



This review method  
is ESG compliant

# Annual Monitoring for Educational Oversight

Handbook for Providers

September 2021

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### Compliance with the ESG

The Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG) provide the framework for internal and external quality assurance in the European Higher Education Area. QAA's review methods are compliant with these standards, as are the reports we publish. More information is available on our website.

## Section 1: Purpose of the monitoring process

1.1 This guidance note applies to alternative providers ineligible to register with the Office for Students and undergoing annual monitoring with QAA for educational oversight purposes. This includes providers in Northern Ireland, Scotland and Wales and those in England who are not required to register with the Office for Students. Educational oversight consists of periodic reviews, an annual return and interim monitoring visits between reviews. This guidance supersedes the separate guidance documents for annual monitoring following each of the types of Higher Education Review.

1.2 The annual return and the desk-based analysis/monitoring visit are an integral part of the overall review process; they will serve as a short check on the provider's continuing management of academic standards and the management/improvement of the quality of learning opportunities. The annual return will be an opportunity to reflect upon developments made in the management of higher education provision by the provider since the previous review, annual return submission or monitoring visit, and for QAA to note any matters that will be of particular interest to the team that conducts the provider's next review or monitoring visit.

1.3 The monitoring process has a developmental aspect, in that it will also serve to support providers in working with the Quality Code.<sup>1</sup> The Quality Code gives all higher education providers a shared starting point for setting, describing and assuring the academic standards of their higher education awards and programmes, and assuring the quality of the learning opportunities they provide.

1.4 Material changes in circumstances, or complaints or concerns raised about a provider, may trigger an extended monitoring visit, partial or full review instead of a standard monitoring visit (see Sections 4 and 5).

1.5 This version of the handbook (2021-22) maintains the following main change:

The COVID-19 (Coronavirus) outbreak has had significant and widespread consequences for the higher education sector. Given the information we have now, for those providers requiring educational oversight, QAA may conduct online reviews where necessary. We will continue to review this position based on the latest government and public health advice until such time as we can return to in-person visits.

The method as set out in the review handbook, will be followed to complete the Higher Education Review online. The scope of the evidence considered and the nature of the judgements will remain the same. The online reviews will continue to be a peer review process which is open and transparent. Operational milestones will remain the same but there will be some adjustments to the operation of the review visit to recognise the online format.

## Section 2: Overview of the monitoring process

2.1 All providers should submit an annual return to QAA, normally 9-10 months after their previous review, monitoring visit or at a similar time to their previous annual return where a visit did not take place. QAA will notify providers of the date when the annual return should be submitted.

2.2 Based on the annual return, QAA will determine whether a monitoring visit, extended monitoring visit, partial or full review visit is necessary. Providers who make commendable progress in one monitoring visit or have a commended and all positive outcomes in a review may not need a monitoring visit the following year, unless there have been material changes or there are potential concerns. Providers who make acceptable progress in one monitoring visit

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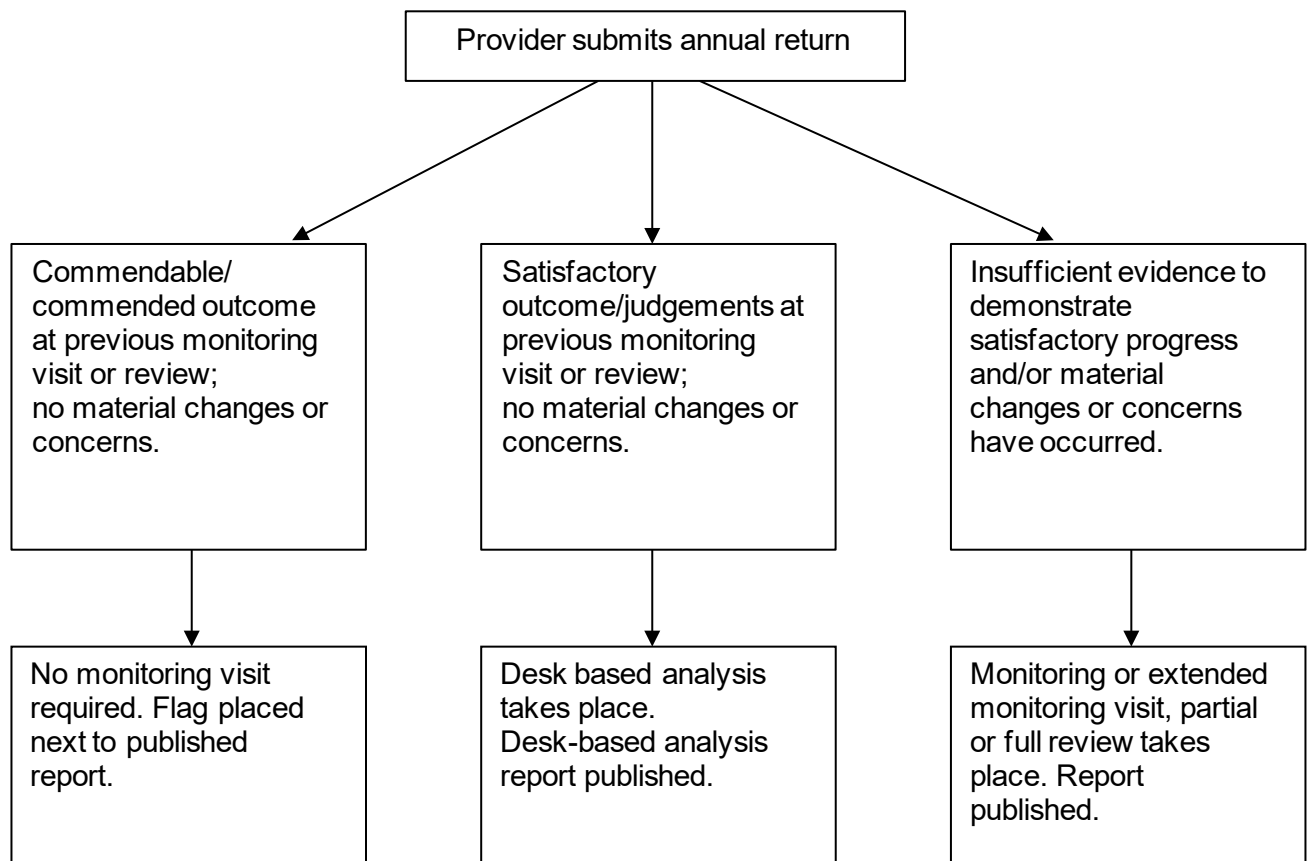
<sup>1</sup> Available at: [www.qaa.ac.uk/quality-code](http://www.qaa.ac.uk/quality-code)

or have 'meets expectations' judgements in their review and have not met any triggers in relation to material changes or potential concerns, may not be required to have a visit in the following year, but their evidence will be reviewed through a desk-based analysis.

2.3 The monitoring visit/desk-based analysis will result in a published annual monitoring report.<sup>2</sup> If a full review takes place, a new review report will be published.

2.4 The flow chart below outlines the monitoring visit process, which takes place each year between full review visits.

**Flow chart: the monitoring process**



2.5 The annual return will normally be submitted 9-10 months after the previous QAA visit. However, QAA should be notified within 28 days of any material changes of circumstances taking place (see Section 4 for details of material changes).

2.6 The annual return should be submitted electronically to QAA. Details will be given to providers on how to do this when they are advised of the date for submission.

2.7 The provider is required to update QAA on:

- current programmes offered, (credit) awarding bodies/organisations, 'sending' organisations or partner organisations, and student and staff numbers (as appropriate for the type of provider)
- student retention and achievement data for the last three years (as appropriate,

<sup>2</sup> Where providers do not have a monitoring visit because they had a 'commended' or 'commendable progress' outcome the previous year this will be flagged on the QAA website and a report is not published.

- so not required for short-term study abroad providers)
- any material changes since the last QAA visit (see Section 4)
- progress on implementing the action plan arising from the previous QAA review or monitoring reports and any subsequent developments
- the provider's internal quality monitoring processes, and how these are used to identify good practice and areas for improvement within the provider
- any specific thematic areas that are to be explored (these will be clarified on the annual return template)
- actions taken to address any recommendations in other recent external reports (such as awarding organisation or professional, statutory or regulatory body reports)
- where appropriate, progress in working with relevant external reference points to meet UK expectations for higher education (assessed in accordance with the applicable Core and Common practices of the Quality Code).

2.8 The annual return will take the form of a short briefing paper, which should be referenced to the supporting evidence (see Annex 2).

2.9 In the first year following a full review, the annual return should include how the provider is maintaining standards and quality, and report in detail on the effective implementation of the action plan in response to the review report. Providers should supply evidence that the actions have been implemented effectively and identify any enhancements to the student experience as a result of these actions.

2.10 Providers should maintain and publish an updated action plan on an ongoing basis, to ensure continual monitoring, review and enhancement of their higher education provision beyond the initial good practice, recommendations or affirmations from the last review.

2.11 In subsequent years, the desk-based analysis/monitoring visit will assess the effectiveness of the provider's actions to support continuous improvement and demonstrate good practice. The annual return is the main mechanism by which the provider can communicate to QAA that it is continuing to evaluate and enhance its management of academic standards and quality.

2.12 Providers should include a commentary on recruitment, retention and pass rates, over the period covered by the data return form, within the annual return document. Please note this is not applicable to short-term study abroad providers.

2.13 Where appropriate, providers should consider how their quality assurance policies and processes allow them to meet the UK expectations (as assessed through the associated applicable Core and Common practices in the Quality Code) for higher education. Providers should reflect on their use of relevant external reference points, including the Quality Code, in the annual return. The main focus for this detail should be on the applicable Core and Common practices.

2.14 Providers should engage students in their quality assurance processes. Students may be involved in implementing the action plan and/or in measuring the outcomes of actions taken.

2.15 The provider's annual return and supporting evidence will be read by a QAA Officer. Following this, providers with a commendable outcome in the previous year may not have a visit. Providers with acceptable progress in the previous year may have a desk-based analysis by a QAA Officer and reviewer. QAA may decide that a monitoring visit, extended monitoring visit, or full review is required if:

- there is evidence that material changes in circumstances have occurred or are shortly to occur (see Section 4)

- there is a lack of demonstrable progress against the published action plan
- QAA has received complaints about academic standards or quality that are being investigated through the Concerns Scheme (see Section 5)
- there are other serious concerns about the provider's ability to effectively maintain academic standards and/or manage and improve/enhance the quality of learning opportunities.

## **The desk-based analysis**

2.16 Where providers have previously received an 'acceptable progress' outcome from an annual monitoring visit or positive outcomes ('meets UK expectations') from a full review, a desk-based analysis of the annual return and associated evidence may be conducted by the QAA officer and reviewer. This may involve additional evidence requests to provide assurance of the provider's continued progress in monitoring, reviewing and enhancing its higher education provision. In cases where material changes have occurred, a monitoring visit (or extended visit, partial or full review) will be required. Providers are not able to have a desk-based analysis in consecutive years or a desk-based analysis following a 'no visit required' outcome.

## **The monitoring visit**

2.17 The standard monitoring visit will last for one day and will normally include meetings with the provider's staff and students. The monitoring team will normally consist of two people: a QAA officer and one reviewer. The team will produce an annual monitoring report that will comment on:

- any changes since the last review or annual monitoring visit
- the progress that has been made in the monitoring, review and improvement of its higher education provision as documented in an ongoing action plan, including reference to associated reports from awarding bodies/organisations (as appropriate)
- any other thematic areas of interest, for example, use of the Quality Code (where appropriate these will be advised on an annual basis) and student outcomes data (as appropriate)
- where appropriate, progress on working with external reference points to meet UK expectations for higher education
- any matters that should be followed up in the next monitoring/review visit
- a conclusion on the progress made in responding to the previous review, desk-based analysis or monitoring visit.

**Table 1: Indicative timeline for the monitoring process**

Time +/- visit in weeks)	Actions required	
-8 weeks	<b>Provider</b> submits electronic copies of the annual return and supporting evidence to QAA.	
-7 weeks	<p><b>QAA officer</b> (QAAO) reads the annual return and determines whether a desk-based analysis, a monitoring (or extended monitoring) visit will take place or whether a partial or full review is required.<sup>3</sup></p> <p>If the monitoring visit is to take place: <b>QAA administrator</b> confirms the monitoring team to the provider and confirms the date(s) of the visit. (If a partial or full review is required, the visit will be rescheduled, and the associated processes followed.)</p> <p>If a desk-based analysis is to be conducted in place of a monitoring visit, the <b>QAA administrator</b> also confirms the monitoring team to the provider.</p>	
	Desk-based analysis	Monitoring visit
-6 weeks	<p><b>Monitoring team</b> analyses the annual return and evidence. The team may ask for additional evidence/raise points for clarification before and/or during the desk-based analysis process.</p>	<b>Monitoring team</b> analyses the annual return and prepares its agenda for the monitoring visit.
-4 weeks		<b>QAA officer</b> agrees the arrangements for the visit with the provider. Provider to advise the associated awarding bodies/organisations as appropriate. The team may ask for additional evidence/raise points for clarification before and/or during the visit as required.
0 weeks		The (extended) monitoring visit takes place: <b>monitoring team</b> visits the provider, meets with staff and students, and considers any other evidence provided.
+1 week	<b>Monitoring team</b> drafts the desk-based analysis/monitoring report (and the QAA Officer completes the final edits).	
+2 weeks	<b>QAA officer</b> takes the report to a moderation meeting.	
+3 weeks	<b>QAA officer</b> sends the report to the provider and its awarding bodies/organisations for comment, as appropriate.	
+4 weeks	<b>Provider</b> returns comments on factual accuracy to QAA. Comments from awarding bodies/organisations should be incorporated into the provider's	
+5 weeks	<b>QAA officer</b> discusses the provider's comments with the reviewer and makes final amendments to the report.	
+6 weeks	<b>QAA</b> publishes the monitoring report on the QAA website. The report is shared with UK Visas and Immigration.	

<sup>3</sup> If a full review is required, the process will be followed as outlined in the review handbook. The review cycle will then begin again.

## Section 3: Outcomes of the process

3.1 Where there has been a monitoring visit, conclusions reflect the provider's continuing management of its responsibilities for academic standards and the management/improvement of the quality of learning opportunities. An overall conclusion will be graded as follows:

- the provider is making **commendable progress**
- the provider is making **acceptable progress**
- the provider is making **progress but further improvement is required**
- the provider is not making acceptable progress.

Guidance on how conclusions are reached is provided in Annex 1.

3.2 Where appropriate, providers should engage effectively with relevant external reference points, including the Quality Code, to manage their higher education. They should actively engage students in quality assurance processes. Monitoring teams will note instances where providers are not managing these responsibilities effectively, in addition to identifying areas where the provider has made commendable progress.

3.3 Academic standards and quality must be maintained in order for a provider to pass the monitoring process. Where there is evidence to demonstrate that a provider is making commendable progress, the next monitoring process (visit or desk based analysis) may take place in two years' time,<sup>4</sup> unless the next annual return provides insufficient evidence that the provider is continuing to make good progress, or the provider undergoes a material change in circumstances, or other concerns are raised about the provider's management of its academic provision. Where there is evidence to demonstrate that a provider is making acceptable progress, the next monitoring visit will take place in two years' time (unless a full review is due or in the meantime the provider undergoes a material change in circumstances or other concerns are raised about the provider's management of its academic provision). In the intervening year, the provider should submit an annual return as usual as the intention will be for the desk-based analysis approach to be applied.

3.4 Where there are weaknesses in the provider's maintenance of academic standards and/or quality, and/or where action plans have not been implemented fully or have not been effective in all areas, further action will be required to maintain educational oversight. The following outcomes are considered to be unsatisfactory:

- the provider is **making progress but further improvement is required**
- the provider is **not making acceptable progress**.

3.5 Where a provider receives one of these outcomes, it must submit a new action plan within 30 days of the publication of the report. In order to maintain educational oversight, the provider should request a full review to take place within six months of the publication of the report. This will prompt a full review and will require an FSMG check in advance. The request for a full review should follow after the action plan has been submitted. QAA will not be able to schedule a further review until the action plan has been signed off.

3.6 As your final review report requires improvement to meet UK expectations or does not meet UK expectations, you are not eligible to display the QAA Graphic. If you have previously been eligible, the licence will be withdrawn from your institution from the date of the report's publication and you will need to remove the QAA Graphic from all your communications, according to the terms and conditions.

3.7 A draft of the monitoring team's findings (from a visit or desk-based analysis) will be

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<sup>4</sup> If a full review is planned for the following year as part of the four-year cycle, this exemption will not apply.



sent to the provider for comment on factual accuracy. The final monitoring report will be shared, as appropriate, with UK Visas and Immigration, the provider's awarding bodies/organisations, and will be published on the QAA website.

## Section 4: Material changes in circumstances

4.1 A material change in circumstances may trigger an early or extended monitoring visit, partial or full review instead of a desk-based analysis. Providers must inform QAA within 28 days of meeting one of the triggers outlined in paragraphs 4.2 and 4.3. Failure to do so will result in the provider's Confirmation of Acceptance of Studies (CAS) allocation being set to zero pending the outcome of the monitoring visit or review.

4.2 The following changes in circumstances may require an extended monitoring visit, partial or full review, at an additional cost:

- change of address
- acquisition of a new building or delivery site
- extension of premises with an increase in capacity by 25% or more
- change of legal or trading name or merger with another provider
- change of principal and/or proprietor or equivalent
- change of 20% or more of permanent teaching staff (including both part-time and full-time staff)
- change of 30% or more on the type of provision/course offered
- for providers with fewer than 50 students at the last QAA visit, an increase in total student numbers (international and domestic) of more than 50 students
- a change of 50 per cent or more on the type of provision/courses offered, including changes of awarding body/organisation.
- for providers with 50 or more students at the last QAA visit, an increase in total student numbers (international and domestic) by more than 20% or 100 students, whichever is greater
- a change of 50 per cent or more on the type of provision/courses offered, including changes of awarding body/organisation.
- a change in the accredited status of the provider in the UK, or in the accredited status of the overseas higher education provider that awards the degrees.

NB. Please provide a commentary on the context and impact of these material changes on the student experience.

4.3 In addition, QAA may decide that a visit, an extended monitoring visit, partial or full review is required based on the evidence submitted in a provider's annual return, where this is insufficient to demonstrate that satisfactory progress is being made, or otherwise raises concerns about the provider's management of academic standards or quality.

## Section 5: Concerns about standards and quality

5.1 As well as undertaking reviews of alternative providers, QAA can also investigate concerns about a provider's academic standards and quality of provision. Where there is evidence of weaknesses that go beyond an isolated occurrence, and where the evidence suggests broader failings in the management of quality and standards, QAA can investigate. These concerns may be raised by students, staff, organisations, or anyone else.

5.2 There are separate concerns schemes for England, Wales, Northern Ireland and Scotland. Details of these schemes can be found on the QAA website.<sup>5</sup> For England, the

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<sup>5</sup> [www.qaa.ac.uk/reviewing-higher-education/how-to-make-a-complaint](http://www.qaa.ac.uk/reviewing-higher-education/how-to-make-a-complaint)

concerns scheme applies to alternative providers that are unable to register with the Office for Students and are undergoing review and/or annual monitoring with QAA for educational oversight purposes.

5.3 With respect to providers in England, when a concern becomes known to QAA well in advance of an annual monitoring visit and there is sufficient evidence to proceed to a concerns visit, QAA may put the monitoring on hold. QAA may then check progress against a concerns action plan through the rescheduling of the annual monitoring visit (see paragraph 5.4). When a concern becomes known to QAA in the immediate build up to a review or annual monitoring visit, QAA may investigate the concern within that visit rather than conduct a separate investigation. If QAA chooses to investigate through the visit, the information and accompanying evidence will be passed to the reviewers. QAA may need to extend the duration of the visit or add extra reviewers to the monitoring visit team. QAA will explain the nature of the concern to the provider and invite them to provide a response to the reviewers. The reviewers' view of the validity and seriousness of the concern may affect the outcome of the visit.

5.4 Where a concern becomes known to QAA during a visit, QAA may investigate it during this time and this could also be grounds for extending the visit. If QAA chooses to investigate the concern in this way, the information and accompanying evidence will be passed to the reviewer(s). QAA will explain the nature of the concern to the provider and invite them to provide a response to the reviewer(s). The reviewers' view of the validity and seriousness of the concern may affect the outcome of the visit. Alternatively, QAA may choose to investigate the concern after the visit has ended, and this may also affect the outcome, and delay publication of the visit report.

5.5 QAA may also use visits to follow up on a provider's response to the outcomes of a Concerns full investigation following the publication of the investigation report, or its response to Concerns initial inquiries. If QAA intends to use the visit for this purpose, the QAA officer will inform the provider and describe how the visit is likely to be affected. It may, for instance, result in the visit being re-scheduled, or involve the submission by the provider of additional evidence, or an additional meeting at the visit. The reviewers' view of the provider's response to the Concerns Investigation may affect the outcome of the visit.

## Annex 1: Conclusions for the educational oversight monitoring process

Teams will draw a conclusion on the progress that has been made by the provider against their action plan, since the last review or annual monitoring visit or submission, and on working with relevant external reference points, following the criteria below. Conclusions reflect the provider's continuing management of academic standards and the management of the quality of learning opportunities.

<p><b>The provider is making commendable progress</b> with continuing to maintain, review and improve/enhance its higher education provision.</p>	<p><b>The provider is making acceptable progress</b> with continuing to maintain, review and improve/enhance its higher education provision.</p>	<p><b>The provider is making progress</b> with continuing to maintain, review and improve/enhance its higher education provision <b>but further improvement is required.</b></p>	<p><b>The provider is not making acceptable progress</b> with continuing to maintain, review and improve/enhance its higher education provision.</p>
<p>The provider is maintaining the academic standards and enhancing the quality of learning opportunities of its provision.</p>	<p>The provider is maintaining the academic standards and quality of learning opportunities of its provision.</p>	<p>There are weaknesses in the provider's maintenance of the academic standards and/or quality of learning opportunities of its provision which have the potential to put academic standards and/or quality at risk.</p>	<p>There are weaknesses in the provider's maintenance of the academic standards and/or quality of learning opportunities of its provision which currently put academic standards and/or quality at risk.</p>
<p>All actions (identified by a QAA team or by the provider) have been implemented fully and have led to improvements in the provider's management of its higher education.</p> <p>Where actions have not been completed fully, they are on target and progress towards achieving them can be demonstrated.</p>	<p>Most actions (identified by a QAA team or by the provider) have led to improvement. Actions that have not been addressed fully do not have the potential to put academic standards or quality at risk.</p> <p>The provider demonstrates appropriate engagement with relevant external reference points, including, where appropriate, the Quality Code.</p>	<p>Actions that have not been addressed fully or effectively have the potential to put academic standards and/or quality at risk.</p> <p><b>and/or</b></p> <p>The provider demonstrates insufficient engagement with relevant external reference points, including, where appropriate, the Quality Code.</p>	<p>Actions that have not been addressed fully or effectively currently put academic standards and/or quality at risk.</p>

<p>The provider demonstrates highly effective engagement with relevant external reference points, including, where appropriate, the Quality Code.</p>			
<p><b>Outcome of the monitoring visit</b></p>			
<p><b>The provider is making commendable progress</b> with continuing to maintain, review and improve/enhance its higher education provision.</p>	<p><b>The provider is making acceptable progress</b> with continuing to maintain, review and improve/enhance its higher education provision.</p>	<p><b>The provider is making progress</b> with continuing to maintain, review and improve/enhance its higher education provision <b>but further improvement is required.</b></p>	<p><b>The provider is not making acceptable progress</b> with continuing to maintain, review and improve/enhance its higher education provision.</p>
<p>The provider may not receive a monitoring visit in the following year, if no material changes have taken place. (If a full review is due the following year, there is no exemption.)</p>	<p>The provider may receive a desk-based analysis of its documentation in the following year, if no material changes have taken place/there are no concerns. (If a full review is due the following year, there is no exemption.)</p>	<p>To maintain educational oversight, the provider must apply for and undergo a full review within six months of the publication of the monitoring report.</p>	<p>To maintain educational oversight, the provider must apply for and undergo a full review within six months of the publication of the monitoring report.</p>

## Annex 2: Annual monitoring process annual return form (educational oversight)

<b>Provider name</b>	
<b>Name and role of main contact</b>	
<b>Contact details</b>	
<b>Date of submission</b>	

Please complete this form electronically and submit to QAA by the date requested (normally 9-10 months after your last QAA visit or annual return). All comments in Sections 2-6 should be supported by evidence. Please append all evidence to this document.

**Important note:** the provider should notify QAA **within 28 days** if any of the material changes outlined in Section 2 take place. Failure to do so will result in the provider's CAS allocation being set to zero pending the outcome of the monitoring visit or review.

### Section 1.1 - Student data

Please complete and return the AP data return, which will have been sent to you in advance.

Below, please list all higher education programmes (Level 4 and above on one of the UK qualifications frameworks)<sup>6</sup> currently offered, with the number of students currently studying on each programme (at the point of submission of the annual return). (Please note that Level 3 qualifications should also be included if they are designed to enable entry to a specified degree programme on completion).

For short-term study abroad providers, please complete the table for any higher education programmes you offer.

<b>Programme title</b>	<b>Awarding body/ organisation/ credit-awarding body</b>	<b>Qualification level and duration</b>	<b>Date of programme approval</b>	<b>Current number of students (headcount)</b>	<b>Current number of students (FTE)</b>
<i>Example: HND Business Studies</i>	<i>Pearson</i>	<i>5</i>	<i>2013</i>	<i>25</i>	

*[insert more rows as required]*

<sup>6</sup> The Framework for Higher Education Qualifications of UK Degree-Awarding Bodies in England, Wales and Northern Ireland (FHEQ); The Regulated Qualifications Framework (RQF); The Scottish Credit and Qualifications Framework (SCQF); and The Credit and Qualifications Framework for Wales (CQFW)

## Section 1.2 - Data commentary

Please provide a commentary on the information provided on the data return form and in the table above. The commentary should explain trends in recruitment, retention, completion and pass rates over the period covered by the form. This is in addition to any remarks in the 'Comments' column on the data return form, which are intended to clarify how the form has been completed. This is not required for short-term study abroad providers.

*[Type text here: expand as necessary. Please reference and append all supporting evidence.]*

## Section 2 - Recent changes

Please tick if any of the following material changes have taken place since the last review or monitoring visit:

Material change (notify QAA within 28 days of one of these changes taking place)		Check box	
Change of address			
Acquisition of a new building or delivery site			
Extension of premises with an increase in capacity by 25% or more			
Change of legal or trading name or merger with another provider			
Change of principal and/or proprietor or equivalent			
Change of 20% or more of permanent teaching staff (including both part-time and full-time staff)			
Change of 30% or more on the type of provision/course offered			
For providers with fewer than 50 students at the last QAA visit	An increase in total student numbers (international and domestic) of more.		
	A change of 50% or more on the type of provision/courses offered, including changes of awarding body/organisation.		
For providers with 50 or more students at the last QAA visit	An increase in total student numbers (international and domestic) by more than 20% or 100 students, whichever is greater.		
	A change of 50% or more on the type of provision/courses offered, including changes of awarding body/organisation.		
A change in the accredited status of the provider in the UK, or in the accredited status of the overseas higher education provider that awards the degrees			

For study abroad providers, any move towards offering complete degrees to students who would be enrolled with the provider in the UK for the full duration of their programme		
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If you have ticked any items in the table, or have undergone any other changes relevant to QAA, please provide further details below:

*[Type text here: expand as necessary. Please reference and append all supporting evidence.]*

### **Section 3 - Update on the annual monitoring for educational oversight action plan and internal quality monitoring processes**

<p><b>One year after a full review:</b> please provide an evaluation of the impact of the actions taken in response to the good practice, recommendations and affirmations from the last review.</p> <p>Each good practice point, recommendation and affirmation should be accounted for separately.</p> <p><b>or</b></p>
<p><b>One or two years after a monitoring visit:</b> please provide an evaluation of the impact of the actions taken in response to the provider's own internal monitoring processes and provide an update on any actions that had not been fully completed at the previous monitoring visit.</p>

**Provide documentary evidence** to demonstrate the achievement, success and internal evaluation of all actions taken. Please provide a copy of your action plan.

*[Type text here: expand as necessary. Please reference and append all supporting evidence.]*

### **Section 4 - Other external reviews**

Please provide details of any other external reviews/accreditations that have taken place since the last QAA visit/submission - for example, British Accreditation Council (BAC), Accreditation Service for International Colleges (ASIC), professional or statutory body, or awarding organisation - along with the outcomes (conditions, recommendations, and so on).

*[Type text here: expand as necessary. Please reference and append all supporting evidence.]*

### **Section 5 - The provider's use of relevant external reference points relating to academic standards and quality for higher education**

Please provide details of how the provider has taken account of relevant external reference points, including the UK Quality Code for Higher Education (Quality Code), in managing its higher education provision.

For Higher Education Review (Foreign Providers) and short-term study abroad providers, please provide details of how the provider in the UK meets the requirements of any credit-awarding bodies or overseas higher education institutions in terms of standards and quality. Where appropriate, you should specify how you engage with relevant external reference points,

including the Quality Code, relating to standards and quality.

*[Type text here: expand as necessary. Please reference and append all supporting evidence.]*

## **Section 6 - Any other information**

Please note any other information that may be relevant to the monitoring process.

*[Type text here: expand as necessary. Please reference and append all supporting evidence.]*

## **Appendices**

Please list all evidence appended to this document.

Updated September 2021

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