

Academic Management Review Report 2016-17



Visit Details	
Academic Management Reviewer	Catherine Halder
AA Number	920559
Reviewer email address	catherine.halder@yahoo.com
Date of review visit	2/3/17
Time started	11:00
Time completed	16:00
Name and designation of people involved in the review	Professor M. Jehangir, Head of Academics and Quality Nominee Mr. Mehboobali Saiyed, Director Mr. Asif Khawaja, Head of Operations.

Essential Actions and Recommendations Review	
Essential Actions from previous report	
None	
Progress Made	Resolved?
n/a	Please select
Recommendations from previous report	
Progress Made	Resolved?
The centre continues to review and revise documentation, policies and resources and has secure room passwords in place.	Resolved

1. Centre details and management

Centre Details	
Centre name	Grafton College of Management Sciences
Centre number	03966E
Principal / Head of Centre	Mr. Mehboobali Saiyed, Director
Centre email address	info@graftoncollege.com
Centre telephone number	0208 7498367
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	Professor M. Jehangir
Quality Nominee email address	jehangir@graftoncollege.com
Quality Nominee telephone number	0208 7498367
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
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?	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:	
Distance learning has been approved by Pearson but all learning is taking place at the college premises.	

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 The centre was able to re-affirm the conditions and requirements of the original approval and recognition applications. The certificate for centre recognition and approval were seen dated 27/6/11 including approval dated 1/3/17 for the new premises in Oxford Street.</p> <p>1.3. An organisation chart was provided which showed a clear delegation of responsibilities for senior and line management and assessment and internal verification roles.</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	Freweyni Gebreselassie	Programme	HNC/HND L5 BTEC Diploma in Business Programme no. NJU89
Enrolment date	22/9/14	Registration date	29/9/14
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:	The timetable is incorporated into the attendance records which show attendance at each class and for each unit on a daily/hourly basis. The confirmation of enrolment letter for this student was seen and registration records which are cross-checked by three separate documents. Student ID and college ID numbers were evident. Records of assessment with evidence of internal verification and detailed feedback against all criteria were observed. The record of achievement was seen with passes for all 16 units and the certification claim was dated 1/8/16. The certificate was issued on 18/8/16.		

Student 2 name	Abdul Ghaffoor Ferdaus	Programme	NJU87
Enrolment date	23/5/16	Registration date	25/6/16
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?	N/A	Issues identified?	No
Comments:	The timetable is incorporated into the attendance records which show attendance at each class and for each unit on a daily/hourly basis. The confirmation of enrolment letter for this student was seen and registration records which are cross-checked by three separate documents. Student ID and college ID numbers were evident. Records of assessment with evidence of internal		

	verification and detailed feedback against all criteria were observed.
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Student 3 name	Anye Gurgis	Programme	NJU87
Enrolment date	23/5/16	Registration date	25/6/16
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?	N/A	Issues identified?	No
Comments:	The timetable is incorporated into the attendance records which show attendance at each class and for each unit on a daily/hourly basis. The confirmation of enrolment letter for this student was seen and registration records which are cross-checked by three separate documents. Student ID and college ID numbers were evident. Records of assessment with evidence of internal verification and detailed feedback against all criteria were observed.		

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	n/a
Comments:	
<p>2.1 - 2.2 The recruitment of students takes place through the centre's website, Facebook and the prospectus . Information is also provided on Moodle, on noticeboards, in leaflets and in the curriculum and student handbooks. There are currently over 100 students enrolled. The Director of the college is currently investing in the development of a TV channel with the help of 'Eurasia', to promote the college as well as the use of a mobile application.</p>	

2.3 Students are individually interviewed and course pre-requirements are established. Employability skills are discussed with students and parents and the handbook gives details of progression opportunities. The admissions officer explains course information and structure.

2.4 - 2.5 The admissions officer checks all applications and student documents. Enrolment requirements are normally a level 3 qualification and residency in the UK. An English and Maths test is undertaken to test proficiency although further English can be offered as an additional study. All registration documents are double checked and cross-referenced.

2.6 Attendance records are rigorously maintained and monitored by a designated member of staff and they showed individual attendance at each class and which units have been studied during the day. SMS is used to record student attendance and other data which is checked every semester. The SLC also monitor attendance.

2.7 - 2.9 Records of achievement are maintained on an online tracking sheet following internal verification and hard copies were also available. Standardisation meetings are held to support assessment decisions. Assessment, moderation and exams boards meet periodically to confirm data held on SMS. The programme leader and QN check tracking records against records of work on a regular, at least quarterly, basis and finally before certification takes place. The exams officer is responsible for liaising with the programme leader and QN to ensure deadlines for submission of outcomes are met and submitting them to Pearson. The exams officer and QN would check certificates received against student records prior to issue and would report any inaccurate claims to Pearson. The check list of certificates awarded was available and was clearly linked to student registration information.

2.10. The centre staff are fully aware of the ability to award unit certification if appropriate for students who have not achieved all units for the qualification and have claimed these in the past.

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	n/a
Comments:	
<p>3.1. The course specification was available, was up to date and accurate and incorporates the requirements to show the authenticity of student work; checks of plagiarism are highlighted. The course is currently taught by different lecturers over four days a week (Monday to Thursday) to two separate cohorts.</p> <p>3.2. - 3.4. The Pearson assignment brief checking service is used assiduously but all staff have received some training in assignment writing and internal verification in the past. The</p>	

centre uses standard assessment plans, assessment tracking sheets, assessment records for feedback to students and standard internal verification documents. All procedures appeared to be consistent, up to date and operational. Standardisation meetings are held (detailed minutes were available) and there are periodic moderations of marking shared between staff. Also a monitoring of the accuracy of records of achievement is carried out by the QN and programme leader. There is an assessment and standardisation policy available to all staff.

3.5. Extra curricula tutorials are scheduled for groups each Friday and individual tutorials are scheduled by appointment. This provision along with the academic calendar and final submission dates are posted on the college notice boards.

3.6 - 3.7. There is an internal verification policy in place and all assignment briefs are both internally verified and reviewed by Pearson's checking service. Assessment plans show the schedule for verifying assessment decisions. There is a dedicated member of staff responsible for training staff in assessment and for ensuring internal verification procedures are robust and that weaknesses are dealt with through mentoring or staff development practice. Minutes of meetings and reports reviewing the assessment and internal verification procedures were observed.

3.8. The centre staff respond conscientiously to all external verification and review by standards verifiers and AMRs although recent reports have generally reflected good practice and accurate assessment decisions. There are regular and productive communications between the QN and Pearson personnel.

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	n/a
Comments:	
<p>4.1 - 4.3. There are suitable job descriptions for staff and all staff met were able to clearly outline their understanding and personal commitment to their individual roles and responsibilities. All the staff C.V.s seen showed a high level of professional experience and qualifications. Recruitment demands the achievement of a good degree, usually a Masters, and preferably six months of vocational qualification or experience; otherwise additional training may be provided. At interview a demo lesson is carried out by candidates. There is a full induction training for all new staff including CPD for BTEC delivery for which there is a generous budget.</p>	

Staff were clearly selected for their strengths and areas of expertise and there seemed to be adequate staffing levels for the current numbers of students.

4.4 The timetables allow for staff meeting times either informally or with the QN and for extra curricula time with students as needed. It was clear that time is allocated for internal verification, moderation and standardisation meetings. All communications are shared via the centre's notice board and online and all minutes of meetings are similarly circulated.

4.5. All staff according to CVs and all documentation evidence seen are experienced at delivering the course and assessing. External speakers are invited in, two of whom were met, to share their expertise but they are not involved in any formal assessments.

4.6 - 4.7 All staff are thoroughly inducted and trained as necessary and the induction process is documented. There are induction/re-appraisal sessions for all staff three times a year. There is a dedicated member of senior staff (on the college Advisory Board) who carries out lesson observations every semester as part of the appraisal system. The process also involves interactive pre-lesson observation activities. Peer observations are encouraged.

There is a termly CPD calendar and the same member of staff assesses and monitors staff development requirements and plans CPD activities. Last year this included mock interviews with staff in preparation for a QAA inspection visit. Staff met felt strongly supported by senior management who sanction any reasonable requests or strategies for improvement both in-house or externally and there was ample evidence of CPD or links with external agencies at all levels.

5. Physical resources

Quality Objective		
5. There is adequate provision of physical resources that will: <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

If 'No' for any quality measures above, an Essential Action is required* Recommendations may be made at any time	
Essential Action	none
Recommendation	Pursue the review of resources necessary for a planned expansion of provision.
Comments:	
<p>5.1. and 5.2. Suitable and adequate resources were observed. There is a well-stocked library and the centre has invested in an online e-library with a wide range of resources accessible from any location. Good sized classrooms were seen appropriate for the current numbers of students although there was no teaching observed to be taking place during the visit. There were adequate computer facilities available within two IT labs and an IT technician on hand which would also suffice for any externally set assessments. A refreshment area and common room was observed and adequate toilet facilities. The staff working environment was very amenable and well equipped with secure storage facilities. The general impression was of a well organised, facilitated and maintained centre.</p> <p>5.3. All resources are risk assessed based upon health and safety and RA policies in place.</p> <p>5.4. The senior management has routinely agreed finance for additional resources as necessary or for enhancement of the provision for students. The centre is considering an increase in student numbers and a move to university status and therefore is currently in the process of reviewing resources to cater for such provision.</p>	

5.5. All resources used are currently on college premises and there is a member of staff in charge of health and safety.

5.6. There appears to be fair and appropriate access for all students including disabled access. There are lifts, specially adapted toilets and a chair lift from the entrance to the lift for physically disabled people.

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	n/a
Comments:	
<p>6.1. There were ample secure storage areas and lockable cabinets within the secure staff quarters which has 24 hour CCTV coverage and six code protected access doors. Assessment records are stored in hard copy in the lockable cabinets and password protected online.</p> <p>6.2. Up to date student records of achievement were available and these are regularly tracked and reviewed by the programme leader and/or the quality nominee. There is a rigorous process of internal verification of assessments and these are reviewed if necessary following external verification and standardisation.</p> <p>6.3. - 6.4. The centre is aware of the need to retain assessment records securely for external scrutiny for at least three years and to store student work for at least 12 weeks following certification.</p> <p>6.5. All assessment records and records of feedback were available in hard copy and electronically.</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	n/a
Comments:	
<p>7.1. All policies and procedural documents were available on the college intranet and referenced in the staff handbooks, learner handbooks and quality assurance documents. The centre closely adheres to the QAA quality code and to the AMR and HEFC requirements. The QN maintains regular contact with Pearson. Quality assurance measures are upheld by the Director, Head of Operations and the QN in conjunction with the academic board, admissions board, performance management committee, assessment board and staff/student liaison committee. Minutes showed regular meetings take place to discuss strategies for improvement and quality assurance and the strategic plan for 2016/17 was available.</p> <p>The QN has prepared seven folders with documentation addressing all the AMR quality objectives and a document which cross-referred every policy to the relevant aspects of quality assurance in the centre.</p> <p>7.2 Policies seen included equal opportunities, risk assessment, a disaster recovery plan (contingency), appeals, malpractice, induction, assessment, internal verification, health and safety, recognition of prior learning. All policies were dated with evidence of the last review.</p> <p>7.3 The college academic board has five sub-committees, four of which have student representatives on them</p> <p>7.4. Regular minuted meetings are held between senior staff, the QN, admin and teaching staff. Members of the Advisory Board (two of whom were met) are also pro-active in disseminating key information to staff and students. There are student representatives on all college boards and committees An informative monthly newsletter is produced in hard copy and on Moodle for students and all stakeholders.</p> <p>7.5.The appeals policy is published in the student and staff handbooks such that all should be aware of the stages of initiating an appeal and possible outcomes. A member of staff on the advisory board oversees the procedures for appeals with both academic and non-academic staff offering training in the appropriate handling of appeals and complaints.</p> <p>Malpractice and warnings about plagiarism are also published and reinforced throughout the course. Staff make rigorous checks for plagiarism and students are asked to deliver presentations of their work following completion of units to establish knowledge and the avoidance of plagiarism.</p> <p>7.6 - 7.7. The policies for appeals and malpractice outline the reasons and possible outcome; issues will be recorded by the programme leader and QN and ultimately referred to Pearson if appropriate. A software programme is used to check for plagiarism and any serious malpractice would be reported to Pearson by the QN.</p>	

General Comments

The centre was founded in 2004 and has been offering Pearson approved courses since 2005 with BTEC approval in 2011. There are just over 100 students at present although the college continues to expand and will have a cap of 300 students next year. All are local - British or EU funded.

The centre recently moved from its premises in Shepherds Bush to its premises in Oxford Street.

The HNC/HND in Business runs over two years. Most students complete an HNC in the first year and a partial HND in the second year with the intention of topping this up at university.

The college already has links with the Open University and other universities and is working towards university status itself within a year or two

Areas of Exemplary Practice

Induction training is reinforced each semester throughout the year. There is generous and well managed resources and CPD funding with targeted in-house training provided. A detailed and well produced newsletter is provided for stakeholders. The active involvement of members of the advisory board and their valuable communications with staff and students utilises their wide-ranging expertise. There is a meticulous administrative system of organising all quality assurance related policies, procedures and guidance documents such that they evidently address the requirements of external bodies. This includes the careful cross-referencing of key policies to address actual areas of staff responsibility.

PEARSON USE ONLY

Reporting Outcome

No Actions Required

Name	Designation	Date
Sally Peacock	Head Of Centre Management	6 th April 2017