



# **AVA relicensing**

## **Operational description**

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## Preface

The Quality Assurance Agency for Higher Education (QAA) is responsible for arrangements for the formal approval and quality assurance of Access to Higher Education (HE) courses. The *QAA Recognition Scheme for Access to Higher Education* (the *Recognition Scheme*) provides the framework of structures, mechanisms and regulations through which QAA exercises this responsibility. Within this framework, QAA licenses organisations to approve Access to HE Diplomas, recognise Access to HE courses and award Access to HE Diplomas to students. An organisation which has been licensed by QAA for these purposes is known as an Access Validating Agency (AVA).

This section of the *Recognition Scheme* describes the process QAA uses to relicence AVAs. It provides a common component of guidance for AVAs and review teams.

The AVA licensing agreement and criteria, and other parts of the *Recognition Scheme* are available at [www.accesstohe.ac.uk](http://www.accesstohe.ac.uk).

# AVA relicensing: Operational description

## Notification and scheduling

1 The Quality Assurance Agency for Higher Education (QAA) relicenses Access Validating Agencies (AVAs), normally every five years. QAA notifies the AVA nine to 12 months in advance of the period when the review will take place, and then sets dates for the review visit. QAA provides the AVA with a detailed timeline for the review.

2 QAA's appointed review team visits the AVA usually in the spring or early summer. The AVA's annual self-evaluation report (received by QAA the preceding December) provides the primary documentary evidence base. This alignment of relicensing with annual reporting minimises the need for additional documentation and leads to integration of outcomes for the AVA.

## Initial meeting

3 QAA arranges a date for an initial meeting between AVA staff and the QAA officer appointed to manage the review. This takes place about six months before the review visit, is held at the AVA's premises, and provides an opportunity to discuss and clarify:

- the purpose and scope of AVA relicensing, including outcomes and follow up
- the detailed practical arrangements, including the timing of activities before, during and after the review visit
- review documentation, including the audit trails and their contents
- the stakeholder survey
- review meetings, including consideration of the standard meeting schedule and any variations which may be appropriate
- the role of the AVA facilitator
- any matters about which the AVA may be unclear or concerned.

## Sources of evidence

4 Relicensing takes into account the views of stakeholders; discussions with AVA staff and committee members; and makes use of the following, mostly pre-existing, documentary evidence:

- annual self-evaluation reports
- relicensing supplement
- policy and procedural documentation
- audit trails on selected Access to HE courses.

5 These sources of evidence and how they are included are explained below.

## Self-evaluation and relicensing supplement

6 Relicensing begins with the AVA evaluating its role as an AVA. Each year, AVAs undertake a self-evaluation<sup>1</sup> which results in a report to QAA. The two most recent annual self-evaluation reports are primary documentary evidence sources for relicensing.

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<sup>1</sup> This evaluates the previous academic year (1 August - 31 July) and is submitted to QAA on 1 December; see *AVA annual self-evaluation report: Guidance to AVAs* ([www.accesstohe.ac.uk/avas/statisticssubmission](http://www.accesstohe.ac.uk/avas/statisticssubmission)).

QAA provides the review team with copies of both the self-evaluation reports, including appendices.

7 For AVAs undergoing relicensing, the self-evaluation undertaken includes explicit self-assessment against the AVA licensing criteria<sup>2</sup> and results in a relicensing supplement. An important part of this is the self-evaluation grid. This provides a summary of evidence demonstrating that the AVA meets the licensing criteria.

8 The self-evaluation grid also provides a summary of action the AVA is taking to enhance AVA practice. Where necessary, it also alerts the review team to action the AVA is taking to address any parts of the licensing criteria that are not met in full. The progress made by an AVA, and the evidence demonstrating such progress, will be key to the team's advice to QAA's Access Recognition and Licensing Committee (ARLC) about the risk judgement (see paragraph 32) for the AVA, and the recommendation which is made to the QAA Board of Directors about the renewal of the AVA's licence.

9 The relicensing supplement includes a brief update on any significant developments after the period covered by the latest annual self-evaluation report (that is, after 31 July) and contains other information not ordinarily in the annual self-evaluation reports.

10 The AVA's governing body formally approves the relicensing supplement before it is sent to QAA. It is submitted to QAA approximately eight weeks before the review visit: usually 1 December for early spring review visits (that is, at the same time as the annual self-evaluation report), or late February/early March for early summer visits.

## **Policy and procedural documentation**

11 The review team requires access to all the AVA's policy statements and operational manuals, or equivalent standard documentation in which its procedures for Access to HE provision are described. At the initial meeting (see paragraph 3), the QAA officer will discuss the way in which the AVA intends to provide the review team with this access. Where available in electronic or web-based formats, access is usually given at the same time that the relicensing supplement is submitted (see paragraph 10).

## **Audit trails**

12 An audit trail is a compilation of existing documentation. It provides a history of an Access to HE course or suite of courses. There are usually six audit trails, depending on the AVA's model of provision. This number may be varied according to the scale and complexity of the AVA's Access to HE activities, and the organisation of its quality assurance.

13 Review teams use audit trails to evaluate the AVA's:

- course recognition and other quality assurance processes 'in action'
- application of the Access to HE Diploma qualification specification and grading requirements
- oversight of student achievement and academic standards through moderation activity.

14 The QAA officer selects the audit trails from the published list of courses in QAA's Access to HE courses database<sup>3</sup> and confirms the trails with the AVA before the initial

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<sup>2</sup> See: [www.accesstohe.ac.uk/home/publications/licensing/criteria.pdf](http://www.accesstohe.ac.uk/home/publications/licensing/criteria.pdf).

<sup>3</sup> See: [ava.qaa.ac.uk/SubSites/PublicSearch/search](http://ava.qaa.ac.uk/SubSites/PublicSearch/search).

meeting (see paragraph 3). In selecting the trails, the following factors are taken into account:

- type, size and location of course providers
- subject areas, modes of study and study options<sup>4</sup>
- maturity and complexity of provision
- number of students
- the nature of the AVA's model for course recognition and moderation.

15 Audit trail documents in electronic formats and a contents sheet for each trail are submitted to QAA at the same time as the relicensing supplement. The contents sheet indicates any audit trail documentation that is only available in hard copy, and the AVA assembles and organises this clearly for the start of the review visit.

16 Other information, including committee papers, may be requested following the review team's planning meeting and during the visit.

## **Background information**

17 QAA provides the review team with the report of the previous review of the AVA and a background paper 'the AVA profile'. The profile is shared with the AVA and includes:

- the outcomes of previous AVA reviews and annual self-evaluation reports
- any matters the ARLC has asked the review team to report on (QAA will have previously notified the AVA of these matters through the feedback to the annual self-evaluation reports)
- details of any substantial changes in the AVA's recent history, identifying changes of name or predecessor organisations (where, for example, AVAs have merged or been reconfigured).

## **Stakeholder survey**

18 A review visit supplements documentary evidence with information gathered from face-to-face meetings with AVA staff and committee members (see paragraph 26). These meetings include discussions about the views and perceptions of stakeholders with an interest in the AVA's work. QAA gathers these views through surveys of:

- Access to HE course coordinators and tutors
- external moderators
- higher education admissions and widening participation staff
- heads of institutions providing Access to HE courses approved by the AVA
- heads of institutions receiving students awarded Access to HE Diplomas by the AVA
- other partners and stakeholders.

19 QAA liaises with the AVA to confirm the list of stakeholders who will be invited to complete the survey. The invitation is sent approximately six weeks before the review team's planning meeting (see paragraph 24). QAA prepares a report from the survey responses, and shares this with the review team and the AVA. The report is a part of the formal evidence base for the review.

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<sup>4</sup> 'Study options' such as evenings, work-based and distance learning, and so on, as defined in QAA's Access to HE courses database.

## **Review team**

20 The review team comprises three reviewers and the QAA officer. Occasionally the team is accompanied by a non-participating observer. QAA informs the AVA of the names of all members of the team. The AVA may contact QAA if it knows of any conflicts of interest the reviewers have with it.

21 All reviewers complete a programme of training before taking part in an AVA review. The composition of review teams takes account of the need to provide objectivity and an external perspective, and an appropriate range and balance of experience within a team. All reviewers are contractually bound to adhere to QAA's expectations relating to confidentiality and conduct. All reviewers participate in the following activities:

- analysis and consideration of documentary evidence
- preparation for the planning meeting and review visit
- conduct of review meetings
- contributing to, and confirming, the review report
- identification of good practice
- setting of required and recommended actions
- agreement of the risk judgement
- confirmation of areas for inclusion in the key themes letter
- where follow-up activity is required, the subsequent assessment of evidence submitted by the AVA.

22 The QAA officer is the review manager, and liaises with the AVA during the preparation and follow up to the review visit. During the review visit itself, the QAA officer chairs the review team's internal meetings, acts as secretary, keeps a record of review meetings, and undertakes any necessary administration. The QAA officer also edits the review report, receiving reviewers' contributions and producing a report which is consistent with QAA house style and which meets QAA standards of reporting. The QAA officer presents the draft report to the ARLC on behalf of the review team.

## **AVA facilitator**

23 The AVA appoints a member of its staff to act as a facilitator to support the review. The facilitator is the primary contact for the QAA officer throughout the preparations for the review visit and for the review team during the visit. More information about the requirements for the role of the AVA facilitator is given in Appendix 1, and these are discussed at the initial meeting (see paragraph 3).

## **Planning meeting**

24 The review team's planning meeting takes place about three weeks before the review visit and is usually held at QAA's offices. The main purposes of the planning meeting are:

- to discuss the AVA's annual self-evaluation reports, the relicensing supplement, audit trails and the stakeholder survey report
- to confirm the schedule of meetings provided by the AVA
- to identify themes for discussion with the AVA during the review visit
- to agree lines of enquiry and plan outline agendas for the meetings
- to consider whether there are any further documents which the team wishes to look at

- to agree preparatory work, such as scrutiny of audit trails and other documentation, to be undertaken before or during the visit
- to agree the contributions to the report to be drafted by each reviewer and confirm the schedule for submission.

25 The QAA officer briefs the team on any matters arising from discussion with the AVA at the initial meeting; the outcomes of previous annual self-evaluation reports or other processes; and any areas in which the ARLC has requested particular report.

## Review visit

26 A review visit normally extends over two consecutive days. The visit is based at the AVA's offices, and meetings take place in an appropriate room which, for the duration of the visit, has been designated exclusively for the review. A standard programme for the visit is given below.

### Day 1: Audit trails and briefing

- 0900 - 1400 Review team explores questions raised by its reading of audit trail documentation and other materials.
- 1400 - 1530 Review team holds briefing meeting with chief officer and other senior staff.
- 1530 - 1730 Review team finalises its agendas for day 2 meetings.

### Day 2: Meetings and outcomes

- 0900 - 1330 Review team meets:
- the governing body of the organisation holding the AVA licence, including its chair
  - Access to HE committee, including its chair
  - quality committee,<sup>5</sup> including its chair
  - AVA chief officer and chair of governing body.
- 1330 - 1730 Review team:
- gives any further consideration to documentary evidence
  - discusses matters to be included in the review report
  - confirms broad areas for inclusion in key themes letter (see paragraph 34).

27 The briefing meeting with the chief officer and other staff on Day 1 is an opportunity for the review team to clarify factual and AVA operational matters, before finalising agendas for meetings on Day 2. Its purpose is to clarify any matters about which the review team remains uncertain after reading the AVA's documentation, so that time can be used purposefully and effectively during Day 2.

28 The AVA arranges the meetings on Day 2 to a schedule which maximises attendance at meetings. Each meeting normally lasts one hour and, other than the final meeting, is usually attended by six to eight committee members. These meetings should always include committee members from further and higher education institutions that provide the AVA's Access to HE courses and receive students awarded the AVA's Access to HE Diplomas.

29 The five AVA licensing precepts (Governance, Strategic Planning, Management, Course Recognition, and Moderation, monitoring and certification) provide common themes for review meetings. The lines of enquiry and specific topics for discussion are determined

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<sup>5</sup> Where the quality committee holds responsibility for Access to HE provision.

by the review team's assessment of the way in which the AVA has met the AVA licensing criteria.<sup>6</sup>

30 In the event that the process of the review visit is disrupted, the review team and QAA officer, in consultation with the AVA, would adjust the arrangements, as necessary, to ensure that the objectives of the review can be met. In the unlikely event of serious disruption, to the extent that the review team is unable to carry out or complete the review, the team may recommend a deferment to allow new arrangements to be made.

## Outcomes

31 The review report summarises the review team's findings and advises the ARLC on:

- required AVA actions (with dates for completion)
- recommended AVA actions
- AVA good practice
- risk judgement ('low', 'medium', 'high' or 'very high').

32 The ARLC receives and considers the review team's report, and confirms the required and recommended actions and the good practice. It also confirms the risk judgements and, on the basis of this, makes a recommendation to the QAA Board about whether the AVA's licence should be:

- renewed, for low and medium risk judgements
- not renewed (with temporary extension given while action is taken), for high risk judgements
- withdrawn (with temporary extension given while withdrawal procedures are completed), for very high risk judgements.

33 Both the review team's advice and the ARLC's recommendation to the Board are based on the extent to which the AVA meets the AVA licensing criteria and the actions required to address any shortcomings identified. The guidance to review teams, which explains how risk judgements are arrived at, with examples of the kinds of circumstances in which different judgements might be reached, is given in Appendix 2.

## Key themes letter

34 A key themes letter, indicating the review team's main findings, is sent to the AVA within two weeks of the end of the review visit. The QAA officer drafts the letter on behalf of the review team.

## Report

35 The report is based on the five AVA licensing precepts. Within this structure, the report may have additional sections and sub-sections to reflect the particular findings of the review. Reviewers submit their individual contributions to the report to the QAA officer, as confirmed at the planning meeting. The QAA officer edits the report and prepares the executive summary, confirming the completed draft with the review team before submitting the report to the ARLC.

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<sup>6</sup> See: [www.accesstohe.ac.uk/home/publications/licensing/criteria.pdf](http://www.accesstohe.ac.uk/home/publications/licensing/criteria.pdf).

36 The QAA officer presents the report to the ARLC and answers any questions the Committee may have. The ARLC makes a recommendation to the QAA Board in relation to the review outcomes.

37 The AVA is sent the draft report with the agreed outcomes, and is invited to comment on any matters of factual error or judgements that are based on factual errors. The AVA has approximately four weeks to make its reply. The AVA's response is sent to the review team for consideration, and the QAA officer amends the report in line with the team's comments. The team approves the amended report and QAA sends the final text of the report to the AVA.

38 If the AVA's response to any of the major review outcomes suggests the report should be fundamentally reconsidered, the Chair of the ARLC considers the response, and may authorise amendments to the required AVA actions by Chair's action or ask for the report to be reconsidered by the full Committee. The QAA officer acts on the ARLC's behalf in the consideration of any minor amendments to required actions. The report is published on QAA's website approximately four weeks later.

## **Complaints and appeals**

39 Complaints about the conduct of the review, and appeals against the decision to withdraw a licence are considered by QAA in accordance with the formal procedures on its website.<sup>7</sup>

## **Evaluation**

40 The AVA is invited by QAA to evaluate the relicensing process.

## **Follow up**

41 The nature of follow up and monitoring depends on the review outcome and level of risk identified, as follows (see Appendix 3 for further details):

- low risk (AVA licence renewed) - any required or recommended actions to be reported on in subsequent annual self-evaluation report
- medium risk (AVA licence renewed) - action plan submitted to QAA, with details of internal monitoring provided
- high risk (AVA licence not renewed) - action plan submitted to QAA, with details of internal monitoring provided; interim progress reports provided to QAA; revisit (and any other necessary monitoring arrangements) arranged
- very high risk (AVA licence withdrawn) - QAA provides stages and dates for planned withdrawal of licence.

42 When required actions have been taken, the risk level may be decreased. If the AVA fails to take the action required of it, the risk level may be increased and a further set of requirements introduced. Changes to the risk level are published with the report.

## **Administration**

43 The AVA may contact the QAA officer at any stage of the review process about any matter relating to the review. QAA also nominates an administrator who is responsible

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<sup>7</sup> See: [www.qaa.ac.uk/Complaints/Pages/default.aspx](http://www.qaa.ac.uk/Complaints/Pages/default.aspx).

for all review arrangements and for tracking progress after the visit has taken place.  
The administrator is the AVA's first point of contact for practical and administrative issues.

## **Appendix 1: Role of the AVA facilitator**

1 The AVA appoints a member of staff to act as a facilitator to support the relicensing review. The role quickens the flow of information between the review team and the AVA. Specifically, the role of the facilitator is to:

- act as the primary contact for the QAA officer throughout the preparations for the review visit and for the review team during the visit
- provide advice and guidance to the team on the review supplement, audit trails and any supporting documentation
- provide advice and guidance to the team on AVA structures, policies, priorities and procedures
- ensure that the AVA has a good understanding of the matters raised by the review team, thus contributing to the effectiveness of the review, and to the subsequent improvements to policy and practice within the AVA
- meet the review team at the team's request during the review, in order to provide further guidance on sources of information, and clarification of matters relating to AVA structures, policies, priorities and procedures.

2 The facilitator is not present for the review team's private meetings. However, the facilitator will have the opportunity for short meetings with the team, as necessary, during the review visit, which will provide opportunities for both the team and the AVA to seek further clarification outside of the formal meetings. This is intended to improve communications between the AVA and the team during the review, and enable AVAs to gain a better understanding of the team's lines of enquiry during the review.

### **Appointment and briefing**

3 The person appointed as facilitator must possess:

- a good working knowledge of the AVA's systems and procedures, and an appreciation of Access to HE quality and standards matters
- knowledge and understanding of the AVA relicensing process
- an ability to communicate clearly, build relationships and maintain confidentiality
- the ability to provide objective guidance and advice to the review team.

4 An AVA should only change its appointed facilitator in exceptional circumstances, and only with the agreement of QAA. As part of the initial meeting, the QAA officer will provide a briefing for the facilitator to ensure that she or he understands the role.

### **How the role operates**

5 Throughout the review, the role of the facilitator is to help the review team to come to a clear and accurate understanding of the structures, policies, priorities and procedures of the AVA. The role requires the facilitator to observe objectively, to communicate clearly with the team where requested, and to establish an effective relationship with the QAA officer. The facilitator should not act as advocate for the AVA. However, the facilitator may legitimately:

- bring additional information to the attention of the team
- seek to correct factual inaccuracy
- provide advice on AVA matters
- assist the AVA in understanding matters raised by the team.

6 It is for the review team to decide how best to use the information provided by the facilitator. The facilitator is not a member of the team and does not contribute to the risk judgement.

7 The facilitator is required to observe the same conventions of confidentiality as members of the review team. In particular, the confidentiality of any written material shared by team members must be respected, and no information gained may be used in a manner that allows individuals to be identified. However, providing appropriate confidentiality is observed, the facilitator may make notes on discussions with the team and report back to other staff in order to ensure that the AVA has a good understanding of the matters raised by the team.

8 The facilitator does not have access to QAA's electronic communication system for review teams. The review team has the right to ask the facilitator to disengage from the review process at any time if it considers that there are conflicts of interest, or that the facilitator's presence will inhibit discussions.

## Appendix 2: Risk judgement guidance

This guidance provides a reference point for review teams when making the risk judgement. The descriptions indicate the common characteristics of AVAs in each of the four possible categories: they are not absolute or mutually exclusive categories.

Low	Medium	High	Very high
All, or nearly all, licensing criteria have been met.	Most criteria have been met, but a few criteria in key areas have not been met in full.	Many criteria have not been met <b>or</b> there are major gaps in one or more key areas of the criteria.	The AVA is evidently in serious and/or continuing breach of the licensing criteria in key respects.
Unmet criteria do not, individually or collectively, present any immediate or serious risks.	Unmet criteria do not present any immediate or severe risks. Some moderate risks may exist which, without action, could lead to serious problems over time.	Unmet criteria present serious risk(s) individually or collectively, and limited controls are in place to mitigate the risk. Consequences of inaction in some areas may be severe.	Unmet criteria present severe risk(s) individually or collectively to key functions. The AVA has not taken appropriate action to mitigate risk when it has been identified.
Required actions may relate, for example, to: <ul style="list-style-type: none"> <li>• minor omissions or oversights</li> <li>• a need to amend or update details in documentation, where the amendment will not require or result in major structural, operational or procedural change</li> <li>• completion of activity that is already underway in a small number of areas that will allow it to meet the licensing criteria more fully.</li> </ul>	Required actions may relate, for example, to: <ul style="list-style-type: none"> <li>• weakness in the operation of part of the AVA's governance structure, or lack of clarity about responsibilities</li> <li>• insufficient emphasis or priority given to Access to HE in the AVA's planning processes</li> <li>• quality assurance procedures which, while broadly adequate, have some shortcomings in terms of the rigour with which quality and/or standards are protected.</li> </ul>	Required actions may relate, for example, to: <ul style="list-style-type: none"> <li>• ineffective operation of parts of the AVA's governance structure</li> <li>• breaches by the AVA of its own financial management procedures</li> <li>• significant gaps in procedures relating to the AVA's major awarding body responsibilities, including for course validation, moderation, or security of certification</li> </ul>	Major problems exist in key areas. <p>The extent of action that would be required to meet the licensing criteria in full would require major structural or organisational change. Changes might require a staff capacity or allocation of resources that the AVA does not possess; external support to which it does not have access; or commitment to change that it has not demonstrated.</p>
The need for action has been acknowledged by the AVA in its review documentation or during the review, <b>and</b> it has provided clear evidence of appropriate action being taken within a	Plans that the AVA presents for addressing identified problems before or at the review are under-developed or not fully embedded in the AVA's operational planning.	Plans for addressing identified problems that the AVA may present before or at the review are not adequate to rectify the problems, or there is little or no evidence of actual progress.	The AVA has not recognised that it has major problems, or has not planned significant action to address problems it has identified.

<p>reasonable timescale.</p> <p>There is evidence that the AVA is fully aware of its AVA responsibilities: previous responses to monitoring outcomes provide confidence that areas of weakness will be addressed promptly and professionally.</p>	<p>The AVA's priorities or recent actions suggest that it may not be fully aware of the significance of certain licensing criteria. However, previous responses to monitoring outcomes suggest that it will take the required actions and provided evidence of action as requested.</p>	<p>The AVA may have limited understanding of the responsibilities associated with one or more key areas of the AVA licensing criteria, or may not be fully in control of all parts of its operation.</p>	<p>The AVA is unaware of, or not in full control of, one or more of its major responsibilities.</p> <p>The AVA has repeatedly or persistently failed to take appropriate action in response to previous monitoring outcomes.</p>
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## Appendix 3: AVA relicensing follow up

This table describes the nature of follow-up activity and monitoring for each review outcome and risk level, as well as consequences of AVA inaction.

Licence renewal	Follow-up activity and the nature of monitoring by QAA	Consequence of AVA inaction
<p><b>Licence renewed (low risk)</b></p> <p>No action required, or evidence of action to be received in the AVA's next annual report.</p>	<p>The AVA <b>informs QAA of required and recommended actions</b> in its subsequent annual report to QAA, providing appropriate documentary evidence in the report's appendices. (The timescale for taking action will normally be that which was proposed by the AVA itself in its review documentation.) The ARLC is reminded of the required actions, as part of the annual report scrutiny information, and makes a judgement about whether all required actions have been completed satisfactorily; feedback is provided.</p> <p>If the ARLC identifies new risks through the annual report, further AVA action may be required, and the risk level may be adjusted accordingly.</p>	<p>If the AVA fails to demonstrate that it has taken appropriate or sufficient action, the AVA is informed in the annual report feedback and is given a date by which it must submit evidence that outstanding actions having been completed in full.</p> <p>If satisfactory evidence is not received by the date set, the AVA may be: reclassified as medium risk, required to provide an action plan (see below), and is subject to the monitoring processes which apply to the medium risk category.</p>
<p><b>Licence renewed (medium risk)</b></p> <p>Action plan required with details of internal monitoring planned.</p>	<p>The AVA develops and <b>provides to QAA an action plan for addressing required actions</b>, with appropriate milestones to meet QAA's deadline, the documentary evidence that it will submit to QAA to demonstrate that required actions have been taken, and details of how the plan will be monitored internally.</p> <p>The review team receives the AVA's action plan and feedback is provided about whether the action plan, proposed milestones and documentary evidence are appropriate.</p> <p>The ARLC is advised about the adequacy of the plan and any amendments that reviewers have recommended.</p>	<p>If, on the recommendation of the review team, the ARLC concludes that action planning is inadequate or subsequent action is insufficient, the AVA is informed of the shortcoming(s) and given a date by which it must submit evidence of adequate planning and/or completion of all outstanding actions.</p> <p>If satisfactory evidence is not received by the date set, QAA</p>

	<p>The review team receives documentary evidence of completed actions, and the ARLC is advised about whether all required actions have been completed in full. When all required actions have been completed to the satisfaction of the ARLC, the AVA risk level is adjusted to low.</p> <p>The AVA reports on its response to recommended actions and other progress in its annual self-evaluation report to QAA. If the ARLC identifies new risks through the annual report, further actions may be required, and the risk level may be adjusted accordingly.</p>	<p>makes arrangements for a meeting with senior AVA personnel or a revisit.</p> <p>(See below). The QAA Board is notified that the risk level has been revised to high.</p>
<b>Licence renewal</b>	<b>Follow-up activity and the nature of monitoring by QAA</b>	<b>Consequence of AVA inaction</b>
<p><b>Licence not renewed (high risk)</b></p> <p>Temporary extension to licence, with renewal of licence conditional on the AVA's satisfactory completion of particular required actions by a given date.</p>	<p><b>QAA sets a date for a revisit</b> and considers whether any other interim monitoring mechanisms are required.</p> <p>The AVA develops and <b>provides to QAA an action plan for addressing required actions and conditions of licence</b>; details of how the plan will be monitored internally; the documentary evidence that it will submit to QAA to demonstrate that required actions have been taken; and dates specified for interim progress reports to be provided to QAA.</p> <p>The review team receives the AVA's action plan, and feedback is provided about whether the action plan and proposed milestones, monitoring mechanisms and documentary evidence are appropriate. The ARLC is advised about the adequacy of the AVA's plan and any amendments that reviewers have recommended.</p> <p>The ARLC receives interim progress reports and other monitoring reports requested, and may require additional action prior to the revisit. (Neither the ARLC nor the review team can 'sign off' actions prior to the revisit.)</p> <p>The review team receives the AVA's evidence of completed actions and any outcomes of the ARLC's monitoring, and prepares for a revisit.</p> <p>The revisit report is received by the ARLC. On the advice of the review team, the ARLC makes a judgement as to whether all actions have been completed. If required actions have been completed, the ARLC recommends to the QAA Board that the licence should be renewed and the AVA risk level revised to low, or medium (if, for</p>	<p>If, on the recommendation of the review team, the ARLC concludes that action planning is inadequate or, on the basis of the ARLC's monitoring, subsequent action is considered insufficient, the AVA is informed of the shortcoming(s) and given a date by which it must submit evidence of adequate planning and/or take further action.</p> <p>If a satisfactory response is not received by the date set, QAA makes arrangements for a meeting with senior AVA personnel.</p> <p>If, on the advice presented in the revisit report, the ARLC concludes that the required actions have not been taken, it may make further monitoring arrangements. If the conditions set for licence renewal have not been met by the</p>

	<p>example, further monitoring is needed, although the identified risk is no longer high).</p> <p>The AVA reports on its response to recommended actions and other progress in its annual self-evaluation report to QAA. If the ARLC identifies new risks through the annual report, further actions may be required, and the risk level may be adjusted accordingly.</p>	<p>time of the revisit, the QAA Board is notified that the risk level has been revised to very high, and QAA begins procedures for withdrawal of the licence.</p>
<b>Licence renewal</b>	<b>Follow-up activity and the nature of monitoring by QAA</b>	<b>Consequence of AVA inaction</b>
<p><b>Licence not renewed: (very high risk)</b></p> <p>Temporary extension to licence for period of planned withdrawal, with restrictions placed on AVA activity.</p>	<p>QAA <b>outlines the stages and dates for planned withdrawal</b> of the licence to the AVA.</p> <p>The period over which the withdrawal takes place may vary according to circumstances, taking account of the need to protect students' interests throughout the process. The stages will normally be:</p> <ol style="list-style-type: none"> <li>1. QAA notifies the AVA of the withdrawal plan, including its responsibilities during the withdrawal period</li> <li>2. QAA arranges a meeting between senior QAA and AVA personnel</li> <li>3. QAA notifies all the AVA's providers that the AVA licence is to be withdrawn, and advises on the implications for providers and students</li> <li>4. The AVA is not permitted to validate new courses: no new courses will be recorded on the Access courses database</li> <li>5. The AVA is required to submit a plan for closure of AVA business, including transfer arrangements for all recognised courses</li> <li>6. The AVA is not permitted to register new students on courses</li> <li>7. The AVA is not permitted to award Access to HE diplomas or to use the Access to HE logo.</li> </ol>	<p><b>The licence is withdrawn.</b></p> <p>(Only under very exceptional circumstances would QAA consider restoring an AVA licence after procedures for withdrawal have begun.)</p>



**The Quality Assurance Agency for Higher Education,**  
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