

Section 1: Centre and Head Office Details

Centre Number:	8461385	NCFE Contacts	
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Initial approval date:	18/08/2009		
Session:	2015/16		
Visit (1st, 2nd or additional):	1 st visit this session		
Visit Date:	27/01/2016		
Visit Duration:	5.5 hours		
Next Visit Date:	20/07/2016		

Section 2: Actions from previous visit

Report Reference	Grade	Action	By whom and when	Completed/ carried over?
		NONE		

Section 3: Recommendations from previous visit

(these can only refer to points graded a 2)

Report Reference	Recommendation	By whom and when	Completed/ carried over?
	NONE		

Section 4 – Management Systems

For Information: Sections 4-7 are graded using the five-point scale described below. The statements identify the systems/evidence centres have in place for the delivery, assessment and quality assurance of IIQ courses. Any actions identified will be highlighted in Section 10 of the report.

1 = Excellent (no action required)

2 = Meets requirements (modifications suggested)

3 = Partially Meets Requirements (action required)

4 = Unsatisfactory (immediate action required)

N/A = Not Applicable

Brackets show mapping to the IIQ Quality Statements

		1	2	3	4	N/A
4.1	There is active senior management support for the IIQ Licence (6.1)	X				
4.2	There is an effective communication system between all levels staff and in all directions (including satellites, re-sellers, placements and peripatetic staff) (6.2, 6.3, 6.4)	X				
4.3	Staff responsibilities and authority are clearly defined in relation to the courses being delivered (6.1, 6.2, 7.2)	X				
4.4	The centre regularly reviews courses against Ofqual's 'Register of Regulated Qualifications' to ensure there's not a more suitable existing qualification available. (1.1)	X				
4.5	There is an effective process in place to write and review courses; to ensure that the level assigned is appropriate; and the courses are fit for purpose with clearly stated aims, objectives, learning outcomes and assessment criteria. (1.1, 1.2, 1.3, 1.4)	X				
4.6	There's an effective process in place to gather and record feedback. This is used this to evaluate, review and improve courses and systems regularly. (1.6,1.7)	X				
4.7	Time is allocated for regular team meetings for all staff involved in the delivery, assessment and internal quality assurance of the courses (1.6, 7.6, 7.11)	X				
4.8	Adequate induction information is available for new staff members (3.4, 7.1)	X				
4.9	Appeals, Complaints and Malpractice procedures are available to all candidates (1.8, 2.10, 5.1, 7.8)	X				
4.10	An equal opportunities/access policy is available to all candidates (2.10, 5.1, 5.3)	X				
4.11	All policies and procedures are reviewed regularly (5.4)	X				
4.12	Candidates receive accurate and up to date information and advice to ensure the course meets their needs. This includes appropriate initial assessment and information on progression (2.1, 2.2, 2.3, 2.4, 2.5, 2.7)	X				

4.13	All advertising, promotional activity and course materials adhere to Ofqual Conditions of Recognition B5.1 and B5.2 (2.1, 2.4, 2.7)	x				
4.14	All advertising, promotional activity and course materials adhere to NCFE's 'Stipulations for advertising and promoting non-regulated courses'	x				

Section 5 – Resources

For Information: Sections 4-7 are graded using the five-point scale described below. The statements identify the systems/evidence centres have in place for the delivery, assessment and quality assurance of IIQ courses. Any actions identified will be highlighted in Section 10 of the report.

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		1	2	3	4	N/A
5.1	The programme is adequately staffed (3.5)	x				
5.2	Assessors are occupationally competent (3.1, 3.2, 3.3)	x				
5.3	Internal Quality Assurers are occupationally competent (3.1, 3.2, 3.3)	x				
5.4	There is appropriate staff development provision for the courses (1.10, 3.6, 3.7, 4.5)	x				
5.5	Physical resources appropriate to the courses are provided (4.1, 4.2, 4.3, 4.4)	x				

Section 6 – Assessment

For Information: Sections 4-7 are graded using the five-point scale described below. The statements identify the systems/evidence centres have in place for the delivery, assessment and quality assurance of IIQ courses. Any actions identified will be highlighted in Section 10 of the report.

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Brackets show mapping to the IIQ Quality Statements

		1	2	3	4	N/A
6.1	There is a planned programme of delivery and assessment methods available, for all IIQ courses, which meets NCFE guidelines. (1.4, 7.1, 7.3, 7.5)	X				
6.2	Suitable arrangements have been made to ensure adequate liaison, consistency and standardisation with all satellites/outreach centres. (3.4, 5.2, 6.2, 6.3, 6.4, 7.11)					X
6.3	Assessment is internally quality assured and each unit/element of internally quality assured evidence is named, signed and dated by the Internal Quality Assurer (7.1, 7.2, 7.6, 7.9, 7.10, 7.12)	X				
6.4	Assessment records show accurate assessment tracking, progress and achievement. (7.3, 7.4, 7.5, 7.6, 7.7, 7.9, 7.10, 7.11, 7.12)	X				
6.5	Each piece of individual candidate evidence is clearly identified as being attributable to that candidate (7.4, 7.5, 7.7, 7.8, 7.9)	X				
6.6	Each unit of assessed evidence is named, signed and dated by the Assessor (7.5, 7.9, 7.10)	X				
6.7	Sample dates agree with dates in the centre records (named, signed and dated) (7.10)	X				
6.8	Assessment decisions are in accordance with the centre's course specification (1.2, 1.4, 7.3, 7.4, 7.10)	X				
6.9	Learners receive written feedback after assessment (2.6, 2.8, 2.9, 7.1, 7.2, 7.3, 7.5, 7.8, 7.9)	X				
6.10	There are adequate procedures to ensure secure and safe storage and delivery of examination materials (4.1, 4.4, 4.5, 7.13)					X
6.11	There are suitable arrangements to administer exams (in line with NCFE's Regulations for the Conduct of External Assessment) (7.13)					X
6.12	Adequate procedures exist to ensure secure and safe storage of current and completed candidate assessment records (4.1, 5.1, 7.10)	X				
6.13	Representative samples of candidate work should be made available to NCFE if requested. (2.11, 7.10)	X				

6.14	Candidate personal data is collected and held in accordance with Data Protection Legislation, including the Data Protection Act 1998, with the consent of the candidate. (2.10, 2.11, 5.1, 5.4)	x				
If you spoke to learners did they confirm that						
6.15	they understood the requirements of the programme (2.1, 2.2, 2.4, 7.4, 7.8)					x
6.16	they understood the relationship between the evidence and the learning outcomes (2.1, 2.2, 2.4, 7.4, 7.8)					x
6.17	they received feedback after assessment (7.5, 7.8, 7.9)					x
If Distance Learning is used:						
6.18	The course includes appropriate workbooks and study guides (1.5)					x
6.19	There is a process to ensure robust feedback for distance learning candidates (2.8, 2.9, 7.3, 7.4, 7.9)					x
6.20	Internal Quality Assurers ensure the marking of workbooks and candidate work is standardised. (7.2, 7.6, 7.10, 7.11)					x
6.21	Candidates receive an appropriate induction and on-going support throughout the course (2.4, 2.6, 2.9, 7.9)					x
6.22	Appropriate communication methods are in place between candidates and Assessors (2.9, 7.9)					x

Section 7 – Internal Quality Assurance

For Information: Sections 4-7 are graded using the five-point scale described below. The statements identify the systems/evidence centres have in place for the delivery, assessment and quality assurance of IIQ courses. Any actions identified will be highlighted in Section 10 of the report.

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2 = Meets requirements (modifications suggested)

3 = Partially Meets Requirements (action required)

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N/A = Not Applicable

Brackets show mapping to the IIQ Quality Statements

		1	2	3	4	N/A
7.1	Individuals are eligible to practise as Assessors in accordance with NCFE guidelines (3.1, 3.2, 3.3)	X				
7.2	Assessors have full up to date and appropriate course documentation (1.3, 1.4, 7.2, 7.3)	X				
7.3	Allocation of Assessor responsibilities is clear and meets the needs of candidates and Assessors (3.4, 3.5, 3.7, 7.2)	X				
7.4	Assessors have been provided with accurate advice and support to enable them to identify and meet their training and development needs (1.10, 3.4, 3.6, 3.7, 7.6)	X				
7.5	Assessors have been assisted with arrangements for special assessment requirements (where applicable) (2.5, 3.4, 3.6, 5.1, 5.2, 7.1, 7.3, 7.4)					X
7.6	Assessors have been assisted in resolving disputes and appeals (where applicable) (1.8, 3.4, 5.1, 5.2, 7.1, 7.4, 7.8)					X
7.7	There are adequate opportunities for Assessors and other team members to meet and discuss assessment and quality assurance issues (1.10, 3.5, 3.6, 7.6, 7.11)	X				
7.8	Assessors are provided with relevant support to achieve consistency in assessments and are given accurate advice on the use of different types of evidence (3.6, 3.7, 7.4, 7.6, 7.7, 7.11)	X				
7.9	Sampled judgements of evidence and assessment decisions are regularly checked against the course standards (1.3, 1.4, 3.6, 3.7, 7.1, 7.6, 7.10, 7.12)	X				
7.10	Internal quality assurance is carried out in line with the centre's internal quality assurance strategy (7.1, 7.2, 7.10)	X				
7.11	Assessors have been provided with clear and constructive feedback on judgements of evidence, assessment decisions and record keeping methods (3.6, 3.7, 7.1, 7.6, 7.10, 7.11, 7.12)	X				
7.12	Assessors are given clear explanations of any identified needs for improving assessment practices (3.6, 3.7, 7.10, 7.12)	X				

7.13	Up to date records showing judgements of evidence, assessment decisions and candidate records have been maintained (7.10)	x				
7.14	Adequate time has been allocated to carry out internal quality assurance duties (3.5, 7.2, 7.6, 7.12)	x				
7.15	The centre has achievement and attendance targets which are closely monitored (1.9)	x				

Section 8: Sampled Candidates

Course number/title	Session	Level	Candidate name	Status	Assessor	IQA	Assessment methods used	Any issues/feedback/action required? Are the assessment methods appropriate?
IIQ457 DIPLOMA IN INTEGRATIVE PSYCHO SPIRITUAL GROWTH FACILITATION OF GROUPS	15/16	5	Fr Chambers	M	Wijnand Huijs (WH)	Programme Management Committee	1, 3, 4, 5 and 6	All methods are appropriate.
IIQ457 DIPLOMA IN INTEGRATIVE PSYCHO SPIRITUAL GROWTH FACILITATION OF GROUPS	15/16	5	Fr Nuh Mbeh	M	WH	Programme Management Committee	1, 3, 4, 5 and 6	All methods are appropriate.
IIQ457 DIPLOMA IN INTEGRATIVE PSYCHO SPIRITUAL GROWTH FACILITATION OF GROUPS	15/16	5	Sr Ai Pak	M	WH	Programme Management Committee	1, 3, 4, 5 and 6	All methods are appropriate.
IIQ454 CERTIFICATE IN COMMUNITY AND PASTORAL LEADERSHIP	15/16	5	Fr Karbo	M	WH	Programme Management Committee	1, 3, 4, 5 and 6	All methods are appropriate.
IIQ454 CERTIFICATE IN COMMUNITY AND PASTORAL LEADERSHIP	15/16	5	Sr Oluoch	M	WH	Programme Management Committee	1, 3, 4, 5 and 6	All methods are appropriate.
IIQ454 CERTIFICATE IN COMMUNITY AND PASTORAL LEADERSHIP	15/16	5	Sr Vedamuthu	M	WH	Programme Management Committee	1, 3, 4, 5 and 6	All methods are appropriate.

Status codes

N – new M – mid F- final L – left

Assessment methods

*1 – natural performance 2- simulation 3 – projects/assignments 4 – questions
5 – report 6 – witness statement 7 - test 8 - other*

Section 8: Sampled Candidates (continued)

Course number/title	Session	Level	Candidate name	Status	Assessor	IQA	Assessment methods used	Any issues/feedback/ action required? Are the assessment methods appropriate?

Status codes

N – new M – mid F- final L – left

Assessment methods

*1 – natural performance 2- simulation 3 – projects/assignments 4 – questions
 5 – report 6 – witness statement 7 - test 8 - other*

Section 9: Feedback to Centre

Comment on how the IIQ courses are being delivered in line with the course outcomes:

All the courses are being delivered in line with the learning outcomes. I was able to see portfolios for learners from year two 'L5 Diploma in Integrated Psychospiritual Growth Facilitation of Groups' and year three 'L5 Transformational Pastoral & Community Leadership & Individual Growth Facilitation'. The year one learners are studying a 'L4 Diploma in Human Development, Leadership, Formation & Communication Building'. The centre is conducting a review of its course component levels to ensure they are consistent with the recent Ofqual descriptors. This is necessary to ensure they can evidence academic progression in line with Home Office guidelines. Because the centres learners come from all over the world to study they need to comply with the most recent requirements for foreign students. We discussed the matter during my visit and the centre will be in contact with the NCFE Accreditation Team to explore the option of creating a L6 course for the third year of a learner's study.

Comment on the quality and accuracy of feedback given by Assessors to Candidates:

The courses run at this centre are all residential. They are designed to develop those men and women working in the church who have a management role. If the learner embarks on a three year course of study they will eventually be able to assist in the delivery of the courses themselves. Therefore, the process is immersive, with the learners receiving 360-degree feedback. Feedback is generally immediate and verbal. Written feedback is recorded by the tutors along with the learners own reflective records. The tutors provide excellent support and guidance for the learner. This is given greater value because of the length of contact time that can be achieved. All written records of interaction are recorded by the centre and the learner all of which is kept in well-presented folders. These records are detailed and comprehensive.

Comment on the quality, accuracy and frequency of feedback given by Internal Quality Assurers to Assessors

All the tutor/assessors are encouraged to attend each other's classes. This is to ensure they maintain their own professional development and it also allows them to see their learners in a different environment. In addition, because of the holistic approach this centre has it will allow the tutor to make connections when observing a learner's behaviour. The tutors work closely together on a daily basis and so a lot of informal standardising takes place. The role of IQA is performed by a panel made up of senior staff called the Programme Management Committee and includes an external representative to provide an objective view. Written and verbal feedback is then provided normally on a one to one basis. Where actions are needed these are recorded and a plan agreed. The centre has designed a range of forms for this purpose.

Comment on the appropriateness of the advertising methods and content used by the centre and any satellite centres

The centre does not use the IIQ logo on its website at the present time. All other references comply with the regulations. I have included a recommendation regarding using the NCFE IIQ logo and explanation of what the IIQ licence represents on the website as this would provide useful information to other regulators.

Any additional comments

All learners at the centre have to apply for a place which is funded by their diocese. We discussed what would happen should a learner have to return back to their country of origin before completing a course. I suggested that a policy be introduced to clarify how long accreditation of study is valid for. In this way a learner could return and complete their study within a defined period without having to do the whole course again.

Section 10: Action Plan

All actions graded 2 or below in sections 4-7 should be carried over into this section.

Management Systems		
Mandatory/ Recommendation	Action including report reference:	By Whom & When:
Recommendation	4.11 The Centre could write a policy to clarify the circumstances under which a learner who had to leave a course for whatever reason could return and complete the course. The policy to include any time limitations due to knowledge loss. The policy would also include a process to clearly record what elements of the course had been achieved prior to departure and what would be required for successful completion at a later date.	Rev. Dr. Len Kofler. 20/07/2016
Recommendation	4.13/14 Use of the NCFE IIQ logo on the web site with an explanation (compliant to advertising regulations) of how courses have been accredited and to what level.	Rev. Dr. Len Kofler. 20/07/2016
Resources		
Mandatory/ Recommendation	Action including report reference:	By Whom & When:
Assessment		
Mandatory/ Recommendation	Action including report reference:	By Whom & When:
Internal Quality Assurance		
Mandatory/ Recommendation	Action including report reference:	By Whom & When:



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Section 11: Action by Quality Verifier/NCFE

	Action Required	By when
Quality Verifier		
Head Office		
Can the centre continue to use the IIQ Licence?		Yes

Section 12: Additional Information

Use this section to give details of good practice demonstrated by the centre and any additional information.

Give details of any good practice demonstrated for course organisation/management

All elements of induction and course delivery are managed to a high standard. Learner welfare is prioritised early on as a range of support mechanisms is required over and above their academic needs when they first arrive. This includes ensuring that learners have the correct visa's. The learner's status is monitored throughout their stay and appropriate, timely action taken when necessary. The centre provides lots of useful information in a range of formats about the courses. In this way the learner knows exactly what to expect from the centre and what is expected of them. Assessment methods are clearly explained prior to the start of the course. The whole process is open and transparent, which is best practice.

Give details of any good practice demonstrated for assessment

I was able to see feedback sheets called 'progress reports' on the whole of the first year learners. Feedback was specific to the learner and developmental. All written feedback is discussed on a one to one basis as well. In this way the learner has the opportunity to ask follow up questions and discuss their development in detail. A requirement of these courses is that the individuals learn about their own beliefs, values and behaviours. This is an effective way of introducing the theories and learning in a safe way. Once understanding of the theory and practice has been achieved the learners can move on to develop their practitioner's skills. All of this development is clearly recorded and stored in the learner's portfolios.

Give details of any good practice demonstrated for internal quality assurance

The centre had gathered all of the information I had requested prior to my visit. Key members of staff were available and I was allowed access to all areas of the centre. In addition, an issue had arisen regarding foreign student visa's which impacted on three courses and their academic level descriptions. The centre had produced some very good research into this matter in order to find a solution. We invested time during the day to discuss options. Conducting a review would be a valuable and timely exercise under the circumstances. By the end of the review the centre hope it will be possible to Demonstrate a clear academic progression from one course to the next based on the most recent Ofqual knowledge and skills descriptors. The centre will be contacting NCFE's Accreditation Team shortly with possible solutions.

Any additional comments

This was a very interesting and informative visit. I would like to thank everyone involved for their openness and contributions. I hope that the current issues are resolved swiftly and I offer my services and support should they be required. My next visit will be Wednesday 20th July 2016 and I will contact the centre nearer the time to make arrangements. Thank you.