

BRITISH ACCREDITATION COUNCIL INSPECTION REPORT

SUPPLEMENTARY INSPECTION CHANGE OF MANAGEMENT (Independent Higher Education)

INSTITUTION: London College of Contemporary Arts

ADDRESS: 9 Holborn

London EC1N 2LL

HEAD OF INSTITUTION: Dr Kate Armstrong

DATE OF INSPECTION: 18 January 2021

ACCREDITATION COMMITTEE DECISION ON ACCREDITATION: Continued accreditation, 27 May 2021

PART A - INTRODUCTION

1. Background to the institution

The London College of Contemporary Arts (LCCA/the Institution) is a privately owned higher education provider. It is a specialist institution that delivers courses in the creative arts, business management and hospitality management. The Institution is located in Holborn in the City of London in the United Kingdom (UK).

LCCA aims to provide creative, innovative and industry-focused programmes that enable students to shape their future in employment.

The Institution is led by the Head of College, who is supported by a senior management team consisting of the Head of Resources, Quality Assurance Manager, Director of Programmes and the Student Support and Administration Manager.

LCCA was established in October 2016 as an independently run organisation under Global University Systems (GUS), which is the parent company. GUS provides payroll, human resources, marketing, and financial and legal services to LCCA, as well as access to administrative staff. GUS also determines the Institution's constitutional governance structure and policies in a number of key areas.

The Institution completed a staffing and curriculum restructure at the end of the academic year in 2020. A new Head of College was appointed in July 2020. This role replaces the previous role of Principal. A new role of Director of Programmes (DoP) was recruited in October 2020 to manage academic courses, replacing the two previous Heads of School. The DoP is supported by three Course Directors and a Course Manager.

Since the last inspection, the Institution has signed a franchise agreement with the University for the Creative Arts (UCA) to offer a four-year integrated foundation programme, seven Bachelor of Arts (BA) programmes and four Master of Arts (MA) programmes. Pearson Higher National Certificate (HNC) and Higher National Diploma (HND) courses, delivered in partnership with Walsall College, have been taught out and are no longer offered. The Institution no longer offers programmes previously delivered in partnership with European higher education partners in Italy and France.

2. Brief description of the current provision

LCCA's provision ranges from programmes at Levels 3 to 7 in Fashion, Graphic Design, Illustration, Business Management and Hospitality Management. It offers an integrated foundation programme, seven BA programmes and four MA programmes, all in partnership with UCA. A one-year Foundation Art, Design and Media Practice programme, awarded by Pearson, is being taught out and is in the last year of delivery. All programmes are delivered face to face at the London campus, with online and blended learning options for selected modules on all programmes.

LCCA has a franchise agreement with the University of East London to offer two top-up BA programmes in Hospitality Management and Business Management. It also has a franchise agreement with Buckinghamshire New University for two BA degree programmes in Fashion Design and Graphic Design. These courses were not running at the time of the inspection and the Institution is not currently recruiting students onto these programmes.

At the time of the inspection, there were 168 students enrolled on foundation and BA programmes. Just over half of the students are female. Around a third of students are UK nationals. Around two-thirds of students are European and international students who already live and work in the UK. At the time of the inspection, there was one student under the age of 18 enrolled on the Pearson foundation programme. LCCA has capacity for 820 students, and a further 260 students have applied for future course intakes.

Students are enrolled in February and October each year. Students must meet standard published entry requirements to enrol on each course.

Inspection process

The inspection took place remotely over a half-day and was undertaken by one inspector. The inspector met with the Head of College, the DoP and other senior managers. The inspector also held online meetings with Course Directors and scrutinised relevant documents and electronic systems. The Institution co-operated fully with the inspection.

Inspection history

| Inspection type | Date |
|-------------------|---------------------|
| Full Inspection | 23–24 November 2017 |
| Mid-way Probation | 22 August 2018 |
| End of Probation | 5 March 2019 |
| Interim | 12 May 2020 |

PART B - JUDGEMENTS AND EVIDENCE

The following judgements and comments are based upon evidence seen by the inspector(s) during the inspection and from documentation provided by the institution.

The numbers below refer to the standards as presented in the Independent Higher Education scheme document and main full inspection report.

INSPECTION AREA - GOVERNANCE, STRATEGY AND FINANCIAL MANAGEMENT

| 1. | The institution is effectively and responsibly governed | |
|-----|--|-----|
| 1.1 | The organisational structure, including the role and extent of authority of any owners, directors or governing body, is clearly defined, documented and understood by stakeholders. | YES |
| 1.2 | The head of the institution, directors and other relevant persons are suitably qualified and experienced, understand their specific responsibilities and are effective in carrying them out. | YES |
| 1.3 | Policies, procedures and systems linking governance and management are well documented and effectively disseminated across the institution. | YES |
| 1.4 | The institution engages in appropriate risk management planning, which is administered and monitored by named individuals. | YES |
| 1.5 | There is a clear separation of ownership and responsibility for financial matters from academic decision-making. | YES |
| 1.6 | The governing body conducts regular risk assessment exercises in all areas of the institution's provision. | YES |
| 1.7 | All relationships with other educational institutions and organisations are defined formally and are fully transparent, with institutions compliant with partner or parent institutions' requirements, where applicable. | YES |

| | Met | Partially met | Not met |
|-------------------------------|-----|---------------|---------|
| This standard is judged to be | ✓ | | |

Comments

The Institution has an effective structure, which is clearly defined and documented. The LCCA Board provides effective oversight as the governing body, chaired by the CEO of GUS. The Head of College is a member of the LCCA Board, to which it also reports. The Head of College is suitably experienced and qualified in academic leadership and creative arts education.

The link between governance and management is clear and appropriately documented. The Board regularly monitors and manages business risk in key areas, including financial performance, the quality of education and student recruitment. The Board also provides financial oversight and supports the Head of College to respond to potential risks, whilst maintaining the quality of provision and the student experience.

The Institution's relationship with awarding partners is formally defined to ensure that expectations and responsibilities for quality and compliance are fully met.

| 2. | The institution has a clear and achievable s | trategy | | | |
|------|---|--------------------|------------------------|-----------|-----|
| 2.1 | 2.1 The institution has a clear strategy for the development of its higher education provision, | | | | |
| | which is supported by appropriate financial | management. | | | |
| 2.2 | There is provision for stakeholder input to in | nform the strategi | c direction of the ins | titution. | YES |
| 2.3 | 2.3 The strategy is well communicated to all stakeholders within and outside the institution. | | | | YES |
| 2.4 | .4 The governing body and senior management conduct a regular and systematic review of | | | | YES |
| | their own and the institution's overall performance and measure this performance against | | | | |
| | strategic targets. | | | | |
| | Met Partially met Not me | | | | |
| This | This standard is judged to be ✓ | | | | |

Comments

The Head of College and the LCCA Board have established an ambitious five-year growth strategy. The strategy is underpinned by the needs of the creative sector and opportunities for developing high-quality graduate skills and digital literacies.

The strategic plan is communicated to stakeholders via the website. Staff and students contribute to the Institution's strategic direction through regular meetings, consultations and workshops. Arrangements for industry leaders and employers to feed into the strategy are being developed, but are not yet formalised.

The LCCA Board, led by the GUS Group Chief Executive (Academic), conducts reviews of the Institution's overall performance against key strategic targets. The Head of College recognises the need to establish appropriate performance indicators at individual programme level, to enhance accountability and ensure that the Institution's overall strategic targets are maintained over time.

| 3. Financial management is open, honest and effective | | | | | |
|--|--------------------------|---|--|--|-----|
| 3.1 The institution conducts its financial matters transparently and with appropriate probity. | | | | | YES |
| 3.2 The institution's finances are subject to regular independent external audit. | | | | | YES |
| | Met Partially met Not m | | | | |
| This s | standard is judged to be | ✓ | | | |

Comments

The LCCA Board has oversight of key financial decisions. There is a clear process for developing and monitoring the budget, with clear lines of responsibility. Approval of the budget is given by the LCCA Board. Annual accounts are subject to independent external audit.

INSPECTION AREA - ACADEMIC MANAGEMENT AND ADMINISTRATION

| 4. | The institution is effectively managed | |
|------|---|-----|
| 4.1 | The management structure is clearly defined, documented and understood by all | YES |
| | stakeholders, including governors, management, staff and students. | |
| 4.2 | The head of the institution and other senior managers are suitably qualified and | YES |
| | experienced, understand their specific responsibilities and are effective in carrying them | |
| | out. | |
| 4.3 | There are clear channels of communication between management, the governing body, | YES |
| | staff, students and other stakeholders. | |
| 4.4 | There are clearly delineated responsibilities and reporting arrangements at institutional, | YES |
| | faculty, departmental, programme and course levels. This should include provision for | |
| | academic leadership at programme and individual course level. | |
| 4.5 | There is an effective committee structure with appropriate reporting lines which informs | YES |
| | management decision-making and provides feedback to stakeholders. | |
| 4.6 | Committees and other meetings have clear and appropriate terms of reference, are | YES |
| | scheduled to meet regularly and are minuted accurately. | |
| 4.7 | There is a set of comprehensive policies, regulations and procedures for staff and student | YES |
| | conduct. | |
| 4.8 | Management ensures that all information, internal and external, including publicity | YES |
| | material, is accurate and fit for purpose. | |
| 4.9 | A policy exists and is administered effectively regarding collection of and refund of student | YES |
| | fees. | |
| 4.10 | Management compiles reports at least annually presenting the results of the institution's | YES |
| | reviews and incorporating action plans. Reports include analysis of year-on-year student | |
| | satisfaction, retention and achievement, staff performance (including research and other | |
| | forms of scholarship) and a review of resourcing issues. | |
| 4.11 | Action plans are implemented and reviewed regularly, with outcomes reported to | YES |
| | management and subsequently to the governing body. | |

| 4.12 | 4.12 Management monitors and reviews academic and administrative staff performance through | | | | YES |
|--|--|-----|---------------|-------|-----|
| a clearly documented and transparent appraisal system. | | | | | |
| | | Met | Partially met | Not r | net |

| | Met | Partially met | Not met |
|-------------------------------|-----|---------------|---------|
| This standard is judged to be | ✓ | | |

Comments

The outcomes of the staffing restructure are clearly defined, documented and communicated to stakeholders. There is an appropriate structure of management and leadership responsibility, and associated reporting, at course and programme level.

Senior managers are suitably experienced and appropriately qualified. They understand and execute their roles and responsibilities effectively. The DoP has a wealth of academic and luxury-brand management industry experience. Course Directors are experienced specialists in their field, holding relevant qualifications and professional expertise in their respective sectors.

A range of effective communication arrangements is in place to ensure that all stakeholders are updated and informed. These include weekly team meetings with academic staff and senior leaders. A clear committee structure is in place, with published terms of reference and membership, including the Academic Board, Teaching and Learning Committee, Student Council Forum and Course Committee. The outcomes of committee and senior management meetings are appropriately recorded, ensuring that stakeholders have a clear record of decisions and actions.

A comprehensive range of appropriate and up-to-date staff and student policies and regulations is maintained. These are disseminated through the annually updated student and employee handbooks. A selection of key policies is also shared via the website. Appropriate mechanisms are in place that monitor the accuracy of internal and external information provided to stakeholders, including regular audits. Not all policies feature clear version controls to help managers ensure that, in the future, only the most up-to-date versions of policies are in use across the Institution.

The detailed student refund of fees policy is communicated via the website and includes a dedicated online refund portal, to ensure the process is clear, accessible and transparent.

Annual performance reports are collated at least annually by the Quality Assurance Manager. Reports consider a range of performance indicators including academic management, the quality of teaching, learning and assessment, student recruitment, support and progression, and quality enhancement. Areas for improvement are identified in action plans and monitored by the senior management team, with oversight from the LCCA Board and relevant committees.

Staff performance is monitored through a well-established annual appraisal system incorporating self-reflection, development planning and individual target-setting. Not all staff appraisals were fully completed in the previous academic year due to the significant restructure of academic staff. Managers have plans in place to ensure that the appraisal system is fully implemented now that the restructure is complete.

| 5. | Academic management is effective | |
|-----|--|-----|
| 5.1 | There are appropriate procedures for the proposal, design and validation of programmes of | YES |
| | study which take cognisance of the mission of the institution, national imperatives, market | |
| | demand and resource issues and reflect international norms. | |
| 5.2 | Management ensures that the stated curricula are delivered as presented in the prospectus and other related documentation, and that requirements from professional or other relevant bodies are met. | YES |
| 5.3 | There are regular scheduled and minuted meetings of academic staff to review academic programmes. | NO |
| 5.4 | There is an appropriate policy and effective procedures exist for the acquisition of academic resources to support programmes. | YES |

| 5.5 | Appraisal of academic staff includes regular classroom observation, which is used for the | | | | |
|-----|---|--|--|--|--|
| | dissemination of good practice. | | | | |
| 5.6 | Academic staff are supported in their continuing professional development and enabled to | | | | |
| | develop further pedagogic techniques to enhance the learning of students. | | | | |
| | | | | | |

| | Met | Partially met | Not met |
|-------------------------------|-----|---------------|---------|
| This standard is judged to be | | ✓ | |

Comments

Almost all programmes are validated by and franchised from UCA, which ensures that the curriculum reflects national trends, priorities and the needs of industry. The Pearson Foundation Art, Design and Media Practice programme follows the published specification, which is designed in collaboration with sector employers and higher education representatives. Course and unit handbooks ensure that students follow the set curriculum.

Academic staff meet regularly as a team and with senior managers.

5.3 The outcomes of weekly DoP meetings are not yet formally minuted.

Academic staff have an appropriate process to follow for the acquisition of relevant academic resources.

The Institution has clear processes, systems and relevant forms in place for annual academic staff appraisal and peer observations of classroom practice. Owing to the staffing restructure in the last academic year, these processes were not fully completed for all staff. Managers have appropriate plans in place to ensure that appraisals and peer observations will be fully completed for all academic staff by the end of the current academic year.

Academic staff have access to funds to support continuous professional development, with a specific budget available for staff wellness and flourishing. Academic staff meet informally to share examples of good practice. Strategic plans include the future development of an in-house teaching qualification for new academic staff, and the establishment of a research centre to support and nurture research activity.

| 6. | The institution is effectively administered | |
|-----|---|-----|
| 6.1 | Administrators are suitably qualified and experienced and understand their specific responsibilities and duties. | YES |
| 6.2 | The size of the administrative team is sufficient to ensure the effective day-to-day running of the institution. | YES |
| 6.3 | The administrative support available to the management is clearly defined, documented and understood and appropriately focused to support its activities. | YES |
| 6.4 | Policies, procedures and systems are well documented and disseminated effectively across the institution. | YES |
| 6.5 | Data collection and collation systems are effective and accurate. | YES |
| 6.6 | Classes are timetabled and rooms allocated appropriately for the courses offered. | YES |
| 6.7 | Comprehensive administrative records are organised and stored efficiently, easily accessed and used effectively. | YES |

| | Met | Partially met | Not met |
|-------------------------------|-----|---------------|---------|
| This standard is judged to be | ✓ | | |

Comments

Administrators are appropriately qualified and experienced. Effective oversight of the administrative function is provided by the Student Support and Administration Manager. At the time of the inspection, additional administrative staff were being actively recruited to fill academic administration vacancies. However, central support services provided by GUS ensure that administrative support is sufficient to ensure the effective day-to-day running of the Institution.

Administrative processes are appropriately documented and implemented, with key policies shared internally and via the policy portal on the website. Data collection and collation systems remain effective. Classes are allocated and timetabled effectively, including for online provision.

Administrative records are stored electronically and logically on secure systems. This ensures that they are easily accessible and effectively used.

| 7. | The institution employs appropriately qualified and experienced managerial and administrative staff | |
|-----|--|-----|
| 7.1 | There are appropriate policies and effective procedures for the recruitment and continuing employment of suitably qualified and experienced staff. | YES |
| 7.2 | There are effective procedures for the induction of all staff. | YES |
| 7.3 | There is a transparent and well-documented appraisal system for all staff. | YES |
| 7.4 | There are clear and appropriate job specifications for all staff. | YES |
| 7.5 | All staff are treated fairly and according to a published equality and diversity policy. | YES |
| 7.6 | The institution has a clear policy regarding the handling of legal issues relating to the employment of staff. | YES |
| 7.7 | Staff have access to a complaints and appeals procedure. | YES |
| 7.8 | Opportunities are provided for the continuing professional development of administrative and managerial staff. | YES |

| | Met | Partially met | Not met |
|-------------------------------|-----|---------------|---------|
| This standard is judged to be | ✓ | | |

Comments

The Institution has effective policies and procedures in place for the recruitment, employment and induction of staff. The Head of Resources is supported by the central human resources team at GUS, to ensure that staff are appropriately recruited and supported. New staff undertake an induction soon after commencing employment to ensure that they are clear and confident about their role and responsibilities.

A clear, documented process for staff appraisal is in place. The Head of College, and relevant senior managers, construct job descriptions that outline the requirements of each role. Staff confirm that they are treated respectfully in line with relevant policies and guidelines, as outlined in the employee handbook. The handbook also outlines appropriate processes for complaints and appeals.

Administrative staff benefit from development and networking opportunities conducted by GUS central support services. All staff are encouraged to engage in Continuing Professional Development (CPD) activities and are able to apply for supporting funds from relevant budgets.

PART C – SUMMARY OF ACTION POINTS

| ACTIONS REQUIRED | Priority H/M/L |
|--|----------------|
| 5.3 Managers must ensure that academic meetings are appropriately minuted and shared | М |
| to support the academic management of programmes. | |

RECOMMENDED AREAS FOR IMPROVEMENT

It is recommended that arrangements are implemented to ensure that industry leaders and employers formally contribute to and inform the strategic direction of the Institution.

The Institution should establish a range of key performance indicators at individual course and programme level

The Institution should consider implementing clear version controls for all policies.

Managers should ensure that plans for staff appraisals, including observations of classroom practice where appropriate, are fully completed for all staff.

It is recommended that formal opportunities for academic staff to gain teaching qualifications and additional research experience are fully implemented.

| COMPLIANCE WITH STATUTORY REQUIREMENTS | |
|--|--------|
| Declaration of compliance has been signed and dated. | YES/NO |
| | YES |
| Further comments, if applicable | • |