

Outcomes from institutional audit
Validation and approval of new
provision, and its periodic review
Second series



Sharing good practice

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ISBN 978 1 84979 129 8

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Registered charity numbers 1062746 and SC037786

Summary

The overall conclusion to be drawn from an analysis of the 59 institutional audit reports published between December 2004 and August 2006 is that institutions had put in place processes for the approval of new programmes and their periodic review which contribute significantly to institutions' arrangements for establishing and maintaining quality and standards. In designing these processes, on the whole institutions have drawn upon the guidance contained in the Academic Infrastructure, and particularly in the *Code of practice for the assurance of academic quality and standards in higher education* (hereafter, the *Code of practice*) *Section 7: Programme approval, monitoring and review*.

In relation to programme approval, the great majority of institutions had processes in place that were at least satisfactory. Where good practice was identified, it related to support given to programme teams; the care taken with the design of the process and of the mechanisms for evaluating its effectiveness; and to the active engagement of external advisers in quality management and course development. Areas which attracted recommendations included adequate use of external advice; clarity for final endorsement of approval decisions; use of reports from the process to ensure accountability and enhance practice; limitations in the use made by institutions of the Academic Infrastructure; and the efficiency and effectiveness of processes.

In the area of periodic programme review, the analysis confirms both the variety and the soundness of review systems, whether based on a revalidation process or on a broader model. The features of good practice identified cluster around three major themes: the use made of external advice, the balance in the membership of review panels (with specific reference to the involvement of students and inexperienced members of staff), and the effectiveness of the review process itself.

Recommendations focused on the efficiency of the procedures, including for example delays in responding to review reports; the monitoring of the extent to which review processes refreshed programmes; incomplete coverage; clarity of definition where dual review processes operated; standardisation of the structure of review reports and response mechanisms; the allocation and exercise of responsibility for producing accurate summaries of review reports for the Teaching Quality Information (TQI) initiative, and wider questions of responsibility and accountability, particularly at an institutional level.

Preface

An objective of institutional audit is 'to contribute, in conjunction with other mechanisms, to the promotion and enhancement of high quality in teaching and learning'. To provide institutions and other stakeholders with access to timely information on the findings of its institutional audits, the Quality Assurance Agency for Higher Education (QAA) produces short working papers, describing features of good practice and summarising recommendations from the audit reports. Since 2005 these have been published under the generic title *Outcomes from institutional audit* (hereafter, *Outcomes...*). The first series of these papers drew on the findings of the audit reports published between 2003 and November 2004. This paper is based on the findings of the institutional audit reports published between December 2004 and August 2006. It includes a brief section at the end of the paper which compares its key features with those of its predecessor in the first series of *Outcomes...* papers.

A feature of good practice in institutional audit is considered to be a process, a practice, or a way of handling matters which, in the context of the particular institution, is improving, or leading to the improvement of, the management of quality and/or academic standards, and learning and teaching. *Outcomes...* papers are intended to provide readers with pointers to where features of good practice relating to particular topics can be located in the published audit reports. Each *Outcomes...* paper therefore identifies the features of good practice in individual reports associated with the particular topic and their location in the main report. Although all features of good practice are listed, in the interests of brevity not all are discussed in this paper. In the initial listing in paragraph 6, the first reference is to the numbered or bulleted lists of features of good practice at the end of each institutional audit report, the second to the relevant paragraphs in Section 2 of the main report. Throughout the body of this paper references to features of good practice in the institutional audit reports give the institution's name and the paragraph number from Section 2 of the main report.

It should be emphasised that the features of good practice mentioned in this paper should be considered in their proper institutional context, and that each is perhaps best viewed as a stimulus to reflection and further development rather than as a model for emulation. A note on the topics identified for the first and second series of *Outcomes...* papers can be found at Appendix 3 (page 23).

As noted above, this second series of *Outcomes...* papers is based on the 59 institutional audit reports published by August 2006 and the titles of papers are in most cases the same as their counterparts in the first series of the *Outcomes...* papers. Like the first series of *Outcomes...* papers, those in the second series are perhaps best seen as 'work in progress'. Although QAA retains copyright in the contents of the *Outcomes...* papers they can be freely downloaded from its website and cited, with acknowledgement.

Introduction and general overview

1 This paper is based on a review of the 59 institutional audit reports published between December 2004 and August 2006 (see Appendix 1, page 19). A note on the methodology used to produce this and other papers in the *Outcomes...* series can be found in Appendix 4 (page 25).

2 One of the purposes of institutional audit is to provide information through published reports which will enable stakeholders, including the public, to judge the soundness of higher education institutions as providers of 'tertiary qualifications of national and international standing' (*Handbook for institutional audit: England (2002)*, paragraph 11) (the *Handbook*). In order to achieve this, institutional audit examines the effectiveness of an institution's internal quality assurance structures and mechanisms, using the *Code of practice* published by QAA as a point of reference.

3 The *Code of practice Section 7: Programme approval, monitoring and review* provides a source of advice for higher education institutions on the approval of new programmes of study and the conduct of periodic reviews on their progress. The topic is discussed in some detail in almost all institutional audit reports (the exceptions being where an institution offers no taught undergraduate or postgraduate programmes). Material from the institutional audit reports relating to programme monitoring is considered in another *Outcomes...* paper, *Programme monitoring arrangements*. The second edition of *Section 7* was published in 2006, after the institutional audits considered in this paper were conducted. References to *Section 7* in this paper are therefore to the first edition, published in 2000 (available from www.qaa.ac.uk/academicinfrastructure/codeOfPractice/section7/archive).

4 In this paper, the words 'approval' and 'validation' are always synonymous, the only reason for the use of 'validation' being faithfulness to the text of particular audit reports and institutional vocabulary. Validation in the sense of approving collaborative programmes is not treated (for further discussion of this particular process, please see the *Outcomes...* paper on *Collaborative provision in the institutional audit reports*, and the forthcoming *Outcomes from collaborative provision audit series*).

5 In *Section 7*, it is suggested that programme review is a periodic process which considers 'the continuing validity' of programme aims and outcomes and is normally 'an institutional process, often involving external participants of high calibre and academic/professional credibility'. Although an analysis of the 59 audit reports shows that many institutions describe their review procedures in terms of revalidation following very closely the original approval process, for some institutions, periodic review has a rather broader scope. Other forms of review (for example, thematic review or quality systems audits) are also discussed briefly in this paper. External review of programmes by professional, statutory and regulatory bodies (PSRBs) is largely excluded, but more detailed discussion may be found in the *Outcomes...* paper on *Institutions' work with employers, and professional, statutory and regulatory bodies*.

Features of good practice

6 Consideration of the 59 institutional audit reports published between December 2004 and August 2006 shows the following features of good practice relating to the validation and approval of new provision and its periodic review:

Programme validation and approval

- the active engagement of Industrial Advisory Panels in quality management and course development [Cranfield University, paragraph 196 i; paragraphs 47, 55, 76, 125, 137 and 145]
- the role of the EDC [Educational Development Centre] in supporting and leading developments in teaching and learning, and its work with the departments to spread good practice [Royal Holloway and Bedford New College, paragraph 215 ii; paragraphs 43, 47, 48 and 99]
- the joint venture with Kingston University which allows transfer of good practice in quality assurance through joint membership of committees and shared procedures and practice [St George's Hospital Medical School, paragraph 188 i; paragraphs 33, 35, 38, 43, 85 and 158]
- the quality of the data gathering, analysis and report generation tools available to staff across the institution to support quality and academic standards management [De Montfort University, paragraph 334 i; paragraphs 46 and 118]
- [the University's] requirement that, with specified exceptions, no proposed programme be validated later than March when it is the intention to recruit students in the following September [De Montfort University, paragraph 334 ii; paragraph 47]
- the University's arrangements for the validation and approval of new programmes of study and, in particular, the quality of the annual Validation Review [Sheffield Hallam University, paragraph 202 ii; paragraph 39]
- the effective use of curriculum mapping to ensure the integrity of programme learning outcomes within a modular scheme [Harper Adams University College, paragraph 189 i; paragraphs 32 and 55]
- the developments in e-learning and the validation and quality control of e-learning materials [University of Bolton, paragraph 196, bullet 3; paragraphs 39 and 150]

Periodic programme review

- the proactive use of externality in the enhancement of the student experience and of the quality of the provision [City University, paragraph 320 ii; paragraphs 65 and 155]
- the institutional recognition of the value of the periodic review process as an effective quality management tool [Cranfield University, paragraph 196 ii; paragraph 54]
- the implementation of the periodic review process [University of Hull, paragraph 216 iii; paragraphs 46, 52 and 140]

- the rigour of the University subject review process and associated follow-up activity [The Queen's University of Belfast, paragraph 260, bullet 2; paragraphs 55-58 and 62]
- student membership of internal (periodic) review panels [Queen Mary, University of London, paragraph 245, bullet 2; paragraph 66]
- the use of a broad range of external peers, including industrialists and academic staff from institutions in Europe, in periodic review of undergraduate programmes [Imperial College of Science, Technology and Medicine, London, paragraph 302 i; paragraph 67]
- the effectiveness of IQA [Internal Quality Audit] as a mechanism for investigating the operation of key quality processes [University of Plymouth, paragraph 244 ii; paragraph 62]
- the identification of, and staff development provided for, personnel who have a key role to play in supporting the devolution of the quality assurance and enhancement agenda as quality leaders, and as leaders in learning and teaching [University of East London, paragraph 256 ii; paragraphs 38 and 56]
- the enhancement undertaken of the institution's revalidation and quality and standards review processes by the involvement of recent graduates in the former and existing students in the latter [University of Chester, paragraph 194 i; paragraph 49]
- the careful and considered way in which the Curriculum Delivery Review was developed and implemented, and the way in which its impact is being monitored [Harper Adams University College, paragraph 189 iv; paragraphs 51, 52 and 91]

Themes

7 Consideration of the features of good practice and recommendations in the institutional audit reports which relate to the validation and approval of new provision suggests the following broad themes merit further discussion:

- frameworks for approval and validation
- approval of minor modifications to programmes
- guidance and support for staff
- use of external reference points
- externality in approval processes
- tracking the outcomes of the approval process
- monitoring and evaluation of the approval process.

8 Consideration of the features of good practice and recommendations in the institutional audit reports which relate to the periodic review of programmes suggests the following broad themes merit further discussion:

- role, scope and context of periodic review
- membership of review panels and the role of externality
- tracking the outcomes of the periodic review process
- monitoring and evaluation of the periodic review process.

Programme approval

Frameworks for approval and validation

9 *Section 7* precept 2 states that 'institutions should ensure that the overriding responsibility of the academic authority (for example, senate or academic board) to set, maintain and assure standards is respected and that any delegation of power by the academic authority to approve or review programmes is properly defined and exercised'. The precept therefore calls for clear definition of the roles, responsibilities and authority of the different bodies involved in programme approval and for the monitoring and review of any delegated power. *Section 7* precept 6 states that 'the final decision to approve a programme should be taken by the academic authority, or a body acting on its behalf', which should be independent of the department or unit that is to offer the programme. In general, the institutional audit reports considered in this paper showed that institutional procedures for programme approval are consistent with these precepts and that they are sound and fit for purpose.

10 While it remains true that most proposals for new programmes originate at departmental or school level, the audit reports seem to indicate an increasing engagement by senior institutional bodies at an early stage of the process. In most cases, this engagement took the form of giving outline approval to a proposal and permission to proceed to more detailed development. The body involved may be an executive body (for example, an academic planning committee) or, in one case, a planning approvals panel chaired by a deputy vice-chancellor which lay outside the formal committee structure and acted as 'a senior management filter' or, in a further example, a sub-committee of the teaching and learning committee. One audit report commented positively on the operation of a newly formed committee, which had a remit to 'generate, consider and develop ideas for new academic programmes; capture innovative ideas from staff; facilitate cross-[institution] developments while preventing duplication and overlap; and take account of projected student demand' as well as taking decisions on course proposals.

11 In some cases, consideration of the outline proposal is reported to be part of the annual planning and budgetary process, which almost invariably involves the major formal committees of the institution and the senior management team. Where new proposals emerge outside the annual planning round, most audit reports noted a clear responsibility within the approval process for checking at an early stage the appropriateness of the new programme proposal. The purpose of this preliminary provisional endorsement at a senior level is generally to ensure that the proposal fits

with the institution's strategy, does not duplicate other provision and is viable in terms of market demand and resources.

12 The audit reports indicate a general alignment with precept 6 of *Section 7* relating to the final decision to approve a programme being taken by the academic authority or its delegated body and independent of the department or unit that is to offer the programme. In systems where the validation process has two stages (the first stage at faculty level, the second at institution level), the audit reports noted that recommendations for approval were either transmitted for further ratification to a senior committee or were presented for information to senate or academic board. In systems where responsibility for the approval process is completely delegated to schools or faculties, care appears to be taken to preserve the independence of the panel from the sponsoring department by the selection of the chair (for example, a dean of faculty) and panel members. Final approval can be given at faculty level with a report of programmes approved being received and endorsed by a higher committee which can then monitor the smooth and appropriate working of the process itself.

13 Approval systems where final approval is delegated to a panel without reference to any higher body, within or outside the faculty, tended to attract less favourable comments in the audit reports. In one institution it was noted that 'it is the approval panel itself - and specifically its Chair as the individual who formally signs off the outcomes of an event - which has the responsibility for the final approval of new programmes'. The report recommended that the institution consider the fact that there was no further check on the action of validation panels and that as a result there was likely to be a lack of structured oversight of the final approval of programmes. In another report there were reservations about a system where panels of variable membership could exercise authority to approve programmes ('which can commence immediately on approval') without reference to a higher body. It was suggested this did not provide an appropriate assurance of consistency across the institution but that this could be achieved by the academic board monitoring and reviewing validation panels' decisions.

14 The audit reports contain some detail on the role of academic board or senate in approval processes. In one institution, exceptional procedures allowed departments to take a programme proposal directly to senate for approval, which bypassed, or could seek to overrule, recommendations of the teaching committee. An example was given where final approval had indeed been given by the academic authority but where the deliberative process had been discounted in favour of 'business and resource imperatives'. In another case, authority to give final approval had been delegated to one of the major committees of the academic board. However, there was evidence that several programmes had started running without prior approval by either body, which seemed to indicate that responsibility had been sub-delegated to planning teams. Moreover, the planning teams included representatives of the staff team proposing the programme (as well as the head of the sponsoring department). The audit report recommended in the strongest terms that final approval decisions should be made independently of those responsible for the programme's management and development. In contrast, in other reports 'the clear separation [...] maintained between the membership of development teams who support the establishment of new programmes, and that of the validation panel' is noted favourably.

15 In some audit reports, comments were made about how the robustness or clarity of the framework for approval could be improved. In one case, multiple stages in a complex process did not each appear to add sufficient value, while in others there were suggestions about the timeliness or length of the process. However, in general, the audit reports indicate institutions had a robust framework in place for programme approval and were working within such frameworks as intended. One such framework was identified as a feature of good practice: 'the University's arrangements for the validation and approval of new programmes of study and, in particular, the quality of the annual Validation Review' [Sheffield Hallam University, paragraph 39].

Approval of minor modifications to programmes

16 The approval of revisions to existing programmes (between programme approval and revalidation, where that exists as a process) was, according to the institutional audit reports, subject to specific processes within most institutions. Responsibility for minor modifications or individual module approval was delegated to faculty level in many institutions, or occasionally to departmental level. On the other hand, in small specialist providers the process may be centralised. Comment on how institutions monitor the operation of devolved responsibility of approval of minor modifications is not frequently found in reports but there are examples of, for instance, a requirement for a report on the process in annual programme monitoring reports or descriptions of audits of sample approvals. It is noted in several reports that an external examiner should be involved in the approval of module changes.

17 A question considered in a number of audit reports is the institutional definition of what constitutes minor and major modifications and how institutions guard against incremental change affecting the integrity of the programme as originally approved. In more than one report minor modifications are defined in terms of proportions or percentages of programmes proposed for change which vary in extent and are not always entirely clear. In only a few cases was a lack of clear evidence of a definition noted. In one report, the institution was encouraged to resolve an anomaly whereby individual schools had different interpretations of what constitutes a minor change. In another institution it was suggested that the criteria for the small-scale validations required for minor amendments should be clarified. In one isolated case, the report noted an 'uncertainty regarding the level of changes to the curriculum and to assessment strategies which could be undertaken without triggering the need for revalidation and/or approval of the validating university'.

18 The institutional audit reports rarely identify processes for tracking the impact of cumulative change to programmes, even though the risk to programme integrity through incremental change is a common line of enquiry. In a small number of institutions, interim reviews are employed and in one case such a review was specifically required to consider changes to programmes between original approval and full periodic revalidation. Moreover, relevant changes to be considered went beyond content to include those related to assessment regulations or methods and changes to structure or learning styles. In one institution where there was an articulated guideline on what constituted a trigger for full revalidation ('more than 40% change compared with the Definitive Documentation [for the programme]'), the institution acknowledged in its self-evaluation document that 'the cumulative

effect of a series of minor changes can be difficult to quantify and monitor'. Another report noted that the chair of the institution's major quality committee, in consultation with the quality office, had the power to require what appeared to be a minor modification to be subject to a fuller approval process because of the cumulative threat to the integrity of the programme. In another institution, revalidation was triggered by a request from the programme committee but it was suggested in the audit report that the institution should consider how the cumulative effect of changes could be managed in the interval between periodic reviews. In another report, it was recommended that an institution should put in place measures which ensured that the accumulation of approved minor changes did not unintentionally result in unapproved major changes, rather than relying on the dean or quality office staff to detect it. The need to raise staff awareness of the potential impact of cumulative changes on overall programme integrity was highlighted in a further report.

Guidance and support for staff

19 In *Section 7* of the *Code of practice*, it is suggested that 'institutions should publish guidance...on principles to be considered when programmes are designed' (precept 5) and that 'approval and review processes should be clearly described and communicated to those who are involved with them' (precept 4). The institutional audit reports demonstrate that almost all institutions provided central guidance on the process and procedures for approval of a programme or module, either as part of a more extensive quality manual or as dedicated documentation.

20 In most cases, the audit reports indicate that the institution's quality office or equivalent managed the approval process and/or provided advice for programme developers and approval panels. In one audit report, a central quality assurance office is identified as one mechanism for maintaining an institutional-level overview of the programme development process. In another report, the assistance given to faculties by the central strategic planning department is identified as a feature of good practice. It is noted that the department 'provides faculties with an annual analysis of current market trends both within the University and in the wider higher education and economic environment' to inform programme development [De Montfort University, paragraph 46].

21 A small number of audit reports discuss the potential problems involved when an institution's educational development unit (or equivalent) provides support for programme development and approval processes. In one case, potential conflict of interest was noted because the educational development unit was involved both in providing support for programme designers and also in the formal validation of those programmes. In another report, the way in which this governance question was addressed was identified as a feature of good practice. The education development unit had a formal role in the process, in the stage between faculty and institutional approval, carrying out 'a detailed and rigorous appraisal process which aims to lighten the load on the validation panel, enabling it to concentrate on its core considerations of rationale' [Royal Holloway and Bedford New College, paragraph 47]. The audit report noted that the risk involved in this situation was limited because the role of the educational development team was purely advisory.

Use of external reference points

22 The institutional audit reports indicate that the consideration of external reference points in the design and approval of programmes, as suggested in *Section 7* of the *Code of practice*, was well established. The reference points used included subject benchmark statements, qualifications frameworks and the requirements of professional, statutory and regulatory bodies. In many cases, this is through the incorporation of reference to the elements of the Academic Infrastructure in templates for programme specifications (for further information, see the *Outcomes...* paper on *Programme specifications*). It is also evident that guidance on the use of external reference points has been widely provided through quality handbooks.

23 The one area where the audit reports suggest there may be room for development is in the use of *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) in programme approval processes. In a small number of reports, comment is made on the lack of reference to the FHEQ in some validation reports or on the lack of requirement to refer to the FHEQ in the institution's programme specification template. In other reports, greater engagement with, and awareness of, the FHEQ is suggested, perhaps through clarified and strengthened guidance or more explicit reference. One institution, recognised for its extensive examination of external reference points, was nevertheless invited to encourage 'greater engagement with the FHEQ at programme level as part of the process of setting and maintaining standards'. It was suggested to another institution that it would be desirable 'to clarify and strengthen its published regulatory guidance so as to include more detailed reference to the FHEQ, or to other descriptors of levels and qualifications aligned with the FHEQ, as normative points of reference for programme and module development, validation and review'. For further discussion of this topic, see the *Outcomes...* paper *The framework for higher education qualifications in England, Wales and Northern Ireland*.

Externality in the approval process

24 The institutional audit reports indicate that, in line with the guidance of *Section 7* of the *Code of practice*, most institutions had put in place at least satisfactory arrangements for incorporating external advice into their approval procedures, whether paper-based or involving a panel validation. Many audit reports conclude that external participation in the approval process was 'strong and scrupulous' and it is judged to bring significant benefits. It is often noted to be mandatory and subject to strict guidelines.

25 It is, however, evident that the nature and timing of external advice vary, and not all institutions make the distinction between external advice taken by programme teams during the process of development and external advice taken by approval bodies. In one report, it is noted that the institution required programme developers to seek external guidance, but this was not followed up by a requirement that the nature and extent of that guidance be passed on to the approving committee or that the committee should seek external advice. It was suggested that the institution consider whether additional reassurance of academic standards and quality might be achieved by providing the external specialist advice to the approval committee. For another institution with a similar approach of involving external experts in

curriculum design but not in institutional level approval, the audit report noted a significant variability in the level of formality and range of external comment. The institution was recommended to enhance the external element of the programme approval process. Similar cases were identified in other audit reports which acknowledge the formative value of external involvement at the design stage. In one case, the active role of industry advisory panels in course development was identified as a feature of good practice, but it was noted that external participation in programme approval processes was not mandatory [Cranfield University, paragraph 47]. In a small number of further audit reports, it was suggested that there could be greater external involvement in the school-level element of programme approval.

26 The selection of external members of approval panels is governed by strict criteria, according to most audit reports. Nominations were proposed by the programme team or by a faculty or its dean, but it was common for final decisions to be made either by the chair of the approval panel or a member of the senior executive team or a senior quality officer. The criteria for the selection of external advisers in programme approval vary in detail. Common qualities are academic and/or professional expertise, knowledge of comparable programmes and familiarity with the Academic Infrastructure. Many institutions also had exclusions in order to ensure independent and objective external advice: current or recent external examiners; recent former members of staff; recent close associates of the institution; anyone who has direct responsibility for student placements; and, in a small number of cases, anyone who has participated in the development process. In a few reports, the institution was recommended to include more practitioner, professional and employer expertise among the external advisers they select, given the stress laid by the institutions on a practice-based curriculum and the strong vocational focus of many programmes.

Tracking the outcomes of the approval process

27 It is common on the approval of a programme for the panel to produce a report which contains recommendations about how the programme may be improved and conditions which have to be met before the proposal is given final approval and before the programme begins. The panel may also identify good practice for dissemination. These reports tend to be sent first of all to the programme development team or the originating department who are required to draft a response, while in some cases a report and its response were presented to a school or faculty board or committee, which was seen as ensuring accountability and facilitating the sharing of good practice. Moreover, it was noted to help the senior institutional body to maintain an oversight of the quality and standards of programmes and the effectiveness of a key quality assurance process.

28 On the whole, the institutional audit reports suggest that institutions have clear policies on the fulfilment and monitoring of conditions set by approval panels. In some cases, the immediate monitoring responsibilities fell to the chair of the approval panel, while in others progress is tracked by the major academic standards committee with the support of the quality office (or equivalents). In a few reports, it is noted that longer term monitoring was undertaken through annual programme evaluation. It was noted in one case that the timescale in which conditions had to be

met was ill-defined and too protracted and the institution was recommended to set time limits. In another case, a serious concern was raised about lack of setting or monitoring of conditions, which meant a programme could start while some matters of resources or benchmarking were still unresolved.

Monitoring and evaluation of the approval process

29 Precept 9 of *Section 7* of the *Code of practice* notes that 'institutions should evaluate the effectiveness of programme approval'. There is considerable evidence in the institutional audit reports that institutions did review their processes and introduce modifications, both large and small. In some cases this took place annually through a report from the appropriate committee to the academic board or senate, which took a genuine oversight of the process and identified good practice and any general issues, and was not just a list of programmes approved. One example, which was identified as a feature of good practice, was described in the audit report as 'an extremely comprehensive and thorough scrutiny and includes a full analysis of external participation, a review of any issues arising in relation to the QAA Academic Infrastructure, an examination of validation outcomes including conditions set and responses to those conditions, and a more general review of the process including [approval panel] membership and the resources expended by the University on these activities' [Sheffield Hallam University, paragraph 39]. The review provided the academic board with its main means of gaining oversight of a key internal process. In another case, it is noted that such a report was produced, but was not received by the senior institutional academic committee, which therefore lacked formal means to monitor systematically the exercise of course approval powers.

30 Other monitoring instruments described in the audit reports included formal internal audits and reviews of approval processes. This may be through a periodic schedule for reviewing the relevant processes or through internal audits of key institutional functions. Some institutions, either instead of or in addition to large scale review, are recorded as having immediate feedback mechanisms designed to gather views from participants in the approval process.

31 The audit reports contain a substantial number of examples of institutions revising their approval procedures in the light of perceived problems or changing circumstances. In one case, the central academic committee had identified that the quality of scrutiny at faculty level had been less than rigorous and that there had been attempts to compress processes under market pressure. The reaction was to adjust the schedule of meetings of the central committee and to issue reminders about the importance of full consideration of all proposals at departmental and faculty level. In other reports, concerns were expressed about duplication and diseconomy of process, volume of documentation, consistency, delays, and a growing number of conditions. In several cases, the ability of the institution to identify and address weaknesses was noted to provide confidence in the institution's ability to maintain effective oversight of quality and standards.

Periodic review of programmes

Role, scope and context of periodic review

32 Precept 8 of *Section 7* advises institutions to review periodically 'the continuing validity and relevance of programme aims and intended learning outcomes' with the intention that they will be refreshed as necessary, and continued alignment with aspects of the Academic Infrastructure checked. The institutional audit reports indicate that in some institutions, periodic review focuses solely on this purpose, while others include it within a broader framework.

33 Of the 59 institutional audit reports analysed for this paper, in almost all cases institutions had in place documented procedures for some form of periodic review, normally at intervals of five or six years, although the scope of review varies. At its narrowest, the review was essentially a revalidation of a programme, using the same process as validation with the added elements of experience, the existence of annual monitoring reports and the involvement of students from the programme. The audit reports demonstrate that some programme-based periodic reviews did not necessarily entail formal revalidation and the emphasis in these cases tends to be on quality enhancement. At its broadest, periodic review was seen to operate at an institutional level in the case of a small specialist college which periodically revalidated its whole provision in a major large-scale exercise, which was identified as a feature of good practice for the careful and considered way in which it was conducted [Harper Adams University College, paragraphs 51, 52 and 91]. In larger institutions, exceptionally review may be at faculty level, more commonly, it is at department or school level. This enabled the review to engage with 'departmental-level [...] programme management', and 'learning resources, staff development arrangements and students' educational experience'. At school level, the focus may be on strategic direction, and in one case the review panel was chaired by the Vice-Chancellor.

34 In other cases, periodic review is based on subjects or subject groupings. In two cases where periodic review processes were identified as features of good practice, they operated at subject level and were variously described as 'robust' and supporting an 'enhancement-led approach' [University of Hull, paragraphs 46 and 182], and 'rigorously applied' [The Queen's University of Belfast, paragraph 58].

35 Some institutions were reported as having dual systems of periodic review, where, for example, subject reviews concentrating on the curriculum were combined with school reviews concentrating on performance, or a programme review was combined with a school or department review. In one institution which operated both a periodic revalidation process (every six years) and a quality and standards review (every three years), it was noted explicitly that staff clearly understood the purpose of each of the processes adopted. However, in a number of other cases, it was not clear that the necessary links were made between different review processes to ensure their complementarity was of value. Unusually, in one audit report it was noted that the institution carried out periodic review through periodic augmentation of the annual field review process. The institution was recommended to monitor the new process carefully.

36 In a number of audit reports, other systems of review are discussed. These included thematic reviews which addressed through institution-wide enquiry the effectiveness of quality assurance processes (including periodic review); audits of academic units to check the operation of quality assurance processes; and service unit reviews. However, concerns were raised in the reports about costs, the justification for separate processes, risks to a common understanding of terminology and unclear or overlapping purposes. On the other hand, in a number of other institutions, the audit report noted the value and impact of systems of review carried out in addition to periodic programme review.

Membership of review panels and the role of externality

37 It is noted in the *Handbook* (paragraph 17) that there is an expectation that in carrying out internal periodic review of programmes or disciplines, an institution will involve independent external experts. This is a key factor contributing to the judgement made in institutional audit about the confidence which can be placed in an institution's quality assurance arrangements.

38 Almost all the institutional audit reports analysed in this paper record the participation of between one and four external advisors in periodic review processes. In one institution where four external participants were involved, these comprise two academics from the UK, one from Europe and an industrial representative; this was identified as a feature of good practice [Imperial College of Science, Technology and Medicine, London, paragraph 67]. As with external participation in programme approval processes (see pages 10-11, paragraphs 24-26), the audit reports indicate that institutions defined criteria for the selection of advisers and these generally excluded current or recent external examiners and recent former staff. Advisers were usually expected to be subject specialists. Where there were more than one, the second adviser is often expected to have professional, practitioner or industry credentials, particularly when the programme is accredited by a PSRB. The lack of practitioner or professional external advisers was commented upon in reports where the institution was committed to offering a 'practice-based curriculum'. In some institutions, experience of periodic review or as a QAA auditor or reviewer was also a criterion. In a small number of cases, the audit report noted that the institution could not be confident that the contribution of external peers in periodic review was impartial, critical and robust and recommended that the institution took action to address this. In some instances, this was linked with devolved responsibility for periodic review, where there were no mechanisms for institutional oversight.

39 Independence and impartiality are also factors in the selection of internal members of periodic review panels. Audit reports contain evidence of institutions seeking to distance both chairmanship and panel membership from the programme or discipline focus of the review and also to achieve consistency of approach. In some cases, the decision on membership lies with a senior executive or the chair of the senior quality committee. The chair of the panel can be a member of the senior quality committee, an academic from a different faculty or department or less commonly, a pro-vice chancellor, or the dean or associate dean of the relevant school. The reports indicate that panels tend not to include an academic closely related to the programme or department under review, but may have members from within the

faculty but not directly involved in the programme or subject area, and from a different faculty or school, as well as representatives from the senior quality committee or the quality office or equivalent to aid consistency. Several reports noted that students were full panel members, and in a number of cases identified features of good practice, including the involvement of a student union officer (or nominee) [Queen Mary, University of London, paragraph 66] and a recent graduate [University of Chester, paragraph 49]. A further feature of good practice was identified where an institution specifically required the panel to include a member of staff who had never previously been involved in the process, noting the developmental potential of this approach [University of East London, paragraph 56].

Tracking the outcomes of the periodic review process

40 The institutional audit reports indicate that review panels were usually convened for one or two days (exceptionally three) to meet relevant staff and students and to consider specified documentation before preparing a report. A typical set of documents for periodic reviews with a subject area or department as focus tended to include programme specifications, data on student recruitment and progression, annual monitoring reports, external examiners' reports and student handbooks. These were often accompanied by a self-evaluation document produced by the academic unit under review, frequently to a set format outlined in the quality handbook. In a small number of instances, institutions made provision for a written submission from students, which in one instance it was suggested could usefully be extended to all types of institutional review. For periodic reviews where the primary purpose was revalidation, the documentation tended to be that required for initial approval augmented by annual monitoring reports and external examiners' reports.

41 On the whole, the audit reports indicate that reports produced for revalidation exercises were disseminated in the same way as those generated by initial approval of the programme (see page 11, paragraph 27), and tended to set out recommendations and conditions. Departmental and subject reviews were more likely to identify areas for improvement and commendations or strengths with a broad developmental intent. In both cases, the unit reviewed is required to respond, commonly in the form of an action plan. In some examples, report and response were presented together to the higher institutional committee. Monitoring of progress against the action plan was variously undertaken by faculty or school boards or committees, or institutional quality committees or quality offices, and may take the form of a commentary on the action plan either as part of an annual monitoring process or as a requirement to give a year-on update. The rigour of the follow-up processes, as well as of the review itself, were identified as a feature of good practice in an institution which had only recently introduced a mechanism for reviewing subjects [The Queen's University of Belfast, paragraphs 55-58]. However, in another institution, the audit report recommended standardising the structure of reports and the formal response mechanisms.

42 A number of audit reports commented on the visibility of periodic review reports at institutional level in relation to both higher level accountability and opportunities to spread good practice. In one institution review reports with recommendations were sent to higher committees with a full range of supporting documentation to

provide background information on panel decisions. Conversely, limited circulation of reports was seen as a missed opportunity in some audit reports. In one institution, the quality committee monitored responses and produced an overview, but it was noted that it was not clear how this contributed demonstrably to quality enhancement or who was responsible at institutional level for ensuring that action lists were addressed.

43 Some of the audit reports analysed in this paper comment on institutions' preparation for and response to the launch of the Teaching Quality Information (TQI) initiative in September 2005, which created a website on which qualitative information about periodic review could be posted (TQI has since been replaced by the Unistats website). In some cases, this had resulted in the alteration of some procedures, a process that had been 'beneficial in that more robust mechanisms for monitoring responses to validations and reviews have been put in place'. In other institutions, the audit report noted that the periodic review procedures in quality handbooks had not always kept pace with the requirement to produce a summary of findings for publication. In one case, the responsibility for writing and approving such summaries had not been indicated, and the report suggested that the institution review its procedures to ensure that summary reports placed on the TQI website were an accurate reflection of the conclusions of the full review reports to which they refer.

Monitoring and evaluation of the review process

44 In line with precept 9 of *Section 7*, the 59 institutional audit reports indicate that institutions were continuously reviewing their periodic review procedures. In some cases this involved formal mechanisms such as an annual reflective meeting of review chairs and secretaries; a full audit of procedures; seeking feedback from review panel members; an annual report on outcomes and process; use of focus groups and a dedicated reflective workshop or close monitoring through the committee system. An important source of evaluation was the cohort of external advisers involved in period review who were asked to provide feedback.

45 The self-evaluation document submitted by institutions as part of the institutional audit process was also often an example of evaluation of the periodic review process. In one case, the institution articulated a conceptual change in their approach to periodic review, introducing a 'more developmental focus to the process and [...] moving from a passive state of "being audited" to one of more active involvement'. In their self-evaluation documents, a number of institutions were reported to have identified issues that needed addressing in the periodic review process: weak evaluation in departmental self-evaluations; lack of dovetailing with PSRB processes; insufficient briefing of external advisers; inconsistency of process; criteria for selecting chairs of panels; prompt production of review reports; size of the discipline under review; appropriateness of a central model for collaborative provision periodic review; time pressures; and the cumulative pressure of potentially duplicative processes.

The findings of this paper and of its counterpart in the first series of *Outcomes...* papers compared

46 The analysis of the 70 institutional audit reports published between 2003 and November 2004 revealed a significant number of recommendations relating to concern that there should be more external involvement in approval and review processes. In the audit reports considered in this paper, this concern has largely disappeared. In the first series *Outcomes...* paper, periodic review was reported to have been recently introduced in many institutions. By the period covered by the current paper, it appears to be universally embedded, and institutions were making regular use of the Academic Infrastructure, particularly *Section 7* of the *Code of practice*.

Conclusions

47 An analysis of the 59 institutional audit reports published between December 2004 and August 2006 indicates that the great majority of institutions had processes for programme approval in place that were at least satisfactory and in some cases featured good practice. Good practice identified related to support given to programme teams, the care taken with the design of the process and mechanisms for evaluating its effectiveness, or to the active engagement of external advisers in quality management and course development.

48 Where recommendations are made in the audit reports about programme approval, these generally relate to matters with the potential to enhance quality and/or further secure standards rather than being necessary to address risks. Areas in which potential for improvement is identified include the use of external advice; the clarity with which approval decisions are given final endorsement; the way reports on the process are used to ensure accountability and enhance practice within a deliberative structure; the use made by institutions of the Academic Infrastructure; and the efficiency and effectiveness of processes.

49 In relation to periodic programme review, the analysis of the 59 audit reports demonstrates the variety and the soundness of review systems, whether based on revalidation or on a broader model. The features of good practice identified cluster around three major themes: the use made of external advice, the balance in the membership of review panels (with specific reference to the involvement of students and inexperienced members of staff), and the effectiveness of the review process itself.

50 Recommendations made in audit reports relating to periodic review were more likely to be considered to have potential to put quality and/or standards at risk and to require preventive or corrective actions. Notably, recommendations rarely related to external involvement in periodic review, which was identified in the *Handbook* as key to institutions' capacity to assure quality and secure standards. They focused rather on the efficiency and effectiveness of the procedures themselves, for example, delays in responding to review reports; monitoring the extent to which review processes refreshed programmes; incomplete coverage; clarity of definition where dual review processes operated; standardising structure of review reports and response mechanisms; and responsibility for producing accurate summaries of review reports for TQI purposes. Clarity of accountability and responsibility was also identified in a small number of reports.

51 Overall, the 59 institutional audit reports indicate that institutions have incorporated the Academic Infrastructure, and particularly *Section 7* of the *Code of practice*, into their operation of programme approval and periodic review processes. It is reasonable to conclude that programme approval and periodic review systems are contributing significantly to institutions' arrangements for establishing and maintaining quality and standards.

Appendix 1 - The institutional audit reports

Note

In the period covered by these papers a number of institutions underwent a variety of scrutiny procedures for taught degree awarding powers, university title and research degree awarding powers. Reports of the individual scrutiny processes were provided to QAA's Advisory Committee on Degree Awarding Powers, and its Board of Directors, and formed the basis for advice to the Privy Council on the applications made by the respective institutions.

In most cases the scrutiny processes also provided information which, in the form of a bespoke report, QAA accepted as the equivalent of an institutional audit report. Only those reports which conform to the general pattern of the institutional audit reports are included in the list below.

2004-05

City University

Cranfield University

University of Hull

University of Leicester

University of Newcastle upon Tyne

University of Nottingham

The Queen's University of Belfast

University of Surrey

University of Ulster

Goldsmiths College, University of London

Queen Mary, University of London

Royal Holloway and Bedford New College (Royal Holloway, University of London)

University of London

University College London

Birkbeck College, University of London

Imperial College of Science, Technology and Medicine (Imperial College London)

St George's Hospital Medical School

University of Derby

De Montfort University

University of Gloucestershire
University of Hertfordshire
Sheffield Hallam University
University of Huddersfield
Kingston University
London Metropolitan University
Leeds Metropolitan University
Liverpool John Moores University
University of Luton¹
University of Northumbria at Newcastle
Oxford Brookes University
University of Plymouth
Staffordshire University
London South Bank University
University of Sunderland
University of Teesside
University of East London
University of the West of England, Bristol
University of Westminster
Buckinghamshire Chilterns University College²
Canterbury Christ Church University College³
University of Chester
Liverpool Hope University
University College Winchester⁴
Henley Management College⁵

¹ Now the University of Bedfordshire

² Now Buckinghamshire New University

³ Now Canterbury Christ Church University

⁴ Now the University of Winchester

⁵ Now merged with the University of Reading

Harper Adams University College
Conservatoire for Dance and Drama
American InterContinental University - London

2005-06

University of Manchester
Courtauld Institute of Art
Heythrop College
University of London External System
London School of Economics and Political Science
The University of Bolton
Thames Valley University
University of Central England in Birmingham⁶
University of Worcester
Birmingham College of Food, Tourism and Creative Studies⁷
Dartington College of Arts⁸
The Arts Institute at Bournemouth

⁶ Now Birmingham City University

⁷ Now University College Birmingham

⁸ Now part of the University College Falmouth

Appendix 2 - Reports on specialist institutions

2004-05

Birkbeck College, University of London

Imperial College of Science, Technology and Medicine (Imperial College London)

St George's Hospital Medical School

Henley Management College

Harper Adams University College

Conservatoire for Dance and Drama

American InterContinental University - London

2005-06

Courtauld Institute of Art

Heythrop College

University of London External System

London School of Economics and Political Science

Birmingham College of Food, Tourism and Creative Studies

Dartington College of Arts

The Arts Institute at Bournemouth

Appendix 3 - Titles of *Outcomes from institutional audit papers, Series 2*

In most cases, *Outcomes...* papers will be no longer than 20 sides of A4. Projected titles of *Outcomes...* papers in the second series are listed below in provisional order of publication.

The first series of papers can be found on QAA's website at www.qaa.ac.uk/enhancement

Titles

Institutions' frameworks for managing quality and academic standards

Progression and completion statistics

Learning support resources (including virtual learning environments)

Assessment of students

Work-based and placement learning, and employability

Programme monitoring arrangements

Arrangements for international students

Institutions' work with employers and professional, statutory and regulatory bodies

Recruitment and admission of students

External examiners and their reports

Collaborative provision in the institutional audit reports

Institutions' arrangements to support widening participation and access to higher education

Institutions' support for e-learning

Specialist institutions

Student representation and feedback

Academic guidance, support and supervision, and personal support and guidance

Staff support and development arrangements

Subject benchmark statements

The framework for higher education qualifications in England, Wales and Northern Ireland

Programme specifications

Arrangements for combined, joint and multidisciplinary honours degrees programmes

The adoption and use of learning outcomes

Validation and approval of new provision, and its periodic review

The self-evaluation document in institutional audit

The contribution of the student written submission to institutional audit

Institutions' intentions for enhancement

Series 2: concluding overview

Appendix 4 - Methodology

The analysis of the institutional audit reports uses the headings set out in Annex H of the *Handbook for institutional audit: England (2002)* to subdivide the Summary, Main report and Findings sections of the institutional audit reports into broad areas. An example from the main report is 'The institution's framework for managing quality and standards, including collaborative provision'.

For each published report, the text is taken from the report published on QAA's website and converted to plain text format. The resulting files are checked for accuracy and coded into sections following the template used to construct the institutional audit reports. In addition, the text of each report is tagged with information providing the date the report was published and some basic characteristics of the institution ('base data'). The reports were then introduced into qualitative research software package, QSR N6®. The software provides a wide range of tools to support indexing and searching and allows features of interest to be coded for further investigation.

An audit team's judgements, its identification of features of good practice, and its recommendations appear at two points in an institutional audit report: the Summary and at the end of the Findings. It is only in the latter, however, that cross references to the paragraphs in the main report are to be found, and it is here that the grounds for identifying a feature of good practice, offering a recommendation and making a judgement are set out. These cross references have been used to locate features of good practice and recommendations to the particular sections of the report to which they refer.

Individual *Outcomes...* papers are compiled by QAA staff and experienced institutional auditors. To assist in compiling the papers, reports produced by QSR N6® are made available to authors to provide a broad picture of the overall distribution of features of good practice and recommendations in particular areas, as seen by the audit teams.

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QAA 351 06/10