

Education Committee  
 15 June 2010  
 Public session  
 Quality Assurance – Recruitment of Quality Assurance Visitors

<b><u>Classification</u></b>	Public
<b><u>Purpose</u></b>	For Decision
<b><u>Issues</u></b>	The potential need to review and revise the job description, team and visitor specifications to ensure fitness for purpose of our Quality Assurance (QA) process and the refreshment of the Quality Assurance Agency for Higher Education (QAA) visitor pool.
<b><u>Financial &amp; Resourcing Implications</u></b>	There are potential cost implications for expanded team, training and recruitment which will require further investigation
<b><u>Equality &amp; Diversity Implications</u></b>	None arising from this paper.
<b><u>Communications Implications</u></b>	None arising from this paper.
<b>Annexes</b>	Annex A – Issues identified by the QA Process Annex B – GOsC / Quality Assurance Agency for Higher Education (QAA) Handbook for the GOsC review of osteopathic courses and course providers, second edition – Extract about visitors including the person specifications for both specialist and lay visitors.

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## **Summary**

1. This paper identifies a potential need to review job descriptions, team and visitor specifications and to refresh the visitor pool to ensure fitness for purpose of our QA processes. The paper also asks the Committee to agree a slight amendment to the QA Work Plan to ensure that sufficient time is allowed to share our emerging thinking with the Osteopathic Educational Institutions (OEIs).

## **Background**

2. Section 12 of the Osteopaths Act 1993 sets out a number of requirements relating to the recruitment of visitors. It provides that the Education Committee may appoint visitors to report on the 'nature and quality' of instruction, facilities and any other requirements set out by the Education Committee. It also sets out provisions requiring that visitors shall not be prevented from being visitors because of their membership of the Council or of a Committee. Also, it prohibits visitors from exercising functions in relation to any place where s/he regularly gives instruction or where s/he has a significant connection. An extract of s12 of the Osteopaths Act 1993 is available on request.
3. In December 2009, the Education Committee noted an analysis of feedback received about our QA process to date. This is set out at Annex A for information.
4. Part of this feedback related to visitors. This paper considers the feedback in more detail and examines the case for the revision of the job description, team and visitor specifications and further recruitment and training to allow us to ensure and to demonstrate to others that the visitor pool is fit for purpose.
5. We are aware that visitor training has not been undertaken for the past few years.

## **Discussion**

6. A number of items in the attached QA feedback paper at Annex A relate to the fitness for purpose of the current visiting teams. These are as follows:
  - a. The Council for Healthcare Regulatory Excellence (CHRE) Report on Quality Assurance of undergraduate education by the Healthcare professional regulators (the CHRE QA Report) published in June 2009<sup>1</sup> noted that the QA process should actively involve and seek the perspectives of students, patients and other members of the public. (See line 2 at Annex A.) We seek views of students and patients as part of our review process. However, whilst we have lay members on visiting teams we do not have students.
  - b. The CHRE QA Report noted that all elements in the QA process should be fit for purpose and subject to review... including visitor / reviewer... recruitment, training and appraisal. (See line 12 at Annex A.) We have not reviewed our QA process across the board since 2005/06. This paper sets out proposals relating to the review of our job description, team and visitor specifications, the refreshment of our visitor pools and training.
  - c. Feedback from the OEI Meeting in September 2009, suggested that the visitors sometimes needed to be aware of the bigger picture. (See line 15 at Annex A). Please note that this issue could be improved by better training for visitors and also better clarity about the role of the visitors and the QA process for the OEIs. Training could help us to ensure that visitors were fit for purpose and undertaking the review in an effective,

<sup>1</sup> CHRE, Quality Assurance of undergraduate education by healthcare professional regulators, June 2009 available at [http://www.chre.org.uk/\\_img/pics/library/090609\\_final\\_QA\\_of\\_HE\\_report.pdf](http://www.chre.org.uk/_img/pics/library/090609_final_QA_of_HE_report.pdf), accessed on 6 June 2010.

appropriate and proportionate way. It would also help us to demonstrate this to the OEIs.

- d. Feedback from the QAA Evaluation 2008/09 suggested that the restriction on principals and vice principals of OEIs being part of review teams was a challenge. (See line 16 at Annex A). Some frustration had been expressed that sometimes the lack of higher education experience within some visiting teams led to feedback which was not well received because it was felt that it was not given in the context of delivery of higher education.

7. Our current guidance, job description and team and visitor specifications are set out in the QAA / GOsC Handbook. The relevant extract is set out at Annex B. The text will need to be revised as part of the revision of the Handbook. However, in doing so, we need to consider some fundamental principles within the specifications of both visitors and visiting Teams.

*The review of the recruitment documentation and the need to refresh the current pool of Visitors*

8. Our current Visitor Pool was recruited in 2005/06. It includes both osteopaths and lay Visitors. Recruitment has not taken place since then. Visitors include a variety of people, some of whom share roles. For example, we know that at least one Council member and one Education Committee member are active members of the Visiting Teams for the OEIs.
9. The team specification currently in place is not explicitly competency based – it requires the involvement of osteopaths, lay visitors and review-co-ordinators. However, we know that a variety of areas could be covered as part of an effective QA team. The CHRE QA Report identified the following types of expertise in QA visiting teams across the regulators. Although, it noted that no regulator covered all.
  - a. The regulator (staff and/ or council)
  - b. Lay people
  - c. Educationalists
  - d. Members of the profession
  - e. Students
  - f. QA consultants
10. We may wish to consider identifying competencies to be demonstrated by each team as a whole. This might help us to ensure the right perspectives and expertise within the team without having to significantly increase its size.
11. The person specification competencies and job description have not been reviewed for around five years.
12. As we have not reviewed the competencies required for both the team and individual visitors it is submitted that it is now appropriate and necessary for us to consider the review of the team and visitor specifications to ensure dynamism, continuous improvement and fitness for purpose.
13. Further, as we have not recruited for around five years, there are likely to be a number of experienced individuals who have not had an opportunity to apply. For this reason, it is submitted that further recruitment should take place to ensure that we capture the expertise of such individuals.
14. It is also worth noting that we do not have an annual appraisal or training programme in place. This means that we have no documented and objective way of ensuring that Visitors remain fit for purpose.

15. If the Committee agrees that it is appropriate for us to review and update the job description, team and visitor specifications, it would next be helpful for the Committee to give an indication about the necessity, nature and extent of the recruitment process.
16. In order to ensure that all visitors are up to date and fit for purpose against revised specifications, we could ask all visitors to reapply. Alternatively, there may be reasons why this would not be appropriate. It would be helpful to receive the Committees preliminary views on the nature and extent of any further recruitment that may be required.
17. However, we suggest that a final decision should be made when the final team and visitor specifications and job description had been agreed to enable clarity about the extent of the changes agreed.
18. We have given an indication of some of the potential changes we think may be required below.

#### *The involvement of students*

19. The description of QA Visitors in the Handbook refers to Osteopaths, Lay visitors and QAA Review Co-ordinators. There is no reference to the possibility of a student being a member of the visiting team. The effect of this is that a student is therefore precluded from applying to be a visitor even if they are able to demonstrate some of the competencies required from a QA visitor and from the visiting team.
20. Some other regulators do use students on their team to help them to ensure an effective student perspective to the judgements of the teams in the same way that lay membership on a team is useful to help to ensure that the patient / public perspective is reflected on the team as well as bringing other skills and competencies to the team dynamic as a whole.
21. Should the involvement of students on our Visiting Teams be considered further? Not all health regulators involve students in quality assurance visiting teams. However, those that have, have found that the student voice on the team is helpful and provides a useful perspective. Student visitors may also regard the experience of working with a Quality Assurance team an invaluable part of their own career development and understanding of regulation. It is also of note that the CHRE QA Report considers it good practice (but not yet necessary) to involve students in the visiting process.
22. In theory, reports should be better informed through student involvement. A student who is currently undertaking an osteopathy course will have a good understanding of the feedback from students and of contemporary issues for students. Students may be more comfortable providing 'real' feedback to another student rather than a qualified osteopath or lay person.
23. On the other hand, one might argue that the benefits of possibly obtaining better student feedback may be outweighed by potential additional costs of team members on a team.
24. We propose that the job description, visitor and team specifications should be revised to reflect competencies. They should not preclude the use of students on a visiting team if the students meet the required competencies. It may be that we could consider piloting the use of students on visiting teams to further explore the value added by their presence. We could explore this proposal further with the OEIs if the Education Committee was content for us to do so.

#### *The involvement of senior staff from other OEIs as members of the Visiting Teams*

25. The current GOsC / QAA Handbook states: 'Matters of commercial sensitivity in the osteopathy sector suggest that principals and vice-principals of providing institutions should not normally be review visitors in this method during 2005-06. For similar reasons, the heads of osteopathic programmes, departments, schools and faculties in publicly-funded institutions are discouraged from applying to be visitors in the 2005-06 academic year.' On the other hand, feedback from

the OEI meeting held in September 2009, and from OEIs generally, seems to indicate that some reviewing teams sometimes have a lack of educational expertise leading to an unsatisfactory review experience and the implication that the broader picture is not being considered because there is a lack of understanding about higher education.

26. Matters of commercial sensitivity need to be explored with the OEIs further to ensure that we can revise the Handbook and the team and visitor specifications appropriately. Commercial sensitivity is an important criteria to be managed as far as possible, however of vital importance is the need to ensure that we have the right expertise on the team to enable a full and effective review both for the OEIs as well as GOsC which helps to ensure the standards of students awarded and RQ leading to registration with us. The QAA Evaluation suggested that the restriction on the use of principals and vice principals as visitors should be explored further with a view to removal. Instead, a further emphasis should be put on the inability to use information for personal use.
27. We propose that revised competencies in the specifications should require educational expertise in each team to address the feedback received. The specifications should not preclude the use of senior staff, including principals and vice principals from applying to be OEI Visitors to ensure that there is appropriate educational expertise on a team.

### *Training*

28. Some of the feedback received about QA is focussed on the training process. The current pool of Visitors was recruited in 2005/06. Some initial extensive training was carried out. (A copy of the training programme is available on request.) However, no further follow-up training has been undertaken in recent years. As part of our contract negotiations this year, we are ensuring that a dedicated training budget will be incorporated into the QAA contract to ensure that regular training will be instigated to provide more support to visitors and to the visiting process. This will help us to meet the CHRE QA requirements. It will also help us to address some of the OEI feedback suggesting that visitors may 'sometimes miss the bigger picture'.
29. If we move to refresh the visitor pool, it would provide an ideal opportunity for us to review our training materials and to provide training for all Visitors about the process and its management to ensure the QA process is fit for purpose moving forward.
30. In due course, we may also wish to consider appraisal or review of individuals to support them in ensuring that they are up to date and fit for purpose as a QA Reviewer.

### *Next steps*

31. Our work plan suggests that a revised team and person specification would be considered by the Education Committee at its next meeting on 16 September 2010. However, this may not allow for sufficient consultation with the OEIs and other interested stakeholders. We therefore propose that our work plan should be amended allowing for a revised job description, team specification and visitor specification be drawn up for consideration at the Education Committee on 14 December 2010.

### **Recommendation**

32. The Education Committee is invited to consider the issues outlined in this paper and to agree that:
  - a. Further work should be undertaken to revise the job description, team and visitor specifications to ensure that they are fit for purpose taking into account all feedback received.
  - b. An amendment to the work plan should be made meaning that specifications should be considered at the Education Committee meeting in December 2010.

Issues identified with QA process and proposals for taking forward for further consideration

Theme	Issue	Origin of issue	Proposal for taking forward
PATIENT SAFETY	1. Links back to patient safety and public protection with a focus on fitness to join the Register	CHRE Report on QA of Undergraduate Education	<p>To make clear in policy paper.</p> <p>To consider further strengthening links as we consider a more major review. (Eg links to student fitness to practise guidance)</p>
	2. Actively involves and seeks perspectives of students, patients and other members of the public.	CHRE Report on QA of Undergraduate Education	<p>To make lay involvement clear in policy paper.</p> <p>To consider active involvement of student visitors as part of more major review in due course.</p>
CO-ORDINATION	3. Builds on other QA activities, including processes adopted internally by the education provider and other external interests to minimise impact, and works to co-ordinate visits with other bodies with an interest wherever possible. Renewal visits should be co-ordinated rather than different visits for different programmes.	<p>CHRE Report on QA of Undergraduate Education and QAA Evaluation 2008/09</p> <p>OEI Feedback has particularly emphasised this point.</p>	<p>To make clear in policy paper.</p> <p>To ask QAA to consider development of SED to ensure that information about other visits is recorded.</p> <p>To consider ensuring that this information is recorded in the Annual Report and available to consider when scheduling further reviews.</p>

			<p>To consider what further existing work might be undertaken to co-ordinate timetabling within current legislative structure.</p> <p>To consider further ways of co-ordinating with other reviews in due course as we consider a move to accredit providers rather than courses.</p>
TRANSPARENT	<p>4. All processes, criteria and procedures are predetermined and publicly available, and decision-making is based on criteria that are consistently applied.</p> <p>It is not clear to the OEIs what the decision making procedure is once a visit has taken place.</p> <p>It is not clear to the OEIs what the process for following up conditions is.</p>	<p>CHRE Report on QA of Undergraduate Education</p> <p>OEI feedback.</p> <p>OEI feedback.</p>	<p>All process documentation is currently published. Although clearer information about the decision making process both with regards to RQ recognitions and renewals and the process of fulfilling conditions..</p> <p>More detailed mapping of standards may assist transparency.</p> <p>To consider whether more detailed clarification of academic v professional QA might be helpful as part of wider QA review.</p>

	<p>5. Reports are publicly available and narratives clearly support decisions taken and subsequent actions.</p>	<p>CHRE Report on QA of Undergraduate Education</p>	<p>To consider further issues in relation to further publication of all reports including issues about clarity and consistency in language.</p> <p>To consider further moderating mechanisms as part of the current review.</p> <p>To consider a formal process to outline when conditions have been met, as part of current review, to ensure that reports and the updated position are accurately reflected on our website.</p>
	<p>6. Summary reports providing analysis of trends and general findings produced on periodic basis demonstrating the value of quality assurance and facilitating the sharing of good practice in education and training</p>	<p>CHRE Report on QA of Undergraduate Education</p>	<p>To commit to feeding back individually and collectively on reports in current cycle.</p> <p>To note that the QAA do undertake evaluations of the process, although these are probably not sufficiently robust to be reported on in their own right. (Low response rates and presentation).</p>



			To consider further how to effectively evaluate our QA process in conjunction with the QAA as part of our mini review and also in due course.
	7. The reports needed to be standardised a little more. For example, best practice should be best practice and not satisfactory practice. An example was given whereby one school had been commended for using external examiners when this was in fact a requirement not good practice. Provided this was demonstrated, they would support publication of the reports.	OEI Meeting Feedback	<p>To consider further moderating mechanisms to demonstrate consistency in reports including standardising the language</p> <p>To note that whilst the reports may not be benchmarks – it will be important to ensure that one OEI is not commended for issues that another OEI regards as standard.</p>
	8. Please can we acknowledge receipt of the Annual Reports.	OEI Meeting Feedback	To acknowledge receipt of the 2009/2010 reports.
	9. It would be helpful if there was more communication with institutions post-review e.g. could we be told when the QAA report is going to Education Committee, what the outcome is etc.etc.	OEI Feedback	To revise our communications with the OEIs to ensure more prompt and regular feedback about the initial feedback from the visit and the decision making process.

	10. Data is different for full time and part time students.	OEI Meeting Feedback	To communicate clearly about the purpose of collecting the data and be clear about differences between full and part time data if referred to in any feedback reports.
FIT FOR PURPOSE - PROPORTIONATE EFFICIENT AND EFFECTIVE	11. Clinical teaching observation is under emphasised in the review method.	QAA Evaluation 2008/09	To ensure that the method of review is considered with particular reference to clinical teaching both in the current review and as part of a longer term consideration.
	12. All elements within quality assurance are fit for purpose and subject to review, including visitor/reviewer recruitment, training and appraisal.	CHRE Report on QA of Undergraduate Education	To ensure that visitor specification is provided as well as training, recruitment and appraisal documentation at QAA to ensure that Visitors are up to date and fit for purpose.  To consider further whether pool of visitors might need to be refreshed.  To keep under review as part of wider QA review in due course.
	13. Do not review programmes unless they have been running. Align the period of recognition to when the programme will run.	QAA Evaluation 2008/09	To consider as a matter of policy in due course. Such an early involvement is in use in other regulators including the GMC.

	14. Embargo on institutional evidence being retained for personal use.	QAA Evaluation 2008/09	To consider how to ensure that Confidentiality is embedded within visitor training process as part of current review.
	15. The visitors needed to be aware that sometimes the bigger picture was missed and they looked for problems where there were none.	OEI Meeting Feedback	To ensure that proportionality is dealt with as part of improved Visitor Training whilst being clear not to fetter Visitor discretion about areas of curriculum outcomes and delivery to investigate.
	16. Could we consider the removal of restrictions on Principals/Vice-Principals of institutions being in review teams – this was due to some frustration expressed about the lack of Higher Education experience in the visiting team.	QAA Evaluation 2008/09	To consider as part of the revision of the person specification. We should consider further the need for HE experience to effectively manage a QA process tempered with the need to be sensitive to the commercial nature of the OEIs.  To consider further as part of a major review.
	17. The Handbook structure was not helpful and needed to be revised. The handbook for review is dense/difficult to read and poorly formatted to navigate. Suggest use pdf format with chapters and also search tools. Style of handbook - far too many	OEI Meeting Feedback and QAA Evaluation 2008/09	To ensure that the Handbook is revised to reflect the updated Policy Paper and updated procedures as a result of this mini review.

	words and fairly impenetrable language; poor rating for this in communication.		
	18. More time for the visit might be beneficial.	QAA Evaluation 2008/09	<p>To consider this issue as part of a more major review of QA.</p> <p>To note it would be important to triangulate this finding and to investigate further as part of a more major review in due course. It is likely to be the case that the OEIs would prefer to have fewer Visits and there are issues around proportionality to consider further.</p>
	19. Can we streamline the Annual Report and make it clear why information is asked for and how it will be used.	OEI Meeting Feedback	We must make sure that the Annual Report is a clear and coherent part of the overall QA process. To revise as part of review of current QA process.
CONTINUOUS IMPROVEMENT	20. How can we improve the process to provide feedback to enable and promote the development of institutions.	OEI Meeting Feedback	We must commit to feeding back in a timely manner to the OEIs both individually and collectively to ensure that the OEIs are given maximum information to continuously improve their own performance.

	21. Please can we feedback individually and collectively about information gleaned from the Annual Reports to assist in the further development of the institutions.	OEI Meeting Feedback	We must commit to feeding back in a timely manner to the OEIs both individually and collectively to ensure that the OEIs are given maximum information to continuously improve their own performance.
OTHER	22. Is our quality assurance too much like validation (more academic) as opposed to accreditation (more professional)?  23. OEIs experiencing both university validation and GOSc accreditation visits within a short space of time have noted considerable overlap in those processes.	OEI Meeting Feedback  OEI feedback	To consider further as part of a major review of the QA process.  To note that we need to be clear about the aims of the joint QAA and GOSc process. At this stage is it looking at academic and professional? If so, what are the benefits and costs of this to osteopathy?

### Extract from GOsC / QAA Handbook about Visitors

#### GOsC QAA Handbook - Annex C

#### Visitors

##### Introduction

1 QAA operates an equal opportunities policy in suggesting visitors to the GOsC. Applications for appointment as a visitor are scrutinised by both the GOsC and QAA. The GOsC remains the appointing body in the recruitment, selection and deployment of visitors. QAA policy on the appointment of review visitors and the application procedures are available on the QAA website. All applicants will be considered on the basis of their ability to meet the specifications outlined below. Matters of commercial sensitivity in the osteopathy sector suggest that principals and vice-principals of providing institutions should not normally be review visitors in this method during 2005-06. For similar reasons, the heads of osteopathic programmes, departments, schools and faculties in publicly-funded institutions are discouraged from applying to be visitors in the 2005-06 academic year. In consultation with QAA, the GOsC will review this policy during the calendar year 2006. More generally, before offering nominations for future visitors, providers are asked to reflect on whether the potential visitor will be commercially acceptable to other providers undergoing review. QAA evaluates the performance of all visitors, using feedback from review visits. *The Osteopaths Act 1993* states that:

- no person appointed as a visitor may act as a visitor in relation to any place at which s/he regularly gives instruction in any subject or any institution with which s/he has a significant connection
- a person shall not be prevented from being appointed as a visitor merely because s/he is a member of the General Council or any of its committees.

2 There are three types of visitor used in the review:

- specialist osteopath visitors, with current teaching experience in the discipline concerned, and/or experience of relevant professional or occupational practice
- review coordinators, who lead academic reviews and have extensive experience of quality assurance and programme approval of HE programmes, usually gained by working with such procedures in more than one discipline. In monitoring reviews, a QAA officer may take the place of a Review Coordinator
- lay visitors are non-osteopaths who have proven an interest in academic standards, quality and management in HE.

##### Qualities required in all visitors

3 Effective visitors will possess the following qualities:

- demonstrable commitment to the principles of quality assurance in educational provision
- an enquiring and sceptical disposition

- powers of analysis and sound judgement
  - personal authority and presence coupled with the ability to act as an effective team member
  - good time-management skills
  - experience of chairing meetings
  - the ability to make appropriate judgements in the context of the college or university being reviewed, and recognising that it is different from their own place of work
  - experience of organisation and management, particularly in relation to teaching and learning matters
  - high standard of oral and written communication, preferably with experience of writing formal reports for publication to deadlines.
- 4 In addition, visitors are expected to have a clear knowledge and understanding of QAA's GOsC review process and the Academic Infrastructure. QAA expects that visitors will be familiar with the *Code of practice* and aware of the precepts in the sections relevant to the provision under review. All sections of the *Code of practice* are operational and will be taken into account by visitors from September 2005.

#### Recruitment, training and role of specialist and lay visitors

- 5 Specialist and lay visitors are recruited from individuals nominated by providers or other organisations, and from individuals who reply to advertisements. Specialist and lay visitors are recruited and trained to ensure that they are capable of carrying out their duties effectively. In particular, specialist and lay visitors who undertake reviews are expected to:
- possess the knowledge and skills set out in detail below
  - have completed successfully QAA's training programme
  - ensure that they are available for the whole period of a review for which they have been selected and have a commitment to complete all processes of a review once they have embarked on it.
- 6 Initial training of visitors is carried out by QAA by means of a two-day residential course.
- 7 QAA maintains a database of visitors and other reviewers and auditors. The primary purpose of the database is to show, for each visitor, the main areas of HE and/or teaching and learning that s/he is qualified to review.
- 8 The key purpose of acting as a specialist or lay visitor is to contribute to the maintenance and enhancement of standards in HE by reporting to the GOsC through QAA on the governance of the provider and the standards and quality of programme(s) scrutinised. Specialist and lay visitors are expected to agree individual timetables of activity with the Review Coordinator or QAA officer, with a view to making the most effective contribution to the review. The responsibilities of visitors include:
- reading and analysing the SED submitted by the provider and any other documents sent in advance of a review

- adhering to the review schedule agreed by the provider and the Review Coordinator/QAA officer
  - participating in visits to the provider in order to gather, share, test and verify evidence
  - making judgements on the governance and management of the provider, the clinical and academic standards achieved and the quality of the learning opportunities provided
  - contributing to and commenting on the completion of the report of the review to agreed schedules and deadlines.
- 9 Specialist and lay visitors analyse and evaluate the SED, with particular emphasis on curricular content and its suitability for achieving the programme outcomes. They review and evaluate the assessment process designed for the programme and determine whether they are suitable to assess programme outcomes as stated in the programme specifications.
  - 10 Specialist and lay visitors consider and evaluate overall student achievement, including progression to employment, the contribution made to student achievement by the quality of teaching, opportunities for learning, academic support intended to ensure effective progression of students and learning resources and their deployment (including staffing).
  - 11 Specialist and lay visitors judge the overall standards for subjects.
  - 12 Specialist and lay visitors judge the overall governance and management of the provision, including financial management and the procedures associated with the maintenance and enhancement of clinical and academic standards and quality.
  - 13 Finally, visitors contribute to the compilation of a report made to the GOsC. Each specialist and lay visitor will be expected to prepare material for the various sections of the report and relevant draft sections of the report, with specific references to the sources of evidence considered.

#### Knowledge and skills required of specialist and lay visitors

- 14 To carry out the role outlined above, for each review, specialist and lay visitors will need to demonstrate:
  - experience, knowledge and understanding of educational provision
  - at least five years' experience of providing HE-level teaching and learning. In the case of professionally-based visitors, familiarity with HE teaching and learning
  - familiarity with academic support strategies and the functions of academic tutorials
  - experience of examining and/or verification (and preferably external examining or verification)
  - knowledge of the quality assurance processes employed by providers of HE
  - knowledge and understanding within the subject area



- knowledge of, and familiarity with, *Standard 2000* and any subject benchmark information produced for osteopathy
- professional and currently registered expertise in osteopathy (specialist osteopath visitors)
- familiarity with health subject matters and/or financial analysis and/or quality assurance and review in HE (lay visitors)
- familiarity with comparable programmes and standards of awards in other providers (specialist osteopath visitors)
- understanding of external examiners' reports and internal documents such as internal verification, second-marking and second reading
- understanding of programme entry requirements and an ability to interpret progression statistics for each stage of the programmes, including withdrawal, transfer and failure rates
- understanding of programme learning outcomes
- familiarity with destinations data and employment statistics
- ability to conduct meetings and interviews with staff
- ability to conduct meetings with a range of current and former students
- ability to write succinctly and coherently
- ability to meet exacting timescales and deadlines
- ability to work effectively as a member of a team
- ability to communicate electronically, including emails, attachments and use of webmail.

#### Recruitment, training and role of review coordinators

- 15 Review coordinators are also recruited from individuals nominated by colleges, universities or other organisations, and from individuals who reply to advertisements. They may be seconded or independent consultants. It is expected that they will possess extensive experience of HE and of the assurance of standards and quality. They will be expected to perform a number of duties, of which managing reviews and writing reports are the major responsibilities. Opportunities to contribute to other activities such as editing reports, training specialist visitors and drafting overview reports may also be available.
- 16 Because of the relative complexity of the Review Coordinator role, the individuals recruited will undergo a longer induction and training process than that provided for specialists. Induction into the review method will normally include attendance at, and participation in, at least one visitor or reviewer training course, as well as attendance at workshops and conferences arranged by QAA.
- 17 Reviews take place throughout the academic year and are variable in length. Review coordinators will need to organise their time and reach agreement with the providers and their teams of visitors, about the pattern of review activities in such a way as to ensure effective use of the time available.

18 All reviews consist of four main activities:

- preparation for review
- visits to the subject provider
- analysis of documentary evidence
- report writing.

19 Each Review Coordinator is responsible for maintaining an overview of the range and balance of these activities, and for helping visitors to divide their time effectively. The achievement of an appropriate balance between the various activities requires planning in advance of, and coordination throughout, the review. Above all, it is essential that it enables the visitors to develop a robust evidence base on which to make judgments.

20 The following criteria for selection will apply.

#### Knowledge and skills required of review coordinators

21 In order to carry out their role, review coordinators will need to demonstrate:

- recent knowledge and understanding of current HE issues
- awareness of current teaching methods and curricula
- knowledge and understanding of the assurance of standards and quality
- experience of liaison with senior management and staff at other levels
- ability to manage small teams (with experience in HE, FE or industry)
- ability to work within tight timescale and to strict deadlines
- ability to lead a team of experts
- ability to communicate effectively in face-to-face interaction
- ability to produce clear and succinct reports to time
- experience of word processing
- ability to communicate electronically, including emails, attachments and use of webmail.

22 The essential qualities above might be reinforced by experience of a wide range of teaching at HE level and by experience of programme accreditation by professional, regulatory or statutory bodies, programme approval or validation events, quality audits, quality assessment/academic review or educational inspection.