

Office for  
Students



# Degree awarding powers (DAPs) assessment report for Dyson Technical Training Limited

New degree awarding powers  
end assessment

**Provider legal name:** Dyson Technical Training Limited

**Provider trading name:** Dyson Institute of Engineering and Technology

**UKPRN:** 10067355

**Assessment conducted:** 24 November 2023 to 16 April 2024

**Reference** OfS 2024.16

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# Executive summary

The Office for Students (OfS) may grant a New degree awarding powers (New DAPs) authorisation to a provider that has been delivering higher education for less than three years. It may grant a full degree awarding powers (Full DAPs) authorisation to a provider that has been delivering higher education for three or more years. In each case, the authorisation will normally be time-limited for three years.

This report represents the conclusions of a DAPs assessment of a provider that currently holds New DAPs and is seeking time-limited Full DAPs, referred to as the 'New DAPs end assessment'.

The purpose of a New DAPs end assessment is to gather evidence to inform a judgement about whether a provider meets the DAPs criteria and has the ability to:

- provide, and maintain the provision of, higher education of an appropriate quality
- apply, and maintain the application of, appropriate standards to that higher education.

New DAPs end assessments are conducted by assessment teams with membership that includes OfS-appointed academic experts. The outcome of the assessment is a report, produced by the assessment team, setting out its advice to the OfS against the DAPs criteria.

This report does not represent any decision of the OfS in respect of whether the DAPs award the provider is seeking should be authorised.

1. A provider that is registered with the OfS and has been authorised with New DAPs will enter a probationary period from the date on which the New DAPs order takes effect. A provider that holds New DAPs for a period of three years will normally be eligible to seek time-limited Full DAPs at the end of the New DAPs probationary period. Before making a decision about whether to authorise a provider with time-limited Full DAPs, the OfS will appoint an external assessment team to undertake a DAPs assessment, referred to as the 'New DAPs end assessment'.
2. The criteria for authorisation for DAPs are designed to ensure that a provider with DAPs demonstrates a firm guardianship of academic standards, a firm and systematic approach to the assurance of the quality of the higher education that it provides, and the capacity to contribute to the continued good standing of higher education in England. The DAPs criteria are the reference point for the New DAPs end assessment process and assessment teams will assess a provider against these criteria. The detailed requirements of the DAPs criteria are set out in Annex C of the OfS's regulatory framework.<sup>1</sup>
3. Dyson Technical Training Limited was established in 2016, under its trading name of The Dyson Institute of Engineering and Technology ('the institute'). The institute was awarded

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<sup>1</sup> See the Regulatory framework: [Annex C – Guidance on the criteria for the authorisation for DAPs - Office for Students](#).

New DAPs by the OfS on 1 September 2021 for a period of three years and three months. The New DAPs order authorised the institute to grant the following specified taught awards, for a probationary period beginning on 1 September 2021 and expiring on 30 November 2024: BEng (Hons) in Engineering Degree Apprenticeship; and BEng (Hons) Degree in Engineering, and the associated intermediate exit awards: CertHE in Engineering, DipHE in Engineering and BEng in Engineering.

4. Prior to being awarded New DAPs, the institute delivered a BEng (Hons) Degree Apprenticeship at its site in Malmesbury. This degree was awarded by the University of Warwick ('the university') through a partnership arrangement with the Warwick Manufacturing Group (WMG).
5. The institute requested an early assessment for Full DAPs, at the end of the second year of the probationary period. The OfS agreed to the request based on the institute's positive progress during the probationary period.
6. The OfS appointed an external assessment team on 23 October 2023 to undertake a desk-based New DAPs end assessment. The OfS asked the team to give its advice about the quality of and standards applied to higher education courses at the institute and whether the institute has met the DAPs criteria through the implementation of its New DAPs plan during the probationary period.
7. The assessment team considered a range of information submitted by the institute in support of its request to seek time-limited Full DAPs, alongside evidence collected during monitoring activities throughout the institute's probationary period.
8. Table 1 summarises the assessment team's advice regarding whether the institute has met the DAPs criteria through the implementation of its New DAPs plan during the probationary period.

**Table 1: Summary of advice against the DAPs criteria**

| <b>Underpinning DAPs criteria</b>  |                |
|--|----------------|
| <b>Criteria</b>  | <b>Summary</b> |
| Criterion A: Academic governance   | Met            |
| Criterion B1: Regulatory frameworks  | Met            |
| Criterion B2: Academic standards   | Met            |
| Criterion B3: Quality of the academic experience   | Met            |
| Criterion C: Scholarship and the pedagogical effectiveness of staff  | Met            |
| Criterion D: Environment for supporting students   | Met            |
| Criterion E: Evaluation of performance   | Met            |
| <b>Overarching Full DAPs criterion</b>   |                |
| The provider is a self-critical, cohesive academic community with a proven commitment to the assurance of standards supported by effective quality systems | Met            |

9. This report will be considered by the OfS's Quality Assessment Committee (QAC). QAC will formulate its advice to the OfS regarding quality and standards at Dyson Institute of Engineering and Technology having considered this report.
10. The OfS will have regard to the assessment report, and QAC's advice when making a decision about whether to award the institute's DAPs authorisation on the basis requested.

## Introduction and background

11. A provider that is registered with the OfS and has been authorised with New DAPs will enter a probationary period from the date on which the New DAPs order takes effect. A provider that holds New DAPs for a period of three years will normally be eligible to seek time-limited Full DAPs at the end of the New DAPs probationary period.
12. Before making a decision about whether to authorise a provider with time-limited Full DAPs, the OfS will appoint an assessment team to undertake a DAPs assessment, referred to as the 'New DAPs end assessment'. The purpose of the New DAPs assessment is to gather evidence to inform a judgement about whether a provider meets the DAPs criteria and has the ability to:
  - provide, and maintain the provision of, higher education of an appropriate quality
  - apply, and maintain the application of, appropriate standards to that higher education.
13. OfS officers will undertake an eligibility and suitability assessment of a provider, and this initial assessment will determine the scope and level of detail of the New DAPs end assessment and whether the assessment should be desk-based in the first instance or should include at the outset a requirement to visit the provider.
14. New DAPs end assessments are conducted by assessment teams with membership that includes OfS-appointed academic experts. Assessors will have experience of higher education and knowledge relevant to those areas they are responsible for assessing. The outcome of the New DAPs end assessment is a report, produced by the assessment team, setting out its advice against the DAPs criteria.
15. The assessment team's advice will be the outcome of a cumulative assessment process throughout the provider's New DAPs probationary period, and the assessment team's view of the success with which the provider has implemented its New DAPs plan.
16. This report does not represent any decision of the OfS in respect of whether the DAPs award the provider is seeking should be authorised.
17. This report will be considered by the OfS's Quality Assessment Committee (QAC). QAC has responsibility for providing advice to the OfS under section 46 of the Higher Education Research Act 2017 (HERA) on the quality of and standards applied to the higher education being provided by providers for which the OfS is considering granting, varying, or (in certain circumstances) revoking authorisation for degree awarding powers. QAC will formulate its advice to the OfS regarding quality and standards at Dyson Institute of Engineering and Technology having considered this report. The OfS will have regard to the assessment report, and QAC's advice when making a decision about whether to award the institute's DAPs authorisation on the basis requested.
18. The OfS will also consider its own risk assessment for the provider and will have regard to advice received from others where this has been sought, as well as other relevant considerations such as the OfS's general duties under section 2 of HERA.

## Context

19. The Dyson Institute of Engineering and Technology ('the institute') was established in 2016 and operates from its site in Malmesbury. The institute specialises in engineering and was set up with the aim to deliver a new approach of higher education, through its academic and workplace learning model. The institute also aims to support the local and national economy by helping to address the engineering skills shortage in the UK.
20. The institute has delivered higher education courses since 2017. Prior to being awarded New DAPs in 2021 it delivered a BEng (Hons) degree apprenticeship that was awarded by the University of Warwick ('the university') through a partnership arrangement with the Warwick Manufacturing Group (WMG). This partnership is legally governed by a tripartite contract between the institute, Dyson Limited ('Dyson Technology') and the university, whereby the university is the apprenticeship training provider and Dyson Technology is the employer.
21. The institute was awarded New DAPs by the OfS on 1 September 2021 for a period of three years and three months. The New DAPs order authorised the institute to grant the following specified taught awards, for a probationary period beginning on 1 September 2021 and expiring on 30 November 2024: BEng (Hons) in Engineering Degree Apprenticeship; and BEng (Hons) Degree in Engineering, and the associated intermediate exit awards: CertHE in Engineering, DipHE in Engineering and BEng in Engineering.
22. The institute's first cohort of students commenced the BEng (Hons) in Engineering Degree Apprenticeship and BEng (Hons) Degree in Engineering under its New DAPs authorisation in September 2021. The previous cohorts of students studying the University of Warwick programme are continuing the university's programme until completion in 2024.
23. The nature of the institute's model of higher education means that students are not charged fees. Students on the current BEng (Hons) programmes are employed as Undergraduate Engineers at Dyson Technology Ltd and are paid a salary.
24. The institute intends to change its BEng (Hons) to an integrated MEng (Hons) in Engineering and has approved delivery of this new programme, along with a new MSc in Software Engineering, to commence from September 2024 should it be awarded time-limited Full DAPs.
25. Based on the latest available OfS 'Size and shape of provision data dashboard',<sup>2</sup> the institute had a student population in 2021-22 of 40 students on its BEng (Hons) in Engineering Degree Apprenticeship and BEng (Hons) Degree in Engineering programmes, all of which are full time. The institute reported that overall, since being awarded New DAPs in 2021, 123 students have been enrolled onto these programmes.
26. The institute reported that it currently employs 15 full-time academics, none of whom are employees of Dyson Technology. There are a further 25 non-teaching members of staff employed by the institute.

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<sup>2</sup> Available at: [Size and shape of provision data dashboard: Data dashboard - Office for Students](#).

27. In July 2023, towards the end of the institute's year two probationary period, the institute requested to be considered to seek time-limited Full DAPs up to and including Level 7 taught awards, and without the programme restrictions set out in its current DAPs authorisation.
28. In accordance with the OfS's operational guidance on degree awarding powers, set out in Annex D to Regulatory advice 12,<sup>3</sup> a typical monitoring schedule for a provider in its probationary period would see it undergo monitoring throughout year two of this period, with a view to commencing assessment for Full DAPs at the start of year three. The institute requested an early assessment for Full DAPs to allow it to change the current BEng programme to an integrated MEng and to deliver the aforementioned MSc. This would allow the institute to offer these courses in line with its business plan, with the aim to support the local and national economy and help address the skills shortage in the UK in engineering. Based on the positive progress of the institute through its probationary period, the OfS allowed the assessment for Full DAPs to start early.
29. Annex D to the OfS's Regulatory advice 12 sets out information regarding the monitoring of providers with New DAPs and the assessment process at the end of the probationary period. To supplement this, the timelines and process of the New DAPs end assessment follows the timescales and processes detailed in the OfS's Regulatory framework and the OfS's published operational guidance on the variation of degree awarding powers process, Regulatory advice 17, Annex B.<sup>4</sup>
30. In accordance with the OfS's Regulatory framework and Regulatory advice 17,<sup>5</sup> the OfS undertook an initial eligibility and suitability assessment of the institute and decided that a desk-based New DAPs end assessment should be undertaken.
31. The OfS appointed an assessment team on 23 October 2023 which consisted of three academic expert assessors and a member of OfS staff in the following roles:
  - a. Professor Christina Cunliffe – committee chair and lead assessor
  - b. Professor Shushma Patel – deputy committee chair and assessor
  - c. Dr Neil Hart – deputy committee chair and assessor
  - d. Mrs Izzy Navarrete – committee member and assessment coordinator.
32. The OfS asked the team to give its advice about the quality of and standards applied to higher education courses at the institute and whether the institute has met the DAPs criteria through the implementation of its New DAPs plan during the probationary period.
33. The assessment team considered a range of information submitted by the institute in support of its request to seek time-limited Full DAPs, alongside evidence collected during monitoring activities throughout the institute's probationary period.

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<sup>3</sup> See: [Operational guidance for providers on DAPs assessment \(officeforstudents.org.uk\)](https://www.officeforstudents.org.uk/operational-guidance-for-providers-on-daps-assessment).

<sup>4</sup> See: [Variation and revocation of DAPs - operational guidance on assessment by the OfS \(officeforstudents.org.uk\)](https://www.officeforstudents.org.uk/variation-and-revocation-of-daps-operational-guidance-on-assessment-by-the-ofs).

<sup>5</sup> See: [Regulatory advice 17: Variation and revocation of degree awarding powers - Office for Students](https://www.officeforstudents.org.uk/regulatory-advice-17-variation-and-revocation-of-degree-awarding-powers).



# Assessment process

## Information gathering

34. In accordance with the process outlined in the OfS's Regulatory advice 12, Annex D, the institute submitted a self-assessment document on 24 November 2023, setting out how it considered it met the DAPs criteria through the implementation of its New DAPs plan during the probationary period.
35. To support the statements made in the self-assessment document, on 24 November 2023, the institute submitted a range of documentary evidence. This included programme documentation, a student submission, as well as information relating to academic policies, processes and governance structures. The team was also granted access to specific areas of the institute's virtual learning environment (VLE).
36. Following the team's assessment of the institute's evidence submission, the team requested further information from the institute. The institute submitted a response to this request on 29 January 2024.
37. Following a review of the additional information submitted, the assessment team sought further clarification on one area. The institute submitted a response to this on 9 February 2024.

## New DAPs probationary period monitoring activities

38. In accordance with the process outlined in the OfS's Regulatory advice 12, Annex D, the team's assessment included a review of previous monitoring activities undertaken, throughout the institute's New DAPs probationary period.
39. The monitoring activities and associated evidence that the assessment team considered during the probationary period included the institute's New DAPs plan, seven self-assessment reports and associated documentary evidence submitted by the institute, and monitoring reports completed by the Quality Assurance Agency (QAA) in its former role as designated quality body (DQB) in England.

## Observations and visits

40. During the first year of the institute's probationary period the QAA undertook five observations between September 2021 to July 2022. These were observations of the Academic Board, an examination board, Council and the Undergraduate Experience Committee. The QAA also undertook two visits to the institute: an online visit on 1 to 2 November 2021, and an on-site visit on 4 July 2022 which included a subsequent online meeting on 11 August 2022.
41. During the second year of the institute's probationary period, the QAA undertook four observations from November 2022 to February 2023. These were observations of the Academic Board, Council and the Staff-Student Liaison Committee. The QAA also undertook an online visit of the institute on 20 and 23 January 2023.

42. The evidence referred to throughout this report includes evidence collected during the probationary period, as well as evidence submitted by the institute to support the New DAPs end assessment.

# Assessment of DAPs criterion A: Academic governance

## Criterion A1: Academic governance

### Advice to the OfS

43. The assessment team's view is that the institute meets criterion A1: Academic governance because it meets sub-criteria A1.1, A1.2, and A1.3.
44. The assessment team's view is based on its review of evidence which shows in summary that the institute has sound academic governance and management structures that demonstrate clear and appropriate lines of accountability. The institute engages students as partners in the academic governance and management of academic standards and quality. The institute's governance structure has appropriate oversight to ensure that if it decides to work with other organisations, these arrangements will be led by a strategic approach and the management of such opportunities is robust and effective.
45. This view is based on specific consideration of the evidence requirements for this criterion collated throughout the institute's probationary period, and for the purposes of this New DAPs end assessment, alongside any other relevant information.

**A1.1: An organisation granted degree awarding powers has effective academic governance, with clear and appropriate lines of accountability for its academic responsibilities.**

### Advice to the OfS

46. The assessment team's view is that the institute meets criterion A1.1 because it has effective academic governance with clear and appropriate lines of accountability for its academic responsibilities.
47. The assessments team's view is based on its review of evidence which shows that the institute has met the evidence requirements for A1.1.

### Reasoning

48. To inform the assessment team's consideration of the institute's academic governance arrangements, the institute provided contextual information as specified within the institute's 'Articles of association' and 'Scheme of delegation and full governance framework'. In summary, the institute's main governing body is the Council, which has responsibility for determining the educational character of the institute and management of the institute's business. This includes ensuring that the institute is appropriately resourced and that senior academic appointments have the right knowledge, experience, and credibility to lead the institute's academic community to meet its published strategies, and to ensure that the institute is ready to assume the responsibilities of degree awarding powers.
49. The institute also operates the Academic Board which acts as the institute's academic authority and is subject to the overall authority of the Council. The Academic Board is

responsible for promoting the academic and professional work of the institute and oversees academic management and matters pertaining to quality and standards, academic strategy, policy, priority and performance. It is responsible for decisions such as the award of academic credit, design and approval of programmes, student conduct cases, design and enforcement of academic policies, student admissions and external examiners. Minutes of the Board are published after each meeting and the team considered these and all associated papers, as well as the direct observations of the Board which had taken place during the probationary period. The team found multiple and consistent evidence that the Board received input from a wide range of both internal and external stakeholders, including subcommittees and working groups, as well as students in discussions relating to Undergraduate Experience Committee meetings. At each meeting there was a standing agenda item to review actions from previous minutes as well as clear action plans for future development. The team's view was that this demonstrated clear engagement between all levels of the institute, including students, with action plans which are clearly followed up between meetings and reported at the following meeting.

50. The Academic Board presents a report to each subsequent Council meeting. In addition, the team noted that the director of the institute is the chief executive officer and is directly responsible to the Council for leadership of the institute's academic affairs and executive management. The team reviewed the function of how the director reported to the Academic Board, and subsequently how the Academic Board reported into the Council. This was demonstrated through membership of both committees along with evidence such as papers submitted for consideration and the minutes of both the Academic Board and the Council. The team found that this evidence showed that matters raised at the subcommittee level, such as programme approval panel outcomes and feedback from student representatives at staff-student liaison committees, were taken forward to the Academic Board, and then escalated as appropriate to the Council. This demonstrated decision making at the appropriate level, followed by delegation back to the appropriate subcommittees for action and implementation. This supports the team's view that the function and responsibility of the senior academic authority is clearly articulated and consistently applied and that there is clarity and differentiation of function and responsibility at all levels of its academic governance structures. Therefore, the team's view was that the institute's senior academic authority structures demonstrated effective governance, with clear and appropriate lines of accountability for its academic responsibilities.
51. The team further considered the institute's governance arrangements and its higher education mission and strategies and found robust evidence for effective academic governance. The institute's mission, as detailed within its 'Strategic plan 2023-28' and as published on the institute's website, along with the associated academic policies, is to 'combine rigorous academic programmes with work on revolutionary future products, advancing technology globally through groundbreaking research in the development of engineering leaders'. Beneath this, the institute identifies its strategic themes are teaching and learning, student experience, research, internationalisation, people and infrastructure and integration with Dyson. Each of these strategies is underpinned by goals which articulate the institute's approach and how it will measure success. The team considered how the institute's education mission and strategic direction were applied and found that the strategic themes and their underpinning goals were routinely considered on a rolling basis at meetings of the Academic Board and Council. It found that the Council meets quarterly with additional strategy sessions

as necessary, as evidenced by the minutes and observations of the Council. The Academic Board meets four times a year, and a recent review of its membership was approved in late 2022 which created a more balanced membership between academic and professional services staff, together with an invitation for all members of staff to attend as observers. In addition, the Institute Management Board meets fortnightly and manages the academic, governance, student experience and professional services functions. Alongside this, the team reviewed evidence of regular communication to staff regarding the institute's mission and strategic direction. This evidence supports the team's view that the institute's mission, strategic direction are understood and applied consistently.

52. The team also reviewed how the institute has matured since the start of the probationary period and how it has modified its governance arrangements in response to internal and external review and adapted its organisation structure to meet the evolving requirements of the institute. For example, the institute has further defined and developed the roles and relationship between the Academic Board, the Institute Management Board and the Council. The team reviewed committee minutes and observations of meetings which demonstrated that the institute's approach to academic governance, as laid out in its 'New DAPs plan', has been consistently applied in each iteration of its development throughout the probationary period, in line with its 'Articles of association' through the 'Scheme of delegation and full governance framework'. Internal and external review of the governance structures has taken place periodically during the probation period, and actions taken to refine and improve governance in line with internal and external stakeholder feedback have been implemented. This further supports the team's view that the institute's academic governance structure is clear with appropriate lines of accountability. Overall, the team's view was that the institute's higher education mission, strategy and academic policies demonstrated effective governance, with clear and appropriate lines of accountability for its academic responsibilities.
53. The evidence considered by the team demonstrates that there is clear governance separation between the institute and Dyson Technology and there is evidence that the institute has control over the decision-making process for academic matters. The 'Articles of association' articulate the duties of the Council and the responsibilities of the director, and this is reinforced by the relevant terms of reference of the Council and the Academic Board within the 'Scheme of delegation and full governance framework'. This supports the position that the Council is the ultimate decision-making body of the institute. The team noted that, while two Dyson Technology executives do sit on the Council to provide advice and perspective on the requirements that graduates will need to meet the standards of the industry, this constitutes a minority membership and a register of interests and declarations of interest occurs at the start of each meeting. This is in line with normal practice across the sector, based on the team's experience. This further supports the team's view that the function and responsibility of the senior academic authority is clearly articulated and consistently applied.
54. The team found that within all levels of the institute's governance structure – from the Council, through to the Academic Board and its subcommittees, under the overarching management of the director – there is clarity and differentiation of function and responsibility. This was evidenced in its governing documents, for example, its 'Articles of association' which showed that the Council is the ultimate decision-making body, and which lays down the institute's strategy for the future. Delegation of academic decision-making to the Academic Board was found through review of the regular reports to the Council of its meetings and activities, and

supporting papers to both committees evidenced the input from each level of the institute into these decision-making bodies.

55. To determine whether the institute develops, implements and communicates its policies and procedures in collaboration with its staff and students, the team reviewed the institute's Academic Board terms of reference alongside the 'Code of conduct' and 'Dyson institute community charter' for staff and students. The team considered that these are effective and reviewed regularly, including the process by which conflicts of interest are managed. The team further considered how these policies and procedures were implemented in practice by reviewing the work of the subcommittees and the input from a wide range of internal stakeholders to the ongoing identification and completion of action plans to meet the institute's objectives. These also showed that the involvement of students in relevant governance bodies is regularly reviewed and implemented, as well as how the Academic Board approves and monitors quality and standards on an ongoing basis. The involvement of students within the institute's management and evaluation of performance is discussed further under criterion A1.2 below, and criterion D1 and E1.
56. On review of the institute's latest academic policies and procedures, including the 'Access and participation statement', the team noted that the institute reviewed and updated them on an annual basis through the Academic Board and ratified at the Council to ensure that they were appropriate and remained current in advance of each academic year. This supports the team's view that the institute's academic policies support its higher education mission and strategy, and that these are applied consistently. The team considered that all academic policies were appropriately mapped against higher education benchmarks, such as sector-recognised standards,<sup>6</sup> the Frameworks for Higher Education Qualifications (FHEQ),<sup>7</sup> Ofsted, and the Office of the Independent Adjudicator (OIA). In addition, the team found the policies were mapped against subject specific benchmarks and other relevant external agencies including the Professional Statutory and Regulatory Body (PSRB), the Institute of Engineering Technology. This informed the team's conclusion that the institute develops, implements and communicates its policies and procedures in collaboration with its staff and external stakeholders.
57. The team reviewed evidence that demonstrates robust mechanisms are in place to ensure the aims and objectives of the institute's educational mission and strategic plan are achieved, including the 'Business plan' and the 'Quality improvement plan'. The business plan was introduced to enable the effective annual monitoring of institutional performance, including the review policies such as the 'Learning and teaching strategy', 'Peer observation framework' and academic regulations. The Quality improvement plan was developed through detailed discussions with both staff and students and incorporates the institute's own 'Self-assessment report' and quality standard 'A Culture of Curiosity' to provide a robust mechanism for monitoring progress against strategic objectives.
58. The team found that the institute's academic policies are comprehensive, and in support of its higher education mission and strategy. This was based on a review of the following academic policies:

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<sup>6</sup> See: [Sector-recognised standards \(officeforstudents.org.uk\)](http://officeforstudents.org.uk).

<sup>7</sup> Available at: [Qualifications Frameworks \(qaa.ac.uk\)](http://qaa.ac.uk).

- a. 'Academic regulations for taught programmes'
- b. 'Academic appeals policy'
- c. 'Academic integrity and misconduct'
- d. 'Fitness to study policy'
- e. 'Mitigating circumstances policy'
- f. 'Programme review and modification policy'
- g. 'Programme design and approval policy'
- h. 'Reasonable adjustments policy'
- i. 'Student complaints policy'.

59. The team also saw evidence that regulations and policies are thoroughly reviewed and updated where necessary, including for example responses to changes in the sector in the light of updated good practice guidance published by the OIA. The team concluded that the institute's academic policies support its higher education mission, aims and objectives and the delivery of effective academic governance. Its higher education mission and strategic direction and associated policies are coherent, published, understood and applied consistently. Overall, the team's view was that the institute's approach to developing and implementing its strategy and academic policies demonstrated effective governance.
60. The team reviewed evidence that demonstrates that the institute has in place appropriate academic leadership to support its academic functions. The institute's 'Articles of association' set out that the director is responsible for leadership of the academic affairs and executive management of the institute and is directly accountable to the Council, reporting to the independent chair. The director is also the accountable officer responsible for compliance with OfS conditions of registration and is the ultimate budget holder able to allocate resources to academic matters as required.
61. The team also reviewed the institute's updated organisational structure, together with job descriptions and CVs of the academic staff and senior managers. The team found that the director and deputy director are appropriately qualified to lead the academic direction of the institute because of their broad knowledge of the industry, experience of management at senior levels and understanding of higher education, and that team leaders and stream leaders are appropriately qualified in terms of subject expertise and academic level. The team's view is that this demonstrates that the institute has in place appropriate academic leadership to support its academic functions.
62. The team concluded that the institute meets criterion A1.1 as the evidence demonstrates that the institute has effective governance with clear and appropriate lines of accountability for its academic responsibilities.



**A1.2: Academic governance, including all aspects of the control and oversight of its higher education provision, is conducted in partnership with its students.**

### **Advice to the OfS**

63. The assessment team's view is that the institute meets criterion A1.2 because its academic governance is conducted in partnership with its students. Its students are individually and collectively able to engage effectively with the management of the institute and its higher education provision.
64. The assessments team's view is based on its review of evidence which shows that the institute has met the evidence requirements for A1.2.

### **Reasoning**

65. The team considered the institute's academic governance structures and found evidence that students are engaged at multiple levels, with the institute's approach to student engagement embodied in section V of the institute's 'Scheme of delegation and full governance framework'. In summary, this sets out that there is student representation at the following committees:
- Undergraduate Experience Committee
  - Staff-Student Liaison Committee
  - Council
  - Academic Board.
66. The team reviewed the minutes and observation notes of the Council, Academic Board and the Institute Management Board as well as the minutes and papers of the Staff-Student Liaison Committee and Undergraduate Experience Committee. The team noted that, although students are not formally included in the membership of the Institute Management Board, joint meetings are held between the Undergraduate Experience Committee, and the Institute Management Board and student representatives have direct and regular access to the senior leadership team through these joint meetings. The team found that the evidence reviewed demonstrates effective engagement and good attendance, with students making clear contributions to discussions. The team considered that there is a wide group of student representatives engaged in academic governance, through membership of these committees which supports the team's view that there is active and effective engagement of students in academic governance at the institute.
67. The team also noted that students are embedded in the operational activities of the institute through membership of the Spaces Management Group and the Learning Services Group. The head representative of the Undergraduate Experience Committee sits on the Council and was recently involved in the appointment of the new director, further supporting the view that students are engaged with the management of the institute.
68. To further consider the institute's engagement of students in its management, and the collaboration with students in developing, implementing and communicating its policies and



procedures, the team reviewed the institute's student submission, along with evidence collated throughout the institute's probationary period, as noted in quarterly reports from the QAA. This included evidence from: the Undergraduate Experience Committee meetings; Staff-Student Liaison Committee meetings; module and mid-module feedback and action plans; meetings between the student body and the Council as well as observations of the Academic Board and the Council. The team found that the range and depth of these engagements demonstrate how the relationship between the institute and the student body has been established over the probationary period. For example, students expressed feeling well supported to undertake their roles as representatives, having been trained to ensure they are fully involved and effectively engaged in the process. In addition, the head student representative has attended AdvanceHE training for student governors, and student representatives benefit from leadership training, funded by the institute and delivered by an external training provider.

69. The evidence considered further supports the team's view that students are actively involved in the governance of the institute. This is demonstrated through both the student representation within the institute's academic governance committee structure and through the way in which the institute values student feedback and considers this feedback at the highest levels of the institute's academic governance. Student engagement across the institute is discussed further under criterion D1 and criterion E1.
70. The team concluded that the institute meets criterion A1.2. The evidence demonstrates that students are individually and collectively engaged in the governance and management of the institute and its higher education provision, with students supported to be able to engage effectively.

**A1.3: Where an organisation granted degree awarding powers works with other organisations to deliver learning opportunities, it ensures that its governance and management of such opportunities is robust and effective and that decisions to work with other organisations are the result of a strategic approach rather than opportunism.**

### **Advice to the OfS**

71. The assessment team's view is that the institute meets criterion A1.3 because its academic governance and management ensure robust and effective oversight of its work with other organisations to deliver learning opportunities.
72. The assessment team's view is that, should the institute propose to work with other organisations in the future, the institute would adopt a strategic approach to ensure arrangements are robust and effective after due consideration of risk in line with the criteria. This is based on the assessment team's view of how the institute currently approaches its management and governance, together with the evidence demonstrated in the management of its current partnership.
73. The assessment team's view is based on its review of evidence under sub-criteria A1.1, A1.2 and A1.3.

## Reasoning

74. The team notes that the institute is part of the Dyson Group and is located at the site of Dyson Technology. The institute regards this relationship as mutually cooperative, with the aim of delivering an experience embedded within the industry to enhance graduate employability, and considers that the interlinked relationships within the Dyson Group are sufficient to provide industry-specific input to its learners.
75. The assessment team reviewed the institute's long-standing relationship with the Warwick Manufacturing Group (WMG), part of the University of Warwick ('the university'), which awarded the institute's BEng programme prior to the institute gaining degree awarding powers. This partnership is legally governed by a tripartite contract between the institute, Dyson Technology and the University of Warwick, whereby the university is the apprenticeship training provider and Dyson Technology is the employer. The previous cohorts of students studying the university's BEng programme are continuing under these arrangements until completion in 2024.
76. The team considered the partnership arrangements and processes during the probationary period, as the institute transitioned away from the university and implemented its own degree awarding powers. The team found that throughout the probationary period there was clear evidence that the partnership was sound and managed appropriately under the institute's governance arrangements, including evidence of managing the performance and engagement of both its own and the university's students. For example, evidence that the institute and the partner worked together was found in the minutes of student engagement groups and through direct observation of the Academic Board. The team also noted that the institute demonstrated that the ongoing monitoring of the partnership is reported through its Academic Board and the Council.
77. The institute does not currently envisage broadening its strategy to work with other organisations to provide other learning opportunities beyond its current arrangement with the university. The team recommends that the institute should consider working in partnership with others in the future, to provide students with broader industry perspectives, though it has currently taken a strategic decision to limit its partnership currently within the Dyson group.
78. Overall, the team's view was that, because of the institute's effective and robust governance and management structures as noted under A1.1 and A1.2, should it decide to work with other organisations, the institute would adopt a strategic approach to ensure arrangements are robust and effective after due consideration of risk.

## Conclusions

79. The assessment team concluded that the institute has effective academic governance and management structures that demonstrate clear and appropriate lines of accountability. The institute effectively engages students as partners in the academic governance and management of academic standards and quality.
80. The team further concluded that the institute's academic governance demonstrates appropriate oversight to ensure that if it decides to work with other organisations, these arrangements will be led by a strategic approach and the management of such opportunities is robust and effective. Therefore, the team concluded that the institute meets criterion A1.

# Assessment of DAPs criterion B: Academic standards and quality assurance

## Criterion B1: Regulatory frameworks

### Advice to the OfS

81. The assessment team's view is that the institute meets criterion B1: Regulatory frameworks because it meets sub-criteria B1.1, B1.2.
82. The assessment team's view is based on its review of evidence which shows in summary that the institute has in place a comprehensive set of academic frameworks and regulations to govern how it awards academic credit, including the approval of degree schemes, the conduct of student assessments and appeals against academic decisions. The institute maintains a definitive record of each programme and qualification that it approves and that these constitute the reference point for delivery, assessment, monitoring, and review of each programme.
83. This view is based on specific consideration of the evidence requirements for this criterion collated throughout the institute's probationary period, and the purposes of this New DAPs end assessment, alongside any other relevant information.

**B1.1 An organisation granted degree awarding powers has in place transparent and comprehensive academic frameworks and regulations to govern how it awards academic credit and qualifications.**

### Advice to the OfS

84. The assessment team's view is that the institute meets criterion B1.1 because it has transparent and comprehensive academic frameworks and regulations which govern how it awards academic credit and qualifications.
85. The assessments team's view is based on its review of evidence which shows that the institute has met the evidence requirements for B1.1.

### Reasoning

86. The team considered the institute's 'Academic regulations for taught programmes' and noted that they are approved by the institute's Academic Board and reviewed annually. It found that the regulations clearly articulate how the institute's approved undergraduate programmes are awarded, including the interrelationship between the institute and Dyson Technology as the employer of the students. The team noted that the institute updated these regulations in August 2023 to encompass Level 7 awards, in response to its plans to deliver two Level 7 programmes from September 2024.
87. The team noted that the academic regulations stipulate that employment of the student by Dyson Technology is a condition of enrolment at the institute, and as such their status as an employee is intrinsically linked to their status as a student. While the team noted the positive impacts of this on students' academic experience, this relationship initially posed a concern to

the team with regard to scenarios whereby students' employment status at Dyson Technology could negatively impact upon the continuation of their studies. The team sought clarification with the institute to understand further how the interest of students would be protected in such scenarios. On reviewing the institute's response and its 'Student protection plan', the team was satisfied that students' interests are protected, such as by facilitating credit transfer to other higher education providers. The team's view was that there is appropriate support and mitigations in place, defined within the 'Academic regulations' and 'Student protection plan', should a student's employment status impact their studies. This supported the team's view that the institute's academic frameworks and regulations are appropriate to its status. The team found these to be transparent and comprehensive which demonstrated that the institute effectively governs how it awards academic credit and qualifications.

88. In line with its New DAPs plan, the institute's programmes are currently operating within two academic frameworks concurrently as it transitions away from its partnership agreement with the university until the final cohort under this agreement completes in 2024. The framework and regulations under the institute's own awarding powers have been in operation since 2021 and the team noted that process of transitioning away from its partnership agreement and regulatory frameworks with the university has been transparent and reported on regularly throughout the probationary period, with the external examiners also reporting that this continued to be managed appropriately. Furthermore, from a review of Staff-Student Liaison Committee minutes and the student submission, the team found that students understood and were engaged with the institute's academic framework and regulatory processes. This supports the team's view that the academic frameworks and regulations are now implemented fully and consistently.
89. The team evaluated the institute's policies and processes for dealing with student complaints, appeals and academic misconduct and reviewed the student complaints logs. The team noted that, throughout the probationary period, there had been a low number of complaints submitted by students and the team considered that all had been dealt with appropriately. Only one complaint had been submitted to the OIA which was subsequently dismissed. The team found this demonstrated that the institute has appropriate and robust regulations to deal with appeals and complaints, which are implemented fully and consistently.
90. In considering the institute's academic regulations further, the team noted that the institute had decided to incorporate an additional degree classification, described as a First Class Honours with Distinction at 80+ per cent. The sector-recognised standards and FHEQ set out the minimum standards and thresholds that providers should meet, and the team noted that a First Class Honours with Distinction represents a higher standard than this. The team wanted to understand this further to make sure that this did not impact on the institute's ability to classify its students as set out in the sector-recognised standards. The team was assured by the institute's response, which provided further clarification that the additional recognition was for exceptional performance and was not intended to be a new classification. The institute recognised that this was not made clear within the published 'Academic regulations for taught programmes' and that it would rectify this with a proposed amendment being taken to the March 2024 Academic Board. The team was therefore satisfied that this did not impact on the institute's ability to classify its students appropriately in line with sector-recognised standards and the FHEQ.

91. The team reviewed how credit is awarded by scrutinising the BEng (Hons) Engineering Degree Apprenticeship and the recently approved MSc Software Engineering and MEng Engineering programmes due to be delivered from September 2024, in addition to reviewing the relevant sections of the institute's academic regulations. The team found that allocation of credit to modules of study is clearly defined in the relevant programme specifications and the pass marks and other detailed information are documented in the institute module specifications]. The academic regulations clearly define how credit is to be awarded, and how credit is accumulated for the award of a degree to be made, while the 'Exam board terms of reference' clearly define the process by which module marks are considered and duly ratified. The transparent and robust application of these processes was demonstrated through the team's review of the institute's BEng examination board meeting minutes.
92. Through considering all of the information reviewed throughout the institute's probationary period, together with this most recent review of the institute's processes (including in particular the correct functioning of the examination boards), the team found the institute's regulations to be transparent, clearly defined and comprehensive. It considered that the regulations were consistently applied to ensure that credit and qualifications are awarded with transparency and fairness. Overall, the team's view was that the institute's approach to its academic frameworks and regulations demonstrated that the institute effectively governs how it awards academic credit and qualifications.
93. Although the team noted two instances where the institute varied from the sector norm, as discussed above, the team is assured of the institute's readiness to grant its own higher education qualifications in terms of the academic framework and regulations it has created. The team is assured that the institute's academic frameworks and regulations governing its higher education provision are appropriate to its status and are implemented fully and consistently.
94. The team concluded that the institute meets criterion B 1.1 as the evidence demonstrates that the institute has transparent and comprehensive academic frameworks and regulations which govern how it awards academic credit and qualifications.

**B1.2 A degree awarding organisation maintains a definitive record of each programme and qualification that it approves (and of subsequent changes to it) which constitutes the reference point for delivery and assessment of the programme, its monitoring and review, and for the provision of records of study to students and alumni.**

### **Advice to the OfS**

95. The assessment team's view is that the institute meets criterion B1.2 because it maintains a definitive record of each programme and qualification that it approves and that these constitute the reference point for delivery, assessment, monitoring and review of each programme. These records are also the reference point for the provision of records of study for students and alumni.
96. The assessment team's view is based on its review of evidence which shows that the institute has met the evidence requirements for B1.2.

## Reasoning

97. The team considered a range of evidence to demonstrate how records for qualification were awarded and maintained. It found that the curriculum is well defined within programme and module specifications, and evidence of this was provided along with the processes applied to any subsequent changes to the curriculum. The team reviewed the programme specifications for the BEng (Hons) Engineering Degree Apprenticeship and the recently approved MSc Software Engineering and MEng Engineering programmes. These informed the team's view that the institute maintains a definitive and up-to-date record of each programme, and that these records are used as the basis for the delivery and assessment of the programmes.
98. The team found that the institute has a clearly defined 'Programme review and modification policy' which sets out the process involved in proposing and approving changes to programmes. The policy categorises changes as either minor or major, and further sub-categorises dependent on potential material impact. The policy also includes a flow chart which clearly maps out the process and identifies appropriate consultation points with students. The team was also provided with evidence that demonstrated that minor modifications to the curriculum are consistently documented and on an appropriate template.
99. Alongside the modification process, the institute undertakes periodic reviews every five years, which are described as the full review of an existing programme 'to assure continuing standards, quality, and currency to ensure continued adherence to the Institute's Strategy and Vision'.
100. The team identified a lack of external input into the programme review and modification process and queried this with the institute, as this appeared to be outside of sector norm practices, based on the assessment team's experience. In its response, the institute explained its approach, noting that due to the nature of the 'minor' programme changes that are permitted through the modification process, it does not consider it pertinent to include external input. The institute noted that the lack of the external advisers within the periodic review process was an oversight and reported that it would update the policy to include the requirement for sufficient and appropriate external membership in readiness for the forthcoming policy review in August 2024.
101. In addition, the team reviewed a set of student records, a student transcript and minutes of examination boards. The team found that this evidence demonstrated that definitive and up-to-date records of each programme and award are being maintained. The team is assured that these records are used as the basis for the delivery and assessment, and although the evidence base is small (based on the stage of delivery, and that only one student has exited the programme), the team was able to review that evidence to provide confidence that the appropriate procedures were in place to do so in the future.
102. The team concluded that the institute meets criterion B1.2 as the evidence demonstrates that the institute maintains a definitive record of each programme and qualification that it approves.

## Conclusions

103. The assessment team concluded that the institute has in place a transparent, comprehensive set of regulations. These regulations cover the academic standards of qualifications, including

the approval of degree schemes, the use of credit, the conduct of student assessments and appeals against academic decisions.

104. Furthermore, the institute maintains a definitive record of each programme which constitutes the reference point for delivery and assessment of the programme, its monitoring and review, and for the provision of records of study to students and alumni. The team therefore concluded that the institute meets criterion B1.



## Criterion B2: Academic standards

### Advice to the OfS

105. The assessment team's view is that the institute meets criterion B2: Academic standards because it meets sub-criteria B2.1 and B2.2.
106. The assessment team's view is based on its review of evidence which shows in summary that the institute has clear and consistently applied mechanisms for setting and maintaining the academic standards of its qualifications. It has demonstrated that it can design and deliver courses and qualifications that meet sector-recognised standards and the FHEQ and has demonstrated that it sets and maintains standards above the threshold, comparable to those set and achieved by other UK degree awarding bodies.
107. This view is based on specific consideration of the evidence requirements for this criterion collated throughout the institute's probationary period, and for the purposes of this New DAPs end assessment, alongside any other relevant information.

**B2.1 An organisation granted degree awarding powers has clear and consistently applied mechanisms for setting and maintaining the academic standards of its higher education qualifications.**

### Advice to the OfS

108. The assessment team's view is that the institute meets criterion B2.1 because it has clear mechanisms for setting and maintaining the academic standards of its higher education qualifications, and that these are consistently applied.
109. The assessments team's view is based on its review of evidence which shows that the institute has met the evidence requirements for B2.1.

### Reasoning

110. To determine how the institute manages its development, approval, monitoring and review arrangements for setting and maintaining academic standards, the team considered the institute's 'Programme design and approval policy' which defines how the institute develops and approves programmes. The policy outlines the process by which initial proposals for new programme developments are firstly considered by the Institute Management Board for strategic fit with the institute's mission and strategy, before being submitted for consideration at the Academic Board and then progressing through to the formal approval process.
111. The team found that the 'Programme design and approval policy', along with the institute's 'Programme review and modification policy', demonstrate robust and clear internal approval processes for the setting and maintaining of academic standards of its awards, from initial proposals through to programme approval and subsequent programme modifications. The team reviewed evidence of the 'Programme design and approval policy' being applied effectively and consistently during the development and approval of the new MEng and MSc programmes through the consideration of minutes of the Academic Board and the case study reports on the development and approval process of the two programmes. This evidence demonstrated engagement with a range of external advisers from the industry and internal



academic stakeholders from the institute and from within Dyson Technology, as well as mapping against external benchmarks (such as FHEQ and sector-recognised standards level descriptors and relevant PSRB requirements from the Institute of Engineering Technology).

112. In addition, the team reviewed the programme specifications for the BEng (Hons) Engineering Degree Apprenticeship and the recently approved MSc Software Engineering and MEng Engineering programmes. These informed the team's view that the institute's awards are offered at levels in line with FHEQ and sector-recognised standards. For example, the qualifications awarded for the institute's BEng programme is located at the correct level of study. The final exit award is appropriately set at bachelors' degree and is at Level 6, with the exit awards of CertHE and DipHE at Level 4 and Level 5 respectively. The team noted that this appropriately reflects the levels at which these qualifications would be expected, in line with the sector-recognised standards, and that awards are appropriately made.
113. Through its review of the 'Programme design and approval policy' and the case study report on the development and approval process of the two new Level 7 programmes, the team found evidence of appropriate use of external advisers. However, the team also noted that the 'Programme design and approval policy' requires such external advisers to sign a non-disclosure agreement, due to the sometimes commercially sensitive nature of the institute's operations. The team was assured that academic integrity was maintained through the process and that this did not compromise the external input to the approval process. The team concluded that the institute makes use of appropriate external and independent expertise through the design and approval of its programmes and qualifications.
114. The team's review of the institute's 'New programme proposal form' provides further evidence of engagement and consultation with students, academic peers, industry experts and external bodies, which the team considered an appropriate level of externality to ensure that academic quality standards are maintained. This informed the team's view that the institute's programme development, approval and curriculum review arrangements are robust and applied consistently. These ensure that academic standards are set at a level which meets the UK threshold standard for the qualification, and are in accordance with its own academic frameworks and regulations. Overall, the team's view was that the institute's approach to programme design and approval demonstrated clear and consistent mechanisms for setting and maintaining the academic standards of its qualifications.
115. The team concluded that the institute meets criterion B2.1 as the evidence demonstrates that the institute has clear mechanisms for setting and maintaining the academic standards of its higher education qualifications, and that these are consistently applied.

**B2.2 Organisations with degree awarding powers are expected to demonstrate that they are able to design and deliver courses and qualifications that meet the threshold academic standards described in the Framework for Higher Education Qualifications (FHEQ). Organisations with degree awarding powers are expected to demonstrate that the standards that they set and maintain above the threshold are reliable over time and reasonably comparable to those set and achieved by other UK degree awarding bodies.**

## Advice to the OfS

116. The assessment team's view is that the institute meets criterion B2.2 because it demonstrates that it designs and delivers courses and qualifications that meet the threshold academic standards described in the FHEQ. The team's view is that these are reliable and reasonably comparable to those set and achieved by other UK degree awarding bodies. Its programme approval arrangements are robust, applied consistently, and ensure that academic standards are set at a level which meets the UK threshold standard for the qualification and are in accordance with its own academic frameworks and regulations.
117. The assessment team's view is based on its review of evidence which shows that the institute has met the evidence requirements for B2.2.

## Reasoning

118. The team referred to the evidence collected in consideration of criterion B2.1 and confirmed that the institute demonstrated that it effectively applies the processes defined in its 'Programme design and approval policy'. The team further considered this policy with reference to the range of external benchmarks, such as the FHEQ level descriptors and relevant PSRB requirements from the Institute of Engineering Technology and British Computer Society. In addition, the team found that the 'New programme proposal form' and the case study reports on the development and approval process of the new Level 7 programmes provide evidence of engagement with the institute's students. Additional engagement was noted with appropriate external and independent points of expertise, to ensure that relevant external points of reference are considered and applied.
119. Furthermore, on reviewing the provided CVs for academic staff and the summary of institute staff's external examining roles, the team found evidence of staff engagement with the activities of other higher education providers. This brings a further degree of externality and expertise to the institute's programme design and approval processes.
120. This evidence supports the team's view that the institute's programme development, approval, and review arrangements ensure that academic standards are at a level which meets FHEQ and sector-recognised standards, through the use of appropriate external and independent expertise and points of reference.
121. The team considered the programme specifications for the BEng (Hons) Engineering Degree Apprenticeship and the recently approved MSc Software Engineering and MEng Engineering programmes. It found that the programmes had been designed with reference to FHEQ level descriptors and are in line with sector-recognised standards for Level 7 qualification descriptors. For example, the sector-recognised standards have a requirement for students

completing a masters' degree to demonstrate 'a systematic understanding of knowledge, and a critical awareness of current problems and/or new insights, much of which is at, or informed by, the forefront of their academic discipline, field of study or area of professional practice'. The team found that this is achieved through the workplace requirements of the BEng programme, which set out that students spend three days a week working alongside Dyson engineers on live projects. The programme specifications across all programmes demonstrated that learning outcomes across the levels of study are appropriate, and the assessments strategies adopted allow students to demonstrate that they have reached the required levels within the specific modules of study.

122. The team also reviewed 15 samples of assessed work from the BEng programme. It found that these showed appropriate marking and moderation to demonstrate that the credit is being awarded fairly, in line with relevant learning outcomes, across the programme of study. The samples demonstrated that standards of the work assessed were in line with the sector-recognised standards regarding 'outcomes a graduate would be expected to demonstrate for each classification'. While the institute has not yet awarded any degrees due to the four-year duration of its BEng programme, the evidence reviewed informed the team's view that credit is awarded only where the achievement of relevant learning outcomes has been demonstrated through assessment. The team was satisfied that both the sector-recognised standards and the academic standards of the institute were demonstrated.
123. In addition, the institute provided a benchmarking comparison of student outcomes, at a modular level, against the performance of students studying the BEng programme under the partnership agreement with the university, which the team found to demonstrate the institute's students' outcomes were comparable to those of the university's cohorts. The team also considered the comments of external examiners which confirmed that student outcomes were in line with other higher education providers. This therefore supported the team's view that the institute's higher education qualifications are offered at levels that correspond to the relevant FHEQ levels and sector-recognised standards. Overall, the team's view was that the design, development and approval of the institute's programmes demonstrated that its qualifications meet the threshold academic standards described in the FHEQ. The team is satisfied that the standards that the institute sets, and maintains, is above the threshold and is reasonably comparable to those set and achieved by other UK degree awarding bodies.
124. The team concluded that the institute meets criterion B2.2 as the evidence demonstrates that the institute can design and deliver programmes and qualifications that meet the threshold academic standards described in the FHEQ in line with sector-recognised standards.

## **Conclusions**

125. The assessment team concluded that the institute has clear and consistently applied mechanisms for setting and maintaining the academic standards of its qualifications. It designs and delivers courses and qualifications that meet sector-recognised standards, and the FHEQ.
126. The team further concluded that the institute sets and maintains standards above the threshold, which are reliable over time as reasonably comparable to those set and achieved by other UK degree awarding bodies, and therefore meets criterion B2.

## Criterion B3: Quality of the academic experience

### Advice to the OfS

127. The assessment team's view is that the institute meets criterion B3: Quality of the academic experience because it meets the requirements for this criterion.
128. The assessment team's view is based on its review of evidence which shows in summary that the institute effectively designs the curriculum, teaching, learning, assessment and feedback in way that delivers a high quality academic experience for all students. The institute demonstrates robust quality assurance of the academic experience to ensure its intentions are being delivered in practice.
129. This view is based on specific consideration of the evidence requirements for this criterion collated throughout the institute's probationary period, and for the purposes of this New DAPs end assessment, alongside any other relevant information.

**B3.1 Organisations with degree awarding powers are expected to demonstrate that they are able to design and deliver courses and qualifications that provide a high quality academic experience to all students from all backgrounds, irrespective of their location, mode of study, academic subject, protected characteristics, previous educational background or nationality. Learning opportunities are consistently and rigorously quality assured.**

### Advice to the OfS

130. The assessment team's view is that the institute meets criterion B3.1 because it designs and delivers courses and qualifications that provide a high quality academic experience to all students from all backgrounds. The team's view is that all learning opportunities are consistently and rigorously assured, and the institute operates effective processes for the design, development and approval of programmes.
131. The assessments team's view is based on its review of evidence which shows that the institute has met the evidence requirements for B3.1.

### Reasoning

132. To inform the assessment team's consideration of the institute's delivery of academic experience to students from all backgrounds, the team reviewed the institute's 'Admissions policy' and access and participation statement 2023-24. The team found that these promote diversity and are appropriate to the current size of the institute's student cohort. The access and participation statement defines how the institute focuses on enhancing recruitment from three underrepresented groups of low socioeconomic backgrounds, female students and students from minority ethnic groups. It reports that all of the institute's students are allocated a student support adviser to ensure that any mental health and disability issues are dealt with appropriately. In addition, the institute's 'Learning and teaching strategy' states as one of its commitments to 'develop an inclusive community treating everyone equally, fairly and with respect'. Further review of the institute's equity, diversity and inclusion (EDI) commitments and student support are discussed under criterion D.

## **Design and approval of programmes**

133. Consideration of the processes for the institute's design, development and approval of programmes is given in full under criterion B2.1, which informed the team's view that the institute operates effective processes. The team considered the institute's 'Programme design and approval policy' and evaluated that it demonstrated a robust, effective and clear internal approval process. The team found that the policy, along with evidence of application of the policy in practice, demonstrates that new programme proposals must be appropriately benchmarked, and involve external advisers. The policy, and evidence of it being applied in practice (as demonstrated through the case study reports of the approval of the MEng and MSc programmes), showed that all relevant staff are informed of the processes and supported throughout to understand their role in following the policies, for example in ensuring appropriate engagement with external and internal stakeholders. The team considered that the case study reports of the approval process of the MEng and MSc programmes demonstrate that there are clear and relevant lines of responsibility for approving new programmes and that these are applied in practice. The team found evidence of appropriate use of external expertise in reviewing the programme against external references, in particular the recent accreditations by the relevant PSRB, and that subsequent action – as a result of recommendations made – is carefully monitored. The team was satisfied that relevant staff are informed of, and provided with guidance and support on, these procedures and their roles and responsibilities in relation to them.
134. The team found that the institute demonstrates coherence in its curriculum development processes through the review of the BEng Engineering programme specification which offers four diverse streams at Level 6 (mechanical, software, electronics, electro-mechanical). The team considered that each of these streams had a good balance between breadth and depth of content and are built appropriately across the programme, with key concepts introduced at appropriate points. They were further satisfied that the multiple pathways offered were appropriate, as evidenced through the recent accreditation by the Institute of Engineering and Technology and British Computer Society, discussed further under criterion D.
135. The team considered how programme planning and approval arrangements were communicated to the institute's learning support services. It was noted that the Head of Engineering Experience, who oversees these services, attends the Academic Board where programme approval requests are considered. The Head of Engineering Experience also attends the Council to ensure that learning support services are fully aware of matters relating to programme planning and any strategic developments proposed for the institute. In addition, staff from the student support team, including the Student Support Manager, are members of Programme Approval Panels, providing early opportunities for specific needs to be identified and addressed. The team found that this demonstrated the close links between the learning support services and the programme review and approval processes.
136. Overall, the team's view was that the institute's approach to the design and approval of courses contributes to a high quality experience for students, irrespective of their background.

## **Learning and teaching**

137. The team reviewed the institute's 'Learning and teaching strategy' which provides overarching principles to be adopted in the design of assessments, and details how the institute's strategic requirements have been used to define specific commitments for the learning and teaching

strategy. For example, commitment 4.1 is 'Delivering an outstanding academic experience'; this is detailed further under commitment 4.1.1 that notes 'we will provide an integrated learning experience that embeds workplace into every stage of study from day one of the programme'. In addition, as discussed under criterion A1, the team considered how the institute's business plan enables the effective annual monitoring of institutional performance, which includes the monitoring and review of the learning and teaching strategy and is used as a mechanism to ensure the aims and objectives of the institute's educational mission and strategic plan are achieved. The team found that this demonstrated that the institute articulates and implements a strategic approach to learning and teaching which is consistent with its stated academic objectives noted within the 'Learning and teaching strategy' and 'Strategic plan'.

138. In considering the physical, virtual and social learning environments maintained by the institute, the team reviewed monitoring assessment reports compiled by previous QAA assessment teams who visited the institute's facilities over the probationary period, both on site and virtually. This is discussed further under criterion D. The institute's VLE was made available to the team and through its own navigation of the system, as well as a review of feedback from students on the functionality of the system, the team observed this to be an accessible, reliable and well organised resource for students. The team reviewed recordings of on-site lectures available on the VLE, which they found demonstrated an accessible study environment, with students fully engaged in a respectful and courteous manner. The team considered the facilities on offer, which had been viewed on site through a comprehensive tour of teaching, library, laboratory, social and accommodation provision during the probationary period. The team found that these facilities, alongside the students' status and work as Dyson Technology employees, provides a high quality, rich technical environment conducive to a positive student learning experience.
139. In addition to the physical and virtual learning environment, the team considered the institute's 'Student support model' and the structure of student support advisers across cohorts. The team found that the institute employs four student support advisers led by a Student Support Manager to provide a range of group and individual support and the team considered that this model further supported the overall learning and teaching. The role of the student support advisers is discussed further under criterion D.
140. The team also reviewed the institute's induction timetables and programme, which the team found to demonstrate appropriate induction and guidance to students on the appropriate and safe navigation of the institute's online and physical environments. The team found the induction programmes to be very comprehensive, covering a range of relevant and appropriate introductions to the workplace, library and IT, as well as student welfare issues such as safeguarding and diversity and inclusion. The team concluded that the evidence reviewed demonstrates that the institute maintains physical, virtual and social learning environments that are safe, accessible and reliable for every student, promoting dignity, courtesy and respect in their use.
141. The team was not able to evaluate learning opportunities for students studying at a distance, because all the institute's programmes are currently, and are intended to be, delivered on-site at the institute's premises.



142. The team reviewed the way in which the institute provides assessment feedback to students. They reviewed 15 samples of assessed BEng work, including the feedback provided to students in terms of how they had performed and what they could do to improve their future work. The team considered that this evidence demonstrated that the institute provides extensive feedback to students to allow continuous improvement in their academic performance. Students can further monitor their own progress through a variety of mechanisms such as within progress review meetings and accessing provisional marks on the institute's VLE, prior to examination boards taking place. In addition, students can monitor attendance records, which are integrated with the VLE and aligned with the institute's 'Student attendance policy'. The team also considered the institute's approach in providing feedback on assessment, by reviewing the institute's 'Assessment marking guidelines', 'Assessment moderation guidelines', 'Assessment mark scheme', 'Assessment approval forms', together with the samples of assessed work from the BEng programme. The team found that the evidence shows clear examples of detailed assessment feedback, including videos of examples of questions and solutions for students. This assured the team that every student is enabled to monitor their progress and further their academic development. The institute's arrangements to support students' academic progress and development is discussed further under criterion D1.
143. Overall, the team's view was that the institute's approach to the learning and teaching of its courses delivers a high quality experience for students and that learning opportunities are consistently and rigorously quality assured.

## **Assessment**

144. In considering the types of assessments used throughout the academic programme, the team noted that the institute's 'Learning and teaching strategy' provides overarching principles to be adopted in the design of assessments. The 'Institute assessment framework' distinguishes between formative and summative assessments, outlines the marking and feedback process and moderation, and provides guidelines for coursework briefs and a marks rubric. The framework also includes a 'tariff table' which demonstrates the equivalence across the full range of assessment types and volumes. The team viewed a wide range of these assessment types being applied through the materials and samples of assessed work available on the institute's VLE. The team considered that the institute's marking rubric is well defined to ensure consistency and transparency of application of marks along with expectations of feedback and moderation. The team considered the institute operates robust and reliable assessments which enable students to demonstrate the extent to which they have achieved the intended learning outcomes. The team's view was informed by the evidence reviewed, alongside the assessment feedback mechanisms and feedback provided to students (as discussed under paragraph 142), together with the comments of external examiners on assessed work.
145. As discussed under B2.1, the institute's student outcomes results reported across all modules are comparable to those obtained by their University of Warwick peers, demonstrating that the institute has provided appropriate learning opportunities in the first three years of operation. This supports the team's view that the institute operates valid and reliable processes of assessment, assured by the external examining process, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought.

146. The team noted that recognition of prior learning under the institute's 'Academic regulations for taught programmes 2023-24' does not permit the award of credit for prior learning, with the exception of students transferring from the University of Warwick BEng Engineering Degree Apprenticeship programme. The team's view is that the institute has demonstrated its awareness of the need to accredit prior learning and has implemented it appropriately according to its regulations for a specified group of students. The team was satisfied that should the institute wish to broaden its approach to accepting prior learning from other institutions, that it had the proper procedures in place to amend its regulations to enable this to happen.
147. The team reviewed how the institute provides students with clear insights into their academic development and considered the student induction and a range of ongoing interventions which support this, including the 'Student support model' and progress review meetings. The 'Student support model' details how student support advisers adopt executive coaching to support students throughout their programme of study. The progress review meetings take place every 12 weeks and are an opportunity for students to reflect on their academic development and progression, and to identify any additional support needed. Each review is recorded by the institute and referred back at the next progress review meeting. The team considered that the support model and review meetings, together with the provisions in place through the Student Support Team (discussed further under criterion D), demonstrate that the institute has in place appropriate support to provide students with clear insights into their academic development. The team also found that the study skills schedule highlights how students are made aware of all aspects of their academic journey and the support offered throughout. For example, setting the academic expectation is evidently embedded into the student induction at the start of the student's journey. This supports students' understanding of the basis on which academic judgements are made as part of their studies with the institute.
148. In addition, the team considered that the institute's marking rubric, accessed through the VLE, along with the feedback mechanism (as discussed under paragraph 142), was further evidence of the institute's approach to supporting students' understanding of academic judgement and assessment. In conclusion, the team's view is that the institute has demonstrated that staff and students engage in dialogue to promote a shared understanding of the basis on which academic judgements are made.
149. The team considered the institute's induction session for students on academic practice; this demonstrates the institute's approach to inform and empower students regarding good academic practice. The team found that the induction session materials clearly map out the academic expectations during their time as students, focussing on academic integrity and misconduct. In addition, the progress review meetings enable students to systematically and regularly reflect on how they have implemented the aspects of academic good practice introduced during the induction. This is evidenced through the copies of reports from review meetings viewed by the team. The team found that this reflected good practice in line with sector standards, based on its experience. Further to this, the institute has a 'Community charter', which was developed from the institute's previous 'Code of conduct', which also sets out the expectations that all staff and students are expected to contribute to a constructive study environment. The team was assured that this evidence demonstrated that students are provided with opportunities to develop an understanding of, and the necessary skills to demonstrate, good academic practice.



150. Upon reviewing the 'Academic integrity and misconduct policy', the team was satisfied that appropriate policies are in place within the institute, to ensure that there is sound academic practice across the higher education provision. The policy clearly demonstrates how the institute aims to prevent academic misconduct, and details the processes set out to address and respond where it is identified. The team noted that this policy is available publicly and provides appropriate guidance to students. In addition, the team found that students are effectively supported in understanding ways to apply good academic practice, as discussed under paragraph 149. The team further considered that the institute has only reported one case of academic misconduct during its probationary period. Therefore, the team was satisfied that the institute operates effective processes for preventing, identifying, investigating and responding to unacceptable academic practice.
151. The team reviewed 15 samples of assessed work from the BEng programme, including the process by which work was marked and moderated. The team found that the marking of student work is undertaken fairly and consistently by the institute academic staff, in line with the institute's 'Assessment marking guidelines', 'Assessment moderation guidelines' and 'Assessment mark scheme'. As discussed further under paragraph 142, the team found that the institute has in place a comprehensive assessment marking and moderation policy which ensures consistency across the institute's staff. Together with the institute's external examiners' annual reports, this informed the team's view that the institute's processes for marking assessments and for moderating marks are clearly articulated and consistently operated by those involved in the assessment process.
152. Overall, the team's view was that the institute's approach to assessment is effective and contributes to a high quality academic experience for students, irrespective of their background.

### **External examining**

153. The team considered the institute's 'External examiner framework' and the appointment and induction of its external examiners throughout the probationary period to evaluate the range of external input to the institute's provision. The team found that the institute makes appropriate use of sufficiently qualified external examiners, evidenced through their associated CVs. The team also reviewed evidence that demonstrated the institute's engagement with external examiners through 'Assessment approval forms', whereby external examiners are asked to provide approval and comments regarding modules assessment. The team reviewed evidence of external examiner scrutiny of student work, provided through external examiner report forms. These assured the team that external examiners are fully engaged in the process of moderation of student work in advance of the examination boards. The team found that the evidence supports its view that the institute makes scrupulous use of external examiners including in the moderation of assessment tasks and student assessed work.
154. In addition, the team found evidence that demonstrated that the institute considers and addresses feedback from external examiner reports. This is demonstrated through the production of formal responses to the external examiner reports, produced by the chair of the Board of Examiners and the Head of Professional Services, and shared with the external examiners. The team considered these responses were robust and provided clarity to the external examiners as to how the institute would address issues raised by the external examiner. This satisfied the team that the institute gives full and serious consideration to the

comments and recommendations contained in external examiners' reports and provides external examiners with a considered and timely response to their comments and recommendations.

155. Overall, the team's view was that the institute's approach to external examining contributes to a high quality academic experience for students and that learning opportunities are consistently and rigorously quality assured.

### **Academic appeals and student complaints**

156. The team evaluated the institute's 'Student complaints policy' and 'Academic appeals policy' and found evidence of effective procedures that are clear, accessible, timely and enable enhancement of the academic experience. For example, the 'Student complaints policy' details the options available to students should they wish to raise a concern and provides information of the two-stage approach of the process with clear timeframes noted. The policy also demonstrates a flexible, proportionate and timely approach; for example it sets out that 'all reasonable attempts will be made to find a mutually agreeable date to convene the [complaints] panel with the student(s)' within 20 working days. The team also noted evidence of the institute aligning with and responding to external reference points; for example both policies are demonstrably aligned to both the UK Quality Code for Higher Education<sup>8</sup> and OIA published best practice,<sup>9</sup> which the team considered to be appropriate based on its experience. The team found evidence of the institute putting this into practice through its reporting of complaints and appeals.
157. The team found that the dual status of students as employees is clearly detailed within the 'Student complaints policy', noting there is a separate process, outside the remit of the institute, for complaints related to students' employment at Dyson Technology. Students are, necessarily, linked to both the institute and Dyson Technology. The team was assured that, should a student's employment status impact upon their status as a student (such as termination of employment) that the student's interests are protected under the 'Student protection plan'. The team was satisfied that there is a clear delineation between the Student Complaint Policy and the 'Academic appeals policy'. In addition, the team noted that reports relating to complaints, appeals and cases of misconduct are provided to the Academic Board. This informed the team's view that the institute has effective procedures for handling academic appeals and student complaints about the quality of the academic experience; these procedures are fair, accessible and timely, and enable enhancement.
158. As discussed under criterion B1, the team noted that throughout the probationary period there had been a low number of complaints raised by students, and the team found that these had been dealt with appropriately in accordance with the institute's complaints policy. One complaint had been submitted to the OIA which was subsequently dismissed, which the team considered to demonstrate that the institute's policy and approach to managing complaints is effective, and that appropriate action is taken following an appeal or complaint. This assured the team that the institute has demonstrated how appropriate action is taken following an appeal or complaint.

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<sup>8</sup> See: [The UK Quality Code for Higher Education \(qaa.ac.uk\)](http://qaa.ac.uk).

<sup>9</sup> Available at: [Providers internal procedures - OIAHE](#).

159. The team concluded that the institute meets criterion B3.1 as the evidence demonstrates that the institute provides a consistently high quality academic experience for students from all backgrounds and that learning opportunities are consistently and rigorously quality assured.

## **Conclusions**

160. The assessment team concluded that the institute demonstrates that it designs and deliver courses and qualifications that provide a high quality academic experience to all students from all backgrounds.

161. The team further concluded that learning opportunities are consistently and rigorously quality assured and the institute designs the curriculum, assessment and feedback in way that gives diligent students the best chance of achieving the qualification being sought. Therefore, the team concluded that the institute meets criterion B3.

# Assessment of DAPs criterion C: Scholarship and the pedagogical effectiveness of staff

## Criterion C1: The role of academic and professional staff

### Advice to the OfS

162. The assessment team's view is that the institute meets criterion C1: The role of academic and professional staff, because it meets the requirements for this criterion.
163. The assessment team's view is based on its review of evidence which shows in summary that the institute has demonstrated that it has appropriate numbers of staff to teach the students, and that all staff are appropriately qualified to teach and support the students at the levels of the qualifications being awarded. The institute ensures that staff maintain a professional understanding of current developments in research and scholarship in their subject and keep in touch with their professional practice. The institute has also demonstrated that the assessment of students is carried out in a professional, rigorous and consistent way.
164. This view is based on specific consideration of the evidence requirements for this criterion collated throughout the institute's probationary period, and for the purposes of this New DAPs end assessment, alongside any other relevant information.

**C1.1 An organisation granted powers to award degrees assures itself that it has appropriate numbers of staff to teach its students. Everyone involved in teaching or supporting student learning, and in the assessment of student work, is appropriately qualified, supported and developed to the level(s) and subject(s) of the qualifications being awarded.**

### Advice to the OfS

165. The assessment team's view is that the institute meets criterion C1.1 because it has appropriate numbers of staff to teach its students, and that all involved in teaching or supporting learning are appropriately qualified, supported and developed.
166. The assessments team's view is based on its review of evidence which shows that the institute has met the evidence requirements for C1.1.

### Reasoning

167. To inform the assessment team's consideration of the institute's scholarship and pedagogical effectiveness of staff, the team reviewed the institute's 'Continuous professional development (CPD) framework', guidance on CPD for institute staff and 'Continuous improvement framework'. These documents outline the institute's requirement for staff to complete skills audits at the start of employment, and annually, as part of the 'CPD framework skills matrix objectives' and is complementary to the academic specific CPD framework. The team considers these frameworks to be in alignment with the UK Professional Standards

Framework (UKPSF)<sup>10</sup> which the team considers a reflection of appropriate sector standards based on its experience.

168. The team found that the institute's guidance on CPD for institute staff clearly articulates that staff are requested to complete skills audits, and update these at least annually, to support the institute to identify where training and support is needed. The institute's staff development plan for non-academic staff also articulates the mandatory and bespoke training available for staff, including access to training materials online. The team considered that the academic specific CPD framework demonstrated that support mechanisms are in place for academic staff to identify how their roles align with the UKPSF and to identify areas of academic and professional development. In considering the institute's CPD guidance and plans demonstrated throughout the probationary period, it is the team's view that staff are actively engaged with the pedagogic development of discipline knowledge.
169. The institute's CPD framework provides clear staff development information for both academic and non-academic staff and includes opportunities for staff to reflect on, and discuss with their line managers, the impact of training. The framework also includes opportunities for mentoring, shadowing and observing, and support for professional body membership. The team also reviewed the 'Peer observation framework', which it found enables staff to reflect on their teaching and wider development needs with the opportunity to outline action plans for individual development, as well as wider academic team development. The team found that relevant learning, teaching and assessment practices at the institute are informed by reflection, evaluation of professional practice and subject-specific and educational scholarship. In addition, there are evident opportunities for staff to engage in reflection and evaluation of their learning, teaching and assessment practice.
170. The team reviewed the CVs of academic staff and senior managers and are assured that staff have both academic and professional expertise, and qualifications to support the delivery of the provision. The team notes that, according to the institute's self-assessment submission, 10 out of 14 academic staff at the institute hold doctorate-level qualifications, and a further two members of staff completed their doctorates following this submission in November 2023 (as noted in the institute's additional evidence request response). The CVs reviewed by the team also show evidence of teaching and professional qualifications, training for teaching and supervision, as well as achievements from the Higher Education Academy, which the team note to be appropriate and reflective of sector standards. The institute's CPD framework also demonstrates that staff are enabled to request funding from the institute to support development needs, including applied research opportunities with Dyson Technology staff, which can inform their teaching. The team's view is that this demonstrated that staff at the institute have the relevant academic and professional expertise.
171. The team further considered the institute's 'Continuous improvement framework' and the requirement for staff to complete skills audits. The team found that the framework enabled and encouraged staff to demonstrate active engagement in their own development in teaching and discipline knowledge. The team noted that this was also reflected within the CVs reviewed, as discussed under paragraph 170, which showed evidence of staff having gained teaching and professional qualifications, undergone training for teaching and supervision as well as gaining fellowship from the Higher Education Academy fellowship.

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<sup>10</sup> Available at: [UK Professional Standards Framework \(UKPSF\) | Advance HE \(advance-he.ac.uk\)](https://www.ukpsf.ac.uk/).

The institute's 'CPD framework' and paper submitted to the Council regarding 'Partnerships and Research Provision' (postgraduate research, identifies the research and pedagogy expertise within the academic team and potential development opportunities within the multidisciplinary team. This supports the team's view that staff are actively engaged with the pedagogic development of discipline knowledge and that there is evidence of active engagement with research and/or advanced scholarship appropriate to the level and subject of the qualifications being offered at the institute. This view is also supported through the evidence provided throughout the probationary period. This further informed the team's view that the institute's approach to CPD demonstrated that everyone involved in teaching or supporting student learning, and in the assessment of student work, is appropriately qualified, supported and developed.

172. To inform the assessment team's consideration of the institute's staff understanding of current research and advanced scholarship in their discipline, the team reviewed the following evidence:

- staff CVs
- 'CPD framework'
- guidance on CPD for institute staff
- 'Continuous improvement framework'
- the institute's New DAPs end assessment self-assessment
- the institute's submission in response to the team's request for additional information.

173. The team considered that the evidence reviewed and the recent awards of PhDs to two staff members demonstrate a good understanding of current research and advanced scholarship. The team found that the evidence reviewed demonstrates that the institute supports staff to engage in research and scholarship. In addition, there is evident support of conference attendance and evidence that research active staff are publishing, as outlined in the institute's 'Academic team publications' and staff CVs. The institute also set out that it is developing plans for co-supervision of doctoral students, to enable staff who have the experience to support staff who do not. The team concluded there is understanding of current research and advanced scholarship in staff disciplines, and that it informs and enhances their teaching. There is also active engagement with research and/or advanced scholarship appropriate to the level and subject of the qualifications being offered.

174. The team further considered the skills audit requirements, as noted in the 'Continuous improvement framework' and reviewed the CPD plan for the institute's director. The team found that this identified relevant development needs, detailed how the opportunities were to be made available, the resources required and proposed a clear timeframe. The team considered the CPD plan to be relevant to the role and needs of the individual to support their role in the institute. The institute records all CPD conversations within its HR system, Workday, and supports staff to reflect on their relevance, which is further supported by the peer observation framework which allows for reflection. This supports the team's view that the institute provides opportunities for staff to engage in reflection and evaluation of their learning, teaching and assessment practice.

175. The institute's self-assessment reports it produces for the Academic Board periodically report on CPD and areas of improvement are highlighted. The team noted that these include recommendations relating to consistency in assessment feedback and improving the assessment criteria. The team also reviewed the three samples of minor modifications from the BEng programme, and was assured that they demonstrated relevant teaching and assessment practices which are informed by reflection, leading to changes in delivery methods, learning outcomes, assessment weighting and format of assessments. This supports the team's view that the institute provides opportunities for staff to engage in reflection and evaluation of their learning, teaching and assessment practice and to enhance their practice and scholarship, and to gain experience in curriculum development and assessment design.
176. On review of the institute's CPD funding and records of types of CPD activities, the team was assured that the institute provides appropriate funding for training and professional development annually and that it provides a range of development opportunities relevant to the different roles. This includes safeguarding as well as research, teaching, assessment and discipline specific training. The institute's 'Admissions policy' details specific training and guidance provided to the recruitment and admissions team, such as Competition and Markets Authority (CMA) guidance, safeguarding, and guidance for supporting students with disability and other support needs. In addition, the institute provides specific training for student recruitment, which includes marketing, admissions, diversity and inclusion, and assessments.
177. The institute provided a summary of staff training CPD activities undertaken between November 2022 and February 2023, which the team found to demonstrate a comprehensive range of training and support provided to all staff, relevant to their roles. In particular, the team noted that it included training to support the development of micro-credentials, as well as attendance at conferences for postgraduate model theory, which the team noted would support the institute in its plans to teach and deliver Level 7 degrees. The institute's 'Peer observation and teaching framework' details the requirements for all academic staff to participate in peer observations and is aligned to the 'Learning and teaching strategy'. The peer observations are confidential, although summaries are reported to the Academic Board. The evidence considered by the team demonstrates that the institute has a comprehensive CPD framework which provides development opportunities for all academic and professional services staff to enhance their practice and scholarship. The opportunities are wide-ranging, role specific and relevant to the institute.
178. The team's view is that the institute provides staff with opportunities to gain experience in curriculum development and assessment design, demonstrated throughout the probationary period. This was further evidenced by the institute's programme design, development and approval processes which set out how staff involved in programme and module design should be supported by more experienced colleagues during the process. The team found that the templates and process for module assessment approval are clear and demonstrate the internal and external moderation that takes place before they are issued to students. In addition, module leaders complete end-of-year module reviews, enabling them to reflect on the success of the module, student satisfaction and performance. The team found that module leaders use the reviews to respond to student feedback and make module assessment changes through the Minor Modifications process.



179. On reviewing the academic staff CVs and the summary of institute staff's external examining roles, the team found evidence of staff engaging with the activities of other higher education providers, for example through acting as external advisers and examiners, as well as experience of programme management design and development. Further to this, academic staff have been involved in the development of the institute's BEng, MEng and MSc programmes which demonstrated that staff have been able to apply their previous knowledge and experience of curriculum development and assessment design or gain new experience in the development and approval of the new programmes. The team concluded that the institute provides opportunities, internally and externally, to gain experience in curriculum development, assessment design and engage with activities such as external examining, validation panels and external reviews. This supports the team's view that, at the institute, everyone involved in teaching, designing of curriculum, and in the assessment of student work, is appropriately qualified, supported and developed.
180. The team reviewed the institute's 'Assessment marking guidelines', 'Assessment moderation guidelines', 'Assessment mark scheme guidelines', assessment approval forms, module review forms and the institute's VLE to consider the institute's staff expertise in providing feedback on assessment. The team also reviewed 15 samples of assessed work from the BEng programme. The team found that the evidence shows clear examples of constructive feedback, including videos of examples of questions and solutions for students. In addition, the team's review of academic staff CVs demonstrates relevant experience in developing assessments, teaching, learning and professional practice. The team concluded that staff have expertise in providing feedback on assessment, which is timely, constructive and developmental.
181. The team considered evidence that informed its view that the institute has the expertise and experience of curriculum development and assessment design. The institute's 'Programme design and approval policy' clearly outlines the process and responsibilities for programme design and approval, identifying the relevant stakeholders to consult with. The 'MEng programme development case study' and the 'MSc software engineering programme development case study' supports the team's view that the institute has the capability and expertise to effectively design and approve its programme's curriculum, by clearly articulating the rationale for the development of the programmes and following relevant and appropriate processes.
182. The MSc Software Engineering programme specification includes a rationale for the programme and details the market needs for software engineers and the relevant entry requirements. It also includes exit awards and the associated learning outcomes for each exit award, ensuring that learning outcomes are achieved. The MEng programme specification specifies the delivery mode, contact hours, entry requirements and programme and module learning outcomes. For both programmes, the learning outcomes align with the overall programme outcomes and the specified modules provide a coherent programme of study. In addition, the team found that the programme proposal and programme specification for the MSc and MEng were aligned with sector expectations of assuring standards because they referenced QAA subject benchmarks,<sup>11</sup> PSRB accreditation requirements, FHEQ level descriptors, as well as sector-recognised standards. The team noted that the coherent nature of these programme specifications was reflected in the programme learning outcomes and the

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<sup>11</sup> See: [Subject Benchmark Statements - full list \(qaa.ac.uk\)](http://www.qaa.ac.uk).



expertly informed curriculum structures. The programme specifications also demonstrated appropriate assessment strategies that demonstrated expertise of the staff in curriculum development and design.

183. The team reviewed evidence that demonstrated appropriate staff expertise and experience in the internal moderation of assessments and the modification and design of assessments. The 'institute assessment framework' underpins the assessment processes and outlines the roles and responsibilities of staff for assessment and feedback processes. The framework distinguishes between formative and summative assessments, outlines the marking and feedback process and moderation, and provides guidelines for coursework briefs and a marks rubric. The framework is linked to the 'Learning and teaching strategy' and the 'Academic integrity and misconduct policy'.
184. The assessment team considered that, although the institute has not yet delivered Level 7 programmes, the staff CVs reviewed by the team indicated appropriate experience of teaching and assessing at Level 7. Further to this, the evidence reviewed of the design and approval of the new MSc and MEng programmes provided further assurances to the team that the institute has the experience and expertise to design and approve Level 7 programmes. This was demonstrated through the MSc Software Engineering and MEng Engineering programme approval papers that were reported to the Academic Board. These detailed the positive outcomes and feedback from the approval panel members, including the benchmark outcomes and commendations. In addition, the team reviewed evidence that demonstrated experience and expertise of staff in undergraduate programme approval and review relating to the development of the existing BEng programme. This informed the team's view that staff at the institute, including programme and module leaders and assessment coordinators, are experienced in designing and developing programmes and assessments. This is further evidenced and discussed under criterion B3.
185. The team noted that the Institute of Engineering Technology recently awarded accreditation to the institute's BEng apprenticeship programme, backdated to the 2020 cohort of students. The team reviewed the 'Institute of Engineering Technology Accreditation Report and Action Plan'. Alongside this, the British Computer Society has accredited the institute with 'Accredited Technical Standard' (TECH 10) for its BEng Engineering (Software Stream) for cohorts starting from September 2024. Evidence of the accreditation from two PSRBs supports the team's view that the institute has the expertise to design and develop programmes which are coherent and provide graduates with the necessary skills for employment.
186. The team's consideration of staff CVs evidenced experience of engagement with other higher education providers, including validation panel members and chairs, external examining and external reviewers. Staff experience of external examining appears to be across a range of programmes and levels, including undergraduate and postgraduate. The 'Deputy director academic CV' provides further assurance there is experience and expertise in developing curricula and assessments. This supports the team's view that the institute staff, including programme and module leaders and assessment coordinators, engage in activities, such as external examining, validation panels and external reviews in other higher education organisations.

187. Based on the team's review of all of the institute's academic staff's CVs, it forms the view that staff at the institute demonstrate the required skills and expertise to teach all students with a generous staff student ratio of 1:11. The institute reported that with the recruitment targets for the 2024-25 and 2025-26 academic years, the staff student ratio will be 1:11 and 1:12, respectively. The team is therefore satisfied that the institute has the appropriate number of staff. In addition, considering the institute's plans to deliver Level 7 programmes, the team was assured by the evidence that showed that staff have the relevant qualifications, experience and expertise to deliver the proposed MSc and MEng programmes, alongside the current BEng programmes.
188. The team reviewed the institute's 'Recruitment guide' led by the in-house talent team and found it to be comprehensive and to provide clear, detailed guidance, including a flow chart outlining the full process from preparing job descriptions to interviewing and induction. The institute's recruitment and development strategy for academic staff and the 'Academic recruitment mitigation plan' specify the expertise required and the roles and responsibilities for curriculum development, quality assurance and teaching, learning and assessment. This evidence supported the team's view that the institute has appropriate recruitment practices. In addition, the team noted that the institute reports new staff at the Academic Board, and the recent recruitment of two new senior members of academic staff further demonstrates its effective staff recruitment processes.
189. The team concluded that the institute meets criterion C1.1 as the evidence demonstrates that the institute has appropriate numbers of staff to teach the students, the staff are appropriately qualified and developed to teach and support the students at the levels of the qualifications being awarded.

## **Conclusions**

190. The assessment team concluded that the institute has the appropriate capacity and competency of staff who teach, facilitate and assess the learning that is central to the value of the education offered. All staff are appropriately qualified and maintain a professional understanding of current developments in research and scholarship in their subject and keep in touch with their professional practice.
191. Furthermore, the team concluded that teaching at the institute reflects the latest developments in the subject field, in a careful, conscious and intellectually demanding manner. Therefore, the team concluded that the institute meets criterion C1.

# Assessment of DAPs criterion D: Environment for supporting students

## Criterion D1: Enabling student development and achievement

### Advice to the OfS

193. The assessment team's view is that the institute meets criterion D1: Enabling student development and achievement, because it meets the requirements for this criterion.
194. The assessment team's view is based on its review of evidence which shows that the institute has appropriate arrangements and resources to enable students to develop their academic, personal and professional potential. The institute also monitors and evaluates these arrangements and resources regularly and consistently. The institute has demonstrated that all facilities, digital resources and support activities maximise students' chances of developing their potential to achieve the qualification they are seeking. Further, the institute has demonstrated that it embodies integration, coherence and internal cooperation across all areas for student development, including academic departments and student representative bodies, as well as external organisations.
195. This view is based on specific consideration of the evidence requirements for this criterion collated throughout the institute's probationary period, and for the purposes of this New DAPs end assessment, alongside any other relevant information.

**D1.1 Higher education providers have in place, monitor and evaluate arrangements and resources which enable students to develop their academic, personal and professional potential.**

### Advice to the OfS

196. The assessment team's view is that the institute meets criterion D1.1 because it has resources in place which enable students to develop their academic, personal and professional potential, and these are monitored and evaluated.
197. The assessments team's view is based on its review of evidence which shows that the institute has met the evidence requirements for D1.1.

### Reasoning

198. To inform consideration of the institute's strategic and operational approach to student development and achievement, the team reviewed the institute's staff and governance structure and evaluated how that supports student development and achievement. The team found that the institute is clearly organised into a number of activity-specific teams, namely:
- an Academic Team to provide academic and pastoral support
  - a Student Support Team to provide wellbeing, welfare mental health and disability support

- a Professional Services Team focusing on governance, quality, student engagement and academic administration
- a Workplace and Engineering Experience Team to support work experience and professional skills development; and a newly formed Digital, Project Management Office
- a Smart Campuses Service Team to provide digital and technical support for resources.

199. The team also considered the updated institute's 'Student support model', which was implemented from September 2023, and details how student support advisers adopt executive coaching to support students throughout their programme of study. The team considered that this model, and the provisions in place through the Student Support Team, demonstrated appropriate support for students across wellbeing, welfare, specialist referrals and transition through their learning journey, including independent study. The team noted that this model was developed during the probationary period, following the institute's review of the student support team and feedback from students, which supports the team's view that the institute takes a comprehensive and operational approach to determine and evaluate how it enables student development and achievement for its students. The updated 'Student support model' also demonstrates how the institute takes into account different students' needs and monitors the effectiveness of its student support provision.
200. On reviewing the institute's academic policies associated with student support, the team was assured that the institute has appropriate policies in place to support student development and achievement, and that these policies reflect best practice adopted across the sector, based on the team's experience. For example, the 'Reasonable adjustments policy' enables students to declare support needs for early and personalised support to be put into place, as well as providing relevant information about what support is available. The policy details how students are supported in requesting such adjustments throughout their studies. Further, the 'Mitigating circumstances policy' details the options for students should they experience circumstances affecting their studies. The team concluded that the institute's academic policies demonstrate a comprehensive strategic and operational approach to student development and achievement for its diverse student body.
201. In considering the way in which students are advised about and inducted into their programmes, the team reviewed the institute's induction timetables and programme. The team found these to be comprehensive, covering a range of relevant and appropriate topics. The breadth of information provided included an introduction to the workplace, student welfare issues such as safeguarding and diversity and inclusion, library and IT guidance, and academic support. This evidence demonstrated that students were engaged in a range of induction activities, such as ice breakers, and were signposted to relevant academic support information, such as academic integrity and misconduct.
202. The academic induction and support provision also includes a 'Mathematics diagnostic' which identifies the varying level of mathematical backgrounds of all students, through an initial questionnaire. This helps staff at the institute to plan the appropriate level of support to students. The institute also runs a 'Physics summer school' which aims to prepare and support students who do not have a physics qualification. The team also noted that further support is provided via an academic tutor who guides students on selection of study stream, transition to study and study skills. Student support advisers support students in both personal

and professional development, including mental health and disability support. The team therefore concluded that students are advised about, and effectively inducted into, their study programmes. Student diversity is taken into account, which also supports the view that the institute's approach to student support is guided by a commitment to equity. This supports the team's view that the institute has in place appropriate arrangements and resources which enable students to develop their academic, personal and professional potential.

203. The team reviewed the institute's 'Admissions policy' and 'Admissions process for 2023' which outline the support provided to applicants, including support for applicants from low socioeconomic backgrounds and promoting women in engineering. The evidence reviewed demonstrates a structured admissions process staged throughout the application cycle, underpinned by a commitment to equality and diversity. The admissions process includes a variety of activities such as assessment centre workshops, academic support workshops for maths, and interview preparation workshops. The team also noted there are specific measures in place aimed at identifying and enabling applications from low socioeconomic groups, for example using free school meals and low-income benefits as indicators as part of the admissions process. In addition, the institute's 'Admissions policy' clearly outlines the process and provision of information for applications, while detailing the required training that all staff involved in the admissions process must undertake, including equality and diversity training. This further informed the team's view that the institute takes steps to enable applications from a diverse body of students and its approach is guided by a commitment to equity.
204. The team found that the admissions process had been reviewed during the probationary period and the institute evaluated entrant and decliners data, as part of a strategic review of its Admissions process. This demonstrated that the institute had considered the impact of its reviewed process, including the impact on recruiting a diverse student body. Changes introduced focused on the aim of increasing recruitment diversity, for example by redesigning online assessments and application support to minimise adverse impact on applicants. The team considered the subsequent report submitted to Council demonstrated a reflective, comprehensive and strategic approach to student admissions to support diversity in its student body.
205. The institute has in place a 'Reasonable adjustments policy', which is linked to the 'Admissions policy', and enables students to declare support needs for early and personalised support to be put into place, as well as providing relevant information about what support is available. The policy details a range of adjustments available for students, including short, seasonal and long-term adjustments. Students are supported in requesting such adjustments throughout their studies, and the policy clearly outlines the stages of the process along with the information required from students. Furthermore, the team noted that the institute prioritises personalised learning as key to student success and transition. The team's review of the 'Student submission' evidenced that academic staff are easily accessible and are aware of each student's abilities and development needs. The team concluded that the reasonable adjustments policy, along with the institute's approach to personalised support, demonstrates a comprehensive and effective approach which takes into account different students' needs, while ensuring support is identified and managed at an early stage.
206. The team considered the institute's support and counselling services and 'Student support model'. It noted that the institute delivers regular wellbeing and development sessions and

information for staff and students, demonstrated by the 'Neurodiversity week', 'Gender Identity newsletter' and 'Personal development curriculum' update. The team reviewed the staff development opportunities in place to support counselling and welfare, which includes safeguarding workshops. In addition, the institute offers ongoing staff training for academic and professional services staff on its intranet 'Dyson Learning', which also provides access to LinkedIn Learning, thereby enabling staff to identify development needs based on their roles and access a huge range of topics, such as mental wellbeing, document formatting and talent management. This informed the team's view that the institute has appropriate support and counselling services in place. In addition, as discussed further under criterion C1, the team found that there are appropriate staff development opportunities in place for academic and professional services staff, including training for staff to support counselling and welfare support for students.

207. In considering the effectiveness and monitoring of student support provisions, the team noted that these are monitored by the professional services team through the 'Student annual survey 2023 action plan'. The team noted that feedback from students via this plan indicates 87 per cent satisfaction with the welfare and support services. The action plan also includes actions and timelines for implementing improvements across all student services, including welfare support and counselling services. The team also reviewed the institute's 'Top 10 Improvements to the Student Experience' report from June 2023 and noted that it specifically focuses on feedback from students to the professional services teams.
208. The institute demonstrated effective monitoring and evaluation of services following feedback that identified changes required to the allocation of student support advisers. The institute noted that previously, each cohort was allocated a student support adviser who would follow them through the duration of the four-year programme. However, following feedback from students and student support advisers, it was noted that this led to resistance by students to engage with other advisers; it also led to resource issues for advisers in supporting all students during peak periods. The institute responded to these issues through the new student support model, which shows that advisers are now allocated students from across all years.
209. The evidence considered by the team informs its view that the effectiveness of the institute's student and staff advisory, support and counselling services are monitored, and any resource needs arising are identified and considered. This further supports the team's view that the institute's approach to student induction and support demonstrated that the institute has in place, monitors and evaluates arrangements and resources which enable students to develop their academic, personal and professional potential.
210. The team reviewed a range of evidence relating to the institute's administrative support systems to consider whether they enable accurate monitoring of students' progression and performance. The team evaluated the progress made in this area during the institute's probationary period, together with a review of the institute's VLE (Canvas), apprenticeship tracking system (A-Track) and student records system. The team found that the institute has in place an integrated approach across these systems. For example, A-Track monitors the required work-based learning, knowledge, skills and behaviours of the students during the degree apprenticeship, which integrate to the institute's VLE and student records system. The institute also has in place 'workflows' between the VLE and student records system to enable overnight uploads of assessment grades to the students' records. Subsequent reports of the



assessment grades for examination boards are prepared directly from the student record system, therefore minimising errors. In addition, the team noted that the integration of the VLE and records system allows students to have access to provisional marks on the VLE, prior to marks being ratified and confirmed at the institute's examination board meetings.

211. The institute's VLE and 'LearnerHub' application provide students with access to a dashboard to monitor progress towards achievement of their qualification and includes individual learning records, portfolio development, assessment reports, and supporting materials such as handbooks, complaints procedure and reasonable adjustments. The institute also monitors students' attendance through the student record system, as detailed within the institute's 'Student attendance policy'. The attendance records are integrated with the VLE and 'LearnerHub' which allows staff and students to monitor and review these. The team concluded that the systems in place demonstrated that the institute's administrative support systems enable it to monitor student progression and performance accurately to provide the necessary information to satisfy management information needs. This further supports the team's view that institute has in place arrangements and resources which enable students to monitor and develop their academic, personal and professional potential.
212. The team considered the institute's 'Study skills schedule', 'Induction programme' and 'Personal development curriculum' update to identify the opportunities that the institute provides to develop student's professional development skills. The team found that the institute offers opportunities to students to develop skills in a range of areas including report writing, understanding the value of assessments and transitioning across through their programme of study. There is evidence of support for academic integrity and exams, including access to mock exams via the VLE. In addition, the team found that the institute sets out 'Professional development competencies' and holds 'Personal and professional development days' for students to support students to identify how and where in their student journey their personal and professional competencies can be developed. The institute has in place a holistic overview of support according to the level of study, from the transition into higher education at Level 4 and across the programme to graduation, as well as personal wellbeing and career planning.
213. The team found that personal and professional development of students cuts across the curriculum. This is demonstrated by the 'Summer series modules', where students are provided with problem-based learning challenges and develop their soft skills, such as negotiation, teamwork, adapting to change and networking. In addition, the summer series also provides opportunities for students to participate in fully funded international work experience. The recent accreditation of the BEng programme by the Institute of Engineering Technology and the British Computer Society, which focuses on the relevance to employability, further supports that the institute provides opportunities for students to develop skills to enable their academic and professional progression for employment. The evidence reviewed informed the team's view that the institute provides a range of opportunities for all students to develop skills that enable their academic, personal and professional progression.
214. In evaluating the institute's learning resources and specialist facilities, the team considered monitoring assessment reports compiled by previous QAA assessment teams who visited the institute's facilities over the probationary period, both on site and virtually. In addition, the team reviewed the '2023 Workplace induction' timetables which include health and safety information regarding the use of specialist facilities that are available at the institute, as well



as library, IT, VLE, cybersecurity, and academic system induction sessions. The institute also reports that students are provided with introductory electrical safety training by an external provider to prepare them for work in the laboratories. This evidence supports the team's view that the institute provides students with the opportunities to develop their skills to make effective use of the learning resources, including the safe and effective use of specialist facilities.

215. The team had access to the institute's VLE and reviewed samples of BEng teaching materials, including examples of problems and solutions to support guided learning and development of subject knowledge. As discussed under criterion B3, the team found the VLE to be a clear and useful resource and noted that the Student Annual Survey 2023 Action Plan includes actions to further improve the ease of access to module information and academic resources on the VLE. The team concluded that the institute provides students with the opportunities to develop their skills to make effective use of the learning resources, specialist facilities and the digital and virtual environments.
216. Overall, the team's view was that the institute's approach to learning resources, including the use of digital and speciality facilities, demonstrated that the institute has in place, monitors and evaluates arrangements and resources which enable students to develop their academic, personal and professional potential.
217. The team noted that in the institute's '2023-24 Access and participation statement', the institute:
- achieved the highest proportion of admissions from quintiles one and two, following the participation of local areas 4 (POLAR4)<sup>12</sup> classification
  - increased the proportion of enrolments on free school meals from 9 per cent in 2020 to 15 per cent in 2023
  - increased the proportion of enrolments of low income and benefits students from 7 per cent in 2022 to 23 per cent in 2023.
218. The institute's aim is to recruit 20 per cent of its students from lower socioeconomic backgrounds and to maintain the recent progress it has made. The team noted the institute's ambition is to reach a 40 per cent proportion of female students in 2024-25; according to the information published in the OfS's 'Size and shape' data dashboard, this was achieved in 2021-22, at 41 per cent. However, the institute reported a decline in recent years, with 35 per cent in 2022 and 25 per cent in 2023. The team considered this data and found that the review of the institute's admissions process for 2023, despite the lower numbers of female students recruited, has had a positive impact overall on increasing the diversity of students. The team are satisfied that further work on outreach activities in association with the revised admissions process should have an overall positive impact and enable the institute to achieve its target ambitions and commitment to equity, as identified in its access and participation statement 2023-24.
219. The team also reviewed the institute's 'Community charter' which includes a commitment to 'Being proactively inclusive and working together to ensure that we are all able to feel

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<sup>12</sup> See: [About POLAR and Adult HE - Office for Students](#).

comfortable being our authentic selves'. The 'Gender identity newsletter', 'Neurodiversity week' events and 'Open talks' demonstrate ways in which the institute champions and promotes diversity. In addition to the institute's own chapter for the 'Women's Engineering Society' (WES), the institute also participates in several outreach activities, including the Engineering Club to support prospective applicants and remove barriers for careers in engineering. The Institute of Engineering Technology accreditation panel commended the strong support for diversity and inclusion in the programme, specifically around neurodiversity and the notable proportion of female students the institute recruits. Diversity and inclusion implications are also considered by the Council for all items, as evidenced in the sample EDI coversheets for Council papers. The institute also supports students with disabilities and learning needs once students are identified as needing additional support and reasonable adjustments (as outlined in the 'Reasonable adjustments policy' 2023-24). This evidence informed the team's view that the institute's approach is guided by a clear commitment to equity. Overall, the team's view was that the institute's commitment to equity demonstrated that the institute has in place, monitors and evaluates arrangements and resources which enable students to develop their academic, personal and professional potential.

220. The team concluded that the institute meets criterion D1.1 as the evidence demonstrates that the institute has resources in place which enable students to develop their academic, personal and professional potential.

## **Conclusions**

221. The assessment team concluded that the institute has appropriate arrangements and resources which enable students to develop their academic, personal and professional potential. Furthermore, the institute sets out a comprehensive strategic and operational approach to determine and evaluate how it enables student development and achievement, while its administrative support systems support students in monitoring their progression and performance. Therefore, the team concluded that the institute meets criterion D1.

# Assessment of DAPs criterion E: Evaluation of performance

## Criterion E1: Evaluation of performance

### Advice to the OfS

222. The assessment team's view is that the institute meets criterion E1: Evaluation of performance because it meets the requirements for this criterion.
223. The assessment team's view is based on its review of evidence which shows in summary that the institute critically reviews its own performance and has in place robust mechanisms for disseminating good practice. It can identify weaknesses and limitations of its own activities and can take timely and effective remedial action when required.
224. This view is based on specific consideration of the evidence requirements for this criterion collated throughout the institute's probationary period, and for the purposes of this New DAPs end assessment, alongside any other relevant information.

**E1 An organisation granted degree awarding powers takes effective action to assess its own performance, respond to identified weaknesses and develop further its strengths.**

### Advice to the OfS

225. The assessment team's view is that the institute meets criterion E1 because it takes effective action to assess its own performance. The institute identifies weaknesses and strengths and responds to these to develop further.
226. The assessment team's view is based on its review of evidence which shows that the institute has met the evidence requirements for E1.

### Reasoning

227. The team considered that the institute has demonstrated robust self-assessment throughout the probationary period. Initially, this was evident through the production of 'pillar' reviews which were annual performance reviews of the different operational areas of the institute. These reviews highlighted the institute's strong focus on monitoring, review and action planning to create a culture of ongoing quality improvement, and which created very detailed and action orientated reporting through to Academic Board and Council. More recently, as the New DAPs plan has been progressively implemented, the institute piloted a different process which the institute found to be more proportionate, holistic and sustainable. The team considered that this demonstrated a maturing of the institute's position during the probationary period, in terms of ongoing self-evaluation: it was more focused on reflection and potential development for the future. This new process includes the 'Self-assessment report', 'Quality improvement plan' and 'Business plan', which the team considered provides the same level of critical self-assessment scrutiny as previously demonstrated through the pillar reviews. This demonstrated to the team that critical self-assessment is integral to the operation of the institute's higher education provision.

228. The team evaluated a range of evidence provided, through review of meeting minutes of the Council, Academic Board, Management Board and subcommittees. These support the team's view that the institute's commitment to self-assessment is mirrored through robust mechanisms for assigning and discharging actions in relation to monitoring and scrutiny of its provision. For example, the institute's survey action plan demonstrated that the institute has taken consideration of and identified areas where students feedback is less positive. Where areas are identified for improvement, the team considered that the actions taken to respond to these issues have been taken forward appropriately through the 'Quality improvement plan' which is scrutinised both at Academic Board and ultimately signed off by the Council.
229. The institute has several ways of ensuring its arrangements for monitoring and evaluating its programmes, and the team found that these are informed by ideas and expertise from within and outside the institute. The team scrutinised how this had developed over the probationary period and found it could evidence effective engagement of external members of governance committees. The institute's arrangements also evidenced the use of external advisers to carry out independent reviews of aspects of the institute's operations, including external reviews of governance and admissions. The team found evidence of the institute broadening the range of internal staff involved in academic governance which, over the probationary period, has encouraged contributions of ideas and expertise from across the staff team and ensured that all stakeholders are represented in governance. In addition (as discussed in detail under criterion B2.1), the team examined the institute's 'Programme design and approval policy' which sets out the process for approving new programmes and the involvement of a range of stakeholders, internally and externally. The team reviewed evidence of this policy being applied in practice, including the incorporation of internal and external expertise, during the institute's design and approval of the new MEng and MSc programmes.
230. The team's view is that student engagement in governance is effective and demonstrates that the institute involves students in the evaluation of its programmes, supports them effectively to engage and is responsive to their feedback. In addition, throughout the probationary period, the institute has enhanced its engagement with its external examiners. The team considered that this had evolved into an effective relationship, demonstrating careful consideration of the external examiners' comments and responding to them appropriately. The team concluded that the institute demonstrated that ideas and expertise, internally and externally to the institute, are drawn into its arrangements for programme design, approval, delivery and review.
231. The team noted that the institute carries out regular module and programme-level surveys of student views and has done so throughout the probationary period. The team is assured that the institute considers the outcomes of these feedback mechanisms through its committee structure, in particular at the Academic Board where all student feedback from the Staff-Student Liaison Committee, and Undergraduate Experience Committee minutes and actions taken against that feedback is monitored. The evidence reviewed also demonstrated reflective consideration and identification of areas where feedback is less positive, evidenced within the institute's survey action plan. Where areas are identified for improvement, the team considered that the actions taken to respond to these issues have been taken forward appropriately through the 'Quality improvement plan' with clear attribution of actions to the appropriate staff. This supported the team's view that the institute has in place clear mechanisms for assigning and discharging action in relation to the scrutiny and monitoring of its academic provision.

232. The team concluded that the institute meets criterion E1 as the evidence demonstrates that the institute takes effective action to assess its own performance. The institute identifies weaknesses and strengths and responds to these to develop further.

## **Conclusions**

233. The assessment team concluded that the institute takes effective action to assess its own performance, respond to identified weaknesses and develop further its strengths. Furthermore, the institute critically reviews its own performance and has in place robust mechanisms for disseminating good practice. Therefore, the team concluded that the institute meets criterion E1.

# Degree awarding powers overarching criterion

**Full DAPs: A self-critical, cohesive academic community with a proven commitment to the assurance of standards supported by effective quality systems.**

## Advice to the OfS

234. The assessment team's view is that the institute meets the DAPs overarching criterion because it meets all the underpinning criteria.
235. The assessment team's view is based on its review of the evidence which shows in summary that the institute develops and encourages a self-critical and cohesive academic community. It has a clear commitment to the assurance of standards, supported by effective and robust quality systems.
236. This view is based on consideration of the evidence requirements for the DAPs criteria collated throughout the institute's probationary period, and for the purposes of this New DAPs end assessment, alongside any other relevant information.

## Reasoning

237. The team found that self-criticality is demonstrated, including through the institute's commitment to ongoing self-evaluation, openness to external and student feedback and robust governance structures that enable timely and effective action across the academic community as needed.
238. The institute is committed to the thorough assurance of standards, including through benchmarking its provision against sector thresholds, protecting the integrity of its assessment process and the use of external examiners to provide assurance that standards have been met.
239. The team considers the effectiveness of the institute's quality systems is apparent, including through the design, implementation and ongoing review of its professional programmes, utilising external expertise and scrutiny to achieve high quality outcomes.

## Conclusions

240. The team therefore concluded that the institute meets the overarching DAPs criterion as the evidence demonstrates that the institute has a self-critical, cohesive academic community with a proven commitment to the assurance of standards supported by effective quality systems.

## Annex A: Abbreviations

| Abbreviation | Meaning  |
|--------------|--|
| CPD          | continuous professional development            |
| DAPs         | degree awarding powers                         |
| DQB          | designated quality body                        |
| EDI          | equity, diversity and inclusion                |
| FHEQ         | Frameworks for Higher Education Qualifications |
| HERA         | Higher Education Research Act 2017             |
| OIA          | Office of the Independent Adjudicator          |
| OfS          | Office for Students                            |
| UKPSF        | UK Professional Standards Framework            |
| PSRB         | Professional Statutory and Regulatory Body     |
| QAC          | [OfS's] Quality Assessment Committee           |
| QAA          | Quality Assurance Agency                       |
| VLE          | virtual learning environment                   |
| WES          | Women's Engineering Society                    |
| WMG          | Warwick Manufacturing Group                    |





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