

Academic Management Review Report 2015-16



| Visit Details | |
|---|---|
| Academic Management Reviewer | Melvyn Hopkins |
| AA Number | 956615 |
| Reviewer email address | melvinh164@gmail.com |
| Date of review visit | 05/01/16 |
| Time started | 09:15 |
| Time completed | 15:45 |
| Name and designation of people involved in the review | Prof M Jehangir - Head of Academics & Quality Nominee |

| Essential Actions and Recommendations Review | |
|---|-----------|
| Essential Actions from previous report | |
| None | |
| Progress Made | Resolved? |
| None reported | Resolved |
| Recommendations from previous report | |
| | |
| Progress Made | Resolved? |
| Completed | Resolved |

Instructions for Academic Management Reviewers

Please submit your completed report to amr@pearson.com within 10 days of your visit.

You must use the following file naming protocol: "AMRreport[centre number].doc", e.g. "AMRreport98765.doc".

1. Centre details and management

| Centre Details | |
|--|---|
| Centre name | Grafton College of Management Sciences |
| Centre number | 03966 |
| Principal / Head of Centre | Saeed Rehman: Chief Executive |
| Centre email address | info@graftoncollege.com |
| Centre telephone number | 0208 749 8367 |
| 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 | Prof M Jehangir |
| Quality Nominee email address | jehangir@uk.graftoncollege.org |
| Quality Nominee telephone number | 0208 749 8367 |
| 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 | None. Cardiff was registered in the college name but has not been used and is now closed with no learners registered. |
| 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? | No |
| Does the centre operate any distance learning? | Yes |
| 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: | |
| Distance learning provision has recently been approved by Pearson (ref S. Peacock) there are 61 learners registered, Learning has now started. All are registered with Pearson. There is no overseas provision. | |

| 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. | N/A: no collaborative |
| 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 | No |
| Recommendation | None |
| Comments: | |
| <p>1.1: All centre documentation relating to Pearson approval is in place.</p> <p>1.2: Not applicable. The centre has no ties and are a stand-alone organisation.</p> <p>1.3: There is a clear organisational chart in place which supports the chain of command and effective communications. The staff handbook is available to all and is available on the intranet and as a hard copy. All staff members have job descriptions which are reviewed annually in line with appraisal and organisational needs.</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 | Ashwag Abdalla | Programme | HNC Business |
| Enrolment date | 26/01/15 | Registration date | 05/02/15 |
| 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? | Yes | Issues identified? | Yes |
| Comments: | Learner registered well within the 30 days requirement. All details recorded on the college student management system (SMS). This SMS system is password protected. Issues regarding attendance or any other issues are dealt with in accordance with the college policy | | |

| | | | |
|---|--|--|--------------|
| Student 2 name | Samira Osman Mohamoud | Programme | HNC Business |
| Enrolment date | 23/09/13 | Registration date | 13/10/13 |
| 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? | Yes |
| Comments: | Learner registered well within the 30 days requirement. All details recorded on the college student management system (SMS). This SMS system is password protected. Issues regarding attendance or any other issues are dealt with in accordance with college policy | | |

| | | | |
|----------------------------------|-------------|--|--------------|
| Student 3 name | Ildiko Kiss | Programme | HNC Business |
| Enrolment date | 27/01/14 | Registration date | 07/02/14 |
| Timetable seen? | Yes | Accurate and complete attendance records seen? | Yes |
| Accurate and complete assessment | Yes | Accurate and timely IV records seen? | Yes |

| | | | |
|---|---|--------------------|-----|
| records seen? | | | |
| Accurate and timely certification process seen? | Yes | Issues identified? | Yes |
| Comments: | Learner registered well within the 30 days requirement. All details recorded on the college student management system (SMS). This SMS system is password protected. Issues regarding attendance or any other issues are dealt with accordance with college policy | | |

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

| Student 4 name | | Programme | |
|---|---------------|--|---------------|
| Enrolment date | | Registration date | |
| Timetable seen? | Please select | Accurate and complete attendance records seen? | Please select |
| Accurate and complete assessment records seen? | Please select | Accurate and timely IV records seen? | Please select |
| Accurate and timely certification process seen? | Please select | Issues identified? | Please select |
| Comments: | | | |

| Student 5 name | | Programme | |
|---|---------------|--|---------------|
| Enrolment date | | Registration date | |
| Timetable seen? | Please select | Accurate and complete attendance records seen? | Please select |
| Accurate and complete assessment records seen? | Please select | Accurate and timely IV records seen? | Please select |
| Accurate and timely certification process seen? | Please select | Issues identified? | Please select |
| Comments: | | | |

| Student 6 name | | Programme | |
|---|---------------|--|---------------|
| Enrolment date | | Registration date | |
| Timetable seen? | Please select | Accurate and complete attendance records seen? | Please select |
| Accurate and complete assessment records seen? | Please select | Accurate and timely IV records seen? | Please select |
| Accurate and timely certification process seen? | Please select | Issues identified? | Please select |
| Comments: | | | |

2b. Quality Objective

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 | 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 | None |
| Comments: | |
| <p>2.1. System has been developed to high standards in line with the college policy. Requirements for admission onto college courses are cited on the very extensive web site and within the prospectus. Learners will know in advance the pre-requirements of their selected course. Each prospective candidate is interviewed on a face-to-face basis. To that end the admission policy and procedure has been re-designed to meet tighter standards.</p> | |

Qualifications are checked for integrity with minimum levels of accreditation for prior learning applied. A learner applying for a level 5 programme must hold a current level 4 qualification for example. Written and spoken English is a key determinant of the learners' ability to be accepted onto the course, this is tested during the acceptance process.

2.2 Learners can submit applications on line or in person. The recruitment and entry policy is available as a hard copy on the college web site. The recruitment documentation has recently been re-designed with open-ended questions giving a detailed insight into each individual learner's background and attitude to study.

2.3. Once the application from the learner has been processed face-to-face interviews will endeavour to answer all questions the learner may have. The college are forging links with a small number of universities which will allow for learner progression. The learner handbook is quite detailed in explaining progression opportunities once the current level of qualification has been achieved.

2.4. The college have in place a process and policy which is both timely and effective. Samples suggest registration happen well within the 30 day requirements, these are entered and checked by a second person. The examinations officer is the leader of this process.

2.5. Process and policy controlled, the college double check all entries to both their own and Pearson data bases.

2.6. The college utilise a very effective SMS system of learner management in which all learner information is managed. Non-attendance is rigorously managed to the point where learners will be withdrawn if they fail to reach the agreed target of attendance. It must be noted that the college will offer support as part of the college policy to learners who find themselves in situations before withdrawal occurs. Registers are up-to-date and monitored in line with college policy.

2.7. On completion of a module and subject to internal verification the learners record will be updated onto the on line tracking sheet. A record of individual learner achievement can also be found on the learner SMS system. Assessment, standardisation and exam boards meet on a regular basis to confirm the data. Records from previous years can also be viewed both as a hard copy on line. The standardisation policy has recently been reviewed and revised to a very high standard.

2.8. There is a policy in place to support the effectiveness of this criteria. Standardisation meeting assist in supporting this process. Records are kept both on line and as a hard copy. These records are subject to protective authorisation.

2.9. Each learner assignment goes through the Turn-It-In software procedure and mention in both the learner and staff handbook. Again, the college have a rigorous policy in place to ensure compliance.

2.10. Completion tracking ensure correct certification is granted on completion of the course. Where required, learners who have failed to complete all units for the qualification will achieve unit certification in line with college policy.

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 | Continue to review and revise documentation as improvement requires. |
| Comments: | |
| <p>3.1. Course specifications are up-to-date and to that end, have recently been reviewed and re-written as required. The standardisation policy is an excellent example of this statement. All can be accessed on the college intranet. Prospective learners will have access to these in advance of joining the course. All policies are closely aligned to the QAA quality code and are reviewed annually. The programme specifications have been re-written and are very detailed giving details of every aspect of each module including credit</p> | |

value, GLH and timetable of study amongst other information.

3.2. All staff have undergone internal verification and assignment writing training in recent times and are all up-to-date with the requirements in this area. All assignment briefs are internally verified before being given to the learners with the internal verification of completed learner work ensure all learners are sampled at least once per year. QAA quality codes are followed meticulously in line with the college policy on this subject.

3.3. Standardisation meetings firm up learner achievement. The tracking document is updated on completion of each unit with individual learner records confirming cross examination via SMS.

3.4. Cross and second marking support the integrity of the process. All assignment briefs have been re-written and effectively contextualised to support higher grade development. The standardisation policy has been re-written to good effect.

3.5. The college have an equal opportunities policy which is available to all stakeholders. The college offers learners regular tutorials and workshops to consolidate the learning outcomes. Teaching takes place Monday to Thursday with Friday giving the learner the opportunity to speak with individual tutors on matters of concern.

3.6. There is an internal verification policy in place which is available to all stakeholders. All assignment briefs are internally verified before being given to the learner with supporting documentation kept for reference. The college have a tracking document in place ensuring each learner is sampled at least once per academic year. This is a robust and ridged process.

3.7. The internal verification process, as previously discussed, works very well. Double and cross marking helps support this process. Team, tutor and standardisation meetings, both formal and informal further strengthen the process. Minutes of such meeting were available to view on the day of my visit these included Assessment, attendance, assessment feedback, learner welfare and academic board meetings which all serve to inform and improve the processes.

3.8. The college take on board and act upon all advice and recommendations from standards verifiers and academic management reviewers. Evidence of this is provided by reflection on previous year's reports and on-going visit from both myself and other SV's this past year. In that time processes and policies have improve significantly. The quality nominee utilises the Pearson helpline to great effect thus further enhancing the college philosophy of continuous improvement.

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 | None |
| Comments: | |
| <p>4.1. All in place and are reviewed and revised annually. Staff appraisals inform CPD. Job descriptions are fit for purpose and up-to-date.</p> <p>4.2. Staffing is consistent with a very low staff turnover rate. All tutors are appropriately qualified, a significant number holding second degrees and above. The effective planning of learner numbers decreases the implications on timetabling and staffing. It is noted within the staff CPD records that subject strengths are listed which informs timetabling decisions and ensures the best possible provision for the learners.</p> <p>4.3. There is an effective HRM policy in place, prospective tutors will go through a selection</p> | |

process after submitting their CV's. There will be a micro teach which is peer and learner assessed. Experience with Pearson qualifications is essential.

4.4 Timetables offer the tutor time to mark and to develop delivery materials. Conversations with teaching staff confirms this comment.

4.5. As part of the recruitment process all staff are expected to have an understanding of the unit and course specifications. Changes are noted in the staff handbook which is updated on an annual basis. Tutors tend to teach to their individual strengths given their individual subject knowledge.

4.6. The induction process is documented within the HRM policy. Annual appraisals will support CPD. Staff meetings are commonplace where the quality nominee will disseminate information, trends and developments.

4.7. CPD records indicate all staff benefit from both in house and external development. The college appraisal system is systematic and up-to-date identifying areas for development in line with organisational objectives. Recent CPD involved Dragon Education Solutions delivering in house training to all staff on assessment.

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 | Should the college develop ideas for the expansion of the provision then capacity will need to be considered. |
| Comments: | |
| <p>5.1. The college have a very well presented establishment which benefits from well equipped, spacious rooms suitable for the current learner numbers.</p> <p>5.2. The college has all the specialist facilities needed to conduct external assessment to required standards.</p> <p>5.3. All relevant policies on this matter are in place. PAT happens when required. There are appointed Fire Marshalls and first aiders in place.</p> <p>5.4. The QN has a number of ideas to develop programmes to match organisational objectives and broaden the offering of the college.</p> <p>5.5. The resources used are all on college premises and there is a health and safety policy in place and a person in charge of that policy. No issues in this area.</p> <p>5.6. Health and safety and equal opportunity policies are available both on line and in hand copy and are available to both staff and learners. There is good access to those with specific needs within all areas of the college.</p> | |

6. Assessment tracking, recording and reporting

| Quality Objective | | |
|---|---|---|
| 6. You record assessment decisions in a way that: <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 | Ensure the secure room passwords are changed on regular basis. |
| Comments: | |
| <p>6.1. All assessment records are stored securely on line and hard copies are stored in a secure room. Both are password protected. The QN is the nominated key holder.</p> <p>6.2. The online SMS contains up-to-date information on learner progress in addition to attendance records. Updates on learner achievement happen once results have gone through internal verification, standardisation and exam boards. Hard copies are also available and stored securely</p> <p>6.3 As above.</p> <p>6.4. Records of assessment are available through the college SMS. A full range of learner work is available both on line and as hard copies. The internal verification records suggest each learner has work sampled. The learner tracking documentation works very effectively.</p> <p>6.5. All records are available on line and all are recorded onto the individual assessment records on the SMS.</p> | |

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 | Continue to review and update policies and procedures on a regular basis |
| Comments: | |
| <p>7.1. All policies and documentation are fully available and are very extensive. Quality is driven from senior management and the QN. The QAA quality framework is extensively used as guidance. There are 17 policies in use, all have been recently reviewed and re-written where necessary. A good example of this is the standardisation policy which is now of a very high standard. All are available on the college intranet site and as a hard copy on request.</p> <p>7.2. All in place, please refer to 7.1</p> <p>7.3. All in place, please refer to 7.1</p> <p>7.4. Staff and learner meetings help inform and disseminate information. Learner and end of module questionnaires help to inform change and improvement which is then transmitted to all stakeholders.</p> <p>7.5. All stakeholders are fully aware of the appeals process within college policy. This is well documented in the learner and staff handbook. Learners are well aware of the rules on continuous absence as explained both verbally and within the handbook. The college go to extreme lengths to ensure learners are fully aware of the consequences of absenteeism.</p> <p>7.6. The policy on appeals and malpractice is very explicit and fully explains what constitutes reason for an appeal. This same policy also explains the timescales and the ultimate referral to Pearson should the appeal not be settled in house, discussions with learners supports this comment. Plagiarism is taken very seriously at this college with each assignment going through the turn-it-in software programme.</p> <p>7.7. There is a policy in place to support serious malpractice.</p> | |

| General Comments |
|--|
| <p>I have been visiting this college continuously since May of 2015 when quality issues were first raised. I know the college team have worked extremely hard to rectify the issues to the point where the college is now ready to move forward again. All assignments have been re-written to a very good standard, all policies have been reviewed and re-written and all staff have undertaken relevant training. In my opinion the college have now turned the corner and are ready to move forward again.</p> |

| Areas of Exemplary Practice |
|---|
| <p>The assignment briefs all contain an effective vocational scenarios with all tasks linked to the aforementioned scenario. All have been contextualised to very good effect. All policies are now of a good standard with the standardisation policy a good example. On speaking with the staff there is a buoyant team working ethic in place with a culture of continuous improvement developing.</p> |

| PEARSON USE ONLY | | |
|--------------------------|---------------------------|----------|
| Reporting Outcome | | |
| No Actions Required | | |
| Name | Designation | Date |
| Sally Peacock | Head of Centre Management | 14/01/15 |