

Report of External Evaluation and Review

Auckland Goldstar Institute Limited

Confident in educational performance

Confident in capability in self-assessment

Date of report: 26 August 2015

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Purpose of this Report

The purpose of this external evaluation and review report is to provide a public statement about the Tertiary Education Organisation's (TEO) educational performance and capability in self-assessment. It forms part of the accountability process required by Government to inform investors, the public, students, prospective students, communities, employers, and other interested parties. It is also intended to be used by the TEO itself for quality improvement purposes.

Introduction

1. TEO in context

Name of TEO:	Auckland Goldstar Institute Limited (AGI)
Type:	Private training establishment (PTE)
First registered:	13 December 2004
Location:	Level 5, 75 Karangahape Road, Auckland
Delivery sites:	AGI has no additional sites.
Courses currently delivered:	<ul style="list-style-type: none">• General English• Certificate in ESOL (Beginners) (Level 1)• Certificate in ESOL (Elementary) (Level 2)• Certificate in ESOL (Intermediate) (Level 3)• Certificate in ESOL (Advanced) (Level 4)• Certificate in English for Academic Purposes and IELTS (Level 5)• NZIM Diploma in Management (Level 6)• Diploma in Healthcare Studies (Level 5)• Diploma in Healthcare Management (Level 6)
Code of Practice signatory	Yes
Number of students:	International, for 2014 (and as at 1 April 2015) – 420 (210): <ul style="list-style-type: none">• NZIM Diploma in Management (Level 5) 11 (five)• Diploma in Healthcare Studies (Level 5) 126

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	(82)
	<ul style="list-style-type: none"> • Diploma in Healthcare Management (Level 6) 74 (75) • General English 209 (48)
Number of staff:	39 (25 academic and 14 administration – 30 full-time equivalents)
Scope of active accreditation:	<ul style="list-style-type: none"> • NZIM Diploma in Management (Level 5) • Diploma in Healthcare Studies (Level 5) • Diploma in Healthcare Management (Level 6) • Diploma in Health (Advanced) (Applied Management) (Level 7) • General English; Certificates in English/ESOL (Levels 1-4); Certificate in Business (Level 4); Certificate in English for Academic Purposes and IELTS) (Level 5)

AGI has consents to assess unit standards from the appropriate domains and related unit standards, including health and well-being, health and safety, residential care, hauora, and English for Speakers of Other Languages (ESOL).

For more details, see:

<http://www.nzqa.govt.nz/providers/course-accreditations.do?providerId=768232001&delSiteInd=0>

Distinctive characteristics:	<p>The Diploma in Healthcare Studies and Diploma in Healthcare Management programmes include a high proportion of workplace learning and experience through clinical placements.</p> <p>The graduate profile for both diplomas comprises residential care officer, family support worker, disability service officer, community worker, kaiawhina hauora (Māori health assistant).</p>
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Recent significant changes:	<p>A quality assurance department was established at AGI in 2013. Two full-time positions (business operations advisor and academic advisor) are responsible for quality assurance activities and ensuring AGI complies with the Education Act and NZQA rules.</p>
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Since 2011, seven tutors have successfully completed

their adult teaching certificates. Specific workshops for professional development have been arranged for staff to improve their knowledge of assessment, moderation and the Code of Practice.

AGI launched its Healthcare Research Centre (AGI Taupua Rangahau Oranga) in March 2015.

The PTE's Diploma in Health (Advanced) (Applied Management) (Level 7) programme was approved by NZQA in March 2015.

English training courses levels 2-4 elementary, pre-intermediate, intermediate, upper intermediate were approved as training schemes in February 2015. AGI has accreditation for New Zealand Certificates in English Language (Levels 1-4) (NZCEL).

AGI started delivering the Diploma in Healthcare Management in 2013.

AGI received approval from NZQA to internally assess English language proficiency in 2014.

Since 2013, a data management system has been used for daily programme delivery management (e.g. timetable, attendance, teaching resources, etc) as well as learner result management (recording student results and reporting to NZQA). All learners have been provided with a login and password to access information on orientation, their timetable, attendance, study materials and test results. Faster internet access and internal networks have been installed along with new computers and printers. Free Wi-Fi connection has been provided to AGI learners since 2014.

Previous quality assurance history:

NZQA was Confident in the educational performance and Confident in the capability in self-assessment of Auckland Goldstar Institute Limited at its previous external evaluation and review (EER) in 2011.

AGI met national NZQA external moderation requirements for two hauora unit standards in 2013 and one in 2014. Other external moderation for five different Healthcare unit standards shows a pattern of improvement resulting in also meeting external moderation requirements.

The Community Support Services (Careerforce)

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Industry Training Organisation's most recent (November 2014) group moderation results show that the two learner post-assessment samples for each of the two unit standards submitted by AGI were approved as being met.

Other:

AGI applies the Te Whare Tapa Wha Hauora Model to provide holistic support to learners with regard to:

- Taha Wairua – Spiritual Well-being
- Taha Whenua – Ethnic and Cultural Identity and Belief System Well-being
- Taha Ni Nengaro – Well-being of the Mind (Emotional and Mental Well-being)

Learners from more than 16 countries are served by AGI staff from 11 countries.

Close relationships have also been developed with organisations and community religious leaders from various denominations such as Christian, Buddhist, Hindu and Sikh; all of whom have been invited to visit AGI to provide orientation services, verifying legal documents, and listening to learners' personal concerns.

The orientation programme also has time set aside for learners to introduce their culture and religion, which increases learners' awareness and acknowledgment of each other's spiritual needs and values.

All Healthcare learners are timetabled to visit a local marae and attend training programmes of the Treaty of Waitangi for a better understanding of ethnic and cultural identity and the concepts of Participation, Protection, and Partnership.

2. Scope of external evaluation and review

The following focus areas were agreed by NZQA and AGI:

- Diploma in Healthcare Management (Level 6). AGI began delivering this higher-level diploma in 2013 in response to feedback from the sector and stakeholders as part of an intention to raise the quality of healthcare in New Zealand. There were fewer students in this programme than in the lower-level 5 programmes at the time of the previous EER, when the Diploma in Healthcare Studies (Level 5) and NZIM Diploma in Management (Level 5)

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were focus areas. The Diploma in Healthcare Studies (Level 5) and Diploma in Healthcare Management (Level 6) both have NCEA and/or IELTS (International English Language Testing System) English proficiency requirements for domestic and international students which apply as appropriate. This focus area also included consideration of the Diploma in Healthcare Studies (Levels 5 and 6) and the NZIM Diploma in Management (Level 5) from the perspective of the Diploma in Healthcare Management (Level 6) students and graduates.

- Certificate in English for Academic Purposes and IELTS (Level 5). AGI received approval for its internal English language proficiency assessment in 2014. This focus area also included General English/Certificates in ESOL (Levels 1-4) and NZCEL applications as appropriate.
- International student support. This focus area was chosen because the majority of AGI's students are international students.

In accordance with NZQA policy, the scope also included the following mandatory focus area:

- Governance, management and strategy.

3. Conduct of external evaluation and review

All external evaluation and reviews are conducted in accordance with NZQA's published policies and procedures. The methodology used is described fully in the web document Policy and Guidelines for the Conduct of External Evaluation and Review available at: <http://www.nzqa.govt.nz/providers-partners/registration-and-accreditation/external-evaluation-and-review/policy-and-guidelines-eer/introduction>. The TEO has an opportunity to comment on the accuracy of this report, and any submissions received are fully considered by NZQA before finalising the report.

Two evaluators conducted the EER over two and a half days at the Karangahape Road, Auckland site. Prior to the EER visit, AGI submitted its self-assessment information. The lead evaluator visited the site and met with the campus director, director of studies, business operations advisor, education advisor and other members of the senior management team and agreed the scope for the EER, which was subsequently confirmed. During the visit, the evaluators interviewed the same personnel, the dean of the Healthcare faculty, Healthcare team leader, tutors and clinical tutors, head of the English department and English tutors, marketing manager and coordinators, current students, graduates and other key stakeholders including local advisory committee members, external moderator(s), employers and international student agents. After the visit, the lead evaluator visited two AGI clinical placement providers, one for level 6 and one for level 5 students, and interviewed the students and supervisors. Before, during and after the visit, AGI provided a wide range of documentation and the evaluators also looked at information online and the AGI external website.

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Summary of Results

Statement of confidence on educational performance

NZQA is **Confident** in the educational performance of **Auckland Goldstar Institute Limited**.

The main reasons for this judgement are:

- AGI has a clear vision of its role as a leader in healthcare in New Zealand and has gone a long way towards achieving this. The most recent and tangible indicator of this is AGI's launch of its research centre.
- AGI clearly meets the most important needs of healthcare students and other key stakeholders such as employers. It fills an employment need for stakeholders and provides a vocational course of study that contains both theoretical and practical components to support the course outcomes.
- There is clear evidence of very effective processes such as clinical placements, which is a key feature of the Healthcare programmes and clearly contributes to learning and other important outcomes such as empathy, cultural awareness, and employment.
- AGI cannot benchmark itself against other New Zealand providers because their programmes are dissimilar. AGI draws strength from the rich experience of its staff and overseas visits which enables it to compare its programmes and practices with international providers and facilities.
- The programme/qualification completion rates for the Diploma in Healthcare Studies have been consistently high over 2011-2014. The completion rates for the Diploma in Healthcare Management have been even higher in its first two years of delivery, 2013 and 2014. The validity of these results is supported by external moderation of hauora (health) unit standards by NZQA and other unit standards by Careerforce which show that AGI has been assessing consistently at the national standard.
- A significant proportion of Diploma in Healthcare Studies (Level 5) students now pathway to the Diploma in Healthcare Management (Level 6). This is a successful outcome because it enables students to succeed at a higher level which enhances their employment and career prospects.
- AGI has found clinical placements for 100 per cent of its students in both its level 5 and level 6 programmes. The employment rate has been continuously maintained above 90 per cent in all programmes, including the Diploma in Healthcare Studies (from 2011) and the Diploma in Healthcare Management (from 2013).
- The Academic English/IELTS preparation students were purpose-driven and clear about why they needed to achieve a particular IELTS result for entry

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into higher-level study or employment. Intermediate students were not as clear about their intentions, although a few suggested that they were interested in gaining entry into the Healthcare programmes. AGI was not running an upper intermediate class which may have suited the needs of some students more than an IELTS class.

- The range of English abilities in the elementary class raised questions about recruitment, placement testing, and progression to higher-level English classes. The evaluators were concerned that beginners' needs were not being matched as well as they might be in areas such as conversation, where the afternoon classes intended to address this were not well attended and there was some repetition of content for some students.
- AGI meets many of the most important needs of its English students and it has effective processes that enable students to progress to higher-level classes and then contribute to other important outcomes such as higher IELTS scores, enabling students to study what they want to, including at university, and gaining employment, including in New Zealand. Some General English students achieve their chosen goal which is to improve their English so that they can enjoy their travel and/or study more. AGI has identified that some of its newer English programmes such as NZCEL need further development and improvement, but the PTE has not fully done this yet.
- The Healthcare programmes and students are performing highly and showing high achievement rates. However, the body of evidence with regards to English was not comprehensive and/or clear enough at this stage, and the range of achievement and outcomes was insufficient to enable NZQA to be more than confident overall in AGI's educational performance.

Statement of confidence on capability in self-assessment

NZQA is **Confident** in the capability in self-assessment of **Auckland Goldstar Institute Limited**.

The main reasons for this judgement are:

- The organisation has effective self-assessment that evaluates most of its high-priority programmes and activities on an ongoing basis. This is particularly the case with the Healthcare programmes, where everyone involved is always looking for ways to develop and improve the programmes and their delivery as part of proactive and continuous improvement, while the English programmes tend to be reviewed periodically more than continuously and changes are made more slowly. The last periodic review of English programmes was completed recently and identified some useful findings which are yet to be acted on.
- The quality and validity of the self-assessment information is generally good, although there are some important areas where quality and validity could be strengthened, particularly in English. The evaluators in their discussions with students noted concerns around initial class placements, incomplete engagement of students with their learning with some unnecessary repetition of content, and no upper intermediate class as an alternative to IELTS Preparation. These concerns do not appear to have been identified by AGI. Whether they were or not, the evaluators were surprised that, having introduced a new curriculum in October/November, AGI did not act more promptly on matters identified through self-assessment.
- Self-assessment includes student satisfaction surveys online, the results of which are acted on by senior management. The surveys show high levels of satisfaction, particularly in Healthcare.
- AGI has the capability to extract a breakdown of the reasons that underpin the ratings, but such analysis is not part of the summaries which are reported and actioned, apart from where immediate changes can be and are made.
- Where more specific areas for improvement are identified, there does not appear to be any great urgency to make changes, particularly in English. However, since the EER visit and the AGI new curriculum survey, English teachers have met and implemented some initiatives.
- AGI uses data to track areas where reassessments are necessary, and identifies and addresses the possible causes; reassessment trends have fallen as a consequence. This is also related to making better use of internal and external assessment and moderation information whereby simple matters such as changing how some assessment questions are phrased may make a difference.

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- Destinal outcomes are clear for Healthcare as most graduates stay in New Zealand, but they are not so clear for English students who are on a range of work, working holiday and visitor visas, although most are on student visas. Clinical placements as part of student experience and learning also provide networking and employment opportunities, and destinal outcomes are recorded when students graduate and leave. Thereafter, AGI knows about graduate destinations through ongoing informal contact with graduates.
- AGI has identified that it wished to have its own more responsive self-assessment tool and has developed one – its potential is not fully realised yet, but it helps to give the evaluators confidence in AGI's self-assessment.
- The new online self-assessment tool has the capacity to readily change questions in student satisfaction surveys to obtain better information. While this is a potentially useful feature, AGI also needs to consider how changing questions may have an impact on benchmarking and the ability to compare data over time.

Findings¹

1.1 How well do learners achieve?

The rating for performance in relation to this key evaluation question is **Good**.

The rating for capability in self-assessment for this key evaluation question is **Good**.

A high proportion of students have successfully completed courses and programmes and gained qualifications in the Diploma in Healthcare Studies 2011-2014 as shown in Table 1. Similarly high retention rates are evident, as would be expected.

	2011	2012	2013	2014	2015
Enrolled	107	161	128	126	82 (as at 1 April)
Course/qualification completion rates %	85	90	87	91	-
Retention rates %	87	93	91	94	-

A high proportion of students have successfully completed courses and programmes and gained qualifications in the Diploma in Healthcare Management since 2013, when it was first introduced, as shown in Table 2. Similarly high retention rates are also evident, as would be expected.

	2013	2014	2015
Enrolled	40	74	75 (as at 1 April)
Qualification completion rates %	93	100	-
Retention rates %	93	100	-

The validity of the level 6 results is supported by the external approval of unit standards of hauora and other unit standards – these standards are used to assess important components of Healthcare assessment. The external moderation of hauora unit standard assessments showed improvement in 2011 and 2012, and that AGI was assessing consistently with the national standard in 2013 and 2014. Twenty-seven Careerforce provider group moderations of 12 unit standards for 2010-2015 showed that AGI was using assessment materials well to consistently

¹ The findings in this report are derived using a standard process and are based on a targeted sample of the organisation's activities.

assess students at the national standard, with only three assessments requiring minor modifications.

In English, students undergo an initial test which determines the level of class they are placed in. Individual progress is tracked and monitored and discussed by teachers, and some students are offered the opportunity to progress to a higher-level class. According to the data provided by AGI, it had 210 General English enrolments in 2010, 260 in 2012, 266 in 2013, 209 in 2014, and 48 as at 1 May 2015. AGI measures students' progress rates by level, based on the number of students in each level class (newly enrolled students, rolled-over students, and students progressed from a lower level) and the number of monthly tests completed. This indicates progression up to and including September 2014, after which a new curriculum was introduced. It is unclear what conclusions AGI draws from the data. Given the number of variables involved in measuring progression in this way and the nature of language acquisition, the evaluators concluded that the data shows some students progress to a higher level from all levels and suggests that, overall, a higher proportion of students progress from elementary and pre-intermediate than from other levels.

AGI measures the progress of students undertaking Academic English/IELTS preparation based on reaching IELTS 5.5 or equivalent. Sixty-seven students who completed this programme between January and September 2014 achieved equivalent IELTS 5.5 or above, a success rate of 82 per cent. The rate of progress after this was not available at the time of the EER visit – 33 per cent of Academic English/IELTS students entered other AGI programmes available at the time, most of them at level 5.

The quality and validity of the self-assessment information for Healthcare is generally sound and useful. This has included identifying quite a high reassessment rate in 2012, which led to a review in 2013 of assessments, teaching materials, tutorials and professional development, with a particular focus on dementia. The review and consequential changes have resulted in a noticeable drop in the reassessment rate from 2014. This is partly the result of improved academic and English support for the students.

There are some areas where the quality and validity of self-assessment, particularly in English, could be strengthened. Currently there are increasing numbers of students at elementary and Academic English/ELTS levels. The English programme is benchmarked against the Common European Framework, and students and tutors have been positive about the introduction of a management system that records and analyses student progress. However, matters identified by the evaluators in their discussions with students, such as initial class placements, incomplete engagement of students with their learning – with some unnecessary repetition of content – and no upper intermediate class as an alternative to IELTS preparation do not appear to have been identified by AGI. Whether they were or not, the evaluators were surprised that, having introduced a new curriculum in

October/November 2014, AGI did not act more promptly on matters that were identified through self-assessment.

1.2 What is the value of the outcomes for key stakeholders, including learners?

The rating for performance in relation to this key evaluation question is **Good**.

The rating for capability in self-assessment for this key evaluation question is **Good**.

The value of the Healthcare outcomes are considerable. Students complete practically orientated courses and gain qualifications. Success at level 5 enables students to progress to level 6, from which they can gain better job and career prospects. The level 7 Diploma in Health qualification, which has just been approved, will offer future students a further pathway and even greater opportunities in the healthcare sector.

Self-reflection, and Māori and multicultural dimensions are embedded in the AGI and clinical placement-based learning and assessment based on hauora unit standards. Students gain meaningful knowledge and a range of useful skills which extend to learning how to learn and be self-supporting and self-managing as well as being part of a team. Students learn how to effectively relate to their culturally diverse patients. In doing so, students develop their own personal abilities and attributes and improve their own sense of well-being and confidence in a challenging environment. The learning prepares students well to be able to contribute positively to the immediate healthcare environment, which benefits families and local and wider communities. It also prepares them well for future employment and a career in healthcare. Such outcomes are of value to the quality of healthcare in New Zealand and, potentially, internationally.

The value of the outcomes for English students is diverse and in some cases less clear. Students preparing for IELTS mostly achieve their goal of gaining the score they need to gain entry into their desired course or programme – although not necessarily at AGI – and/or employment. Intermediate students the evaluators spoke to were less clear about the outcomes they were seeking, other than to improve their English. Some of their aspirations sounded similar to those of the IELTS preparation students, but were less convincing and possibly determined by the lack of an upper intermediate class. Like some of the intermediate students, elementary English students wanted to improve their English for a wide range of reasons including work, travel and progress to further study in New Zealand or elsewhere. The evaluators were not convinced that some of the practices at intermediate and elementary levels would provide some students with the outcomes they sought.

AGI has clear self-assessment feedback on the value of the outcomes for its Healthcare students, from not only the students themselves and the tutors but also from key stakeholders such as employers, sector representatives and members of

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the AGI advisory group. It also has sound information about the destinal outcomes of graduates when they leave and commonly after that through a range of ongoing contact and related information and feedback.

The online student satisfaction survey provides valuable feedback from Healthcare and English students. Entry and regular testing help AGI identify the progress of individual English students and level cohorts. AGI's self-assessment did not identify matters the evaluators picked up by talking to some English students, and AGI did not always promptly address English matters that it did identify, including in its thorough review.

1.3 How well do programmes and activities match the needs of learners and other stakeholders?

The rating for performance in relation to this key evaluation question is **Good**.

The rating for capability in self-assessment for this key evaluation question is **Good**.

The Healthcare programmes and activities match the needs of students and sector stakeholders very well. Robust entry requirements help ensure quality students. The reasons why students wish to undertake Healthcare studies are thoroughly considered at the stages of pre-enrolment and enrolment, and the process includes an oral interview conducted by the head of the Healthcare department. Students need to complete the level 5 qualification successfully before progressing to the level 6 programme. Most students do this but some go straight from level 5 to employment. Graduates who did this confirmed that while they gained employment with the level 5 qualification, it could be limiting in terms of the roles they are employed in and career progression.

Students and graduates shared with the evaluators that for some of them level 6 is quite a big jump in requirements and expectations from level 5. Whether at level 5 or level 6, students' needs are well met by a high proportion of their learning and assessment being based on clinical placements directly related to their studies. Students' learning needs are effectively addressed through attachment to an experienced placement buddy, close supervision and support, frequent and regular teacher visits, and self-reflections and logbooks which capture learning and improvements in practice. AGI manages placements with caregiving institutions so that students are as fully prepared as possible to deal with particular challenges, such as the range of possible behaviours of patients with dementia. Such behaviours include possible patient aggression and sexual harassment as well as the death of the people the students care for. In addition, AGI requests that students not be placed in a full dementia ward, at least at first. These challenges cannot be completely avoided, however, and rare occurrences are shared appropriately with all students to enhance their learning.

General English students undertake a placement test and oral interview tests (which are recorded on CD) which help identify students' English language needs

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and determine their class level for initial placement. Benchmarking against Common European Framework level descriptors are used to track progress. The needs of Academic English/IELTS students vary considerably, but have been and are being met. The number of General English students is quite large and AGI tracks their individual progress within and between levels. It is able to show improved progress rates over all levels from 2011 to 2014 and into 2015, although it is not clear how the PTE uses this information.

While many of the needs of General English students are being met, the evaluators, and in some cases AGI, have identified where student needs are not fully matched. For example, the conversational needs of some students are not being met as well as they might be. The use of student activities inside and outside the classroom to improve students' conversational English varies, as does the uptake of optional afternoon classes, which is low overall. Several of the intermediate students interviewed by the evaluators said they wanted to enrol in the Academic English/IELTS preparation class, but several of them were unclear as to why. AGI did not have an upper intermediate class (though it has had in the past, most recently with small numbers). The evaluators observed that few intermediate students identified an intention to go on to the Healthcare level 6 programme. The evaluators consider that some of the intermediate English students would be better served by progressing to an upper intermediate rather than Academic English/IELTS preparation class.

AGI has effective self-assessment of the Healthcare programme from a range of sources. These sources include initial internal needs analysis, progress monitoring and student satisfaction surveys as well as external professional clinical placement feedback. Such feedback has led to improvements in how the Healthcare programmes monitor individual progress, provide support, and address matters like dementia and aggression in the patients. The General English self-assessment sources are similar yet not as effective given the range of student needs not identified and/or addressed. AGI has an excellent self-assessment tool which is not yet being used to its full potential, although the PTE is doing all it can to encourage student feedback, including suggestion boxes, student representative meetings and weekly tutor meetings which student representatives attend (by class for Healthcare and by nationality for General English).

1.4 How effective is the teaching?

The rating for performance in relation to this key evaluation question is **Good**.

The rating for capability in self-assessment for this key evaluation question is **Good**.

Healthcare tutors are current, well qualified, experienced and work together collegially and effectively. They engage students effectively through using a range of student-orientated learning methods which include interactive approaches such as role-plays. Learning is planned and structured and students have plentiful opportunities to apply their knowledge and skills in their clinical placements – 80 per cent of student assessments are practicum based and provide students and their supervisors and tutors with solid feedback on student progress. The effectiveness of the healthcare teaching is enhanced by factors such as small classes and a lot of individual student attention; the theory teachers are also clinical placement teachers. Where reassessment is necessary, it is preceded by effective learning interventions before it is undertaken. Students have the opportunity to undertake a maximum of three reassessments.

Reassessment trends are identified, explained and acted on, and the rates have come down. For example, at level 5, the reassessment rate of dementia and colonisation unit standards was identified as being high. The root causes were identified, improvements in delivery and assessment were made, and the reassessment rate came down. At level 6, the reasons for not submitting assignments on time were identified and addressed through enhancing student self-responsibility and the use of clinical tutor and programme leader support. Assessment and moderation are externally robust and mainly minor changes are identified and made. These are recorded and signed off when they arise from external moderation, but not always when they arise from internal moderation.

The English language tutors are current, qualified and experienced in teaching in a range of English language institutions. English language tutors are contracted on a different basis for varying periods of time, which are often extended. However, certainty around a minimum number of hours for all tutors, other than those on call who relieve another tutor, would support the general morale of all the tutors. Class sizes vary but do not exceed 18 students. Lesson plans and records are thorough and enable ready continuity if a teacher is away for any reason. Resources, including textbooks, are sufficient. Some tutors provide their own supplementary materials and activities, including New Zealand content, to enhance their students' experience while at the same time helping improve their oral English proficiency. The evaluators identified one class where students experienced repeated use of the same part of the textbook depending on when they started, which is not good practice.

Weekly class tests, a four-weekly oral test, and tutor discussions determine movement to a higher-level class, although the actual criteria for this, including the use of the Common European Framework level descriptors, were not fully clear. Tutors' experience of teaching at different levels varied, as did their opportunities to

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do so. Marking schedules, guidelines, assessment and moderation require further development as part of the programme review before they are fully adequate for their purpose. Any professional development of generic assessment and moderation will need to be focused on specific new English language requirements to be relevant and effective.

Healthcare student surveys show that they are highly satisfied with the effectiveness of the teaching they receive. They report that they are well prepared for what they experience during their clinical placements. This includes how to effectively relate to and communicate with the people they care for. It also includes their first aid knowledge and skills training, which is outsourced by AGI. AGI uses self-assessment effectively to make worthwhile improvements, most recently to invest more in equipment on site at AGI to enhance the training.

English language student satisfaction surveys show quite high satisfaction but vary according to level. It is unclear how this survey information and level progression rates data for 2011-2014 have been used by AGI to identify areas for improvement and to make changes. Further analysis of the data and reasons for the responses will improve the value of the self-assessment. The use and value of teacher observations, appraisals and internal and external professional development based on the rich opportunities available in Auckland could be enhanced if it was better connected to self-assessment. The head of English is capable of doing this.

1.5 How well are learners guided and supported?

The rating for performance in relation to this key evaluation question is **Excellent**.

The rating for capability in self-assessment for this key evaluation question is **Good**.

AGI guides and supports all its students very well. All staff contribute to student guidance and support, including the members of the marketing department who help provide first language communication opportunities, mentoring and a wide range of student support services. AGI clinical tutors, clinical placement supervisors and student buddies support students on placements effectively.

AGI's enforcement of strict attendance policies and procedures supports student achievement. AGI's attention to attendance supports the students' motivation – students' success is institutionally as well as individually and personally driven. This contributes to low withdrawals and high retention rates. Healthcare students are focused on completing their programmes, obtaining their qualifications and gaining employment. AGI's use of software and training in the use of bibliographies helps to ensure the authenticity of student work and deter plagiarism. With the majority of the assessments (up to 80 per cent) being practical clinical placement based, plagiarism is not a significant issue. English language students are intent on improving their English, and for a small number of students this means obtaining a sufficiently high IELTS score to enable them to enrol in programmes at AGI or other institutions.

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The self-reflective nature of the Healthcare programmes helps students succeed. So does the cultural diversity of the AGI student population profile. The attention paid to Māori culture, particularly hauora, which enables students to effectively apply a cultural framework to their practice during their clinical placements, and thereafter in their employment, is of real value to those they care for.

AGI complies with the Code of Practice for the Pastoral Care of International Students and Immigration New Zealand requirements as far as could be determined. This includes the provision of information pre-enrolment and at enrolment, and regular review of such information.

AGI completes its own police checks on homestays and for under-18 international students as required by the Code of Practice. Three staff members are available to students 24/7 in case of emergency. AGI provides students with advice about health insurance and visas. AGI reports to the parents of students under 18 years of age as required by the Code of Practice. Under 18-year-old students complete a weekly questionnaire as an additional tool to help support their well-being. Any complaints relating to clinical placements are fully investigated and the students are fully supported.

AGI provides excellent support and guidance to its students, and is focused on compliance with external requirements. A very small number of complaints have been made to the International Education Appeal Authority, and they have not been upheld. AGI could still learn from these isolated cases and consider any improvements to their own related practices. AGI could consider making even greater use of its excellent but quite new survey tool to self-assess guidance and support, although the evaluators realise that AGI could also gain increasing and valuable feedback on this area from its student suggestion box initiative.

1.6 How effective are governance and management in supporting educational achievement?

The rating for performance in relation to this key evaluation question is **Good**.

The rating for capability in self-assessment for this key evaluation question is **Good**.

The purpose and direction of AGI are very clear. The PTE wants to be a leader in the healthcare education sector, and in many ways it is. Its education and training are well aligned to New Zealand social policy settings in healthcare. It is well informed about the healthcare sector in New Zealand and overseas. It is very active in the sector and has facilitated stakeholder meetings to enable stakeholders to share their knowledge and experience and have input into programme development. In 2015, AGI launched its well-supported research centre.

The leadership of AGI is effective. The PTE exhibits sound strategic and business planning and a strong team capable of delivering. The advisory committee and its members support AGI well, and individual members contribute to the well-being of AGI.

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AGI is aware of international needs and future opportunities, but in the meantime is focused on its role and responsibilities in New Zealand. AGI has shown it can anticipate and respond to change with regard to NZQA and Immigration New Zealand, although it still has to show how well it can manage the NZCEL programmes.

AGI allocates resources well to support learning, teaching and research. A recent example of this is the investment in healthcare equipment on site to enhance training in-house prior to clinical training. Another example is AGI's development and launching of a customised student management system – this enables students to use their own login and connect to AGI's site and access all the information they need. It also enables AGI to capture, process, analyse and use data much more effectively than its off-the-shelf predecessor – although the system is not yet being used to its full and considerable potential. AGI also intends to move to bigger and better premises in the future.

AGI recruits and develops its staff well. Its Healthcare leadership is well experienced and connected and the staff members have strong complementary qualifications and experience including research. AGI supports staff professional development, but the evaluators consider that this could be strengthened for the English language tutors. AGI listens to its tutors and acts and supports them, and as a consequence staff feel valued. These attributes extend to the strengths of the clinical placements and the range of stakeholders the PTE regularly engages with.

The relationship between the English language and Healthcare programmes is not as clear as it might be. In many ways, English language and Healthcare are quite separate activities at AGI. However, the evaluators noted that English students are informed about the Healthcare programmes and all students are encouraged to socialise during breaks in their studies in the same building.

AGI has developed an excellent new tool for self-assessment and has shown it has the capability to be excellent in this area. However, it has not quite used the tool to its full potential and is still coming to terms with how to use its flexibility – for example, AGI can change student satisfaction survey questions but has to consider how to manage this and still be able to compare feedback from one cohort or year to another.

AGI is aware of the importance of determining the reasons for student responses and addressing them, not just the specific individual ones but also considering generic and systemic changes it might make. Supplementary and complementary self-assessment methods are important and they could include talking to internal and external focus groups. It is not clear that AGI did this with its English language students. If it had done so the PTE might have identified some of the matters the evaluators identified by talking to the students.

Focus Areas

This section reports significant findings in each focus area, not already covered in Part 1.

2.1 Focus area: Governance, management and strategy

The rating in this focus area for educational performance is **Good**.

The rating for capability in self-assessment for this focus area is **Good**.

2.2 Focus area: International student support

The rating in this focus area for educational performance is **Excellent**.

The rating for capability in self-assessment for this focus area is **Good**.

2.3 Focus area: Diploma in Healthcare Management (Level 6)

The rating in this focus area for educational performance is **Excellent**.

The rating for capability in self-assessment for this focus area is **Excellent**.

This focus area also included consideration of the Diploma in Healthcare Studies (Levels 5 and 6) and the NZIM Diploma in Management (Level 5) as appropriate.

2.4 Focus area: Certificate in English for Academic Purposes and IELTS (Level 5)

The rating in this focus area for educational performance is **Good**.

The rating for capability in self-assessment for this focus area is **Good**.

This focus area also included General English/Certificates in ESOL (Levels 1-4) and NZCEL applications as appropriate.

Recommendations

NZQA recommends that Auckland Goldstar Institute Limited:

- Continue to develop the benchmarking of its educational performance in Healthcare, including student achievement, clinical placement, assessment and moderation, employment outcomes and related practices against other comparable New Zealand and international tertiary educational providers.
- Develop its English language teaching effectiveness, including resources, professional development, observation, appraisal, curriculum delivery, assessment and moderation, progress reporting and related practices.

Appendix

Regulatory basis for external evaluation and review

External evaluation and review is conducted according to the External Evaluation and Review (EER) Rules 2013, which are made by NZQA under section 253 of the Education Act 1989 and approved by the NZQA Board and the Minister for Tertiary Education, Skills and Employment.

Self-assessment and participation in external evaluation and review are requirements for maintaining accreditation to provide an approved programme for all TEOs other than universities. The requirements are set through the NZQF Programme Approval and Accreditation Rules 2013, which are also made by NZQA under section 253 of the Education Act 1989 and approved by the NZQA Board and the Minister for Tertiary Education, Skills and Employment.

In addition, the Private Training Establishment Registration Rules 2013 require registered private training establishments to undertake self-assessment and participate in external evaluation and review, in accordance with the External Evaluation and Review Rules (EER) 2013, as a condition of maintaining registration. The Private Training Establishment Registration Rules 2013 are also made by NZQA under section 253 of the Education Act 1989 and approved by the NZQA Board and the Minister for Tertiary Education, Skills and Employment.

NZQA is responsible for ensuring non-university TEOs continue to comply with the rules after the initial granting of approval and accreditation of programmes and/or registration. The New Zealand Vice-Chancellors' Committee (NZVCC) has statutory responsibility for compliance by universities.

This report reflects the findings and conclusions of the external evaluation and review process, conducted according to the External Evaluation and Review (EER) Rules 2013.

The report identifies strengths and areas for improvement in terms of the organisation's educational performance and capability in self-assessment.

External evaluation and review reports are one contributing piece of information in determining future funding decisions where the organisation is a funded TEO subject to an investment plan agreed with the Tertiary Education Commission.

External evaluation and review reports are public information and are available from the NZQA website (www.nzqa.govt.nz).

The External Evaluation and Review (EER) Rules 2013 are available at <http://www.nzqa.govt.nz/assets/About-us/Our-role/Rules/EER-Rules.pdf>, while information about the conduct and methodology for external evaluation and review can be found at <http://www.nzqa.govt.nz/providers-partners/external-evaluation-and-review/policy-and-guidelines-eer/introduction/>.

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Final report.