

Organisation name	Cambridge Academy of English
Inspection date	23 October 2024
Current accreditation status	Accredited
Reason for spot check	Signalled: follow up on Points to be addressed

Recommendation

We recommend continued accreditation. The next inspection falls due in 2027; there are no grounds for bringing this forward.

Changes to the summary statement

The need for improvement in strategic and quality management and course design can now be removed. An updated summary statement can now be issued.

New summary statement

The British Council inspected and accredited Cambridge Academy of English in July 2023 and October 2024. The Accreditation Scheme assesses the standards of management, resources and premises, teaching, welfare, and safeguarding under 18s and accredits organisations which meet the overall standard in each area inspected (see www.britishcouncil.org/education/accreditation for details).

This was a compliance-only inspection during which the inspectors focused only on whether inspection criteria were met or not met. Inspectors did not evaluate the extent to which requirements were exceeded and no strengths were awarded. No new summary statement has been issued; please refer to the last inspection report for any areas of strength previously awarded.

The inspection report stated that the organisation met the standards of the Scheme.

Updated summary inspection findings

Management

The provision meets the section standard. The management of the provision operates to the benefit of students and in accordance with the providers' stated goals, values, and publicity. Student administration is handled effectively.

Teaching and learning

The provision meets the section standard. The academic staff team has a professional profile appropriate to the context. Teachers receive guidance to ensure that they support students effectively in their learning. Courses are structured and managed to provide the maximum possible benefit to students. The teaching observed met the requirements of the Scheme.

Welfare and student services

The provision meets the section standard. The provision meets the needs of the students for security, pastoral, care, information and leisure activities. Students benefit from well-managed student services, including out-of-class activities and suitable accommodation.

Safeguarding under 18s

The provision meets the section standard. There is appropriate provision for the safeguarding of students under the age of 18 within the organisation and in any leisure activities or accommodation provided.

Organisation profile

Inspection history	Dates/details
First inspection	2012
Last full inspection	2023
Subsequent checks/visits (if applicable)	N/a
Other related non-accredited activities (in brief) at this centre	N/a
Other related accredited schools/centres/affiliates	N/a

Other related non-accredited schools/centres/affiliates	N/a
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Student and staff profile

	At inspection	Estimate at peak: July
Total ELT/ESOL student numbers (FT + PT)	0	37
Minimum age (including closed group or vacation)	0	8
Typical age range	0	8–17
Typical length of stay	0	2–4 weeks
Predominant nationalities	N/a	Slovakian, Chinese, Spanish, German, French, Italian, Ukrainian
Total number of teachers on eligible ELT courses	0	5
Total number of managers including academic	3	3
Total number of administrative/ancillary staff	0	0

Premises profile

Address of main site	Bedford School for Boys, De Parys Avenue, Bedford MK40 2TU
Additional sites in use	N/a
Additional sites not in use	N/a
Sites inspected	None – remote inspection

Introduction

Background

This was a signalled spot check with a focus on points to be addressed from the previous inspection.

Preparation

Prior to the visit, the reporting inspector contacted Cambridge Academy of English (CAE) to confirm key staff would be available during October. An updated action plan on points to be addressed and further supporting documentation were requested. The date of the inspection was not disclosed until the day before.

Programme and persons present

The inspection was carried out remotely by one inspector and lasted for half a day. During the week of the inspection the summer centre was not running, and no classes were taking place. The inspection began at 10.00 and concluded at 15.00. Meetings were held with the two company directors. Documents were viewed prior to, during and after the inspection. These included meeting minutes, collated student feedback, staff induction checklists, staff files, the student handbook, pre-arrival information for students, guidance for teachers, course design and review documentation, records of accommodation inspections, and social programme risk assessments. The website was also checked.

Findings

Findings are reported in the following sections and in the Action taken on points to be addressed.

Management

Strategic and quality management	Met
M1 There is a clear statement describing the goals and values of the organisation, which is made known to all staff.	Met
M2 The management has clear objectives for the future of the organisation and has realistic plans to achieve them.	Met
M3 There is a documented and clearly understood structure for the ELT operation. There are sufficient staff to manage and deliver the provision, and to ensure continuity at all times.	Met
M4 There are effective channels of communication between all involved in the ELT operation, and between the ELT operation and any wider organisation of which it is a part.	Met
M5 The provider regularly obtains and records feedback from students on all the services offered. Feedback is circulated to relevant staff and appropriate action is taken and recorded.	Met

M6 The provider regularly seeks and records feedback from all staff on the services offered. Appropriate action is taken and recorded.	Not met
M7 The provider reviews systems, processes and practices with a view to continuing improvement. Appropriate action is taken and recorded in an annual self-evaluation.	Met

Comments

The goals and values of the organisation are made known to staff through the staff handbook and organisational plans are appropriate. The structure of the organisation is clear and there are sufficient staff to ensure the effective delivery of the provision and ensure continuity at all times. Communication within the summer centre team and with HO is effective. Minutes of meetings are recorded. Feedback is obtained from students via initial, mid, and end-of-course feedback forms, and some actions have been recorded. While some informal feedback is gathered from staff, there are no formal records of this, or records of action being taken. Policies and procedures are reviewed on an annual basis.

Course design and implementation	Met
T11 The course design is comprehensive and is based on the provider's stated approach to learning or educational philosophy, and is appropriate to the learning context.	Met
T12 Courses include strategies which help students to develop their language skills outside the classroom and benefit linguistically from their stay in the UK.	Met
T13 Course design is regularly reviewed in light of the different and changing needs of students and feedback from teachers and students.	Met
T14 Written course outlines and intended learning outcomes, appropriate to the course length and type, are available to students and referred to in class.	Met

Comments

There is a clear rationale for course design and written guidance is provided for teachers on how to structure and deliver the academic programme. Intended learning outcomes are included but study and learning strategies are not systematically covered. However, strategies to help students develop their language skills outside the classroom are well covered and there are clear links between the academic and activity programmes. Course design is regularly reviewed in light of teacher and student feedback. Written course outlines are made available to students and referred to in class.

Action taken on points to be addressed

Points which must be addressed within three months

Management

M3 The number of staff is not always sufficient to ensure the effective delivery of the provision and ensure continuity at all times.

Addressed. Additional year-round staff have been recruited and staff provision at the junior centre is now suitable.

M10 Recruitment procedures are not always followed, and some staff files were incomplete.

Addressed. A new member of staff has responsibility for recruitment documentation. Sampled staff files were complete.

Welfare and student services

W4 (2024: W3) The safeguarding policy is not made known to students.

Addressed. Safeguarding, tolerance, respect and anti-bullying policies and procedures feature in a number of documents and posters displayed around the centre.

W7 (2024: W5) No information on compliance with the law is made available to students.

Addressed. Compliance with the law is featured in the first-day welcome meeting, excursion preparation lessons and on poster displays.

W11 (2024: W9) There are no records of the inspection of accommodation prior to occupation.

Addressed. A full inspection of all accommodation is conducted prior to occupation alongside a risk assessment.

W26 (2024: W22) Written risk assessments are not used prior to excursions or activities, and therefore these documents are not updated at any point.

Partially addressed. Risk assessments are made known to all supervisory staff prior to an activity or excursion but do not include sufficient detail on potential risks that may be encountered.

Safeguarding under 18s

S4 Two references could not be found for all staff.

Addressed. Two references are now on file for all members of staff.

S6 The DSL was not aware of the procedure for responding to requests for overnight stays and there is no written guidance.

Addressed. This information is now clearly presented in the pre-course information sent to parents and the policy is made clear to all relevant members of staff.

Other points to be addressed

Management

M4 There are insufficient systems in place to ensure consistent communication between HO and the centre. Minutes are not currently recorded for such meetings.

Addressed. One of the Directors is now based at the centre on a full-time residential basis. Daily, all staff meetings take place. Minutes of meetings are recorded and shared with all relevant members of staff.

M5 Feedback is obtained from students via initial and end-of-course feedback forms, but actions are not recorded.

Partially addressed. Student feedback is regularly obtained, results are collated and some actions recorded. However, not all actions taken in response to feedback have been recorded.

M6 Staff feedback is mostly informal, but actions are not recorded and staff reported that their recommendations were often overlooked.

Not addressed. There are no systems in place to record staff feedback or evidence of actions taken in response to informal feedback.

M7 There was no evidence that policies and procedures are reviewed on an annual basis.

Addressed. Evidence was seen that annual review procedures are now in place.

M11 Induction records are not always kept on file.

Addressed. Records including induction checklists for all staff are now in place.

M12 There are no records of appraisals or performance review meetings.

Not addressed. Although staff exit interviews take place there are no written records of such meetings. Permanent staff are not appraised other than on completion of their probationary period.

M20 (2024: M19) Conditions under which a student may be asked to leave a course are not made available to students.

Addressed. Examples of unacceptable behaviour leading to expulsion are featured in terms and conditions and highlighted to students at the welcome briefing.

Teaching and learning

T7 (2024: T5) Cover arrangements often rely on senior staff which can prevent them from carrying out their main duties effectively.

Addressed. Suitable and effective cover procedures are now in place to ensure minimal disruption to the smooth running of the operation.

T11 There is insufficient guidance on how to plan a two-week programme that will ensure all essential elements are covered. There is no overall course plan for teachers to follow. Teachers at the focus group commented that they would have liked more guidance on course design and spend a lot of time on the preparation of lessons.

Partially addressed. Schemes of work and sample course plans are now made available to teachers, along with suggested materials. However, study and learning strategies do not feature in these documents.

T12 (2024: T13) There is no evidence that course design has been reviewed recently, other than collecting materials from previous teachers.

Addressed. In addition to an annual review meeting, course design is reviewed with teachers prior to the start of the programme and throughout.

T13 (2024: T14) Written course outlines are not made available to students.

Addressed. Course outlines are referred to in weekly schemes of work displayed on classroom walls and student portfolios.

T15 (2024: part of T11) Learner strategies are not systematically covered in course design documents.

Not addressed. Learner strategies are not included in course design documents.

Conclusions

The organisation has taken action on the vast majority of the points to be addressed highlighted in the previous report. Overall, the requirements for strategic and quality management and course design and development are now met; these areas are no longer a need for improvement.

Outstanding points to be addressed

M5 Feedback is obtained from students via initial and end-of-course feedback forms, but actions are not recorded. **Partially addressed. Student feedback is regularly obtained, results are collated and some actions recorded. However, not all actions taken in response to feedback have been recorded.**

M6 Staff feedback is mostly informal, but actions are not recorded, and staff reported that their recommendations were often overlooked. **Not addressed. There are no systems in place to record staff feedback or evidence of actions taken in response to informal feedback.**

M12 There are no records of appraisals or performance review meetings. **Not addressed. Although staff exit interviews take place there are no written records of such meetings. Permanent staff are not appraised other than on completion of their probationary period.**

T15 (2024: part of T11) Learner strategies are not systematically covered in course design documents. **Not addressed. Learner strategies are not included in course design documents.**

W26 (2024: W22) Written risk assessments are not used prior to excursions or activities, and therefore these documents are not updated at any point. **Partially addressed. Risk assessments are made known to all supervisory staff prior to an activity or excursion but do not include sufficient detail on potential risks that may be encountered.**

New points to be addressed arising from this visit

M16 Students or parents are not able to opt out of the use of photographic images when agreeing to the terms and conditions of the school.

Action plan

It is a requirement of M7 that an Action plan showing progress on all points to be addressed is submitted within six months of the date of the committee meeting at which the report was considered. Therefore, your action plan must be sent to the Accreditation Unit by 4 June 2025. However, action on any points to be addressed with a specific earlier deadline must still be submitted by the deadline given in the results letter.

Once submitted the Action plan should be kept up to date (but not submitted unless requested) ready for future inspections.