named individual).

5.5

External resources are not contracted by ASC in the context of their current portfolio of BTEC qualification delivery.

5.6

ASC's building has lifts and disabled access to meet all student diverse needs in accordance with the centre's equality provision and procedural access policy which is confirmed as being the subject of annual review and any necessary revisions.

6. Assessment tracking, recording and reporting

Quality Objective		
<p>6. You record assessment decisions in a way that:</p> <ul style="list-style-type: none"> • 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	None
Recommendation	No recommendations levied as all quality measures are in place and proven to support QO.6 objectives.
Comments:	
<p>6.1 The office administrator provided evidence to confirm safe and secure online and hardware storage for assessment record in support of the AMR process.</p> <p>6.2 AMR access to paper and online records of student achievements confirmed these are managed, maintained, monitored and checked against Pearson regulated and recognised programme standards. The office administrator provided access to the ASC's single systematic tracking record; this includes student names mapped against units of study to monitor level of individual attainment. The QN holds a line of responsibility for drawing down a record of achievement from each individual student tracker for the purpose of Exam Board ratification and formal sign-off, prior to making certification claims.</p> <p>6.3 The Principle explained the rigour in maintaining assessment and IV records for 3 years and making these readily available for external scrutiny; the administrator explained that student work is stored online and in paper format for 12 weeks post-certification to meet Pearson regulatory requirements.</p>	

6.4 All current student evidence is available for centre and awarding body structured verification purposes; this provision is confirmed through AMR access to SV and external examiner reports.

6.5

All current records of assessment feedback are readily available for verification, confirmed through AMR access to SV and external examiner reports and online records and facilitated by the office administrator in support of the AMR process.

7. Policies and procedures

Quality Objective		
<p>7. You have effective systems and procedures developed and agreed by managers, which cover Level 4-7 assessment processes and are:</p> <ul style="list-style-type: none"> 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	<p>There are centre-wide quality assurance procedures for Level 4-7 provision, that:</p> <ul style="list-style-type: none"> 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	<p>Policies and procedures are in place for managing:</p> <ul style="list-style-type: none"> 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. 	Yes
7.3	Centre policies and procedures are reviewed and evaluated annually, incorporating student feedback, improvement planning and actions.	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	<p>There is a means for ensuring all students and staff are aware of:</p> <ul style="list-style-type: none"> 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	None
Recommendation	7.5 Maintain a line of named accountability for actions/recommendations in (any) policy revisions and include this in each (policy) footnote.
Comments:	
<p>7.1 The Principle explained that since 2011 ASC has been approved by the Independent Schools Inspectorate (ISI) to meet the standard of HE delivery at overall Grade 2 for:</p> <ul style="list-style-type: none"> • Curriculum quality standards • Teaching and learner achievements • Student welfare (including health and safety) • Effective governance, leadership and management <p>These standards have been internally applied to all BTEC IOA procedural policies and provision being sampled in the Quality manual and online in support of the AMR process.</p> <p>7.2 All ASC policies and procedures are in place and readily available to staff, students and other stakeholders. The range meets with Pearson regulatory approval and is affirmed through AMR scrutiny of policy titles and full listing in support of the AMR process.</p> <p>7.3 All policies and procedures are the subject of annual review and updating by ASC's SLT as evidenced through sampled footnotes for dates and author(s).</p> <p>7.4 The office administrator is responsible for managing internal and external communications on behalf of the Principal and ASC's SLT. The extent of her responsibilities was described and evidenced during in-person discussions at the AMR visit.</p> <p>7.5 Staff and student handbooks are evidenced to confirm ASC's constituent appeals process and what is considered to be assessment malpractice. The procedure for implementing an appeal and investigating malpractice is clearly defined in tandem with the possible outcomes and the internal and external consequence arising. The process of appeals enablement is explained to students. The potential for any assessment malpractice, to inform programme planning, is referenced in both staff and learner handbooks and the procedural process is detailed in the staff handbook.</p> <p>7.6 The systems for recording and managing all assessment appeals and malpractice were described in detail by the Principal in face to face discussions; plagiarism and malpractice is addressed through assignment briefing declarations.</p> <p>7, 7 The Principal as QN clarified his direct line of responsibility for reporting serious assessment malpractice to Pearson.</p>	

General Comments

Following on from a certification block levied in 2015-16 AMR, the Principle, the SLT and the office administrator have worked hard to establish systems which have met with the approval of Pearson's Head of Quality Management in a joint visit with the Pearson Centre quality Manager. Sampling of subsequent certification claims and issue documentation from September 2016 evidenced the lifting of the applied block post the June 13 2016 visit.

All advance communications gained speedy responses from ASC's Principal, evidence requested on the day was facilitated by the office administrator, supported by the Principal. Confidential contractual documentation in support of the collaboration with Pathway Direct was supplied by the Principal on request and in support of the AMR process.

Areas of Exemplary Practice

The Principle and the office administrator demonstrated exemplar practice in facilitating ready access to all documentation supporting the AMR process.

PEARSON USE ONLY

Reporting Outcome

No Actions Required

Name	Designation	Date
Sally Peacock	Head of Centre Management	27 th March 2017