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Quality Assurance and Enhancement Policy

Policy no:	ASQ 1.1
Version no. & date:	Version 1.0 - November 2025
Author:	Director of Governance, Quality and Student Success
Last review date:	November 2025
Next review due:	November 2027
Responsible Committee:	Quality of Education Committee
Approved by & date:	November 2025
External reference points:	OfS Condition B, QAA Quality Code
Linked policies:	ASQ 1.2 Partnership Review & Development Policy; ASQ 1.4 Learning Teaching Strategy; ASQ 1.8 Academic Support and Improvement Policy; ASQ 1.9 Assessment & Feedback Policy; ASQ 1.6 Academic Misconduct and Integrity Policy; GA 3.2 Risk Management Framework; GA 3.3 CAGF
Audience:	Staff

1. Purpose

The purpose of this policy is to articulate the principles, structures and processes through which the College assures, monitors and enhances the quality of higher education delivered under franchise arrangements with awarding body partners. The College does not design, validate or set the academic standards of the programmes it delivers. Those responsibilities rest entirely with the awarding bodies. However, the College is responsible for ensuring that its teaching, assessment administration, student support and wider academic environment meet the expectations set by its awarding body partners and by the Office for Students under Conditions B1 to B5.

The policy establishes a comprehensive and coherent framework that enables the College to evaluate performance across the academic cycle, identify and address risks to quality and student outcomes, and deliver consistent, high quality academic experiences across all campuses and delivery sites. This framework is operationalised through two core internal mechanisms:

1. **The Review and Enhancement Process**, a structured two stage academic monitoring cycle that evaluates performance in October, and July.
2. **The Operational Delivery Plan**, a live operational record that consolidates partner requirements, internal responsibilities, risk profiles, progress notes and evidence.

Together, these mechanisms ensure that the College undertakes both historic assurance and in year monitoring in a manner that is structured, evidence based and aligned with awarding body requirements, internal governance expectations and the regulatory framework.

2. Scope

This policy applies to all higher education provision delivered by the College under franchise arrangements. It applies across all campuses, academic departments, teaching staff, support teams and administrative functions engaged in higher education delivery.

The policy covers responsibilities relating to:

- teaching delivery and academic support

- assessment administration and compliance with partner regulations
- student engagement, attendance and progress monitoring
- operational delivery processes that underpin academic quality
- evaluation of the student academic experience
- monitoring of risks and early identification of issues
- enhancement planning and evaluation
- reporting to partner universities as required
- compliance with the Office for Students Conditions B1 to B5
- reporting to the College's governance bodies

The policy does not cover curriculum design, programme validation, programme modification or the setting of academic standards.

3. Definitions

3.1 Academic Standards

The level of achievement that students must attain to successfully complete a programme or module, as defined by the awarding body. Academic standards for franchised programmes are set by the partner university and are underpinned by sector recognised standards, including the Frameworks for Higher Education Qualifications (FHEQ) and relevant Subject Benchmark Statements.

Sector Recognised Standards

Nationally recognised expectations for academic levels and learning outcomes, including the FHEQ, Subject Benchmark Statements and the Characteristics Statements used by awarding bodies to secure comparability of academic standards across the UK higher education sector.

3.2 Quality Assurance

Activities that ensure academic delivery, support, assessment administration and learning environment provision meet awarding body and regulatory expectations.

3.3 Quality Enhancement

Systematic actions undertaken to improve academic delivery and the student experience, evaluated for impact.

3.4 Franchise Delivery

Provision delivered by the College on behalf of an awarding body, which retains responsibility for academic standards, curriculum, assessment design and external examining.

3.5 English Language Proficiency Requirements

The expectations set by awarding bodies and regulatory frameworks regarding students' ability to study and be assessed in English. UKCBC monitors English language proficiency through admission processes, diagnostic assessments (where required), ongoing academic support and module evaluation feedback.

This definition ensures explicit alignment to OfS **Condition B4(d).**

3.6 Graduate Outcomes

The progression of students into employment, further study or other positive destinations following completion of their studies. UKCBC monitors graduate outcomes where data is made available by awarding partners and uses these insights to inform programme evaluation and enhancement.

This definition supports alignment with OfS Condition B3.

3.7 Annualised Assurance

Retrospective evaluation of academic performance undertaken at the end of the academic cycle.

3.8 In Year Monitoring

Frequent and structured review of performance indicators within the academic year that enables early identification of risks.

3.9 Review and Enhancement Process (REP)

The College's overarching quality assurance framework, consisting of academic evaluation at two defined stages (October, and July) which draws on evidence from quality assurance tools and informs enhancement planning and academic assurance.

3.10 Operational Delivery Plan (ODP)

A live internal document for each franchised partnership that consolidates partner requirements, operational processes, risk assessments, monitoring activities, evidence sources and progress updates. The ODP records operational compliance and aligns with REP outputs.

3.11 Annual Monitoring and Review (AMR)

The formal annual self-evaluation undertaken at partnership level during the October REP window, based on REP evidence and aligned with OfS Conditions of Registration.

3.12 Institutional Annual Monitoring Report (Institutional AMR)

An aggregated institutional review synthesising all partnership AMRs to provide a college wide academic evaluation.

3.13 Institutional Quality Improvement Plan (QIP)

The institution wide enhancement plan derived from the Institutional AMR, monitored through the QoE and July REP windows.

4. Roles and Responsibilities

4.1 Policy Sponsor

The Director of Governance, Quality and Student Success sponsors the policy, ensuring alignment with regulatory expectations and overseeing the policy's implementation.

4.2 Policy Owner

The Director of Governance, Quality and Student Success (or delegated nominee) is responsible for maintaining, reviewing and updating the policy.

4.3 Programme Leads

Programme Leads complete REP evidence, maintain the Operational Delivery Plan, contribute to monitoring window reviews and implement actions arising from REP and ODP.

4.4 Quality of Education Committee

The Quality of Education Committee is the central academic quality forum of the College. It receives REP outputs and ODP updates at each monitoring window. It confirms risks, approves enhancement actions, evaluates progress and ensures that issues are escalated appropriately.

4.5 College Management Team

The College Management Team receives risks identified through REP and ODP, coordinates operational responses, allocates resources and ensures that issues impacting delivery are addressed.

4.6 Executive Leadership Team

The Executive Leadership Team receives academic assurance based on REP and ODP evidence, confirms institutional compliance with awarding body and regulatory requirements and ensures appropriate escalation to the Board.

4.7 Board of Governors

The Board receives the annual academic assurance report based on REP outcomes, ODP evidence and institutional performance data.

4.8 Academic and Support Staff

All staff involved in delivery and support participate in quality assurance and enhancement processes by providing accurate data, engaging with REP and ODP processes and implementing determined actions.

5. Policy Statement

UKCBC is committed to delivering high quality higher education that meets the expectations of awarding body partners, aligns with sector recognised standards and fulfils the Office for Students Conditions of Registration, particularly relating to academic experience (B1), support (B2), outcomes (B3), assessment (B4) and academic standards (B5).

As a teaching provider operating under franchise arrangements, UKCBC does not design the curriculum or determine academic standards; these remain the responsibility of the awarding body. However, UKCBC is fully accountable for:

- delivering programmes in ways that enable students to meet the intended learning outcomes at the appropriate FHEQ level
- ensuring that teaching, learning and assessment are academically challenging, coherent and professionally relevant
- providing high quality academic support and learning resources that enable all students to succeed, including targeted English language and academic skills support where required
- administering assessments rigorously, consistently and in full accordance with awarding body academic regulations
- maintaining the integrity, comparability and credibility of partner awards through robust moderation, operational compliance and the effective use of external examiner feedback
- monitoring and improving student outcomes, including continuation, completion, achievement and progression
- ensuring that student voice contributes meaningfully to enhancement at programme, partnership and institutional levels
- identifying, managing and escalating academic and operational risks
- providing clear, reliable and evidence based academic assurance to governance and awarding body partners

UKCBC maintains a culture of evidence-informed enhancement in which all staff contribute to improving the academic experience, student outcomes and delivery of partner awards. Continuous in year monitoring by the Quality of Education Group (QoE) and formal evaluation through the October and July Review and Enhancement Process (REP) ensure that quality and standards are upheld and enhanced systematically.

Through this policy and its associated processes, UKCBC confirms its commitment to providing students with:

- an academically robust and professionally relevant learning environment
- high quality teaching that challenges and supports progression

- fair, reliable and secure assessment
- timely, effective and accessible academic support
- opportunities to contribute to quality enhancement
- a learning experience that supports successful progression into employment or further study

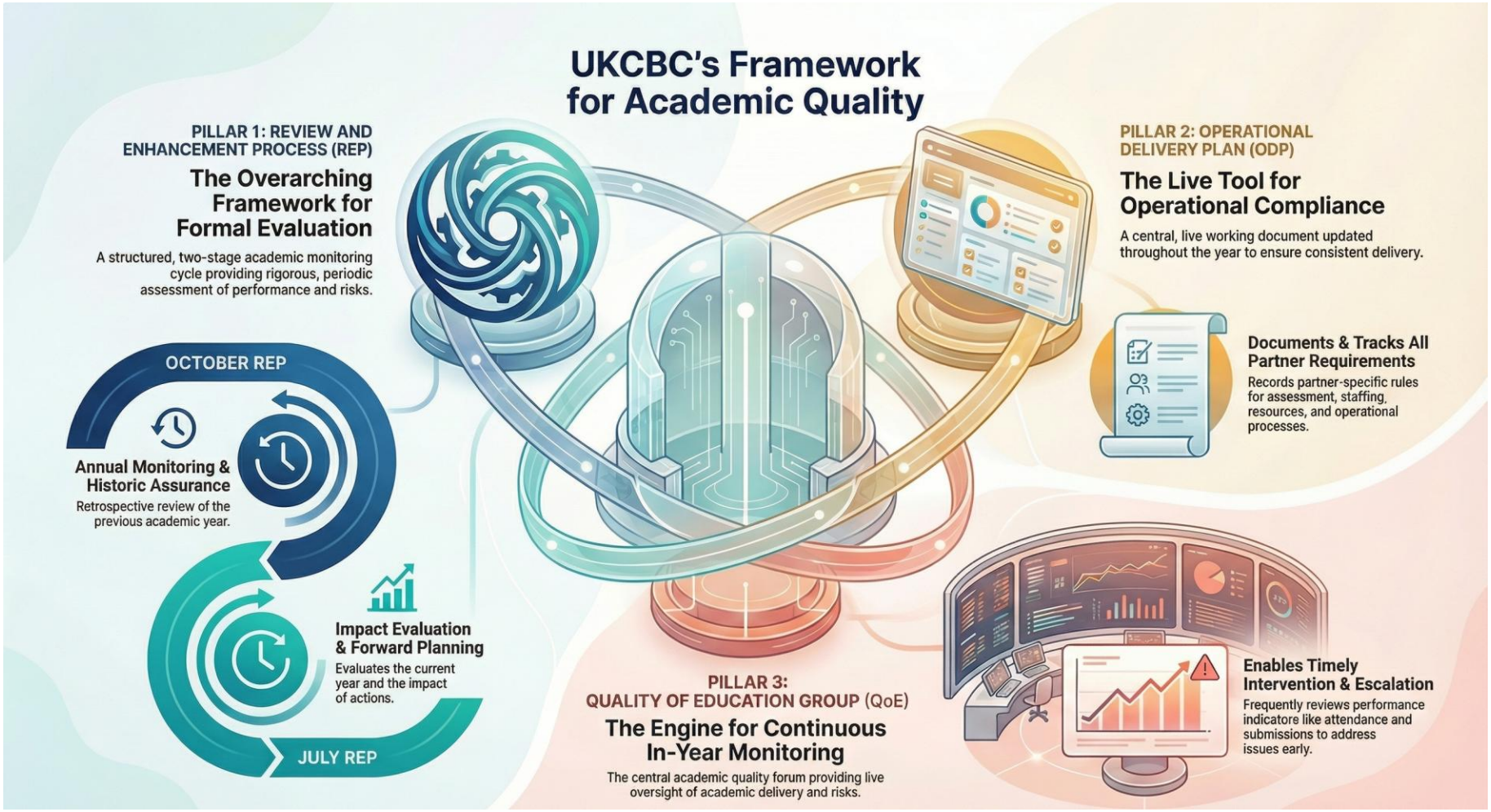
This policy underpins the College's approach to maintaining academic quality and standards across all higher education provision and ensures ongoing alignment with the expectations of awarding bodies, regulators and the wider sector.

6. Quality Assurance at UKCBC

The College maintains a structured, evidence based and proportionate set of procedures to evaluate, assure and enhance academic quality and standards across all franchised higher education provision. These procedures operate at three interconnected levels:

1. Continuous in year monitoring, led by the Quality of Education Group (QoE), ensuring that academic delivery, assessment administration, and student experience remain under active oversight throughout the academic cycle.
2. Formal academic evaluation, undertaken through the Review and Enhancement Process (REP) in October and July, providing rigorous, periodic assessment of performance, risks and enhancements.
3. Operational compliance management, governed through the Operational Delivery Plan (ODP), ensuring that all partner requirements and internal expectations are consistently met.

These procedures ensure full alignment with awarding body regulations, sector recognised standards (including the FHEQ and Subject Benchmark Statements) and the Office for Students Conditions of Registration (B1 to B5).


UKCBC's Framework for Academic Quality
PILLAR 1: REVIEW AND ENHANCEMENT PROCESS (REP)
The Overarching Framework for Formal Evaluation
A structured, two-stage academic monitoring cycle providing rigorous, periodic assessment of performance and risks.
OCTOBER REP
Annual Monitoring & Historic Assurance
Retrospective review of the previous academic year.
Impact Evaluation & Forward Planning
Evaluates the current year and the impact of actions.
JULY REP
PILLAR 2: OPERATIONAL DELIVERY PLAN (ODP)
The Live Tool for Operational Compliance
A central, live working document updated throughout the year to ensure consistent delivery.
Documents & Tracks All Partner Requirements
Records partner-specific rules for assessment, staffing, resources, and operational processes.
PILLAR 3: QUALITY OF EDUCATION GROUP (QoE)
The Engine for Continuous In-Year Monitoring
The central academic quality forum providing live oversight of academic delivery and risks.
Enables Timely Intervention & Escalation
Frequently reviews performance indicatore like attendance and submissions to address issues early.

6.1 Quality Assurance Framework

The College maintains a structured quality assurance framework that integrates academic monitoring, operational oversight, risk management and enhancement planning into a single system. This framework ensures that:

- continuous monitoring through QoE
- formal academic evaluation through REP
- operational oversight through the ODP
- risk management and enhancement planning
- formal annual reporting (AMR and Institutional AMR)

This integrated framework ensures that:

- delivery complies with awarding body partnership requirements
- assessment administration is robust, timely and consistently applied across sites
- the student academic experience is high quality, inclusive and responsive to student needs
- academic, operational and compliance risks are identified early and addressed proportionately
- enhancement activity is evidence based and evaluated for impact
- governance receives accurate, reliable and triangulated academic assurance

The framework comprises the following mechanisms:

6.1.1 Review and Enhancement Process (REP)

REP provides the structured evaluative pathway through which evidence from all Quality Assurance Tools is synthesised. The REP consists of two review windows:

October REP Annual Monitoring and Evaluation

The October window provides a retrospective academic review of the previous academic year. Activities include:

- completion of partnership level Annual Monitoring Reports (AMRs)
- evaluation of student outcomes (continuation, achievement and progression)
- analysis of student experience evidence from module and programme evaluations

- review of assessment administration, academic integrity and moderation
- review of teaching effectiveness and student challenge
- identification of curriculum coherence or delivery issues for escalation to awarding partners
- evaluation of resourcing, VLE readiness and academic support
- confirmation of baseline academic and operational risks
- development of partnership level and institutional enhancement actions

Outputs include:

- Update of the academic quality and standards risk register
- partnership level AMRs
- Institutional AMR
- Institutional Quality Improvement Plan (QIP)

Governance:

- QoE reviews and confirms the AMRs
- ELT receives the Institutional AMR for information
- The Board of Governors receives the Institutional AMR and QIP as the College's annual academic assurance statement

July REP Impact Evaluation and Forward Planning

The July window evaluates the academic year in progress and the impact of enhancement actions agreed during the October cycle.

Activities include:

- evaluation of impact of October QIP actions
- analysis of Semester One and Semester Two module evaluation results
- review of in year assessment performance and administrative compliance
- review of teaching observation outcomes and staff development needs
- review of support usage patterns and English language development needs
- evaluation of operational compliance and ODP progress

- identification of residual risks requiring action in the next academic cycle

Outputs include:

- updated QIP with impact statements
- evaluative summary of the academic year
- recommendations for enhancement to be incorporated into the next October cycle

Governance:

- QoE receives and confirms July outputs
- ELT is informed for institutional awareness
- Findings feed directly into the next AMR cycle

6.1.2 Continuous In-Year Monitoring (Quality of Education Group)

The Quality of Education Group (QoE) is responsible for live monitoring of academic risk, student experience and operational delivery across all campuses and partnerships. QoE meets monthly or termly to review:

- student engagement, attendance and continuation
- assessment submission patterns and academic integrity indicators
- teaching observation outcomes
- VLE readiness and learning resource availability
- student feedback and evaluation trends
- academic support usage patterns, including English language and study skills referrals
- compliance with awarding body requirements as recorded in the ODP
- operational staffing, resourcing and documentation accuracy
- any emerging risks requiring escalation or intervention

Where risks are identified, QoE ensures:

- timely intervention at programme or campus level
- targeted academic or pastoral support for students
- escalation to senior academic leadership where required
- appropriate updates to the Operational Delivery Plan

- recording of interventions for review during the October and July REP cycles

QoE does not duplicate the role of the REP. Instead, it provides the continuous assurance and intelligence that enables REP evaluations to be robust, triangulated and based on accurate in year evidence.

6.1.3 Operational Delivery Plan (ODP)

The ODP is the central operational compliance tool through which the College monitors activity aligned with partner university requirements and internal expectations. The ODP:

- records partner specific academic, operational and assessment requirements
- confirms FHEQ level and sector recognised standards expectations for each programme
- documents assessment scheduling, moderation expectations and feedback deadlines
- maintains evidence of documentation accuracy and VLE resource readiness
- records staff qualifications and teaching allocations
- incorporates English language support and diagnostic requirements
- includes risk indicators and progress reporting
- provides live evidence for QoE and REP evaluations

The ODP is a live document, updated throughout the year by Academic Leads, Programme Leads and the Quality Function.

6.1.4 Quality Assurance Tools within the Review and Enhancement Process Framework

The College deploys a suite of quality assurance tools which provide the evidence used during the Review and Enhancement Process. Each tool offers a distinct perspective on academic delivery and student experience. These tools operate within the Review and Enhancement Process framework and contribute to academic evaluation, risk identification and enhancement planning.

The tools include:

- Operational Delivery Plan
- module and programme evaluations
- teaching and learning observations
- student voice activities

- English Language Proficiency Monitoring (support referrals, risk indicators)
- attendance and engagement monitoring
- assessment administration checks
- moderation and feedback turnaround reviews
- academic integrity monitoring
- support and referral analysis
- documentation and resource audits
- external examiner feedback where shared

These tools are used at appropriate stages of the Review and Enhancement Process to ensure that academic decisions are based on triangulated evidence drawn from multiple sources.

6.1.5 Academic Risk Identification and Escalation

The Quality Assurance and Enhancement Framework operates as the College's primary evaluative mechanism for identifying risks to academic quality, standards and the student academic experience.

Evidence generated through the Review and Enhancement Process (REP), Annual Monitoring and Review (AMR), Operational Delivery Plans (ODPs) and the Quality Assurance Tools is systematically reviewed to identify issues that may represent academic risk.

Where REP evaluation identifies issues that are systemic, recurring, material in impact or indicative of a failure to meet awarding body or regulatory expectations, these issues must be escalated for consideration within the Academic Quality and Standards Risk Register, in accordance with the College's Risk Management Framework.

The Quality of Education Committee is responsible for confirming whether REP identified issues require formal risk registration, determining appropriate risk ownership and ensuring that enhancement actions and risk mitigation measures remain aligned.

Academic risks recorded on the Academic Quality and Standards Risk Register must be traceable to the underlying evaluative evidence, including relevant REP windows, AMR findings and Quality Improvement Plan actions.

6.1.6 Metrics Framework

The metrics framework supports the College in monitoring performance across franchises and campuses. Metrics provide key indicators of academic experience, assessment reliability and student outcomes.

Metrics include:

- continuation
- completion
- progression
- submission and assessment patterns
- attendance and engagement indicators
- attainment and module performance
- student satisfaction
- academic integrity trends
- student support referral patterns

Metrics are analysed as part of the Review and Enhancement Process at each monitoring window. This analysis informs intervention decisions and enhances programme and institutional performance evaluation.

6.1.7 Annual Monitoring and Review (AMR)

The AMR cycle forms a key component of the October REP window. Each awarding body partnership completes a partnership level AMR, which provides a comprehensive evaluation of the previous academic year, structured around OfS Conditions of Registration and awarding body requirements.

These partnership level AMRs are aggregated to produce the Institutional AMR, which synthesises performance trends, risks and priorities across all partnerships and delivery sites.

6.1.8 Institutional Quality Improvement Plan (QIP)

The Institutional QIP is created from the analysis undertaken during the October REP and captured within the Institutional AMR. It:

- outlines institution-wide enhancement priorities
- defines specific, measurable actions
- assigns ownership and accountability
- identifies indicators of success
- sets expected timescales and monitoring points
- Enhancement actions in the QIP are monitored:
- continuously by QoE through in year evidence
- formally at the July REP through impact evaluation

The July REP confirms the extent to which actions have had the intended impact and identifies residual or emerging actions for the next cycle.

6.1.9 Monitoring Windows

The October, and July monitoring windows provide a predictable annual structure for review, reflection and improvement across programmes and delivery sites. These windows ensure that:

- historic performance is reviewed and evaluated
- in year performance is monitored and acted upon
- year-end performance is evaluated for impact
- governance receives accurate and timely assurance

Together, REP, ODP, AMR, the Institutional AMR and the Institutional QIP ensure that the College maintains a rigorous, evidence based and improvement-oriented approach to academic quality and standards in franchised higher education delivery.

6.1.10 Governance of the Review and Enhancement Process

The Quality of Education Committee scrutinises Review and Enhancement Process outputs at each monitoring window. It confirms risks, approves actions and ensures escalation to CMT or ELT where required. The Review and Enhancement Process contributes evidence to the institutional enhancement review and to the annual academic assurance report to the Board of Governors.

6.1.11 Governance and Reporting

The Review and Enhancement Process (REP), the Annual Monitoring and Review (AMR) cycle, and the Operational Delivery Plan (ODP) together provide the structured, evidence-based foundation for academic assurance across UKCBC's higher education provision. These processes are specifically designed to ensure that academic delivery, assessment administration, and the student academic experience meet awarding body expectations and demonstrate continuous alignment with the Office for Students Conditions of Registration (B1 through B5).

To Align with OfS Condition B:

- Condition B1 (Academic Experience): The REP and ODP mechanisms verify that each course is up to date, provides sufficient educational challenge, is coherent, and is effectively delivered to ensure a high-quality academic experience.
- Condition B2 (Resources, Support, and Student Engagement): Monthly QoE oversight monitors that cohorts receive sufficient resources and academic support, and that student engagement is effective in supporting success both in and beyond higher education.
- Condition B3 (Student Outcomes): The AMR cycle utilizes the Metrics Framework to evaluate performance against OfS indicators for continuation, completion, and progression, identifying where context or credible improvement plans are required.
- Condition B4 (Assessment and Awards): The ODP tracks assessment validity, reliability, and the effective assessment of technical English proficiency, while ensuring robust records are maintained for regulatory scrutiny.
- Condition B5 (Sector-Recognised Standards): Governance routes ensure that all awards granted appropriately reflect applicable sector-recognised standards and the Frameworks for Higher Education Qualifications (FHEQ).

Risk Identification and Escalation:

- Evidence generated through REP, AMR, and ODP monitoring is used to identify strengths, enhancement priorities, and specific risks to academic quality and standards.

- Where evaluation identifies issues that are systemic, recurring, or material in impact–including any potential breach of OfS Condition B–these are reported and monitored in accordance with the College's Risk Management Framework.

- Identified issues are escalated for formal entry onto the Academic Quality and Standards Risk Register, ensuring clear ownership, proportionate mitigation, and effective oversight by the Quality of Education Committee and the Board of Governors

6.1.11.1 Programme and Partnership Level

During the October Review and Enhancement Process window, Programme Leads complete the partnership level Annual Monitoring Reports (AMRs). These AMRs provide the formal annual evaluation of each partnership's academic performance based on outcomes, assessment practices, student experience, compliance and risk.

Programme teams update their Operational Delivery Plans to reflect:

- enhancement actions arising from AMR
- revised risk ratings
- compliance findings
- priorities for the forthcoming cycle

This ensures integration of evaluative and operational processes.

6.1.11.2 Quality of Education Committee

The Quality of Education Committee is the authoritative academic governance body responsible for academic assurance. It receives:

- all partnership level AMRs
- the October, and July REP outputs
- updated Operational Delivery Plans for each partnership

QoE scrutinises the evidence, confirms academic risks, ensures that enhancement actions are appropriate and monitors compliance with awarding body and regulatory expectations. QoE confirms the academic assurances that will be presented to the Board of Governors.

6.1.11.3 Institutional Aggregation

The Quality Function aggregates partnership AMRs into the Institutional Annual Monitoring Report. This synthesis provides an institution level evaluation of:

- academic performance
- outcomes and continuation
- assessment reliability
- student experience
- partner compliance
- risk themes and comparability across partnerships

The Quality Function also prepares the Institutional Quality Improvement Plan, which sets institutional priorities and enhancement actions.

6.1.11.4 Executive Leadership Team

The Executive Leadership Team (ELT) receives the Institutional AMR and the Institutional QIP for information purposes. ELT uses this information to maintain institutional awareness of academic performance, aligning academic findings with:

- strategic planning
- resource considerations
- risk management
- institutional regulatory preparedness

6.1.11.5 Board of Governors

The Board of Governors receives:

- the Institutional Annual Monitoring Report
- the Institutional Quality Improvement Plan
- the corresponding academic assurance statement from the Quality of Education Committee

The Board uses these documents to provide high level oversight of academic quality and to satisfy itself that:

- the College meets awarding body expectations
- regulatory requirements under the Office for Students are met
- academic risks are identified and managed
- the institution takes appropriate steps to enhance the quality of its provision

The Board's assurance is grounded in the formal evaluation delivered through the Review and Enhancement Process and the Annual Monitoring and Review cycle.

6.1.12 Partner Alignment

The College delivers franchised provision in accordance with the requirements of its awarding body partners. Partner expectations for assessment, moderation, documentation, student support and operational delivery are recorded in the Operational Delivery Plan and reviewed through the Review and Enhancement Process. Evidence of partner compliance is maintained for monitoring, reporting and assurance purposes.

7. Monitoring and Review

Implementation of this policy is overseen through the Review and Enhancement Process and the Operational Delivery Plan, which together form the College's internal monitoring system. The Director of Governance, Quality and Student Success leads the review of this policy every two years, or earlier if required by changes in partner expectations, regulatory amendments or internal audit findings.

8. Linked Policies

- Academic Misconduct and Integrity Policy
- Academic Support and Improvement Policy
- Assessment and Feedback Policy
- Learning and Teaching Strategy
- Academic Appeals Policy
- Extenuating Circumstances Policy
- Programme Review and Development Procedure
- Policy Preparation and Version Control Guidance

- Review and Enhancement Procedure

9. External References

- Office for Students Conditions of Registration (especially Conditions B1 to B5)
- QAA Advice and Guidance on Monitoring and Evaluation
- QAA Advice and Guidance on Partnerships
- Partner university regulations and quality handbooks

APPENDIX A – QUALITY ASSURANCE TOOLS AND METRICS FRAMEWORK

A1. Purpose of the Tools and Metrics Framework

The purpose of this framework is to:

- define the evidence sources that underpin the Review and Enhancement Process
- provide a consistent approach to data collection and analysis
- ensure metrics and indicators are applied consistently across all sites and partnerships
- support early identification of risks to quality and student outcomes
- enable clear benchmarking and threshold setting
- align operational and academic monitoring through the ODP and REP

This framework applies to all higher education provision delivered by the College.

A2. Quality Assurance Tools

The following tools provide the evidence base for monitoring academic delivery, student experience and assessment administration. These tools are deployed in alignment with the Review and Enhancement Process windows in October, and July.

Each tool is described with:

- purpose
- evidence produced
- method of use within REP and ODP
- associated metrics (with placeholders for thresholds)

A2.1 Operational Delivery Plan

A2.1.1 Purpose

To document operational compliance with partner requirements and internal expectations.

Evidence Produced

- delivery structures

- compliance with partner regulations
- assessment scheduling and logistics
- documentation checks
- risk categorisation
- progress tracking

Use in REP

Provides operational evidence for academic evaluation, confirming that procedural risks or issues impact delivery.

Associated Metrics

- operational compliance score (placeholder)
- documentation accuracy rate (placeholder)
- timeliness of required submissions to partner (placeholder)

A2.2 Module and Programme Evaluations

Purpose

To capture student feedback on teaching, learning, resources, assessment and academic experience.

Evidence Produced

- student satisfaction themes
- module specific strengths and concerns
- suggestions for improvement

Use in REP

Reviewed in October and to identify trends and inform enhancement activity.

Associated Metrics

- satisfaction rate per module (placeholder)
- satisfaction rate per programme (placeholder)

- areas of recurring concern (qualitative metric)

A2.2.1 Module Evaluation Survey Administration Procedure

The Module Evaluation Survey is a core quality assurance tool used to gather structured student feedback on the academic experience at module level. It provides essential evidence for the Review and Enhancement Process, the Operational Delivery Plan, the Annual Monitoring Report and wider institutional quality assurance activity.

The survey evaluates four thematic areas aligned to sector expectations and is administered at the end of each module delivery period.

A. Survey Structure and Question Set

The survey consists of four themed question groups, each derived from nationally recognised student experience items adapted for module-level use. A final overall satisfaction question is included.

All items use a five-point Likert scale:

1. = Strongly disagree
2. = Disagree
3. = Neither agree nor disagree
4. = Agree
5. = Strongly agree

Theme 1: Clarity of teaching and explanation

1. The teaching staff for this module explained concepts and ideas clearly.
2. The teaching staff for this module presented material in a way that helped me to understand the subject.
3. The teaching staff for this module supported my learning through clear and accessible explanations.

Theme 2: Assessment clarity and effectiveness of feedback

1. The marking criteria for this module were clear and easy to understand.
2. The assessment feedback I received for this module helped me to improve my work.
3. The assessment feedback for this module helped me to understand how to prepare for future assessments.

Theme 3: Learning materials and resources

1. The learning materials for this module were suitable and sufficient for my studies.
2. The resources provided for this module supported my learning effectively.
3. The digital and online materials for this module were accessible and supported my study needs.

Theme 4: Opportunities to give feedback

1. I had appropriate opportunities to give feedback on this module.
2. The teaching staff for this module valued the feedback that students provided.
3. It was clear to me that student feedback on this module was listened to and acted on.

Final overall satisfaction question

Overall, I am satisfied with the quality of this module.

B. Administration Requirements

1. Timing of the survey

The survey must be administered at the following times:

- For Semester One modules: final teaching week or assessment week
- • For Semester Two modules: final teaching week or assessment week
- • For short modules / block delivery: final scheduled class session

2. Delivery method

The survey will be administered:

- electronically via a secure online survey tool
- anonymously
- using a consistent institutional template
- through a standardised link provided by the Quality Unit

Paper based versions must not be used unless specifically approved due to accessibility requirements.

3. Communication to students

Programme Leads must:

- ensure all students receive the link
- remind students during class time
- highlight the purpose of the survey
- explain how feedback informs improvements
- confirm anonymity

Partner institutions may additionally share communications where appropriate.

C. Response Processing and Scoring Method

1. Positive and negative scoring

Responses are categorised as follows:

- Positive: scores of 4 and 5
- Neutral: score of 3
- Negative: scores of 1 and 2

2. Calculation of satisfaction

Overall satisfaction is calculated as:

(Total Positive Responses ÷ Total Responses) × 100

This is calculated:

- per question
- per theme
- per module
- per programme (aggregated)

3. Qualitative comments

All free text comments must be:

- categorised thematically reviewed for emerging concerns
- reviewed for good practice
- combined across cohorts where required

D. Responsibilities

Programme Lead

- ensures students complete the survey
- reviews quantitative and qualitative results
- records findings within REP (October July windows)
- updates the ODP where issues relate to delivery or resources

Academic Lead

- reviews trends across modules and sites
- identifies teaching or curriculum implications
- supports action planning

Quality Unit

- administers the survey
- extracts data and provides analysis to Programme Leads
- ensures consistency across all programmes

- stores evaluation evidence centrally

E. Use of Survey Results in the Quality Framework

1. October REP (historic review)

- previous academic year module evaluations reviewed
- informs AMR commentary on teaching, resources and assessment
- supports identification of priority enhancements for the new year

2. July REP (end of year evaluation)

- Semester Two evaluations reviewed
- used to assess the impact of October and QoE actions
- identifies good practice for sharing across sites

3. ODP (Operational Delivery Plan) integration

Module evaluation findings inform:

- resource adequacy
- VLE readiness
- timetabling issues
- teaching support requirements
- staff development needs

These are recorded under B9.3.5 (Monitoring) and B9.3.6 (Learning Infrastructure).

4. AMR (Annual Monitoring Report) integration

Evaluations contribute to:

- the student experience section
- triangulation with outcomes and engagement data
- identification of recurring themes
- development of the partnership Quality Improvement Plan

F. Data Storage and Record Keeping

Module evaluation outputs must be:

- stored centrally in SharePoint
- version controlled
- accessible to Programme Leads, Academic Leads, Quality and DGQSS
- retained for a minimum of the partner's required period
- available for awarding body review, external examiner review and OfS scrutiny

A2.3 Teaching and Learning Observations

Purpose

To evaluate the quality of teaching practice, delivery and learning environment.

Evidence Produced

- observation ratings
- developmental feedback
- examples of effective practice
- areas for improvement

Use in REP

Supports triangulation of data, especially where student experience or outcomes indicate concern.

Associated Metrics

A2.3.1 Teaching Observation and Lesson Evaluation Tool

The Teaching Observation and Lesson Evaluation Tool provides a structured method for evaluating the quality of teaching, learning and assessment. It enables the College to:

- review the effectiveness of planned learning
- evaluate student engagement and educational challenge

- identify the extent to which teaching enables learners to make progress from their starting points
- assess whether sector-relevant skills are being embedded
- identify good practice and areas requiring development
- ensure alignment with awarding body expectations for teaching quality
- provide evidence for REP, ODP monitoring and staff development planning

Teaching observations are a key assurance mechanism supporting OfS Condition B1 and contribute directly to programme-level evaluation at the October and July REP windows.

A2.3.2 Observation Focus and Outcome Statement

Each observation must evaluate the presence of academic rigour and educational challenge through the following mandatory outcome statement: whether:

"The lesson inspired, challenged, and enabled all learners to maximise their potential progress from individual starting points."

Observers must select:

• **Yes** – the lesson met this expectation
• **No** – the lesson did not fully meet this expectation

This outcome informs programme level enhancement planning and staff development priorities.

A2.3.3 Evidence Areas

Where the overall outcome is met or not met, observers must identify the specific contributors or barriers using the following evidence categories:

1. Effective Planning for Learning

Evidence should focus on:

- clarity of intended learning outcomes
- sequencing of learning
- appropriateness of activities for the cohort
- preparation and organisation of resources

2. Positive Student Engagement (Inspiration)

Includes:

- student participation
- curiosity and interest
- challenge
- learner motivation and energy

3. Positive Management of Students and Safety

Includes:

- classroom management
- maintenance of a safe and respectful learning environment
- behaviour expectations

4. Individualised Learning

Includes:

- differentiation strategies
- adaptation of instruction
- support for students at risk
- extension for high achieving students

5. Assessment for Learning and Feedback

Includes:

- checking for understanding
- questioning strategies
- formative assessment
- clarity and quality of verbal feedback

6. Skill Development (Sector Area)

Includes:

- practical skill acquisition
- industry specific competencies
- employability skill development

7. Incorporation of Innovative Technology

Includes:

- appropriate use of digital tools
- inclusive practice through technology
- use of VLE and digital resources to enhance learning

Observers must tick all applicable categories.

A2.3.4 Observation Process

1. Scheduling and Notification

- Observations are scheduled annually for all teaching staff.
- Additional observations may be arranged for developmental or assurance purposes.
- Staff should be notified in advance unless part of an agreed unannounced cycle.

2. Observation Duration

- Standard observations should cover a complete teaching segment (typically 60–90 minutes).
- Shorter observations may be used for follow-up or sampling activities.

3. Conducting the Observation

Observers must:

- focus on learning rather than teaching performance alone
- take structured notes linked to the seven evidence categories
- avoid interrupting the lesson unless safeguarding concerns arise
- review planning documents where applicable

4. Professional Dialogue

A post observation discussion should take place within five working days to:

- explore the rationale behind planning and teaching decisions
- confirm strengths
- identify development points
- agree any required support

A2.3.5 Use of Evidence within REP and ODP

October REP

- previous year observation outcomes support historic evaluation
- informs AMR narrative on delivery quality

- helps identify staff development needs for the year

ODP Integration in ODP and REP

Information from observations is updated across the quality framework to ensure institutional oversight:

- ODP Tracking: Observation schedules (A5) and findings are recorded in the Operational Delivery Plan to monitor teaching capacity and staff qualifications.
- October REP (Annual Monitoring): Previous year outcomes support the narrative in the Annual Monitoring Report (AMR) regarding the quality of the academic experience.
- July REP (Impact Evaluation): Used to assess the impact of staff development actions and evaluate full-year teaching performance.

Where concerns exist, Programme Leads must log them in the ODP with associated actions.

Metric	Description	Placeholder Threshold
Observation coverage	Percentage of staff observed annually	___ percent
Lessons meeting the outcome statement	Proportion of observations rated "Yes"	___ percent
Strengths by evidence category	Frequency of ticks per category	Qualitative
Areas requiring development	Frequency of barriers identified	Qualitative
Follow up completion rate	Percentage of actions completed	___ percent

These metrics feed into programme level monitoring and institutional assurance.

A2.4 Student Voice Activities

Purpose

To gather direct feedback from students through structured mechanisms.

Evidence Produced

- representative meeting minutes
- focus group findings
- emerging student concerns
- positive feedback themes

Use in REP

Provides real time insight into the student experience, especially useful for QoE in year monitoring.

Associated Metrics

- number of student voice meetings (placeholder)
- recurring issues frequency (placeholder)

A2.5 Attendance and Engagement Monitoring

Purpose

To identify early indicators of academic risk.

Evidence Produced

- attendance data
- engagement data
- patterns of concern linked to progression risk

Use in REP

Feeds directly into risk assessment and early intervention planning.

Associated Metrics

- attendance percentage (placeholder)
- engagement score (placeholder)
- risk flagged student percentage (placeholder)

A2.6 Assessment Administration Checks

Purpose

To verify that assessment processes comply with partner requirements.

Evidence Produced

- submission rates
- punctuality of assessment release
- punctuality of feedback return
- moderation compliance

Use in REP

Supports assessment risk analysis in QoE and July.

Associated Metrics

- submission rate per assessment (placeholder)
- late submission rate (placeholder)
- feedback turnaround within required timeframe (placeholder)

A2.7 Moderation and Feedback Review

Purpose

To evaluate consistency and quality of marking and moderation.

Evidence Produced

- moderation records
- internal sampling
- feedback quality review
- partner feedback where available

Use in REP

Informs risk analysis on assessment integrity and comparability.

Associated Metrics

- moderation compliance rate (placeholder)
- feedback quality rating (placeholder)

A2.8 Academic Integrity Monitoring

Purpose

To identify patterns of academic misconduct and the effectiveness of preventive systems.

Evidence Produced

- case numbers
- case severity
- recurrence patterns

Use in REP

Contributes to risk evaluation, especially in QoE and July.

Associated Metrics

- incidence rate (placeholder)
- recurrence rate (placeholder)

A2.9 Student Support and Referral Analysis

Purpose

To monitor academic and pastoral support engagement.

Evidence Produced

- referral volumes
- reasons for referrals

- outcomes of support activity

Use in REP

Provides insight into student needs that may affect outcomes and progression.

Associated Metrics

- referral rate (placeholder)
- resolution time (placeholder)

A2.10 Documentation and Resource Audits

Purpose

To ensure compliance of programme documentation and learning resources.

Evidence Produced

• documentation quality checks

• VLE audit records

• resource availability and accuracy

Use in REP

Supports operational evaluation within the ODP.

Associated Metrics

- documentation compliance score (placeholder)
- VLE readiness percentage (placeholder)

A2.11 External Examiner Feedback (where shared)

Purpose

To integrate external academic insight into programme evaluation.

Evidence Produced

• external examiner comments

• recommendations

• comparative feedback

Use in REP

Provides context for performance trends and comparability.

Associated Metrics

- number of recommendations (placeholder)
- completion of actions (placeholder)

A2.12 B3. Metrics Thresholds and Escalation (Placeholders)

This section defines the **principles** for metric thresholds.

Thresholds will be determined collaboratively at a later stage, but the structural placeholders are:

- **Green:** within expected range
- **Amber:** below expected range and requiring monitoring
- **Red:** below threshold requiring intervention

Thresholds will apply at:

- module level
- programme level
- campus level
- partner level
- institutional level

Escalation routes are:

- Programme Lead
- Academic Lead
- Quality of Education Committee
- College Management Team
- Executive Leadership Team

APPENDIX B – OPERATIONAL DELIVERY PLAN TEMPLATE

B1 OPERATIONAL GUIDANCE FOR COMPLETING THE OPERATIONAL DELIVERY PLAN

The Operational Delivery Plan (ODP) is a core component of the College's internal quality assurance system. It documents how UKCBC meets the operational, procedural and compliance requirements set by each awarding body partner. The ODP ensures that academic delivery, assessment administration and student support processes are implemented consistently and in accordance with both partner expectations and internal UKCBC procedures.

This guidance sets out how to complete, update and maintain the ODP throughout the academic cycle.

It should be read before completing the ODP template.

B2 Purpose of the ODP

The ODP serves to:

- record partner specific operational requirements in one structured document
- ensure clarity on responsibilities, deadlines and evidence required
- support academic delivery by providing operational consistency across sites
- evidence compliance with awarding body expectations
- monitor progress against actions arising from REP and AMR
- identify and track risks to academic delivery or assessment administration
- align operational activity with the College's October, and July monitoring windows

The ODP is therefore both an assurance tool and a planning and coordination mechanism.

B3 Scope of the ODP

An ODP must be completed for each awarding body partnership, covering:

- all programmes delivered under that partnership
- all UKCBC campuses delivering those programmes
- all operational activities required for effective academic delivery

- all partner specific instructions that UKCBC must follow
- monitoring requirements for assessment, documentation, support, resources and teaching

A single ODP may cover multiple programmes where the partner requirements are shared.

B4 Status of the ODP

The ODP is a live working document. This means:

- it must be updated throughout the year as requirements change
- all changes must be version controlled
- it must be available for staff delivering the partnership
- it must reflect up to date compliance and operational conditions
- it must be presented at each Review and Enhancement Process (REP) window

The most recent version of the ODP must always be stored in the HE Quality SharePoint area.

B5. Who Completes and Maintains the ODP

B5.1 ODP Owner

The designated Course Director is responsible for maintaining the ODP.

B5.2 Contributors

The following roles must contribute relevant sections:

- Programme Leads and Module Tutors
- Campus Managers / Academic Leads
- Registry, Assessment and Administrative Teams
- Quality Function
- Student Support Team
- IT and Resource Leads (where relevant)

The ODP must reflect shared ownership, but responsibility for accuracy rests with the ODP Owner.

B5.3. When the ODP Must Be Updated

B5.3.1 At the start of the academic year

Populate all partner requirements, deadlines, documentation checks, assessment schedules and known risks.

B5.3.2 During the October REP window

Record findings from the AMR and REP October evaluations. Update risks and actions accordingly.

B5.3.3 During the July REP window

Update year end outcomes, assessment administration performance, and confirm final status of actions.

B5.3.4 Whenever partner requirements change

This includes:

- new assessment briefs
- changed moderation deadlines
- amended programme documentation
- updated partner regulations

B5.3.5 Following internal or external audit activity

Implement any required changes arising from audit findings.

B6 How to Complete Each Section of the ODP

The ODP template is divided into seven structured sections. The guidance below explains how each should be completed.

B6.1 Partnership Risk Assessment

This section identifies operational risks to the delivery of the partnership.

Ratings must be evidence based and linked to REP and AMR findings.

You should:

- review previous year performance
- consider staff turnover, assessment issues, student feedback, compliance concerns
- assign Low, Medium or High-risk ratings with clear rationale
- consult Quality Function where risk is unclear

B6.2 – Partner Requirements Mapping

This section requires the ODP Owner to map partner expectations to UKCBC's internal delivery processes.

You should:

- list all partner documentation and confirm version control
- describe how UKCBC implements each requirement
- identify areas where practice differs and record mitigating actions
- ensure all requirements are communicated to delivery staff

This section evidences UKCBC compliance with awarding body contract obligations.

B6.3 Ongoing Quality Monitoring Activities

This section links operational tasks directly to REP monitoring windows.

You should:

- list all required operational monitoring activities
- identify frequency, owners and evidence sources
- ensure alignment with October, and July REP expectations
- include monthly data monitoring (attendance, submissions, risks)
- maintain notes on issues requiring attention

This section ensures REP activity is supported by operational delivery.

B6.4 Programme Delivery and Learning Infrastructure

This section captures the operational foundations of delivery.

You should record:

- timetables
- staffing qualifications
- resource availability
- VLE readiness
- induction and communication processes

Evidence must be attached or referenced clearly.

B6.5 Assessment Process and Compliance

This section is critical for partner assurance.

You must:

- list all assessments, submission dates and moderation requirements
- confirm who is responsible at each stage
- monitor adherence to deadlines
- record issues with assessment release, marking or feedback
- ensure compliance with partner regulations

Assessment issues must be escalated promptly to the Quality Function and Campus Management.

B6.6 Action Tracking and Enhancement Log

This section links REP, AMR and operational findings.

You must:

- record each enhancement action
- state its origin (October REP, July REP, AMR, audit)
- assign ownership and deadlines
- monitor progress with evidence
- evaluate the impact at subsequent REP windows

Actions without progress must be escalated to QoE.

B6.7 Governance and Reporting Summary

This section evidences that:

- partnership level AMRs have been completed
- actions have been incorporated into the ODP
- risks have been discussed at QoE and escalated where needed

This ensures traceability between partnership delivery, monitoring and institutional assurance.

B6.8 Expectations for Evidence Storage

All evidence referenced in the ODP must be managed as follows to ensure compliance with internal governance, awarding body requirements, and the Office for Students (OfS) Conditions B4 and B5:

- Centralised Storage: All records must be stored securely in the designated HE Quality SharePoint area.
- Accessibility: Evidence must be immediately accessible to relevant academic staff, the Quality Function, and senior leadership.
- Version Control and Labelling: All documents must be version controlled and clearly labelled to ensure accuracy and traceability.
- Assessed Work Retention (The 5-Year Rule): In accordance with OfS expectations, the College must retain appropriate records of students' assessed work, including for students no longer registered on a course, for a period of five years after the end date of a course.
- Anonymisation and Data Integrity: Where possible, student personal data should be removed from retained records, provided this does not limit the ability to identify all work belonging to an individual student for regulatory scrutiny.

Availability for Scrutiny: Evidence must be made available for the following purposes:

- REP Reviews: To support periodic academic evaluation and impact assessment.
- Partner Audits: To satisfy awarding body contractual and quality assurance requirements.
- Internal or External Reviews: Including QAA oversight and institutional quality audits.

- Governance Reporting: To provide the Board of Governors with triangulated, evidence-based assurance.
- OfS Regulatory Scrutiny: To enable the OfS to assess ongoing compliance with Conditions B1–B5.

Note: The absence of required records of students' assessed work may lead the OfS to make negative inferences regarding compliance and may result in targeted regulatory action

B7. Approval and Publication Requirements

The completed ODP must be:

- reviewed by the Quality Function
- approved by the Director responsible for HE Quality
- noted at the Quality of Education Committee
- uploaded to the HE Quality SharePoint

Programme teams must have access to the ODP at all times.

B8. Key Principles for Effective Use of the ODP

1. Accuracy: record partner requirements exactly as stated.
2. Currency: update the ODP promptly when requirements change.
3. Transparency: ensure staff understand operational expectations.
4. Evidence based: support all entries through traceable documents.
5. Alignment: ensure ODP, REP and AMR remain consistent.
6. Proportionality: adopt enhanced monitoring where risk is higher.

B9 OPERATIONAL DELIVERY PLAN (ODP) TEMPLATE

B9.1 Cover Page

Field	Information Required
Partner University	
Partner School or Faculty	
Programme Title(s)	
Programme Code(s)	
Campus(es)	
ODP Period	**Academic Year ____**
ODP Owner	
Partner Key Contact(s)	
Initial Risk Category	**Low / Medium / High**
Date First Approved	

Date Last Updated	
Version Reference	
Approved By (DGQSS)	
Noted by QoE (Date)	

B9.2. Programme Risk Assessment

B9.2.1 Summary of Programme Risk

[Narrative summary of overall partnership delivery risk.]

F2.2 Detailed Risk Categorisation

Risk Factor	Evidence Considered	Rating	Notes
Staff stability		**Low / Medium / High**	
Assessment administration		**Low / Medium / High**	

Moderation compliance		**Low / Medium / High**	
Student feedback		**Low / Medium / High**	
Attendance and engagement		**Low / Medium / High**	
Programme outcomes		**Low / Medium / High**	
Documentation accuracy		**Low / Medium / High**	
Support referrals		**Low / Medium / High**	
Operational capacity (staffing, timetabling, rooms)		**Low / Medium / High**	
Partner communication responsiveness		**Low / Medium / High**	
Readiness for audits / quality visits		**Low / Medium / High**	

B9.3 Partner Requirements Mapping

B9.3.1 Documentation Reference Table

Name of Awarding Body or Organisation				
Area or Function	UKCBC	Partner	Shared	Notes
Use of external expertise in maintaining academic standards				
Course design and/or delivery				
Setting assessments				
First marking of student work				
Moderation or second marking of student work				
Giving feedback to students on their work				
Student recruitment				
Student admissions				
Widening access				
Selection or approval of teaching staff				
Facilities, learning resources and student support services				
Student engagement				
Responding to external examiners and other third parties				
Annual monitoring				
Student complaints and concerns				
Student appeals				
Managing relationships with other partner organisations (such as placement providers)				

B9.3.2 Communication and Escalation Pathways

Communication Type	UKCBC Lead	Partner Lead	Frequency	Method	Notes
Academic oversight			Monthly	Online/Meeting	
Operational admin			Weekly / Fortnightly	Email	
Assessment queries			As required	Email/Teams	
Urgent escalation			Immediate	Phone/Email	
Minutes and records			After each meeting	Shared drive	

B9.3.3 Schedule of Quality Visits (UKCBC to Partner)

Date	Purpose	Visiting Staff	Evidence Required	Follow Up Required

B9.3.4 Schedule of Visits from Partner to UKCBC

Date	Purpose	Visiting Staff	Evidence Required	Follow Up Required

B9.3.5 Ongoing Quality Monitoring Activities (Linked to REP Windows)

Ref	Activity	Purpose	Frequency	Data Source	Responsible Role	REP Window (Oct/Mar/Jul)	Notes
A1	Attendance monitoring	Identify at risk learners	Monthly	BI Dashboard	Programme Lead	All	
A2	Submission monitoring	Identify non submission	Monthly	BI Dashboard	Programme Lead	All	
A3	Risk dashboard review	Identify emerging issues	Monthly	BI Dashboard	Programme Lead	All	
A4	Module evaluation analysis	Student experience	Per module	Surveys	Academic Lead	Oct / Mar	
A5	Teaching observations	Enhance teaching quality	Annual	Observation form	Academic Lead	Oct/Mar	
A6	Support referral review	Identify students needing support	Monthly	Support logs	Programme Lead	All	
A7	VLE resource audit	Ensure CMA compliance	Start of year + random	VLE audit tool	Academic Lead	Oct	

A8	Documentation check	Ensure programme info accuracy	Start of year	Document repository	Programme Lead	Oct	
A9	Staff induction and approval	Compliance check	As required	HR / Training records	Campus Lead	As needed	
A10	Student representative election	Student engagement	Annual	Meeting minutes	Programme Lead	Oct	
A11	Quality meetings with partner	Relationship and oversight	Monthly	Minutes	ODP Owner	All	

B9.3.6 Programme Delivery and Learning Infrastructure

Requirement	**Partner Expectation**	**UKCBC Activity**	**Evidence Source**	**Responsible Role**	**Risk Notes**	**Progress**
Marketing accuracy			Marketing vetting	Marketing/ODP Owner		
Induction			Induction checklist	Programme Lead		
Timetabling			Timetable approval form	Campus Lead		

Learning resources			VLE/LRC logs	Academic Lead		
VLE readiness			VLE audit	Programme Lead		
Staff qualification compliance			Staff CVs, approvals	Quality Admin		

B9.4 Assessment Process and Compliance

B9.4.1 Assessment Mapping

Module	Component	Weighting	Planned Submission	Actual Submission	Moderation Requirement	Responsible Role	Risks	Actions

Add rows as required

B9.4.2 Assessment Compliance Checks

Activity	Deadline	Responsible Role	Evidence	Status	Notes
Module Title:[]					
Confirm assessment schedule					
Release of briefs					
Moderation submission					

Feedback turnaround					
Module Title:[]					
Confirm assessment schedule					
Release of briefs					
Moderation submission					
Feedback turnaround					
Module Title:[]					
Confirm assessment schedule					
Release of briefs					
Moderation submission					
Feedback turnaround					
Module Title: []					
Confirm assessment schedule					
Release of briefs					
Moderation submission					
Feedback turnaround					

Add rows as required

B9.4.3 Assessment Landscape and Key Dates

Intake	*Assessment Plan Upload*	*Resubmission Deadline*	*Exam Board*	*Graduation*	*Notes*

B9.5 Version Control

Version	Date	Summary of Changes	Updated By	Approved By	Notes

APPENDIX C – REVIEW AND ENHANCEMENT PROCESS (REP)

Part 1: Guidance for Completing the Review and Enhancement Process (REP)

C1. Statement of Intent

UKCBC is committed to the continuous review and enhancement of its franchised higher education provision. The College ensures that academic delivery, assessment administration and the student academic experience are monitored systematically and improved through evidence-based action planning.

The College's strategic commitment is to provide a high quality, industry relevant, digitally enhanced learning environment in which students develop the knowledge, skills and behaviours required for successful progression and employment.

This commitment is achieved through:

- partnering with awarding bodies to deliver academically strong and professionally relevant programmes,
- empowering students to contribute feedback and shape enhancements to their academic experience,
- fostering collaboration between staff and students as partners in learning,
- using evidence to improve teaching, learning, assessment and student support,
- preparing graduates for progression into employment or further study through high quality academic delivery and robust academic support systems.

The Review and Enhancement Process (REP) enables the College to measure performance against these aims, awarding body expectations and the requirements of the Office for Students Conditions of Registration.

C2. Introduction and Purpose

The Review and Enhancement Process (REP) provides the structured method through which UKCBC evaluates the quality of academic delivery, assessment administration and the student experience across all franchised higher education partnerships. REP aligns fully with:

- the Quality Assurance Agency's *Advice and Guidance*
- awarding body franchise arrangements
- OfS Conditions B1, B2 and B3 relating to academic experience, support and outcomes
- UKCBC's internal Operational Delivery Plan (ODP) model
- the Annual Monitoring and Review (AMR) cycle

The aims of the Review and Enhancement Process are:

- to ensure the quality of the student academic experience,
- to maintain and enhance the quality of teaching and learning,
- to review, evaluate and inform quality assurance and enhancement,
- to develop targeted, evidence-based improvement actions,
- to support the College in delivering high quality education in partnership with awarding bodies,
- to identify and disseminate good practice across delivery sites and partnerships.

The Quality of Education Committee is the authoritative academic body responsible for receiving, reviewing and confirming the outcomes of the REP cycle. The Committee reports academic assurance to the Board of Governors.

The REP process comprises two annual review points: October, and July, each supported by structured templates. These review points draw upon evidence already captured through the Operational Delivery Plan, the Quality Assurance Tools and the metrics framework.

During the October REP window, Programme Leads also complete the partnership-level Annual Monitoring Report (AMR), which provides the formal evaluation of the previous academic year.

C3. Structure of the Review and Enhancement Process (REP)

REP is an ongoing process of self-evaluation that uses the following evaluative questions:

- **Review:** How are we performing versus how well we should be performing?
- **Evidence:** What evidence informs our evaluation?
- **Planning:** What requires improvement?
- **Action:** What steps will be taken?

- **Monitoring:** Are the actions being taken and are they having the intended impact?

The following evidence sources are used throughout REP:

- metrics on continuation, achievement, progression and engagement,
- module and programme evaluation outcomes,
- teaching and learning observations,
- assessment administration and moderation records,
- student voice activities,
- operational evidence from the ODP,
- external examiner or partner feedback (where provided).

REP operates over the two monitoring windows as follows:

October Review (Historic Assurance & Annual Monitoring)

- completion of partnership level Annual Monitoring Reports
- full review of previous academic year
- review of outcomes, assessment processes and student experience
- confirmation of baseline risks and enhancement priorities

July Review (End of Year Evaluation)

- evaluation of second semester performance
- review of full year outcomes
- assessment of the impact of actions
- recommendations carried into the next October cycle

C4. Responsibilities for Completing the REP

C4.1Programme Leads

- complete the REP templates at each review point
- evaluate performance using the College's defined quality assurance tools and metrics
- propose enhancement actions and update the Operational Delivery Plan (ODP)

C4.2 Academic Leads / Campus Management

- support Programme Leads in evidence analysis and evaluation
- ensure that findings are consistent across delivery sites

C4.3 Quality Function

- provides data, templates and analytical guidance
- ensures consistency of evaluation across partnerships
- aggregates outputs into the Institutional AMR after the October window

C4.4 Quality of Education Committee

- receives and scrutinises REP outputs
- confirms academic risks and enhancement actions
- notes partnership AMRs and approves institutional assurance for the Board of Governors

ELT receives the Institutional AMR for information only, maintaining institutional awareness.

C5. Completing REP Templates and Presentations

The REP templates are evolving documents and must be completed progressively throughout the academic year, using in year data to build a full evaluative record.

Templates for **October, and July** contain structured prompts aligned with:

- awarding body requirements,
- the OfS regulatory framework,
- UKCBC's internal Operational Delivery Plan,
- the metrics framework,
- expectations for academic delivery and assessment administration.

Where available, relevant data will be populated centrally and provided to Programme Leads in advance of each review period.

Programme Leads must submit completed templates to the HE Administrator no later than five working days before the scheduled review meeting.

C6. Meetings and Review Panels

Each review window includes a formal review meeting, chaired by senior academic leadership and attended by Programme Leads and relevant staff.

Meetings are used to:

- validate findings
- challenge evaluative judgements
- confirm risks
- agree enhancement actions
- ensure alignment between REP and ODP

Presentations must be concise, and evidence-based, no longer than 15 minutes, with up to 10 minutes for questions.

All Programme Leads are expected to attend and contribute.

C7. Institutional Assurance

October REP outputs, including the completed partnership level AMRs, are aggregated by the Quality Function into the Institutional Annual Monitoring Report (Institutional AMR).

The Institutional AMR forms the evidence base for the Institutional Quality Improvement Plan (QIP).

The Institutional AMR and QIP are:

- received and confirmed by the Quality of Education Committee,
- provided to ELT for information,
- submitted to the Board of Governors as the College's annual academic assurance statement.

C7.1REP Templates for Operational Use

The following templates support the operational delivery of the Review and Enhancement Process.

They must be completed at each review point as part of the College's quality assurance and enhancement cycle.

Templates are organised as follows:

- C8 – October Review and Enhancement Template (AMR + QIP)
- C19 – July Review and Enhancement Template (End of Year Evaluation)

These templates should be used in conjunction with Sections C1–C7

C8 October Review and Enhancement Template [Annual Monitoring & Review (AMR) Document 2025-26]

C8 Institution Annual Monitoring & Review (AMR) Document 2025-26

Date of Self-evaluation:		**Review date**	
Completed by:			

Introduction

Purpose:

This self-evaluation & improvement planning template has been aligned to the Office for Students' (OfS) Conditions of Registration[1] Regulatory Framework[2] for higher education in England (November 2022) and provides a means to support academic partners evaluate the quality of their provision in readiness for any OfS Quality and Standards Review. The OfS requires all registered higher education providers' courses to meet a minimum set of requirements or conditions that relate to quality and standards, as outlined in the OfS' Regulatory Framework.

[1] https://www.officeforstudents.org.uk/advice-and-guidance/regulation/registration-with-the-ofs-a-guide/conditions-of-registration/
[2] https://www.officeforstudents.org.uk/media/1231efe3-e050-47b2-8e63-c6d99d95144f/regulatory_framework_2022.pdf

The creation of this evaluative template provides the means for the College to undertake a systematic internal review of provision so that:

- strengths and areas of good practice pertaining to the ongoing Conditions of Registration can be identified and disseminated with other programme areas and more widely within the College.
- any risk of a breach of one of more of the ongoing Conditions of Registration can be identified and decisive action taken before the risk crystallises into a breach and impacts on the quality of provision, on student outcomes and the student experience.

The template is aligned only to those conditions that are relevant to the College. A full list of the Conditions of Registration can be found at the back of this self-evaluation document.

Annual Monitoring & Review:

The process of self-evaluation can be a fundamental force in achieving improvement (EDT 2013). A self-evaluation is likely to be more effective when it is:

- Concise and succinct, capturing the key points and identifying the main sources of evidence to inform any self-evaluation
- Evaluative rather than descriptive and captures the impact of actions on quality, outcomes and student experience
- A working document which is regularly referred back to and updated as part of the academic Programme's ongoing self-evaluation processes
- Written in relation to the relevant regulatory framework requirements (in this case the OfS Conditions of Registration Regulatory Framework)
- Improvement focussed: linked to the improvement planning cycle, identifying areas for improvement and the specific actions that will help to bring about the desired improvements

In order to know how to improve, an academic Programme must be able to evaluate:

- where it is
- what it needs to improve and
- what indicators will suggest that it has achieved its aims

In undertaking the self-evaluation and improvement planning cycle, the following questions should be considered:

REVIEW: How are we doing Vs How well should we be doing?

EVIDENCE: How do we know and what is informing our self-evaluation?

PLANNING: What has been identified as requiring improvement?

ACTION: What steps will be taken?

MONITORING: Are we doing what we agreed and are the actions having the desired impact to bring about improvements in outcomes, quality and/or student experience?

This template provides a means to capture this process.

Using this template:

The process should be fully inclusive, drawing on internal and external evidence and input from all stakeholders to inform the self-evaluation and improvement plan.

Evaluations should be fully aligned to the Conditions of Registration Regulatory Framework for higher education which can be found here. For ease, each condition below includes the page references within the Regulatory Framework which should be referred to in full. In writing the self-evaluation & improvement planning document, academic partners are required to:

- Identify the sources of evidence which inform the evaluative commentary and also provide evidence of conditions being met. Sources of evidence should include both internal and external evidence. Examples of evidence might include, external examiner reports, student outcome data, National Student Survey (NSS) data etc. Links to the relevant OfS data dashboards can be found on the final page of this template.
- Write an evaluative commentary aligned to the Regulatory Framework, identifying strengths, areas for improvement and the impact of actions on quality, outcomes and student experience. Specific examples should be drawn upon to exemplify what has been written.
- RAG (red, amber, green) rate each category using the following drop-down categories:
    - Green: Condition met – good practice. This category should be used when there is evidence of good practice which is worthy of sharing / disseminating more widely within the College and/or sector.

- Amber: Condition met – no concerns.
- Red: Condition met – concerns. This category should be used, for example, to indicate a deterioration in quality, outcomes and student experience, inconsistencies and variation between and within programmes.
- Dark Red: Condition not met. The Regulatory Framework provides a non-exhaustive list of examples which might indicate a condition not being met.

In the majority of cases, the rating 'Condition met – no concerns' will be used.

- Develop an action plan. Actions should be prioritised for any Condition rated as 'Condition met – concerns' or 'Condition not met'.

Programmes of study within the review	*Please list programmes here:* •

Condition of Registration: A – Access and participation for students from all backgrounds	
Sources of evidence	*Please list sources of evidence here:* •

Condition	**Evaluation category**
Condition A1: Access and participation plan	
An Approved (fee cap) provider intending to charge fees above the basic amount to qualifying persons on qualifying courses must: 1. Have in force an access and participation plan approved by the OfS in accordance with the Higher Education and Research Act 2017 (HERA). 2. Take all reasonable steps to comply with the provisions of the plan.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for A1 here:	

Condition	**Evaluation category**
Condition A2: Access and participation statement	
An Approved provider or an Approved (fee cap) provider charging fees up to the basic amount to qualifying persons on qualifying courses must: 1. Publish an access and participation statement. 2. Update and re-publish this statement on an annual basis	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for A2 here:	

Condition of Registration: B - Quality, reliable standards and positive outcomes for all students	
Sources of evidence	*Please list sources of evidence here:* •

Condition	**Evaluation category**
Condition B1: Academic experience – pg.90-98	
The provider must ensure that the students registered on each higher education course receive a high-quality academic experience. For the purposes of this condition, a high-quality academic experience includes but is not limited to ensuring all of the following: a. each higher education **course** is **up-to-date**. b. each higher education **course** provides **educational challenge**; c. each higher education **course** is **coherent**; d. each higher education **course** is **effectively delivered**; and e. each higher education **course**, as appropriate to the subject matter of the course, requires students to **develop relevant skills**.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for B1 here:	
Condition	**Evaluation category**
Condition B2: Resources, support and student engagement – pg. 99-107	
The provider must take all reasonable steps to ensure: a. each **cohort of students** registered on each higher education course receives **resources and support** which are sufficient for the purpose of ensuring:	Choose an item.

i. a **high-quality academic experience** for those students; and ii. those students **succeed in and beyond** higher education; and b. effective **engagement** with each **cohort of students** which is sufficient for the purpose of ensuring: i. a **high-quality academic experience** for those students; and ii. those students **succeed in and beyond** higher education.	
Evaluative commentary	
Please insert evaluative commentary for B2 here:	
Condition	**Evaluation category**
Condition B3: Student outcomes – pg. 108-118	
The provider must deliver positive outcomes for students on its higher education courses. For the purposes of this condition, delivering positive outcomes means that either: a. in the OfS's judgement, the **outcome data** for each of the **indicators** and **split indicators** are at or above the **relevant numerical thresholds**; or b. to the extent that the provider does not have **outcome data** for each of the **indicators** and **split indicators** that are at or above the relevant **numerical thresholds**, the OfS otherwise judges that: i. the provider's **context** justifies the **outcome data**; and/or ii. this is because the OfS does not hold any data showing the provider's numerical performance against the **indicator or split indicator**; and/or iii. this is because the OfS does hold this data but the data refers to fewer than the **minimum number of students.**	Choose an item.

Evaluative commentary	
Please insert evaluative commentary for B3 here:	
Condition	**Evaluation category**
Condition B4: Assessment and awards – pg. 119-127	
The provider must ensure that: a. students are **assessed effectively**; b. each **assessment is valid** and **reliable**; c. **academic regulations** are designed to ensure that **relevant awards** are **credible**; d. subject to paragraph B4.3, in respect of each **higher education course**, **academic regulations** are designed to ensure the effective assessment of technical proficiency in the English language in a manner which appropriately reflects the level and content of the applicable **higher education course**; and e. **relevant awards** granted to students are **credible** at the point of being granted and when compared to those granted previously.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for B4 here:	
Condition	**Evaluation category**

Condition B5: Sector-recognised standards – pg. 128-132	
The provider must 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 appropriately reflect any applicable **sector-recognised standards**; and b. awards are only granted to students whose knowledge and skills appropriately reflect any applicable **sector-recognised standards**	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for B5 here:	

Condition of Registration: C. Protecting the interests of all students	
Sources of evidence	*Please list sources of evidence here:* •
Condition	**Evaluation category**
Condition C1: Guidance on consumer protection law – pg. 142-144	
The provider must demonstrate that in developing and implementing its policies, procedures and terms and conditions, it has given due regard to relevant guidance about how to comply with consumer protection law	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for C1 here:	

Condition	Evaluation category
Condition C2: Student complaints scheme – pg. 145-146	
The provider must: 1. Co-operate with the requirements of the student complaints scheme run by the Office of the Independent Adjudicator for Higher Education, including the subscription requirements. 2. Make students aware of their ability to use the scheme.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for C2 here:	

Condition	Evaluation category
Condition C3: Student protection plan	
The provider must: 3. Have in force and publish a student protection plan which has been approved by the OfS as appropriate for its assessment of the regulatory risk presented by the provider and for the risk to continuation of study of all of its students. 4. Take all reasonable steps to implement the provisions of the plan if the events set out in the plan take place. 5. Inform the OfS of events, except for the closure of an individual course, that require the implementation of the provisions of the plan.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for C3 here:	

Condition	Evaluation category
Condition C4: Student protection directions	
The provider must comply with any Student Protection Direction in circumstances where the OfS reasonably considers that there is a material risk that the provider will or will be required by the operation of law to, fully or substantially cease the provision of higher education in England ('Market Exit Risk'). 2. A Student Protection Direction may be varied or revoked (wholly or in part) by express provision in a subsequent Student Protection Direction issued by the OfS in	Choose an item.

accordance with this condition of registration, and the OfS may otherwise revoke a Student Protection Direction by issuing a notice in writing to the provider. 3. A Student Protection Direction (or, as the case may be, part of a Student Protection Direction) will cease to have effect in accordance with the following provisions: a. in circumstances where a Student Protection Direction is varied or revoked (wholly or in part) by a subsequent Student Protection Direction, on and from the time and date that the subsequent Student Protection Direction takes effect; or b. in circumstances where a Student Protection Direction is revoked by a notice in writing, on and from the time and date specified in that notice in writing. 4. Where a Student Protection Direction ceases to have effect at any time (for any reason), that cessation does not in any way affect the ability of the OfS to investigate and/or take any form of regulatory or enforcement action in respect of any non-compliance with that Student Protection Direction (whether or not the non-compliance remains ongoing in nature) which took place during the period that the Student Protection Direction was in effect. 5. For the purposes of this condition: 'Student Protection Direction' means, irrespective of whether or not an approved student protection plan exists, a direction requiring a provider to: a. produce a special type of plan setting out Student Protection Measures for approval by the OfS and thereafter implementation by the provider (both in timescales specified in writing by the OfS) ("Market Exit Plan"); b. instead or in addition to a), put in place and/or implement any Student Protection Measures which are specified in writing by the OfS (in timescales specified in writing by the OfS); and c. do (or refrain from doing) such other consequential, ancillary or incidental actions, as the OfS considers is reasonably necessary, for ensuring that a Market Exit Plan or Student Protection Measures are put in place and/or implemented in an effective and expedient manner (including, but not limited to, compliance with general ongoing condition of registration C3, publishing information, deploying human resources, and consulting a registered insolvency practitioner on the feasibility of the Market Exit Plan (all in timescales specified in writing by the OfS)).	

Evaluative commentary
Please insert evaluative commentary for C4 here:

Condition of Registration: D. Financial sustainability	
Sources of evidence	*Please list sources of evidence here:* •

Condition	Evaluation category
Condition D: Financial viability and sustainability – pg. 155-161	
The provider must: 1. Be financially viable. 2. Be financially sustainable. 3. Have the necessary financial resources to provide and fully deliver the higher education courses as it has advertised and as it has contracted to deliver them. 4. Have the necessary financial resources to continue to comply with all conditions of its registration.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for D here:	

Condition of Registration: E. Good governance	
Sources of evidence	*Please list sources of evidence here:* •

Condition	Evaluation category

Condition E2: Management and governance – pp. 164-169	
The provider must have in place adequate and effective management and governance arrangements to: 1. Operate in accordance with its governing documents. 2. Deliver, in practice, the public interest governance principles that are applicable to it. 3. Provide and fully deliver the higher education courses advertised. 4. Continue to comply with all conditions of its registration.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for E2 here:	

Condition of Registration: F. Information for students	
Sources of evidence	*Please list sources of evidence here:* •
Condition	**Evaluation category**
Condition F1: Transparency information – pp. 176-177	
1. The provider must provide to the OfS, and publish, in the manner and form specified by the OfS, the transparency information set out in section 9 of HERA.	Choose an item.
Evaluative commentary	
Please insert evaluative commentary for F1 here:	
Condition	**Evaluation category**
Condition F4: Provision of information to the DDB – pp. 182	
1. For the purposes of the designated data body (DDB)'s duties under sections 64(1) and 65(1) of HERA, the provider must provide the DDB with such information as the DDB specifies at the time and in the manner and form specified by the DDB	Choose an item.
Evaluative commentary	

Please insert evaluative commentary for F4 here:

Programme level top-level evaluation summary	
Programmes with no concern	*Please list programmes here:* •
Programmes of concern	**Programme name** / **Please identify the Conditions of Registration which are of concern (e.g. B1)** *Add rows as necessary*

Improvement action plan					
Issue & Condition of Registration ref (e.g. B1)	**Action(s) to bring about improvements**	**Indicator(s) of success**	**Responsibility owner (initials)**	**Timescale**	**Monitoring (how, when, who?)**

Add rows as necessary

Office for Students (OfS) – Conditions of Registration Mapping

The following pages set out, in full the Conditions of Registration. As indicated on page 3, some conditions are more relevant at an institution level rather than at an academic Programme level.

Initial conditions: These are the conditions providers must meet to become registered. Most initial conditions apply to all providers.

Ongoing conditions: These are the conditions providers must meet to stay registered. Most conditions apply to all registered providers. Specific ongoing conditions are those that the OfS may decide, based on a risk assessment, to impose on an individual provider in order for it to register or to remain registered.

Condition	Initial or ongoing	Institution, Programme or NA
A – Access and participation for students from all backgrounds		
Condition A1: Access and participation plan An Approved (fee cap) provider intending to charge fees above the basic amount to qualifying persons on qualifying courses must: 1. Have in force an access and participation plan approved by the OfS in accordance with the Higher Education and Research Act 2017 (HERA). 2. Take all reasonable steps to comply with the provisions of the plan.	Both	Institution
Condition A2: Access and participation statement An Approved provider or an Approved (fee cap) provider charging fees up to the basic amount to qualifying persons on qualifying courses must: 1. Publish an access and participation statement. 2. Update and re-publish this statement on an annual basis	Both	NA
B - Quality, reliable standards and positive outcomes for all students		
Condition B1: Academic experience The provider must ensure that the students registered on each higher education course receive a high quality academic experience.	Ongoing	Programme

For the purposes of this condition, a high-quality academic experience includes but is not limited to ensuring all of the following: a. each higher education **course** is **up-to-date**. b. each higher education **course** provides **educational challenge**; c. each higher education **course** is **coherent**; d. each higher education **course** is **effectively delivered**; and e. each higher education **course**, as appropriate to the subject matter of the course, requires students to **develop relevant skills**.		
Condition B2: Resources, support and student engagement The provider must take all reasonable steps to ensure: a. each **cohort of students** registered on each higher education course receives **resources and support** which are sufficient for the purpose of ensuring: i. a **high-quality academic experience** for those students; and ii. those students **succeed in and beyond** higher education; and b. effective **engagement** with each **cohort of students** which is sufficient for the purpose of ensuring: i. a **high-quality academic experience** for those students; and ii. those students **succeed in and beyond** higher education.	Ongoing	Programme
Condition B3: Student outcomes The provider must deliver positive outcomes for students on its higher education courses. For the purposes of this condition, delivering positive outcomes means that either: a. in the OfS's judgement, the **outcome data** for each of the **indicators** and **split indicators** are at or above the **relevant numerical thresholds**; or b. to the extent that the provider does not have **outcome data** for each of the **indicators** and **split indicators** that are at or above the relevant **numerical thresholds**, the OfS otherwise judges that: i. the provider's **context** justifies the **outcome data**; and/or ii. this is because the OfS does not hold any data showing the provider's numerical performance against the **indicator or split indicator**; and/or iii. this is because the OfS does hold this data, but the data refers to fewer than the **minimum number of students.**	Both	Programme
Condition B4: Assessment and awards The provider must ensure that:	Ongoing	Programme

a. students are **assessed effectively**; b. each **assessment is valid** and **reliable**; c. **academic regulations** are designed to ensure that **relevant awards** are **credible**; d. subject to paragraph B4.3, in respect of each **higher education course**, **academic regulations** are designed to ensure the effective assessment of technical proficiency in the English language in a manner which appropriately reflects the level and content of the applicable **higher education course**; and e. **relevant awards** granted to students are **credible** at the point of being granted and when compared to those granted previously.		
Condition B5: Sector-recognised standards The provider must 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 appropriately reflect any applicable **sector-recognised standards**; and b. awards are only granted to students whose knowledge and skills appropriately reflect any applicable **sector-recognised standards**	Ongoing	Programme
Condition B6: Teaching Excellence Framework participation The provider must participate in the **Teaching Excellence Framework** (TEF).	Ongoing	Institution
Condition B7: Quality The new initial condition of registration B7 applies to applications for registration made on or after 1 May 2022. Transitional arrangements will apply to applications for registration which were live at any time between 1 March 2022 and 30 April 2022. The implementation arrangements are set out in this Notice. Summary: The provider must: 1. have credible plans that would enable the provider, if registered, to comply with conditions B1, B2 and B4 from the date of registration; and 2. have the capacity and resources necessary to deliver, in practice, those plans.	Initial	NA – only applicable for initial registration on or after 1 May 2022
Condition B8: Standards The new initial condition of registration B8 applies to applications for registration made on or after 1 May 2022. Transitional arrangements will apply to applications for registration which were live at any time between 1 March 2022 and 30 April 2022. The implementation arrangements are set out in this Notice.	Initial	NA – only applicable for initial registration on or after 1 May 2022

Summary: The provider must demonstrate, 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.		
C. Protecting the interests of all students		
Condition C1: Guidance on consumer protection law The provider must demonstrate that in developing and implementing its policies, procedures and terms and conditions, it has given due regard to relevant guidance about how to comply with consumer protection law	Both	Programme *(implementation of policies)*
Condition C2: Student complaints scheme The provider must: 1. Co-operate with the requirements of the student complaints scheme run by the Office of the Independent Adjudicator for Higher Education, including the subscription requirements. 2. Make students aware of their ability to use the scheme.	Ongoing	Programme
Condition C3: Student protection plan The provider must: 1. Have in force and publish a student protection plan which has been approved by the OfS as appropriate for its assessment of the regulatory risk presented by the provider and for the risk to continuation of study of all of its students. 2. Take all reasonable steps to implement the provisions of the plan if the events set out in the plan take place. 3. Inform the OfS of events, except for the closure of an individual course, that require the implementation of the provisions of the plan.	Both	Institution
Condition C4: student protection directions 1. The provider must comply with any Student Protection Direction in circumstances where the OfS reasonably considers that there is a material risk that the provider will or will be required by the operation of law to, fully or substantially cease the provision of higher education in England ('Market Exit Risk'). 2. A Student Protection Direction may be varied or revoked (wholly or in part) by express provision in a subsequent Student Protection Direction issued by the OfS in	Ongoing	Institution

accordance with this condition of registration, and the OfS may otherwise revoke a Student Protection Direction by issuing a notice in writing to the provider.

3. A Student Protection Direction (or, as the case may be, part of a Student Protection Direction) will cease to have effect in accordance with the following provisions:
   a. in circumstances where a Student Protection Direction is varied or revoked (wholly or in part) by a subsequent Student Protection Direction, on and from the time and date that the subsequent Student Protection Direction takes effect; or
   b. in circumstances where a Student Protection Direction is revoked by a notice in writing, on and from the time and date specified in that notice in writing.
4. Where a Student Protection Direction ceases to have effect at any time (for any reason), that cessation does not in any way affect the ability of the OfS to investigate and/or take any form of regulatory or enforcement action in respect of any non-compliance with that Student Protection Direction (whether or not the non-compliance remains ongoing in nature) which took place during the period that the Student Protection Direction was in effect.
5. For the purposes of this condition:
   'Student Protection Direction' means, irrespective of whether or not an approved student protection plan exists, a direction requiring a provider to:
   a. produce a special type of plan setting out Student Protection Measures for approval by the OfS and thereafter implementation by the provider (both in timescales specified in writing by the OfS) (“Market Exit Plan”);
   b. instead or in addition to a), put in place and/or implement any Student Protection Measures which are specified in writing by the OfS (in timescales specified in writing by the OfS); and
   c. do (or refrain from doing) such other consequential, ancillary or incidental actions, as the OfS considers is reasonably necessary, for ensuring that a Market Exit Plan or Student Protection Measures are put in place and/or implemented in an effective and expedient manner (including, but not limited to, compliance with general ongoing condition of registration C3, publishing information, deploying human resources, and consulting a registered insolvency practitioner on the feasibility of the Market Exit Plan (all in timescales specified in writing by the OfS)).

D. Financial sustainability		
Condition D: Financial viability and sustainability The provider must: 1. Be financially viable. 2. Be financially sustainable. 3. Have the necessary financial resources to provide and fully deliver the higher education courses as it has advertised and as it has contracted to deliver them. 4. Have the necessary financial resources to continue to comply with all conditions of its registration.	Both	Programme
E. Good governance		
Condition E1: Public interest governance The provider's governing documents must uphold the public interest governance principles that are applicable to the provider.	Both	Institution
Condition E2: Management and governance The provider must have in place adequate and effective management and governance arrangements to: 1. Operate in accordance with its governing documents. 2. Deliver, in practice, the public interest governance principles that are applicable to it. 3. Provide and fully deliver the higher education courses advertised. 4. Continue to comply with all conditions of its registration.	Both	Programme *(…Effective management arrangements)*
Condition E3: Accountability The governing body of a provider must: 1. Accept responsibility for the interactions between the provider and the OfS and its designated bodies. 2. Ensure the provider's compliance with all of its conditions of registration and with the OfS's accounts direction. 3. Nominate to the OfS a senior officer as the 'accountable officer' who has the responsibilities set out by the OfS for an accountable officer from time to time	Ongoing	Institution
Condition E4: Notification of changes to the Register The governing body of the provider must notify the OfS of any change of which it becomes aware which affects the accuracy of the information contained in the provider's entry in the Register.	Ongoing	Institution

Condition E5: Facilitation of electoral registration The provider must comply with guidance published by the OfS to facilitate, in co-operation with electoral registration officers, the electoral registration of students	Ongoing	Institution
F. Information for students		
Condition F1: Transparency information The provider must provide to the OfS, and publish, in the manner and form specified by the OfS, the transparency information set out in section 9 of HERA.	Ongoing	Programme
Condition F2: Student transfer arrangements The provider must provide to the OfS, and publish, information about its arrangements for a student to transfer.	Ongoing	Institution
Condition F3: Provision of information to the OfS For the purpose of assisting the OfS in performing any function, or exercising any power, conferred on the OfS under any legislation, the governing body of a provider must: 1. Provide the OfS, or a person nominated by the OfS, with such information as the OfS specifies at the time and in the manner and form specified. 2. Permit the OfS to verify or arrange for the independent verification by a person nominated by the OfS of such information as the OfS specifies at the time and in the manner specified and must notify the OfS of the outcome of any independent verification at the time and in the manner and form specified. 3. Take such steps as the OfS reasonably requests to co-operate with any monitoring or investigation by the OfS, in particular, but not limited to, providing explanations or making available documents to the OfS or a person nominated by it or making available members of staff to meet with the OfS or a person nominated by it.	Ongoing	Institution
Condition F4: Provision of information to the DDB For the purposes of the designated data body (DDB)'s duties under sections 64(1) and 65(1) of HERA, the provider must provide the DDB with such information as the DDB specifies at the time and in the manner and form specified by the DDB	Ongoing	Programme
G. Accountability for fees and funding		
Condition G1: Mandatory fee limit A provider in the Approved (fee cap) category must charge qualifying persons on qualifying courses fees that do not exceed the relevant fee limit determined by the provider's quality rating and its access and participation plan.	Ongoing	Institution
Condition G2: Compliance with terms and conditions of financial support	Ongoing	Institution

The provider must comply with any terms and conditions attached to financial support received from the OfS and UK Research and Innovation (UKRI) under sections 41(1) and/or 94(2) of HERA. A breach of such terms and conditions will be a breach of this condition of registration.		
Condition G3: Payment of OfS and designated body fees The provider must pay: 1. Its annual registration fee and other OfS fees in accordance with regulations made by the Secretary of State. 2. The fees charged by the designated bodies.	Ongoing	Institution

Office for Students (OfS) – Data Dashboard Links

The following external data dashboards should be used to support evaluate commentary, RAG rating and action planning.

Access and participation data dashboard - https://www.officeforstudents.org.uk/data-and-analysis/access-and-participation-data-dashboard/

National Student Survey data: provider-level - https://www.officeforstudents.org.uk/data-and-analysis/national-student-survey-data/provider-level-dashboard/

Student outcomes data dashboard - https://www.officeforstudents.org.uk/data-and-analysis/student-outcomes-data-dashboard/

C9. July Review and Enhancement Template

End of Year Evaluation

The July Review and Enhancement Process provides the end of year evaluation for each programme delivered under franchise arrangements. It builds upon the October review and allows programme teams to assess full year performance across outcomes, assessment administration, teaching and learning and the student academic experience.

The July review forms the final stage of the annual monitoring cycle before the next academic year begins. It allows programme teams to:

- evaluate full year continuation, achievement and module performance
- review Semester Two module evaluation outcomes and programme level student feedback
- assess the implementation and impact of actions initiated after the October Annual Monitoring

Review

- confirm whether intended enhancements have been realised or require continuation
- consolidate risks and recommendations to be carried forward into the next October review
- update the Operational Delivery Plan with end of year evidence

The July review is also the stage at which programme teams prepare the evaluative baseline for the next academic year. Themes, risks and enhancement priorities identified in July will form the early starting point for the next October REP and AMR cycle.

The July REP ensures that:

- programmes complete a full academic year of evaluation,
- enhancement actions have been evaluated for actual impact,
- any ongoing issues are clearly recorded for follow up,
- partnership requirements for annual reporting can be met consistently,

- institutional aggregation into the next Annual Monitoring Report is supported by complete data.

Programme Leads must complete the C9 July REP Template using full year evidence to support each evaluation.

SECTION 1 – PROGRAMME INFORMATION

Field	**Information Required**
Awarding Body	
Programme Title(s)	
Campus Location(s)	
Programme Lead	
Date of July REP Review	

SECTION 2 – YEAR END PERFORMANCE REVIEW

Metric	**Full Year Result**	**Benchmark (placeholder)**	**Variance**	**Commentary**
Continuation				
Achievement				
Progression (if available)				
Final module performance				

SECTION 3 – STUDENT EXPERIENCE (SEMESTER TWO AND ANNUAL)

Area	Evidence	Evaluation	Enhancements Required
Module evaluations (Sem 2)			
Programme evaluation (annual)			
Student voice			

SECTION 4 – TEACHING, LEARNING AND ASSESSMENT

Area	Evidence	Evaluation	Actions
Teaching observations			
Assessment cycle (full year)			
Moderation cycle (full year)			
Feedback quality			

SECTION 5 – ACTION PLAN IMPACT REVIEW

Action (from October QIP)	Evidence of Completion	Impact Achieved	Further Action Required

SECTION 6 – FINAL RISKS AND RECOMMENDATIONS

Risk	Rating	Rationale	Recommendation for Next Cycle