

Extraordinary Revision of Registration of the Quality Assurance Agency for Higher Education (QAA)

Register Committee
27/28 June 2022

Decision of:	28/06/2022
Report received on:	04/10/2021
Agency registered since:	23/10/2013
Last external review report:	21/06/2018
Registration until:	30/06/2023
Absented themselves from decision-making:	none
Attachments:	<ol style="list-style-type: none"> EQAR decision on QAA's Substantive Change Report Decision of 12/08/2020, 02/11/2020 (previously published, incl. Annexes) QAA letter: further substantive change report, 04/10/2021 EQAR letter: extension of the period for further report, 25/03/2021 QAA letter: further clarifications, 01/03/2021 QAA representation on its Extraordinary Revision of Registration, 22/04/2022 Annex- QAA's Designated Quality Body new arrangements, 22/04/2022 Substantive Change Report - QE-TNE 16/05/2022 Substantive Change Report - GOsC) Review, 26/05/2022

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- The Quality Assurance Agency for Higher Education (QAA) made a Substantive Change Report on 12/08/2020.
- In its decision of 02/11/2020 the Register Committee requested QAA to publish all its assessment reports and to ensure the involvement of students in all reviews, and make a further report once that was ensured.
- The Committee considered QAA's explanations on 01/03/2021 and the planned course of action to ensure compliance with ESG 2.4 and 2.6, but understood that these issues could not be substantially addressed in a short time, and therefore granted QAA an extended deadline (letter of

25/03/2021) to provide a further change report by end of September 2021.

4. The Register Committee considered QAA's response (of 04/10/2021) in which the agency explained that the necessary changes to meet ESG 2.4 and 2.6 could not be implemented.
5. Pursuant to §8.1 of the EQAR Procedures for Applications and in light of the concerns summarised below, the Register Committee initiated an extraordinary revision of QAA's registration and invited QAA to make additional representation.
6. The Register Committee considered QAA's representation (of 22/04/2022) at its meeting on 27/28 June 2022.

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1. Summary of evidence

7. In its Change Report of 12/08/2020 QAA informed EQAR of substantive changes in its activities carried out in England as the Designated Quality Body (DQB) under the authority/instruction of the Office for Students (OfS).
8. In considering the changes in the agency's external QA activities the Register Committee raised two main concerns (decision of 2/11/2020):
 - A. the lack of students on the review panels for Quality and Standards Review (QSR), Quality and Standards Review Monitoring and Intervention (QSRMI) and New Degree Awarding Powers Test (New DAP's Test), and
 - B. the lack of publication of review reports for external QA reviews carried out in England for QSRMI and DAP.
9. The Committee understood that the external QA activities under discussion might be replaced with a new assessment method (Quality and Standards Assessment Method, QSAM) as of autumn 2022.

A. Separation of DQB work

10. In its representation (of 22/04/2021), QAA explained that its Board had approved a new approach of governance and operational separation of QAA's work as DQB, placing the work as DQB at "arm's length" from the rest of the operations of QAA.
11. As a result of that new approach, QAA requested that EQAR consider its work as DQB as out of scope of EQAR registration.

B. Involvement of students in review panels (ESG 2.4)

12. The Register Committee learned from the agency's change report and the agency's clarification letter (of 29/10/2020) that students were involved where deemed appropriate in the agency's new/changed external QA activities (QSR, QSRMI, DAP). Overall, the involvement of

students was ensured for approximately a third of the reviews carried out at that time.

13. In its letter of 01/03/2021, QAA stated that it was committed to working toward ensuring students being appointed for all QSR and DAP assessment panels in England; such a change was expected to be in place by September 2021. QAA further noted that the involvement of students in QSRMI investigation panels was expected to become the norm, with exceptions being made for investigation panels that are very small and specialised.
14. In its letter of 04/10/2021, QAA reported that no tangible progress could be achieved to date, citing that OfS' consultation on the regulation of quality and standards in England had entered a second phase, that QAA was tasked to design new methods that could replace the current QSR and QSRMI methods of assessment, and that QAA was unable to make adjustment to the current methods.
15. In its representation (of 22/04/2022), QAA explained further that its negotiations with the OfS ultimately did not lead to a favourable resolution. According to the specifications set out by the OfS for the forthcoming QSAM, QAA shall only nominate students as part of the quality investigation assessment (method one), but may not include students in any of its standard assessments or standard investigation assessments (method two).

C. Publication of reports (ESG 2.6)

16. The Committee learned from QAA's change report that the agency does not publish the reports from its QSRMI procedures and some of the reports of the DAP assessments. In the autumn of 2020 (see QAA letter of 29/10/2020) the QSRMI reviews amounted to approximately a quarter (24.5%) of the total external QA activities carried out by QAA in England, while DAP assessment were less frequently (1.5%).
17. In its letter of 01/03/2021, QAA explained that reports were published after the OfS has made its regulatory decision, but that reports did not always lead to a regulatory decision and thus remained unpublished in certain cases. The agency explained that its ability to publish reports was in discussion and subject to the conclusion of the OfS' ongoing consultation.
18. In its letter of 04/10/2021, QAA expressed its disappointment that no tangible progress could be achieved as to the publication of all reports and noted that there would be no further development of the current QSR and QSRMI methods.
19. In its representation (of 22/04/2022) the agency explained that the Government was in the process of amending a bill that would allow the OfS to publish everything it deemed fit, while receiving protection from legal proceedings when doing so; the agency reiterated that the

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publication of reports under the forthcoming QSAM scheme remained outside the control of QAA.

20. QAA further stated that it was currently publishing all reports of reviews undertaken in England (where a regulatory decision is made) apart for QSRMI and DAP Monitoring.

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2. Analysis

21. In its additional representation, QAA requested that the Register Committee consider the QSRMI activity outside the scope of the ESG due to the evolution in the English regulatory framework and the reactive investigatory approach of the QSRMI methods. The Committee underlined that it followed the agency's own classification in considering the activity within the scope of the ESG (following its Change Report of 08/2020), but also understood that no QSRMI reviews have been carried out since February 2019.
22. The Register Committee agreed to the agency's request and considered the QSRMI outside the scope of the ESG.

A. Considering DQB activities outside EQAR-registration

23. The Register Committee considered QAA's request to place all external QA activities undertaken as DQB on behalf of the Office for Students as outside the scope of EQAR-registration (currently applicable to QSR, QSRMI and DAP reviews). As set out in the Policy on the Use and Interpretation of the ESG (see section 4), registration on EQAR is a label awarded to an entire agency. As a result, the entirety of an agency's activities that are by their nature/characteristics within the scope of the ESG are required to be conducted in compliance with the ESG. This includes activities performed by subsidiaries or sub-structures that are not effectively distinguishable from the agency itself.
24. While the external QA activities carried out under DQB may be different in nature from what QAA carries out elsewhere, the Committee regarded them as an essential part of QAA's work. Considering that QAA itself (and not the DQB sub-unit) remains formally mandated as DQB and the DQB sub-unit thus operates under QAA's ultimate authority, the Register Committee was not persuaded that DQB could be regarded as a fully distinguishable entity from QAA.
25. The Committee considered that the organisational separation of DQB as a sub-entity appeared as an artificially-crafted separation to resolve the issues of ESG compliance for the activities in question. The Committee was thus mindful not to set precedent where compliance with the ESG may easily be eluded by placing non-compliant external QA activities within an artificially separated sub-structure/department.
26. The Committee also noted that some reports produced by QAA in its capacity as DQB could be found both on the new DQB and QAA's websites; this raises serious questions whether the external QA

activities under DQB are effectively distinguishable from QAA's other work for the public.

27. As the Register Committee was not persuaded that the new configuration makes DQB an effectively distinguishable entity, the Committee rejected QAA's request to consider the activities carried out under DQB outside the scope of EQAR registration. Instead, the Committee continued to apply the requirement of ESG compliance to these activities, unless DQB were to become an entirely separate legal entity.

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B. Involvement of students in review panels (ESG 2.4)

28. Student involvement in QAA's DAP assessment panels was a concern the Register Committee flagged when the agency initially became registered in 2013; QAA was found to be partially compliant with the standard ESG 2.4 in the agency's renewal application in 2018. The Committee also found that this has remained an unaddressed concern in the recently developed procedures (for QSR, QSRMI and DAP).
29. The Committee considered that DAP and QSR currently make up most of the reviews carried out by QAA in England and that QAA has failed to systematically involve students in these procedures i.e. between 2019 and 2020 QAA failed to deploy students in 16 of the 20 QSR review teams (80% of cases).
30. The Committee took note that QAA has raised the matter of student involvement with the OfS in the new QSAM procedure, and that the proposed requirement for the team composition is to only include a student assessor "where this is requested by the OfS" namely in the quality investigation assessment (assessment method one). The Committee understood that students shall not be involved in the standards assessment or standards investigation engagements (assessment method two) "as these require academic judgement in relation to sector-recognised standards only". To ensure a wide range of expertise, the Committee finds that students should be part of a review team, as they can provide first hand experience of the educational process (within different educational sectors), a perspective which cannot be replaced by an 'academic judgment' only approach.
31. In its previous decision the Register Committee already underlined (see Decision of 15/03/2019) the absence of students from General Osteopathic Council reviews as well as the irregularity in the involvement of students in the panels for Higher Education Review (Alternative Providers) and Transnational Education reviews (TNE).
32. The Committee understood that the contract with the General Osteopathic Council has now ceased and also that the scope of TNE procedures has changed (QAA substantive Change reports) and therefore the involvement of students is no longer a concern for these procedures. Following a random sampling of review reports completed

in 2020 and 2021, the Committee, however, found that no students were present on review teams also for a number of procedures that are outside the purview of the OfS, i.e. Higher Education Review (Alternative Providers), Higher Education Review (Foreign Providers) and Recognition Scheme for Educational Oversight.¹

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- 33. Considering QAA's failure to address the requirement of the standard ESG 2.4 that "external quality assurance should be carried out by groups of external experts that include (a) student member(s)" the Register Committee concludes that the agency is not in compliance with standard 2.4. In reaching this judgment the Committee has weighed in the agency's recurrent lack of student involvement in review panels and the lack of resolve of the situation for activities carried out on behalf of the OfS.**

C. Publication of reports (ESG 2.6)

34. The Register Committee underlined that the standard (ESG 2.6) clearly requires the publication of all reports from external QA activities within the scope of the ESG, irrespective of the nature of issues that are investigated on behalf of the regulator (like in the case of QSRMI and DAP Monitoring).
35. The Committee understood that DAP Monitoring reports are provided to the OfS to allow them to make decisions about awarding Degree Awarding Powers, but could not follow the reasoning of not publishing such reports based on the reasoning that they are "not a substitute for regular institutional review" and their focus on "academic governance processes and the delivery against a bespoke plan".
36. The Committee agreed that it could be necessary and justified to redact certain parts of a report in specific cases, e.g. where financial or personal information is concerned. In the view of the Committee this does, however, not justify a blanket exceptions from publishing reports altogether.
37. The Committee noted that QAA is bound by the directives of the OfS, which dictate when such reports are to be published, but underlined that QAA was responsible not to engage and undertake external QA activities when it cannot ensure that they follow the principles and standards of the ESG.
- 38. As a consequence of QAA's inability to ensure a consistent publication of external QA reports for DQB activities in England, the Committee concluded that QAA is not in compliance with standard 2.6. In reaching this judgment the Committee has weighed in the agency's lack of**

¹ Example of reviews where no students were involved in the panel: Al-Maktoum College of Higher Education (2020), EUSA LLP (2020), Belfast Bible College Ltd (2021), Free Church of Scotland t/a Edinburgh Theological Seminary (2021), Irish School of Ecumenics (Trinity College Dublin, 2021), CAPA The Global Education Network Ltd (2021), CIEE Study Abroad London Ltd (2020), Washington International Studies Council (2021), Foundation for International Education (February 2021)

publication of review reports carried out as DQB since 2018 and the lack of resolve of the situation for reviews to still be carried out on behalf of the OfS.

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3. Conclusion

39. Given that QAA fails to comply with the ESG (standards 2.4 and 2.6) in its work as DQB in England, the registration criteria are currently not fulfilled. At the same time, the Committee considered that QAA seemed committed to resolve these matters either by adjusting the methodologies accordingly or by ceasing to carry out these reviews.
40. The Register Committee therefore suspended the agency's registration until the situation is resolved (see §8.4 c & d of the EQAR Procedures for Applications). The suspension may last at most until the next external review of QAA is considered by the Register Committee following the agency's expiry of registration in June 2023.
41. To lift the suspension QAA is required to provide clear evidence that it has either aligned the DQB activities in England with the ESG or discontinued these activities.
42. The Register Committee underlined that the issues of compliance raised in this decision only concern the external QA activities carried out by QAA in England (mainly QSR and DAP reviews, carried out as DQB under the directions of the OfS). The Committee had no concerns on the external QA processes undertaken by QAA in line with the ESG in Wales, Scotland and Northern Ireland, nor on the international external QA activities of QAA.



4 October 2021

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Sent via email to: colin.tueck@eqar.eu
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Dear Colin

Further Substantive Change Report – Progress during the extension

We wish to thank you for granting QAA an extension to the period in which we could supplement our initial Substantive Change Report and address the issues that were highlighted in the Register Committee's decision of 02/11/2020. As you highlighted in your letter of 25/03/2021 the Committee were clear that QAA was not in a position, at that time, to substantially address the way in which we continue to meet ESG 2.4 and 2.6. As the Committee noted we anticipated that we would have made tangible progress by the end of September 2021 and would be able to address the ways in which we meet the ESG. The intent was for QAA to have a student on each DAP and QSR panel and have clarity on our ability to publish our reports subject to the conclusion of the Office for Students (OfS) consultation on the regulation of Quality and Standards in England.

Unfortunately, the OfS consultation has entered a second phase and as such we are unlikely to know the final outcomes (and the impact of the outcome on our ability to publish) until at least the end of December 2021. This means that there has been no tangible progress moves toward publishing the QSRMI and DAP reports we produce for OfS (we continue to publish QSR reports).

The consultation has also led to OfS issuing (this week) a revised specification for the QSR and QSRMI methods of assessment with an expectation that QAA will design new methods, ready for OfS consideration, in December 2021. As such there will now be no further development of the QSR and QSRMI methods as QAA focuses on the development of the new method. This means that we are not in a position to include student members on all QSR and DAP assessment panels until the new method is developed.

We are disappointed that we are not currently able to provide you with further information to demonstrate that we are continuing to meet ESG 2.4 and 2.6. However, we do believe that the collaboration between OfS and QAA is stronger now than it has been, which is particularly evidenced by the increasing collaborative approach to the design of assessments in England and the way QAA is commissioned work by OfS.

As such we would hope to be in a position, early in the New Year, to provide an update on the progress that has been made on the substantive issues regarding ESG 2.4 and 2.6.

Yours sincerely



Alastair Delaney
Executive Director of Operations and Deputy Chief Executive

Brussels, 25 March 2021

Substantive Change Report - Extension of the Period for Further Report

Dear Douglas,

I wish to thank you for your letter of 01/03/2021 following our conversation and in response to EQAR's decision on QAA's Substantive Change Report of 12/08/2020.

The Register Committee considered QAA's explanations and the planned course of action to ensure compliance with ESG 2.4 and 2.6, but understood that these issues could not yet be substantially addressed.

The Committee welcomed that the involvement of students in all QSR and DAP assessment panels is expected to be in place by September 2021.

The Committee appreciated that the QSRMI method is of a different nature than a typical review. At the same time, as it is presented as an external quality assurance activity within the scope of the ESG, QAA is thus expected to follow the standards accordingly, including ensuring that the assessment is carried out by a groups of experts, and that these groups include a student member.

The Register Committee further appreciated that the publication of reports from QSRMI reviews is currently under discussion as part of the ongoing consultation launched by the Office for Students (OfS). The Committee will be keen to learn of the results of that consultation and any resulting changes. Meanwhile, the Committee stressed that an ESG-compliant external quality assurance process should always lead to a published report, irrespective of whether and what further regulatory actions by the OfS follow after them. While confidential information can always be redacted from a published report, blanket exceptions from publishing reports are not in line with the ESG.

We understood that QAA expects to achieve tangible progress by September 2021. To allow QAA to adequately resolve the compliance issues noted in the Register Committee's decision of 2/11/2020 the Committee therefore extended the period for QAA to provide a further

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report until 30 September 2021. Please inform us if any difficulties arise in meeting this deadline.

Your letter and this response will be attached to our published change report decision of 2/11/2020.

I shall be at your disposal if you have any further questions or inquiries.

Kind regards,



Colin Tück
(Director)



01 March 2021

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Dear Colin,

Re: QAA meeting with members of EQAR Registration Committee

Thank you to you Anita, Beate and Melinda for taking the time to meet with us on 11 February to explore the issues raised in the 02 November 2020 decision notice. At that meeting I promised I would write a brief letter setting out how QAA intends to respond constructively to the Register Committee's decisions.

While most QAA assessments and reviews currently involve students we are committed to working toward students being on all Quality and Standards Review (QSR) and Degree Awarding Powers (DAPs) assessment panels in England. We anticipate that these changes should be in place by September 2021. The nature of the QSR Monitoring and Intervention (QSRMI) method is investigatory, as such the investigation panels can be very small and specialised (sometimes involving only one assessor). This means that while we expect the norm to be that each QSRMI investigation panel will include a student, there are some circumstances when they would not be. The decisions on size and composition of investigation panels will continue to be carefully chosen. We will ensure that any decision not to include a student on an investigation panel will be taken against transparent criteria. We hope that these changes should also be in place by September 2021.

In England all QAA assessment reports for QSR and for Degree Awarding Powers are published after the Office for Students (OfS) has made its regulatory decision(s). Currently QSRMI investigation reports do not always lead to a regulatory decision. As such publication of QSRMI reports (where no regulatory decision was made, or where that decision was delayed) may impact OfS and/or the provider generating a concern that both QAA and the OfS could be legally challenged. Instead only regulatory decisions are published. On 15 December 2020 the OfS published a consultation proposing changes to the way that they publish information. If the proposals are confirmed it will lead to all QAA reports being published, unless there is a reason for not doing so. QAA will respond to this consultation, broadly welcoming the proposals, while highlighting the need for clear criteria to be used if a decision not to publish is reached. The time frame for any change depends on the outcome of the consultation.

I hope the Register Committee will welcome this positive commitment from QAA to progress these issues.

Kind regards,

A handwritten signature in black ink, appearing to read 'Douglas Blackstock'.

Douglas Blackstock
Chief Executive

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22nd April 2022

Dear Mr K Dittrich

Extraordinary Revision of QAA's Registration on EQAR

I write in response to your letter dated 10 February 2022. In this letter you informed QAA of the Register Committee's decision to initiate an extraordinary revision of our registration on EQAR.

You kindly invited QAA to make representation on this matter, and so I enclose a document that addresses this.

I would want to emphasise that QAA regards its position on the EQAR register as being of the highest importance. Indeed, it has been the highest risk on our strategic risk register for some time, which ensures that it is a matter of constant focus from our Board and Executive Team.

I have tried succinctly to present our current position in the attached document. I have included as evidence key reference documents and links to public statements to support our position in annexes. I would want to emphasise that I stand ready to provide any clarification that you may require, either in writing or in person.

Yours sincerely,



Vicki Stott
Chief Executive

Extraordinary Revision of QAA's Registration on EQAR

Representation

Introduction

QAA has been on the EQAR Register since 2013. We regard our membership of ENQA, and our status on the EQAR Register to be essential as a matter of principle, as a respected QA agency in the EHEA, and also as crucial for our future development.

It is important to emphasise the devolved nature of higher education policy in the UK, and the fact that the issues we are addressing here are not relevant to our work in Scotland, Wales, Northern Ireland, to our reviews of Alternative Providers in any UK nation or to our International Quality Review. Of course, all of these areas will be examined by ENQA during our next agency review in March 2023. However, we find ourselves in a position of non-compliance with certain ESG standards due to the policy and practice of the regulator of higher education in England.

The role of QAA in England

We have intentionally not described in detail here the process through which we became the Designated Quality Body for England. Suffice to say that through the Higher Education and Research Act 2017, only applicable in England, the Office for Students (OfS) was created as the regulator for higher education in England in 2017. The Act also stipulated that the Secretary of State for Education may appoint a designated quality body (DQB) whom OfS would commission to undertake assessment of the quality of, and the standards applied to, higher education provided by English higher education providers'.

QAA was designated as that quality body in 2018 and we began an engagement with the OfS to devise what approach should be taken. Both organisations have learned and adapted over time, with the OfS also adapting and responding to the changing political climate in England. OfS is currently reviewing QAA's performance as the DQB as part of a triennial process required by the legislation (which has been extended by one year due to the impact of the Covid-19 pandemic). OfS will report to the Secretary of State in the summer of 2022. Within this, there will be a recommendation made whether the QAA should continue to be designated. That decision is expected during the Summer of 2022.

The identified areas of non-compliance with the ESG relate to the operation of review methods that were developed at the beginning of our designation in 2018 – Quality and Standards Review (QSR) and Quality and Standards Review – Monitoring and Intervention (QSRMI). Both OfS and QAA agreed subsequently that they would require amendment, but in the short-term OfS needed to get advice from the DQB to make decisions about registration of providers. QAA was asked to develop a second model in 2020, but this was never implemented, because the pandemic caused a period of both disruption and reflection by the OfS on the nature of regulation of quality and standards in England, and so OfS launched a period of consultation with a view to substantially amending its Regulatory Framework.

In October 2021 OfS produced a specification for a new approach to review (based around its proposed new approach to regulating quality and standards) – the Quality and Standards Assessment Methods (QSAM). QAA has been working on developing a methodology to deliver on this approach since then, providing OfS with draft materials for its approval, whilst still delivering

QSR. This specification is detailed and prescriptive in nature, and places restrictions on what the DQB can do – such as when to use student reviewers. The specification can be found in Annex A for your information. It is expected to be implemented later in 2022 once OfS has agreed the methodology and pending the outcome of the triennial review process. Until this time, the old approach of QSR and QSRMI is being used, alongside some bespoke review arrangements the OfS has commissioned from time to time.

With regard to QSRMI, this method has not been used since February 2019. It is a reactive investigation, initiated and done on behalf of the OfS. We understand that this was placed in scope of the ESG by QAA at our last ENQA review. The evolution of English regulation has made clear that this should not have been placed in scope'. QSR, however, is in scope and is currently in use.

Analyses and proposal

It is QAA's view that its work as DQB for the OfS is unlike anything else that we do. It is a risk-based compliance check and is more similar to an audit function than it is an approach to quality assurance and enhancement. As such it is not in line with what QAA would normally develop and deliver, and indeed is very different to all our other work.

However, QAA understands from the sector in England that their strong preference is for QAA to remain the DQB. Higher education representative bodies, such as UUK and GuildHE, alongside mission groups such as the Russell Group have all expressed this view. At the time of writing, it is unknown whether OfS shares this view, or whether they will recommend an alternative approach to the Secretary of State. All of this puts QAA in a difficult position.

Our solution to this is as follows.

On Wednesday 9 March 2022 the QAA Board approved a proposal for a clear governance and operational separation of our work as DQB. The paper that gives details of this is attached in Annex B. Whilst QAA has operated a strict "ethical barrier" between its work as DQB and the rest of QAA since its designation, we recognised that there was a possibility of a perception of conflict of interest in the sector. The new approach places the work as DQB at "arm's length" from the rest of the operations of QAA. It satisfies the sector request that QAA remains as DQB, but it also ensures that QAA clearly regards this work as the delivery of statutory functions for the OfS, rather than core business, and of being of a very different nature to the work that QAA would normally undertake. It is in effect the delivery of a contract.

As a result of this, we kindly request that EQAR considers our work as DQB as out of scope.

Progress on implementation

Immediately after the Board meeting on 9 March, we began to implement the governance and operational changes.

We formally announced the intention to move to new governance arrangements to key stakeholders, such as the Office for Students and Department for Education, on 29 March. On the same day we launched the new DQB England website (Annex C) demonstrating a clear separation of DQB activity from the rest of QAAs work. We also announced the change on our website (Annex D)

We advertised the contract for a company to recruit members of the DQB England Board on 21 April (Annex E). It is planned that the new DQB England Board will meet for the first time in July or August 2022 and take over formally at that point the oversight of our DQB Activity.

Current situation regarding the two substantive issues identified by EQAR

We would wish to reiterate that the issues raised by EQAR apply only to our work as DQB for the OfS in England, and that is why we have taken the steps we have to isolate this work from the rest of QAAs operations and ask EQAR to consider it out of scope for the purposes of monitoring our compliance with ESG.

But we wanted to provide an update on the two issues referred to as part of the Extraordinary Revision Process for completeness.

As previously notified to EQAR, there were two developments that QAA was taking forward with OfS to address our non-compliance. These were publishing all QSR and Degree Awarding Powers (DAP) reports and placing student reviewers on all review teams.

Students on all review teams

QAA had negotiated this with OfS last Autumn, and we had even recruited and trained a group of new student reviewers ready to proceed. However, OfS did not ultimately agree to this approach.

The OfS has specified to QAA when it is allowed to deploy student reviewers on their new assessment methods. The full specification is in Annex A, and I would refer you to page 15 regarding the requirements for the composition of review teams.

Consequently, QAA is unable to make its work for the OfS compliant with this standard in the ESG.

Publication of all review reports

The OfS ran a public consultation from December 2020 to March 2021 proposing that it would “normally expect” to publish all reports. The consultation stated that “there is a ‘fundamental principle that [its] regulation should be transparent’”. This was necessary as it was seeking protection against legal proceedings as a result of doing so. The results of this consultation have still not been published. However, a Bill currently proceeding through the Westminster Parliament has been amended by the Government to include a clause that allows OfS to publish whatever it deems fit (although see comment below) and provides protection from legal proceedings when doing so. . However, this remains outside the control of QAA and so would remain non-compliant with the ESG.

QAA is well aware that EQAR would expect quality agencies to publish their own reports irrespective of the stance taken by the regulator or Ministry. In England, and for DQB work specifically, we now publish all reports of reviews undertaken by us after the regulatory decision has been taken, apart from the two cases below:






- QSRMI – This is an investigation undertaken on behalf of the OfS and specified by the OfS. Our report is provided as advice to the OfS only, who decide if they are to be published. However, we have not had a QSRMI commission since February 2019, and this method will no longer apply once the new QSAM method is finalised.
- DAPs Monitoring reports – these are provided to the OfS to allow them to make decisions about awarding Degree Awarding Powers. They are not a substitute for regular institution review and are very focused upon academic governance processes and the delivery against a bespoke plan.

Conclusion

As highlighted earlier, we take the matter of EQAR registration, and wider compliance with the EHEA and ESG, very seriously. We do not regard the work we do for the OfS in England to be in any way similar to the work we do elsewhere across QAA. We have taken substantial practical steps to quarantine the governance and operation of this work from the rest of QAA.

We respectfully ask that the Registers Committee take the above into account in its deliberations relating to our Extraordinary Revision process.

ANNEXES

Annex A – specification from the OfS to QAA for new review model	 QAA spec v7 for QAA.docx
Annex B – Board paper on future governance arrangements for DQB	   BD-21-22-31 Item 7 BD-21-22-31 Item 7 BD-21-22-31 Item 7 Appendix 1 - ProposAppendix 2 - DiagraAppendix 3 - Implem  BD-21-22-31 Item 7 Appendix 4 - DQBE E
Annex C – Hyperlink to new DQB website	https://dqbengland.org.uk/
Annex D – Announcement on QAA website	https://www.qaa.ac.uk/news-events/news/qaa-announces-new-designated-quality-body-for-england-board
Annex E – advertisement for company to find DQB England Board members	https://www.contractsfinder.service.gov.uk/Notice/1058a341-e542-4286-b858-4215fed10524

**Specification for the designated quality body
for new methods to assess quality and standards**

VERSION 7

PART ONE: INTRODUCTION

1. This document sets out for the designated quality body (DQB) the specification for new assessment methods to assess quality and standards:
 - a) Assessments of quality and standards for providers seeking registration with the OfS.
 - b) Investigations of quality and standards for registered providers where the OfS has identified areas of concern.
2. The purpose of both assessments is to provide evidence to the OfS so it can make reliable regulatory judgements about quality and standards, including deciding if the quality and standards conditions have been satisfied, or not satisfied. This might include decisions not to register a provider, to impose specific conditions, or to take enforcement action. The OfS may also ask the DQB to assess quality and standards matters that may not fall within the scope of an existing condition of registration. That assessment may be used for regulatory intervention, for example, through the imposition of a specific condition of registration.
3. Assessment for the purposes of the OfS's regulation of degree awarding powers sits outside this specification.

Context

4. The Quality Assurance Agency (QAA) was designated by the Secretary of State in February 2018 to perform quality and standards assessment functions for the OfS as set out under HERA. The effective performance of the assessment functions is central to the ability of the OfS to perform its functions under HERA in reaching its decisions about quality and standards, including providers' compliance with initial and ongoing conditions of registration.
5. Currently, the regulatory framework contains five conditions of registration which set out the OfS's requirements for quality and standards that all providers must meet; the regulatory framework says that the OfS expects the DQB to provide assessments in relation to four of these. To date, the DQB has carried out assessments using the current method, Quality and Standards Review (QSR) which assesses a provider's ability to meet the core practices of the UK Quality Code. The core practices correspond to the non-exhaustive behaviors that may indicate compliance with current conditions B1, B2, B4 and B5 that are listed in the table set out in paragraph 355 of the regulatory framework. OfS assessors use the evidence and judgements provided by the DQB to make an informed assessment of whether a provider has satisfied the B conditions and to inform judgements about whether there is an increased risk of a future breach of conditions.
6. The OfS is currently consulting on revisions to its approach to the regulation of quality and standards. Nothing in the current document pre-judges the outcomes of the current consultation.
7. The OfS has published a phase two consultation on quality and standards conditions in July 2021.¹ The phase two consultation sets out proposed revisions to ongoing quality conditions B1, B2, and B4 and ongoing standards condition B5. For B5 this includes extended sector-recognised standards relating to degree classification descriptors for honours degrees. Two new initial conditions of registration, B7 for quality and B8 for

¹ The consultation document including draft conditions are attached for reference.

standards, are set out in the proposals as is new guidance on evidence gathering, assessment and enforcement for all the proposed conditions.

8. These proposals, as part of a principles- and outcomes-based approach to regulation, would give providers the flexibility they need to drive innovation in the design and delivery of high quality courses which deliver the best outcomes for students.
9. The proposals would also provide the OfS with the platform it needs to drive up quality across the sector. The DQB's assessment methods must therefore be designed and implemented in a way that sets the bar for acceptable quality in an appropriately high place rather than accepting established sector norms.
10. The DQB will need to design and implement new assessment methods as a result of any changes the OfS makes following the current consultation. The new methods will need to take into account previous feedback given by the OfS, and the DQB's 'lessons learnt' exercise that took place in 2020. In particular, assessments made under the new methods must enable the OfS to make robust regulatory decisions using an outcomes-based approach.
11. The current B3 condition will also be subject to consultation in autumn 2021, but condition B3 sits outside the scope of activity by the DQB, as student outcomes will continue to be assessed directly by the OfS.

Notes on the specification

Key requirements

12. The specification places particular emphasis on the need for assessment methods that are agile, flexible and rigorous.
13. The assessment methods need to be agile in order to allow the OfS to regulate a diverse sector in a way that delivers its principles- and outcomes-based approach through a proportionate and targeted approach, as set out in the regulatory framework.
14. The quality of outputs from the new assessment methods must also reflect the OfS's need to rely on them for use in making regulatory decisions that are subject to representation processes and may subsequently be subject to legal challenge.² A representations process means that the OfS is required set out the detailed reasons for its provisional decisions in a way that a provider can understand and make an informed response. This must be based on evidence and reports from the DQB, and therefore must be very clearly articulated to ensure the OfS and the provider are clear about the detailed nature and reasoning for any concerns.

References to the proposed conditions

15. References to 'conditions' and associated guidance in this specification refer to the proposed conditions and associated guidance set out in the phase two consultation. The OfS is asking the DQB to begin work on new assessment approaches in parallel with the phase two consultation but has in no way prejudged the outcome of that consultation.

² On representations see regulatory framework paragraphs 110 (refusal to register a provider), 176 (imposition of a specific condition), 180 (monetary penalties), 184 (suspension), 193 (deregistration); see also phase two consultation Annex A paragraphs 16, 39 and 58, and Annex B paragraph 11 (breach of condition).

This means that some, or all, of the proposals in the consultation may not be implemented, or may be implemented in a different form.

16. The DQB should therefore expect to need to revise the emerging approach as necessary when the consultation outcomes are known. The OfS expects to be in a position to be able to confirm any such changes by the end of December 2021.

PART TWO: SPECIFICATION OF ASSESMENT METHODS

ASSESSMENT METHOD ONE: QUALITY AND STANDARDS ASSESSMENTS (QSAs) TO INFORM JUDGEMENTS ABOUT INITIAL CONDITIONS OF REGISTRATION

Purpose
<p>The purpose of QSA is to provide evidence to the OfS to inform the OfS's decision about whether initial conditions B7 and B8 have been satisfied and, if they have, whether there is increased risk of a future breach of any of the relevant ongoing conditions. The evidence from QSA will therefore inform the OfS's decisions about whether a provider should be registered, and if it is registered, whether regulatory intervention, such as one or more specific ongoing conditions or other additional monitoring requirements, are necessary.³</p> <p>The outputs from QSA need to enable the OfS to regulate in a way consistent with the regulatory framework: that is, in a way that is proportionate, principles-based, risk-based and outcomes focused, and to enable it to deliver its four primary regulatory objectives.⁴</p> <p>The process for QSA should be split into two elements:</p> <ul style="list-style-type: none">• Quality Assessment (QA) assessing the requirements contained in initial condition B7.• Standards Assessment (SA) assessing the requirements contained in initial condition B8. <p>Each element must be capable of delivery without the other.</p> <p>The requirements for both QA and SA are set out in this section. The requirements for both, including requirements relating to judgements, may in operation be varied by the OfS in order to meet its needs for individual provider assessments. Any variations commissioned by the OfS will normally be consistent with the arrangements for evidence-gathering set out in paragraphs 8-11 and 18-22 of Annex C of the phase two consultation. This means that from time to time the OfS may ask the DQB to vary its approach and the assessment methods need to allow for this.</p>

Quality Assessment: requirements for judgements and advice
<p>The report for Quality Assessment should set out two separate judgements with reasons in relation to condition B7.2:</p>

³ See Phase 2 consultation Annex C, guidance, paragraphs 8, 11, 18 and 22.

⁴ Regulatory Framework paragraphs 10(g), 8, 41(a) and 3 (<https://www.officeforstudents.org.uk/advice-and-guidance/regulation/the-regulatory-framework-for-higher-education-in-england/>).

Judgement 1. With reference to part (a) of condition B7.2, whether the provider does/does not have credible plans that would enable the provider, if registered, to comply with conditions B1, B2 and B4 from the date of registration;

Judgement 2. With reference to part (b) of condition B7.2, whether the provider does/does not have the capacity and resources necessary to deliver, in practice, those plans.

Notes:

- a) In reaching Judgements, assessors should have regard only to the relevant conditions and the guidance underpinning these as set out in the phase two consultation. Any material developed by the DQB to train assessors, or brief providers, or otherwise support the assessment process, must not be used as the basis for making judgements.
- b) In reaching Judgement 2, assessors should only consider capacity and resources from the perspective of capacity and resources to deliver the plans required under part (a) of condition B7, rather than wider questions of the finances, management and governance of the provider that may be necessary to deliver its higher education courses.⁵ These wider issues are within the scope of other conditions of registration and the OfS will assess these as part of the registration process.
- c) In reaching Judgements, a positive judgement should only be reached if assessors are satisfied that the relevant requirement in condition B7 has been met with reference to each of the relevant ongoing conditions (B1, B2 and B4). The evidence, judgement and reasons for each Judgement (positive or negative) should be set out separately with reference to each of the three relevant ongoing conditions.
- d) The reasoning accompanying the Judgements should clearly explain the extent to which the requirements of the condition have or have not been satisfied, for example where there is a negative judgement it would be helpful to understand whether the provider is close to satisfying the requirements in the condition. This advice should set out clearly the scale of any concerns and to which ongoing condition or conditions (B1, B2 or B4) these relate.
- e) Where both Judgement 1 and Judgement 2 are that the requirements of the initial condition are satisfied, there then need to be three further judgements, based on the evidence considered to make Judgement 1 and Judgement 2, **of the likelihood that the provider will be able to ensure that:**⁶

One, referring to the definitions contained in ongoing condition B1: **the likelihood that** the students registered on each higher education course will receive a high quality academic experience.

Two, referring to the definitions contained in ongoing condition B2: **the likelihood that:**

- a. each cohort of students registered on each higher education course will receive resources and support to ensure:
 - i. a high quality academic experience for those students; and

⁵ **NOTE for QAA** – we think there is a risk here of mission creep on the part of assessors. We are open to suggestions about a way to frame the specification here so that doesn't happen.

⁶ These statements correspond to draft condition B1.2, B2.2 and B4.2 respectively.

- ii. those students succeeding in and beyond higher education; and
- b. there will be effective engagement with each cohort of students to ensure:
 - i. a high quality academic experience for those students; and
 - ii. those students succeeding in and beyond higher education.

Three, referring to the definitions contained in ongoing condition B4: the likelihood that

- a. students will be assessed effectively;
- b. each assessment will be valid and reliable;
- c. academic regulations will be designed to ensure that relevant awards are credible; and
- d. relevant awards granted to students will be credible at the point of being granted and when compared to those granted previously.

The purpose of this part of the assessment is to allow the OfS to decide whether any additional regulatory requirements, such as one or more specific ongoing conditions of registration or other additional monitoring requirements, should be imposed if the provider is registered.

- f) All Judgements, reasons and advice need to be based on careful and clear evaluation of relevant evidence presented by the provider, so that the outputs can be relied on by the OfS to reach, and set out in writing for providers, legally sound, rational and proportionate regulatory decisions, including in relation to compliance with conditions of registration, assessment of future risk and regulatory intervention.

Quality Assessment: method of assessment

The assessment that underpins the judgement and advice should be conducted in a way that is consistent with the OfS's regulatory approach.

This means that:

- a) The assessors apply a principles-based approach as set out in the regulatory framework.
- b) The assessment does not focus on the policies or process that a provider plans to have in place, but evidence of whether its plans will be effective in delivering the outcomes expressed in ongoing conditions B1, B2 and B4.
- c) The QA method must be adaptable in ways that will ensure that the full range of types and size of provider eligible to be registered with the OfS can be effectively assessed against condition B7. It must be clear to providers in documentation that there are many ways a provider can satisfy the requirements in B7 and the method must ensure that assessors do not set unnecessary barriers in how they consider that a provider should operate, provided the requirements are satisfied.

The assessment method must also:

- Ensure that the assessment is conducted and the outputs are moderated in a way that will ensure appropriate comparability in judgements and advice between different assessments.
- Wherever appropriate, provide students from the provider under assessment with an opportunity to provide relevant evidence for the assessors to consider, both in advance of and during the assessment.⁷

⁷ It is recognised that this will not necessarily be possible for in principle providers.

- Set out in the documentation for providers any requirements for the format in which information should be submitted before or during the assessment.

The assessment report should:

- Clearly set out the evidence that has been used to inform each Judgement and set out how that evidence informs the relevant Judgement. The assessment report should also present an appropriate volume and range of evidence.
- Contain a clear justification of how each Judgement has been reached, which is outcomes-focussed and based on the evidence assessed.
- Set out in summary how the assessment was conducted in order to demonstrate that due process has been followed.

Standards Assessment: requirements for judgements and advice

The report for Standards Assessment should set out a judgement with reasons in relation to condition B8.2:

Whether with reference to condition B8.2 the provider has/has not demonstrated, in a **credible** manner, that any standards to be set and/or applied in respect of any **relevant awards** granted to students who complete a **higher education course** provided by, or on behalf of, the provider (if registered), whether or not the provider is the awarding body, are consistent with any applicable **sector-recognised standards**.

Notes:

- In reaching the Judgement, assessors should have regard only to the relevant condition and the guidance underpinning this, as set out in the phase two consultation. Any material developed by the DQB to train assessors, or brief providers, or otherwise support the assessment process, must not be used as the basis for making judgements.
- A positive judgement should only be reached in relation to condition B8 if assessors are satisfied that all the requirements in condition B8 have been met.
- The evidence for the Judgement should be limited to (1) any relevant written final or draft course documentation (such as programme specifications, module outlines, marking schemes or equivalents) and (2) any relevant examples of student work if available. This evidence should be assessed only in relation to the relevant sector-recognised standards as set out in the regulatory framework. Other evidence (such as staff interviews, or the provider's systems and processes) is not required.
- Where the Judgement is that the requirements of the initial condition are satisfied, there then needs to be a further judgement, based on the evidence considered to make the Judgement for condition B8 **of the likelihood that:**

in respect of any **relevant awards** granted to students who complete a **higher education course** provided by, or on behalf of, the provider (whether or not the provider is the awarding body):

- a. any standards set will be consistent with any applicable **sector-recognised standards**; and
- b. awards will only be granted to students whose knowledge and skills are consistent with any applicable **sector-recognised standards**.⁸

This should refer to the definitions contained in ongoing condition B5.

The purpose of this part of the assessment is to allow the OfS to decide whether any additional regulatory requirements, such as one or more specific ongoing conditions of registration or other additional monitoring requirements, should be imposed if the provider is registered.

- e) The reasoning accompanying each Judgement should clearly explain the extent to which the requirement of the condition has or has not been satisfied, for example where there is a negative judgement it would be helpful to understand whether the provider is close to satisfying the requirements in the condition. This advice should set out clearly the scale of any concerns.
- f) All Judgements, reasons and advice need to be based on careful and clear evaluation of relevant evidence presented by the provider, so that the outputs can be relied on by the OfS to reach, and set out in writing for providers, legally sound, rational and proportionate regulatory decisions, including in relation to compliance with conditions of registration, assessment of future risk and regulatory intervention.

Standards Assessment: Method of assessment

The assessment that underpins the judgement and advice should be conducted in a way that is consistent with the OfS's regulatory approach.

This means that:

- a) Although the OfS has signalled that its approach to setting requirements for standards is more rules-based than its approach to requirements for quality, assessments for condition B8 must demonstrate an understanding that the sector-recognised standards are criteria that might be met in a wide variety of ways by different providers depending on their context and courses.
- b) The assessment focuses only on the relevant sector-recognised standards as set out in the regulatory framework. Other evidence (such as staff interviews, or the provider's systems and processes) is not required.
- c) The SA method must be adaptable in ways that will ensure that the full range of types and size of provider eligible to be registered with the OfS can be effectively assessed against condition B8. It must be clear to providers in documentation that there are many ways a provider can meet B8 and the method must ensure that assessors do not set unnecessary barriers in how they consider that a provider should operate, provided the condition is satisfied.

The assessment method must also:

- d) Ensure that the assessment is conducted and the outputs are moderated in a way that will ensure appropriate comparability in judgements and advice between different assessments.

⁸ These statements correspond to draft condition B5.

- e) Set out in the documentation for providers any requirements for the format in which information should be submitted before or during the assessment.

The assessment report should also

- f) Clearly set out the evidence that has been assessed to inform the judgements and present an appropriate volume and range of evidence.
- g) Contain a clear justification of how judgements have been reached, in relation to the sector-recognised standards and based on the evidence assessed.
- h) Set out in summary how the assessment was conducted in order to demonstrate that due process has been followed.

ASSESSMENT METHOD TWO: QUALITY INVESTIGATION (QI) AND STANDARDS INVESTIGATION (SI)

The OfS may commission the DQB to carry out an assessment of quality and standards for any registered provider. Such an assessment may relate to subject matter within the scope of one or more ongoing conditions of registration – in those circumstances, the methods for QI and SI below should be used. The OfS may also commission an assessment of quality and standards without identifying which if any of the ongoing conditions may be relevant to its concerns – in those circumstances, the method used by the DQB will need to be sufficiently flexible to assess matters relating to quality or standards that are not within the scope of the general ongoing conditions that apply to all registered providers.

Purpose

Quality investigation (QI)

For QI, the OfS will commission the DQB to carry out a bespoke investigation where there is a particular concern or concerns about a registered provider in relation to matters relevant to the quality conditions (B1, B2 and B4). The output of QI may be used by the OfS to inform a decision about a breach of a condition (and any appropriate enforcement of that breach, or consequences that may flow from it), or a judgement about whether there is increased risk of a future breach (and whether regulatory intervention, such as a specific ongoing condition, or additional monitoring requirements, are necessary).⁹

The scope for a QI, including relevant supporting information, will be set out in writing by the OfS as an **Issue**.¹⁰ The report from QI will be a **Finding** in relation to the Issue with reasoning for the Finding. An Issue will focus on specified aspects of the quality of a provider's courses, and may apply to all or a sub-set of courses.

The outputs from QI need to enable the OfS to regulate in a way consistent with the regulatory framework: that is in a way that is proportionate, principles-based, risk-based and outcomes focused, and to enable it to deliver its four primary regulatory objectives.¹¹

⁹ See proposed condition B5 and associated guidance, Consultation on Quality and Standards Conditions, Annex A.

¹⁰ The OfS will supply the QAA with examples of Issues to inform its development of MI.

¹¹ Regulatory Framework paragraphs 10(g), 8, 41(a) and 3 (<https://www.officeforstudents.org.uk/advice-and-guidance/regulation/the-regulatory-framework-for-higher-education-in-england/>).

The requirements for QI are set out below. The requirements for QI, including requirements relating to findings, may in operation be varied by the OfS in order to meet its needs for individual provider assessments. Any variations commissioned by the OfS will normally be consistent with the arrangements for evidence-gathering set out in paragraphs 13-19, 36-42 and 56-61 of Annex A of the phase two consultation. This means that from time to time the OfS may ask the DQB to vary its approach and the assessment method needs to allow for this.

Standards Investigation (SI)

The OfS may, separately from or alongside a QI, commission the DQB to carry out an SI.

For SI, the OfS will commission the DQB to carry out an investigation where there is a particular concern or concerns about a registered provider in relation to matters relevant to the standards condition (B5). The output of SI may be used by the OfS to inform a decision about a breach of that condition (and any appropriate enforcement of that breach, or consequences that may flow from it), or a judgement about whether there is increased risk of a future breach (and whether regulatory intervention, such as a specific ongoing condition, or additional monitoring requirements, are necessary).¹²

SI may take the form of an assessment of all of a provider's courses in relation to condition B5 or a sub-set of those courses.

The outputs from SI need to enable the OfS to regulate in a way consistent with the regulatory framework: that is in a way that is proportionate, principles-based, risk-based and outcomes focused, and to enable it to deliver its four primary regulatory objectives.¹³

The requirements for SI are set out below. The requirements for SI, including requirements relating to judgements, may in operation be varied by the OfS in order to meet its needs for individual provider assessments. Any variations commissioned by the OfS will normally be consistent with sections 23(2)(a) or 23(1) of HERA and the arrangements set out in paragraphs 9-14 of Annex B of the phase two consultation. This means that from time to time the OfS may ask the DQB to vary its approach and the assessment method needs to allow for this.

Requirements for QI

The report for QI should set out the **Finding** in relation to the Issue and the reasons for that finding.

Notes:

¹² See proposed condition B5 and associated guidance, Consultation on Quality and Standards Conditions, Annex B.

¹³ Regulatory Framework paragraphs 10(g), 8, 41(a) and 3 (<https://www.officeforstudents.org.uk/advice-and-guidance/regulation/the-regulatory-framework-for-higher-education-in-england/>).

- a) Findings need to set out information in a way that will enable the OfS to: decide whether there is a breach of a condition, decide the risk of a future breach of a condition and/or make a decision regarding any proportionate regulatory enforcement action or other intervention. To enable their use for this purpose, the Findings must show regard to relevant conditions of registration or parts of conditions of registration in the way they respond to the Issue, but negative findings should still be presented where assessors are not clear about the link to any particular condition of registration.¹⁴ Any material developed by the DQB to train reviewers and assist them to set out Findings must embed this approach.
- b) The Finding should include any other information that raises concerns about the provider's compliance with any of OfS's quality and standards conditions (B1, B2, B4 and B5) that may be identified by the assessors in the course of the QI, even where that information is not relevant to the original Issue.
- c) Findings need to be based on careful and clear evaluation of relevant evidence presented by the provider, so that the reports can be relied on by the OfS to reach legally sound, rational and proportionate regulatory decisions in relation to compliance with conditions of registration, assessment of regulatory risk and regulatory intervention.

Quality Investigation: method of assessment

The assessment that underpins the Findings, should be conducted in a way that is consistent with the OfS's regulatory approach.

This means that:

- The assessors apply a principles-based approach as set out in the regulatory framework. The assessment is focussed on the outcomes expressed in conditions B1, B2 and B4, rather than the processes a provider follows to deliver those outcomes.
- As appropriate to the Issue raised, the assessment does not focus on the policies or process that a provider has in place but evidence of whether these are effective in delivering the outcomes expressed in ongoing conditions B1, B2, and B4.

The assessment method must also:

- Be capable of being deployed quickly and at short notice where that is needed by the OfS.
- Ensure that the assessment is conducted and the outputs are moderated in a way that will ensure appropriate comparability in Findings between different assessments
- Where appropriate to the Issue, provide opportunity for students from the provider under assessment to provide evidence, both in advance of the assessment and during the visit itself.

¹⁴ For example, the framing of Findings for an Issue relating to the currency of courses might be (with reference to the requirements set out in B1.3(a), B2.2(a) and B2.3(j)(i)) that 'the provider's courses are not high quality because the content is not up-to-date because the provider does not have sufficient staff'. Findings should not take the form of a judgement relating to compliance with a condition, e.g. 'the provider is in breach of condition B1 and B2 due to the content not being up-to-date and due to the provider not having sufficient staff'.

The assessment report should also

- Clearly set out the evidence that has been used to inform the Finding and set out how that evidence informs the Finding. The assessment report should also present an appropriate volume and range of evidence.
- Contain a clear justification of how the Finding has been reached, which is outcomes-focussed and based on the evidence assessed.
- Set out in summary how the assessment was conducted in order to evidence that due process has been followed.

The process for QI should also include the following provisions:

- An initial clarification phase where there can be dialogue between the DQB and the OfS about the OfS's Issue to identify and resolve any matters of clarity or scope to ensure the DQB is able to carry out the QI.
- Scope for the assessment team to seek clarification from the OfS during the QI engagement regarding how it should proceed if it has queries about the scope of its activities, or in the light of its provisional findings.

Requirements for Standards Investigation

An SI report should set out a judgement with reasons as to whether the provider does or does not:

ensure that, in respect of any relevant awards granted to students who complete a higher education course provided by, or on behalf of, the provider (whether or not the provider is the awarding body):

- a. any standards set are consistent with any applicable sector recognised standards; and
- b. awards are only granted to students whose knowledge and skills are consistent with any applicable sector recognised standards.

Notes:

- b) In reaching this Judgement, assessors should have regard only to the relevant condition and the guidance underpinning this as set out in the phase two consultation. Any material developed by the DQB to train assessors, or brief providers, or otherwise support the assessment process, must not be used as the basis for making judgements.
- c) A positive judgement should only be reached in relation to condition B5 if assessors are satisfied that all the requirements in condition B5 have been met.
- d) The evidence for the Judgement should be limited to (1) all relevant written course documentation (such as programme specifications, module outlines, marking schemes or equivalents) and (2) any relevant examples of student work. This evidence should be assessed only in relation to the relevant sector-recognised standards as set out in the regulatory framework. Other evidence (such as staff interviews, or the provider's systems and processes) is not required.

- e) Where the Judgement is that the requirement of the condition is satisfied, there then needs to be a further judgement **of the likelihood that:**

in respect of any **relevant awards** granted to students who complete a **higher education course** provided by, or on behalf of, the provider (whether or not the provider is the awarding body):

- a. any standards set are consistent with any applicable **sector-recognised standards**; and
- b. awards are only granted to students whose knowledge and skills are consistent with any applicable **sector-recognised standards**.

The purpose of this part of the assessment is to allow the OfS to decide whether any additional regulatory requirements, such as one or more specific ongoing conditions of registration or other additional monitoring requirements, should be imposed.

- f) The reasoning accompanying each Judgement should clearly explain the extent to which the requirements of condition have or have not been satisfied. This advice should set out clearly the scale of any concerns.
- g) All Judgements, reasons and advice need to be based on careful and clear evaluation of relevant evidence presented by the provider, so that the outputs can be relied on by the OfS to reach, and set out in writing for providers, legally sound, rational and proportionate regulatory decisions in relation to compliance with conditions of registration, assessment of future risk and regulatory intervention.

Standards investigation: method of assessment

The assessment that underpins the judgement and advice should be conducted in a way that is consistent with the OfS's regulatory approach.

This means that:

- a) Although the OfS has signalled that its approach to setting requirements for standards is more rules-based than its approach to requirements for quality, assessments for condition B5 must demonstrate an understanding that the sector-recognised standards are criteria that might be met in a wide variety of ways by different providers depending on their context and courses.
- b) The assessment focuses only on the relevant sector-recognised standards as set out in the regulatory framework. Other evidence (such as staff interviews, or the provider's systems and processes) is not required.

The assessment method must:

- c) Ensure that the assessment is conducted and the outputs are moderated in a way that will ensure appropriate comparability in judgements and advice between different assessments.
- d) Set out in the documentation for providers any requirements for the format in which information should be submitted before or during the assessment.

The assessment report should:

- e) Clearly set out the evidence that has been assessed to inform each judgement and present an appropriate volume and range of evidence.

- f) Contain a clear justification of how each judgement has been reached, which is outcomes-focussed and based on the evidence assessed.
- g) Set out in summary how the assessment was conducted so as to demonstrate that due process has been followed.

GENERAL REQUIREMENTS APPLICABLE TO ALL ASSESSMENT METHODS

Selection and training of assessors, composition of assessor teams and student assessors

For all assessment methods, assessments should be overseen by DQB staff and undertaken by assessors with relevant and appropriate expertise and experience.

Collectively each team of assessors must have sufficient expertise to ensure that the assessment is appropriately conducted. Appropriate collective expertise is likely to include at least one academic assessor qualified to doctoral-level, or with equivalent professional experience, and at least one academic assessor who holds, or has held in the previous 12 months, a current senior academic leadership role in a UK higher education provider. Each team must include at least one academic assessor drawn from the most selective providers.¹⁵ The purpose of defining the composition of assessor teams in this way is to ensure that the expectations and norms set by the assessment of quality and standards are set by experienced academics from the highest quality providers – this is necessary to deliver the OfS’s policy of identifying areas of weak quality and driving up quality across the sector.

In addition, each QA team should include a student assessor. QI teams should include a student assessor where this is requested by the OfS in the commission for the investigation. Student assessors will not be included in SA or SI engagements as these require academic judgement in relation to sector-recognised standards only.

Every assessor (including student assessors) must have successfully completed mandatory DQB training and continue to meet the relevant CPD requirements before being assigned to an engagement thereby ensuring that they have current regulatory and investigatory knowledge in addition to their professional knowledge and experience.

Additional specialist assessors

Assessment teams should normally include all the specialist expertise required to complete the assessment – this must include academic expertise in a particular subject. In some circumstances it may be necessary for an assessment team to be augmented to include additional specialist assessors qualified to comment on specific matters relating to additional academic subjects, organisational structures and practices, or other issues on which the assessment team determines it requires specialist input.

Specialist assessors should be sufficiently to effectively discharge their role in assessments.

¹⁵ The OfS will supply the QAA with a list of the providers that fall into this category.

<p>Policies relating to the use / non-use of person visits as part of an assessment</p> <p>A visit is required for all QA (unless the OfS decides otherwise) although some elements of the assessment may take place remotely if agreed in advance by the OfS. For QA, the documentation for providers should include a written procedure that sets out the functions served by in person visits for those assessments to inform decisions about whether some elements of an assessment could be conducted remotely and to ensure that any remote elements maintain the rigour of the assessment process.</p> <p>Any variation to the normal approach and content of a visit (such as a virtual visit) should be agreed with OfS before communication to the provider about each engagement.</p> <p>The inclusion of visits for SA, QI or SI will be determined by OfS on a commission by commission basis.</p>
<p>Sampling of evidence</p> <p>For all assessment methods the DQB should set out a clear approach to selecting a sample of evidence that will support the robustness of judgements, findings and advice under the different assessment methods.</p>
<p>Format of reports</p> <p>The OfS expects the format of reports to be as concise as possible and to avoid unnecessary repetition.</p> <p>Listing of evidence should be avoided in the main text and instead footnotes should be used to reference evidence used to support judgements / findings, and the full name of evidence included in an annex.</p>
<p>Clear timescales for assessments</p> <p>The documentation for each assessment method must include a clear timeline from the point of commission by OfS to submission of the report by the DQB to the OfS, including key intermediate stages.</p> <p>The OfS expects the current timelines to be reduced significantly</p>
<p>Minimising burden on providers</p> <p>The OfS must have regard to being proportionate, efficient, effective and economic in its regulatory activities¹⁶, and is committed to minimising the regulatory burden on providers.</p>

¹⁶ See HERA section 2 (1) (f) and (g).

The approach to evidence-gathering used for each assessment method should minimise the regulatory burden on providers, while ensuring sufficient evidence is gathered to make robust decisions. This means that evidence gathered from providers must be relevant to the assessment in hand and focused. Any pro forma information requests for particular assessment methods should reflect this in their approach.

Requirements for documentary evidence should draw from evidence already available to the provider where possible. Information requests from assessors to providers should be restricted to evidence necessary to form judgements.

EQAR Substantive Change Report

Reference #	22447649
Status	Complete
Login Username	r.pelik.2@qaa.ac.uk
Login Email	r.pelik.2@qaa.ac.uk
Agency #1	Quality Assurance Agency for Higher Education
Agency acronym	QAA
Expiry date #1	30/06/2023
Contact #1	Piers Wall
Phone #1	+44 7789 938385
Email #1	p.wall@qaa.ac.uk
Other organisations?	No
A. Has the organisational identity of the registered agency changed?	No
B. Has the organisational structure changed?	No
C. Changes in EQA activities	4. Not applicable, no new activities/no changes
D. Activity outside the scope of the ESG	Yes
Context	<p>QE-TNE is a thematic, enhancement-based method. It is an innovative high-value scheme with clear benefits for its members, it meets the interests of host countries and the differing requirements of the UK's home nations. It is fit for its purpose and aligned with the spirit and essential purpose of the ESG although, due to its nature, it does not fully meet all standards.</p> <p>QE-TNE focuses on quality enhancement and thematic reporting thus it is external quality</p>

activity not external quality assurance.

- The focus is UK TNE in a selected host country (it is neither institutional nor programme review)
- It is voluntary and fees-based
- TNE arrangements are selected for evaluation visits (with findings not judgements) alongside institution-led case studies
- There is a range of published outputs including the Overview Report
- It is flexible and responsive to the context of the host nation
- It complements UK quality assurance and does not duplicate it
- Thematic analysis is built into the whole approach
- The benefits go beyond the country or arrangement being selected – **and beyond the UK.**

QE-TNE has five stages (handbook attached)

Stage 1: Creating a schedule of country-based activity involves analysing data and looking at policy priorities to assess potential host nations against the criteria set out in the method handbook.

Stage 2: Relationship building and liaison with the host country **to:**

- Build trust and relationships, share...

... intelligence and insights

- Explore any challenges for TNE
- Prepare for in-country activity: the provider and sample selection (including shared activity); meetings with a wider group of UK TNE students; potential meetings with UK TNE graduates, employers or professional bodies linked to UK TNE provision

QE-TNE is a collaborative process throughout and looks to mutual benefits between the UK and host nation and for UK TNE providers in the scheme overall.

Stage 3: Preparation and planning in the UK
UK providers are surveyed; case studies selected; the visit sample enables the review team to explore TNE delivery and understand what the nature of the student experience is like in practice, to look at how providers work with their partners and seek to enhance provision.

Stage 4: Evaluation activity

The sample of TNE arrangements, like any other method, involves an evidenced self-evaluation, expert peers (including a student), a site visit and reporting. The review team identify common matters across providers to feed into wider thematic reporting, identifying: what are the distinctive features of UK TNE in this country? **what is working well? where are there areas for development? what are the collective challenges?**

Stage 5: Production of reports, publications and wider outcomes

The country-related outputs are: the Overview Report (the publicly available report of UK TNE activity within the selected country); a short report on each TNE arrangement; ...

...institution-led case studies; student experience report; Country Guide; and a range of dissemination events, such as webinars. This range of outputs across three countries each year enables all the material to be interrogated to produce a flow of thematic reports and

resources.

File #1	qe-tne-handbook-21_1.pdf (7.80 MB)
Submit form?	I am ready to submit the change report form
Last Update	2022-05-16 15:13:34
Start Time	2022-05-16 15:06:00
Finish Time	2022-05-16 15:13:34
IP	78.150.189.52
Browser	IE
Device	Desktop
Referrer	N/A

EQAR Substantive Change Report

Reference #	22531649
Status	Complete
Agency #1	Quality Assurance Agency for Higher Education
Agency acronym	QAA
Expiry date #1	30/06/2023
Contact #1	Alastair Delaney
Phone #1	+44 (0)1452 557091
Email #1	a.delaney@qaa.ac.uk
Other organisations?	No
A. Has the organisational identity of the registered agency changed?	No
B. Has the organisational structure changed?	No
C. Changes in EQA activities	3. One or several existing activities were discontinued
3. Discontinued EQA activity	
1	General Osteopathic Council (GOsC) Review
Context	Contract for this work has ended. QAA no longer does reviews on behalf of the GOsC.
D. Activity outside the scope of the ESG	No
Submit form?	I am ready to submit the change report form
Last Update	2022-05-26 16:46:32
Start Time	2022-05-26 16:42:55
Finish Time	2022-05-26 16:46:32
IP	151.230.240.244
Browser	Chrome

Device

Desktop

Referrer

<https://www.eqar.eu/>
