



# **Institutional audit**

**Liverpool John Moores University**

**NOVEMBER 2009**

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ISBN 978 1 84979 081 9

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Registered charity numbers 1062746 and SC037786

## Preface

The Quality Assurance Agency for Higher Education's (QAA) mission is to safeguard the public interest in sound standards of higher education qualifications and to inform and encourage continuous improvement in the management of the quality of higher education. To this end, QAA carries out Institutional audits of higher education institutions.

In England and Northern Ireland QAA conducts Institutional audits on behalf of the higher education sector, to provide public information about the maintenance of academic standards and the assurance of the quality of learning opportunities provided for students. It also operates under contract to the Higher Education Funding Council for England and the Department for Employment and Learning in Northern Ireland to provide evidence to meet their statutory obligations to assure the quality and standards of academic programmes for which they disburse public funding. The audit method was developed in partnership with the funding councils and the higher education representative bodies, and agreed following consultation with higher education institutions and other interested organisations. The method was endorsed by the then Department for Education and Skills. It was revised in 2006 following recommendations from the Quality Assurance Framework Review Group, a representative group established to review the structures and processes of quality assurance in England and Northern Ireland, and to evaluate the work of QAA.

Institutional audit is an evidence-based process carried out through peer review. It forms part of the Quality Assurance Framework established in 2002 following revisions to the United Kingdom's (UK's) approach to external quality assurance. At the centre of the process is an emphasis on students and their learning.

The aim of the Institutional audit process is to meet the public interest in knowing that universities and colleges of higher education in England and Northern Ireland have effective means of:

- ensuring that the awards and qualifications in higher education are of an academic standard at least consistent with those referred to in *The framework for higher education qualifications in England, Wales and Northern Ireland* and are, where relevant, exercising their powers as degree awarding bodies in a proper manner
- providing learning opportunities of a quality that enables students, whether on taught or research programmes, to achieve those higher education awards and qualifications
- enhancing the quality of their educational provision, particularly by building on information gained through monitoring, internal and external reviews and on feedback from stakeholders.

Institutional audit results in judgements about the institutions being reviewed. Judgements are made about:

- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of its awards
- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

Audit teams also comment specifically on:

- the institution's arrangements for maintaining appropriate academic standards and the quality of provision of postgraduate research programmes

## Institutional audit: preface

- the institution's approach to developing and implementing institutional strategies for enhancing the quality of its educational provision, both taught and by research
- the reliance that can reasonably be placed on the accuracy and completeness of the information that the institution publishes about the quality of its educational provision and the standards of its awards.

If the audit includes the institution's collaborative provision the judgements and comments also apply unless the audit team considers that any of its judgements or comments in respect of the collaborative provision differ from those in respect of the institution's 'home' provision. Any such differences will be reflected in the form of words used to express a judgement or comment on the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

## Explanatory note on the format for the report and the annex

The reports of quality audits have to be useful to several audiences. The revised Institutional audit process makes a clear distinction between that part of the reporting process aimed at an external audience and that aimed at the institution. There are three elements to the reporting:

- the **summary** of the findings of the report, including the judgements, is intended for the wider public, especially potential students
- the **report** is an overview of the findings of the audit for both lay and external professional audiences
- a separate **annex** provides the detail and explanations behind the findings of the audit and is intended to be of practical use to the institution.

The report is as concise as is consistent with providing enough detail for it to make sense to an external audience as a stand-alone document. The summary, the report and the annex are published on QAA's website.

## Summary

### Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited Liverpool John Moores University (the University) from 9 to 13 November 2009 to carry out an Institutional audit. The purpose of the audit was to provide public information on the quality of the learning opportunities available to students and on the academic standards of the awards that the University offers.

To arrive at its conclusions, the audit team spoke to members of staff throughout the University and to current students, and read a wide range of documents about the ways in which the University manages the academic aspects of its provision. As part of the process, the team visited one of the University's partner organisations in the UK where it met with staff and students. It also conducted, by teleconference, a meeting with staff at an overseas partner.

In Institutional audit, the institution's management of both academic standards and the quality of learning opportunities are audited. The term 'academic standards' is used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the UK. The term 'quality of learning opportunities' is used to describe the support provided by an institution to enable students to achieve the awards. It is about the provision of appropriate teaching, support and assessment for the students.

### Outcomes of the Institutional audit

As a result of its investigations, the audit team's view of Liverpool John Moores University is that:

- limited confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of its collaborative overseas 'recognition and validation' awards; for clarity, this relates to a concern about the alignment of awards with *The framework for higher education qualifications in England, Wales and Northern Ireland* (2008) in just one aspect of one element of the University's overseas collaborative provision
- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of its home (non-collaborative) awards and of its collaborative awards other than collaborative overseas 'recognition and validation' arrangements
- confidence can reasonably be placed in the soundness of the institution's present and likely future management of the quality of the learning opportunities available to students.

On this occasion the team carried out a hybrid Institutional audit. The hybrid process is used where QAA considers that it is not practicable to consider an institution's collaborative provision as part of standard Institutional audit, or that a separate audit activity focusing solely on this provision is not necessary.

### Institutional approach to quality enhancement

The audit team found that the University takes deliberate actions at the institutional level to improve the quality of the learning opportunities available to students. The University's

approach to quality enhancement is overseen by the Strategic Management Group. The core objectives contained within the University's Strategic Plan are expressed in terms of a clear commitment to the enhancement of the student learning experience. The Learning, Teaching and Assessment Strategy, developed to support the implementation of the University's Strategic Plan goals for learning, teaching and assessment, has a strong enhancement focus. The audit team saw evidence of a rolling programme of strategic initiatives designed to improve the student experience.

### **Postgraduate research students**

The audit team concluded that the University's procedures for the support, supervision and assessment of research degrees meet the expectations of the precepts of the *Code of practice, Section 1: Postgraduate research programmes*. The development of the University's Degree Regulations was found to provide a student-centred framework for postgraduate research. Institutional oversight is maintained by the Academic Board, with clear reporting arrangements from faculty Research Committees to the University's Research Degrees Committee.

### **Published information**

The audit team established that the University provides an extensive and accessible range of published information for prospective and current students, both electronically and on paper. Arrangements exist to ensure that published information is legal, valid and up-to-date. The audit team found that students were satisfied with the information received both prior to and during their course. The team concluded that reliance can reasonably be placed in the integrity and reliability of the information that the University publishes about its educational provision.

### **Features of good practice**

The audit team identified the following areas as being good practice:

- the support provided by the Centre for Staff Development and the Learning Development Unit, and the range of activities available for staff, including the staff of partners
- the early and prolonged engagement of external advisers in the development of proposed programmes of study
- the introduction of Student Democracy Coordinators as a means of enhancing the effectiveness of the student voice
- the impact on the student experience of staff engagement with pedagogic research and development
- the University's support in collaborative provision of the student experience and of its partner institutions
- the use of electronic recording and performance indicators in the monitoring and review of students and in managing and enhancing the quality of their learning opportunities
- the detailed nature of the University's programme specifications and their ready and secure availability through the internet.

### **Recommendations for action**

The audit team recommends that the University consider further action in some areas.

The team considers it essential that the University:

- ensure that awards of the 'recognition and validation' type in overseas collaborative provision are aligned with *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), published in 2008.

The team advises the University to:

- ensure that the University Standing Panel is clearly placed within the academic management structure, that its membership and terms of reference are reviewed, and that the Panel is clearly referenced in publications.

It would be desirable for the University to:

- work towards ensuring that external examiners' reports are seen consistently by all boards of studies and, thus, by student representatives
- ensure that there is a clearly communicated and consistently operated system of deadlines for the provision to students of feedback on assessment
- bring the practice of interim Personal Development and Performance Review into line with the formal expectation
- provide more guidance on how many postgraduate research students a supervisor might be expected to manage
- ensure that postgraduate research students undertaking teaching are provided with adequate guidance and support.

## Reference points

To provide further evidence to support its findings, the audit team investigated the use made by the University of the Academic Infrastructure, which provides a means of describing academic standards in UK higher education. It allows for diversity and innovation within academic programmes offered by higher education. QAA worked with the higher education sector to establish the various parts of the Academic Infrastructure, which are:

- the *Code of practice for the assurance of academic quality and standards in higher education*
- the frameworks for higher education qualifications in England, Wales and Northern Ireland, and in Scotland
- subject benchmark statements
- programme specifications.

The audit found that the University took due account of the elements of the Academic Infrastructure in its management of academic standards and the quality of learning opportunities available to students. The University has responded appropriately to the FHEQ, subject benchmark statements, programme specifications and QAA's *Code of practice*, with the exception of the areas covered by the essential recommendation.

## Report

1 An Institutional audit of Liverpool John Moores University (the University) was undertaken during the week commencing 9 November 2009. The purpose of the audit was to provide public information on the University's management of the academic standards of the awards that it delivers and of the quality of the learning opportunities available to students.

2 The audit team comprised Professor Gwendolen Bradshaw, Professor Geoffrey Elliott, Dr Keith Gwilym, Dr Peter McIntyre and Dr Monika Ruthe, auditors, and Ms Rachel Lucas, audit secretary. The audit was coordinated for QAA by Mr Alan Bradshaw, Assistant Director, Reviews Group.

### Section 1: Introduction and background

3 The University came into existence formally in 1992, but its origins extend back to the Liverpool Mechanics' School of Arts founded in 1825. The academic organisation of the University remains largely unchanged since the last Institutional audit, although schools have been replaced by different organisational structures in some of the six faculties. The University has over 24,000 students studying for credit-bearing awards, over 4,000 of whom are studying at postgraduate level on taught and research programmes. Students are based at three locations in Liverpool. The University also has two satellite buildings in Birkenhead.

4 The overall mission of the University states: 'Our mission is to serve and enrich our students, clients and community by providing opportunities for advancement through education, training, research and the transfer of knowledge'.

5 The audit was based on a Briefing Paper provided by the University, supported by documentary evidence provided both before and during the audit, by intranet access, and by meetings with staff, students and collaborative partners. The information available to the audit team included the following QAA documents:

- the Institutional audit report, published in 2004
- the Collaborative provision audit report, published in 2006
- the special review of postgraduate research programmes, published in 2006
- the Foundation Degrees review in Public Services (Criminal Justice), published in 2005
- the Major Review of Nursing and Midwifery, published in 2005.

6 The audit team was grateful to representatives of the Liverpool Students' Union, who produced a student written submission. This submission was based on student opinion information, the principal sources of which were the 2008 National Student Survey and the University's 2008 Student Opinion Survey.

7 The previous Institutional audit in 2004, and the Collaborative provision audit in 2006, found that broad confidence could be placed in the soundness of the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards. The reports highlighted areas of good practice linked to staff development, and the management of standards and the student experience. The reports also identify recommendations which the University should address, and, while the audit team recognised that much had been done to rectify the issues raised at these audits, there were still incomplete areas of action. The University had not fully addressed differences between published policies, procedures, terms of reference of committees and practice (see paragraph 9). The proportion of credit given through an overseas collaborative



provision 'recognition and validation' agreement had remained unsatisfactory (see Section 5).

8 Since the previous audits, the University has developed a revised strategic plan (2007-2012); four strategic initiatives, one of which includes revised arrangements for student recruitment and support; a revised Learning, Teaching and Assessment Strategy; the continued expansion of collaborative partnerships within the UK and in selected areas overseas; and the University's estate.

9 The Vice Chancellor is the principal executive officer of the University and is supported by a Strategic Management Group. The Academic Board, chaired by the Vice Chancellor, is the ultimate academic body of the University, responsible for the management of academic standards and the quality of learning opportunities. The audit team found that the University generally had well-defined practices to assure the maintenance and enhancement of quality, but recommends that it is advisable for the University to ensure that the University Standing Panel is clearly placed within the academic management structure, that its membership and terms of reference are reviewed, and that the Panel is clearly referenced in publications. The same was true of the standards of all provision except for that delivered through 'recognition and validation' agreements; this theme is discussed in Section 5, below.

## **Section 2: Institutional management of academic standards**

10 The University operates a relatively small committee structure. The Academic Board is one of the two principal decision-making bodies of the University, the other body being the Strategic Management Group. The Strategic Management Group is responsible for resource matters, while the Academic Board is responsible for academic quality and standards. A two-year period of testing and consultation on new enhancement-led quality management arrangements was coming to a close in 2009.

11 The Academic Board gives devolved responsibility for the oversight of academic standards, quality and enhancement to the Quality and Standards Committee. The subcommittees of the Academic Board are programme assessment boards, the Ethics Committee, and the Research Degrees Committee. The two subgroups of the University's Quality and Standards Committee are the Partnerships Quality and Standards Panel and the faculty quality committees.

12 The Programme Planning and Development Committee reports to the Academic Board on matters of academic policy, and reports to the Strategic Management Group on all other resource matters. The Programme Planning and Development Committee has advisory panels as follows: the Learning, Teaching and Assessment Panel, the Partnerships Panel, and the Partner Colleges Panel.

13 The faculty quality committees cover aspects of academic standards, quality and enhancement in each faculty. Faculty Quality Committee chairs are members of the University's Quality and Standards Committee, and a clear audit trail of standards, quality and enhancement exists between faculty quality committees and the University's Quality and Standards Committee

14 Institutional oversight of the management of standards and quality in collaborative provision is achieved through the Partnerships Quality and Standards Panel on behalf of the Quality and Standards Committee and the Academic Board. The management of academic standards of UK collaborative provision was tested in various ways, including through discussions with staff and students at one partner. The audit team found high satisfaction

with the partner, and evidence of good practice in the management of relationships at course and module level between the University and its collaborative partners.

15 The audit team discussed committee relationships with senior staff and took evidence from committee meetings and minutes with regard to the management of quality and standards. The University stated that the level descriptors at programme level within faculties are mapped to qualification descriptors in *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), referenced in the University Modular Framework. The University operates a standard modular credit structure.

16 The University's regulations and processes for setting, maintaining and assuring the management of academic quality and standards are contained in the University Modular Framework. The University stated that there was an expectation that the curriculum should meet the needs of employers, reflect one or more subject benchmark statements, and enable students to meet standards set by professional and statutory bodies. The auditors found evidence of engagement with employers through the World of Work initiative, which aims to give students employer-certified skills and experience. External advisers take part in the process of programme development.

17 The University's new approach to the validation and review of home programmes was introduced in 2009-10 following a two-year period of testing and review. The Quality Support Team has overall responsibility for the design of standards and quality management, including programme validation and review, annual monitoring, internal academic audit, external examining, student surveys, and the management of the relationship with QAA. Programme approval, monitoring and review are managed by faculty quality teams and report through faculty quality committees and the University's Quality and Standards Committee to the Academic Board. The audit team found clear evidence of the new approach to programme approval, monitoring and review processes of the University.

18 The University stated that the management processes used for programme approval, validation and review are mapped to the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)* published by QAA. Peer review is used within programme approval, monitoring and review.

19 In the new approach to validation and review the Academic Programme Development Team is required to consult in another area of the University an independent internal advisor who is well informed about the University's requirements for validation and review, and an external adviser who is a subject specialist.

20 Programme development and approval at school and faculty level lead to consideration of a proposal at the University Standing Panel, which includes a second external advisor. The audit team considered the early and prolonged engagement of external advisers in the development of proposed programmes of study to be good practice.

21 In the evidence provided to the audit team, the recent introduction of a University Standing Panel was not consistently recorded or referenced in the University Committee structure for 2009, and its formal relationship with the Academic Board is not entirely formally defined. The University stated in meetings with senior staff that the role of the University Standing Panel was to confirm whether process requirements have been met, and a faculty recommendation for approval can be confirmed on behalf of the Academic Board. The team found some inconsistency of view of the role of the University Standing Panel when speaking to senior staff, compared with the documentation that indicated that the University Standing Panel was a panel making recommendations to the Academic Board and not a final approval panel for new programmes. The team recommends that the University ensure that the University Standing Panel is clearly placed within the academic management structure, that its membership and terms of reference are reviewed, and that

the Panel is clearly referenced in publications. Reporting arrangements and the role of the Academic Board have been strengthened since the last Institutional audit.

22 Taught programme validation is normally followed every five years by programme review. The review process draws on evidence from student feedback, external examiners' reports, outcomes of reviews by professional, statutory and regulatory bodies, and annual monitoring. The audit team found that these sources of evidence were generally well utilised. Flexible and distributed learning is used by staff, although it is a small aspect of the University's provision.

23 Regulations governing the appointment and role of external examiners are set out in the University Modular Framework. The University operates a two-tier system of examination boards. External examiners are appointed to cover a Module Award Board or Programme Award Board. External examiners have the opportunity of a briefing on appointment. External examiners produce an annual external examiner's report. A sample of external examiners' reports and responses to these reports was scrutinised by the audit team.

24 External examiners' reports are presented to boards of study for staff and student scrutiny, although this was not universally evident practice across the University. It is desirable for the University to ensure that external examiners' reports are made more available to students. External examiners' comments are considered at faculty and university level. The Director of Quality Support reviews all external examiners' reports and responds directly on institution-wide matters of importance to the Strategic Management Group and Academic Board.

25 An overview report to the University's Quality and Standards Committee and the Academic Board disseminates in the University what it regards as good practice. The audit team found that, beyond the desirable recommendation concerning external examiners' reports, the arrangements for external examining work effectively, and that any difficulties are addressed at both faculty and university level.

26 The University stated in its institutional Briefing Paper that it was aware of, and compliant with, the Academic Infrastructure, and there is clear evidence of this within programme approval, monitoring and review at faculty level. The University employs the Academic Infrastructure, but the audit team found that in some aspects of overseas collaboration, the University's practice did not properly engage with the FHEQ. This theme is discussed in Section 5, below.

27 The University has relationships with a diverse range of professional, statutory and regulatory bodies for programme accreditation or recognition, with an overview maintained by the Quality and Standards Committee. There was clear evidence of the recognition and implementation of professional, statutory and regulatory body requirements within programme approval, monitoring and review.

28 The University stated that its assessment policies and practices met the requirements of the *Code of practice, Section 6: Assessment of students*, and the audit team found evidence that this was so. The Student Policy and Regulation Team maintains institutional oversight of policies and regulations on assessment, and its work includes staff training, dealing with cases of suspected academic impropriety, and academic appeals. The University has a policy of anonymous marking of examinations. The Academic Board has approved a policy for future anonymous marking of coursework and this was being piloted across the University at the time of the audit visit.

29 Each year the University monitors the number and nature of student appeals received. The audit team was satisfied with the effectiveness of assessment policies and

regulations at faculty and university level. The broad communication of policies and practices was evident in module guides, course guides and other University documentation. However, there was evidence from meetings with staff and students that the timeliness of feedback was inconsistent across the University. The team recommends that it is desirable that the University establish a clearly communicated and consistently operated system of standard deadlines for the provision to students of feedback on assessment.

30 The Academic Planning and Information Team reports on admissions, student retention, student completion and achievement, and graduate destinations by papers and presentations to the Academic Board, the Strategic Management Group and the Programme Planning and Development Committee.

31 The audit team found that there has been a significant innovation in the use of statistical management information with the development in 2008 of the WebHUB, a system for reporting on student progression and achievement that is part of the annual monitoring cycle. The WebHUB is used to provide detailed information on progression, retention and student satisfaction, and is used for better analysis and decision-making in various areas of the University, particularly in the cycle of programme monitoring and review. The team supported the University's view that this has enabled a more quantitative approach to quality assurance and monitoring arrangements.

32 In its consideration of the University's policies and procedures for the management of the standards of its awards, the audit team concluded that confidence could reasonably be placed in the soundness of the institution's current and likely future management of the academic standards of its home (non-collaborative) awards and of its collaborative awards other than collaborative overseas 'recognition and validation' arrangements. These arrangements are explained and discussed below in Section 5: Collaborative arrangements.

### **Section 3: Institutional management of learning opportunities**

33 The University has diverse and effective methods, designed to minimise questionnaire fatigue, for gathering student feedback. First-year undergraduates complete a questionnaire, second-year students participate in focus groups run by trained staff, and third-year students are asked to complete the National Student Survey. In addition there are electronic module feedback mechanisms which inform annual monitoring procedures. This data is made available on the intranet and used widely across the University. A new university-wide approach has been developed for 2009 survey results.

34 Feedback to students on actions taken to address themes raised by them through these diverse mechanisms is provided through staff-student liaison committees, personal tutors, email and web pages.

35 In schools and departments there is extensive evidence of student attendance and engagement with committees and working groups, However, at faculty and university level student attendance is weaker, with the exception of the Academic Board, Board of Governors and the Quality and Standards Committee.

36 Student Democracy Coordinators have recently been appointed in all faculties to promote student participation and provide training for course representatives. The audit team considers that the introduction of Student Democracy Coordinators is an example of good practice as a means of making the student voice more effective.

37 Students told the audit team that the academic staff's use of electronic methods of module delivery was excellent in parts of the University.

38 The two service departments responsible for library and computer resources work well together, and deliver learning resources that are appreciated by students. In particular, students praised the easy search of library electronic resources, and the easy access to electronic journals from home.

39 The University's Learning, Teaching and Assessment Strategy has, as one of its key principles, the promotion of teaching that is informed and enriched by research, and this commitment is evidenced in the allocation of funding and in faculty activities. A Pedagogic Research Forum has been established, and meets regularly to disseminate teaching-related research and provide research training. The Forum also hosts an online site on the University's virtual learning environment that contains a wide range of training resources and presentations. Both the Forum and the resources site are supported by the Learning Development Unit. The Learning Development Unit also hosts an annual two-day learning and teaching conference attended by a substantial number of staff. This provides further opportunity to explore the nexus between teaching and research. All of these initiatives are well attended by staff, and the audit team noted the students' awareness of their impact on learning and teaching. The staff who met the team were not only aware of the resources available to them and the key objectives of the Learning, Teaching and Assessment Strategy but had engaged practically. The team found that the University had a clear commitment to delivering teaching and learning informed by research and scholarship, and had created the mechanisms for achieving this. The impact on the student experience of staff engagement with pedagogic research and development was considered to be a feature of good practice.

40 The University approved a comprehensive admissions policy in May 2009 as part of a wider enhancement strategy. The new Admissions Policy and Admissions Code of Practice are informed by the *Code of practice*, the principles in the Schwartz Report, and the work of Supporting Professionalism in Admissions. The Supporting Professionalism in Admissions programme was established in 2006 and works closely with higher education institutions, schools and colleges and other stakeholders on the development of fair admissions and good practice in admissions, student recruitment and widening participation. The policy is applicable to all programmes and types of students, including international students, and, where relevant, includes the requirements of professional, statutory and regulatory bodies where programmes of study lead to a licence to practice.

41 The University stated that it values the diversity of its student population and the audit team found that widening access to higher education is firmly embedded within its Admissions Policy. The Policy introduces mandatory training for academic and administrative staff involved in admissions, and, to ensure compliance with legalisation and UK Borders Agency requirements, additional training for staff involved in international recruitment. The team found evidence of the uptake of this training provision.

42 Six faculty admissions 'hubs' or services are being created, with the assistance of a small Admissions Working Group. Faculty admissions hubs will oversee all admissions for a faculty, and will operate standardised and transparent admissions procedures. Three of the faculty hubs were operational at the time of the audit. The Student Recruitment and Widening Access Team will monitor, promote and evaluate admissions practice at faculty level. Faculty acceptance of the new admissions model was demonstrated to the audit team at both staff and student meetings.

43 Although it is too early to assess entirely the effectiveness of the new arrangements, the audit team found that the students were generally satisfied with the admissions process. The audit noted that the University planned to undertake a review of admissions practices in Spring 2011 to evaluate the effectiveness of the new model.

44 Academic support and guidance are provided by staff such as personal and year tutors. Students have regular opportunities for academic progress review with their personal tutor. Personal tutors are readily accessible, supportive and can be approached for a range of academic and pastoral issues. Faculty staff supporting students liaise closely with central staff, and there is a referral system for specialist support. Core student support services are all accessible in one location on campus in dedicated Student Support Zones. Study support is available covering a wide range of study skills. Welfare support services include general and specialist welfare advice; advice on financial support opportunities, a disability service, accommodation and mental health support. The quality of centrally provided support is judged as good by students. The Graduate Development Centre provides careers advice and guidance and support on skills development for employability. This includes personal development planning and the World of Work scheme, which leads to employer-certified employability skills. At the time of the audit the employer-certified part of the scheme remained to be fully implemented.

45 The audit team found that a range of high-quality student support services, both academic and pastoral, is available to all students regardless of their mode of study.

46 Staff recruitment and selection are guided by clear job descriptions and person specifications. The University seeks to identify the development needs of staff prior to arrival through clear person specifications and interview processes and, upon the arrival of staff, has a comprehensive induction process, which covers both institutional and faculty procedures. All full-time lecturing staff with fewer than three years' experience of higher education (or equivalent) are required to take the full Postgraduate Certificate in Learning and Teaching in Higher Education. Part one is compulsory for part-time staff. Usually, new staff are assigned a mentor during the first year, and currently phase one of a mentoring project for new academic staff is being tested. Phases two and three will cover support for existing and promoted staff respectively. Human Resources policies and procedures are communicated to staff through Human Resources advisers, line managers and the Human Resources website, which includes an online staff handbook. Newly appointed staff were very complimentary about their induction, the Postgraduate Certificate and the mentoring system.

47 The University has a comprehensive programme of support for staff, provided through its Centre for Staff Development and the Learning Development Unit. Staff development opportunities are available to staff in partner organisations, and the University staff conduct staff development sessions with overseas partners. The University's Continuing Professional Development Framework has been recognised by the Staff and Educational Development Association as part of its Professional Development Framework. The audit team met a range of staff, all of whom praised the support offered through the Centre for Staff Development and the Learning Development Unit. It is the team's view that the way in which staff development is delivered through the Centre for Staff Development and the Learning Development Unit is a feature of good practice.

48 Staff appraisal is through an annual Personal Development and Performance Review. To monitor individual progress, interim reviews are to be conducted at regular intervals, with a minimum of one every six months. Staff confirmed that Personal Development and Performance Review was an annual process but that, in their experience, interim reviews did not take place. The Personal Development and Performance Review scheme was supported by staff and found to be an effective way of determining both individual and corporate needs. The audit team found that staff were well supported by the University in both their personal and professional development, but that it was desirable that the University bring the practice of interim Personal Development and Performance Review into line with the formal expectation.

49 Overall, the audit team found that confidence can be placed in the soundness of the University's current and likely future management of the quality of the learning opportunities available to students.

## **Section 4: Institutional approach to quality enhancement**

50 The audit team found evidence of deliberate steps being taken at institutional level to enhance the student experience. The core objectives contained within the University's Strategic Plan are expressed as a clear commitment to the enhancement of the student learning experience. The Learning, Teaching and Assessment Strategy developed to support the implementation of the University's Strategic Plan has undergone continuous improvement since 1995, and it now has a strong enhancement focus. Recently, a major review of the quality management processes led to revised processes with an enhancement-led quality management approach.

51 The European Foundation for Quality Management Excellence Model is being used by the University as the framework for the improvement and enhancement of the overall management system, and produces benefits for the student experience. The University has achieved an Excellence Award from the Foundation.

52 The University is implementing a rolling programme of strategic initiatives to enhance the experience of students. Major projects include the Student Experience Review; World of Work initiative; Estates and Information Technology Systems Development and the University's Centre for Excellence in Teaching and Learning.

53 The Student Experience Review aims to improve the quality of administrative services provided to students. Key principles include improved access, ease of use, flexibility, responsiveness, consistency, professionalism and general customer care. The audit team saw evidence to support this claim. Examples of developments included the introduction of student administrative centres offering help with administrative tasks within learning resource centres and faculty admission hubs.

54 The University's World of Work initiative is intended to provide all students with enhanced opportunities to develop the attributes and skills most valued by employers. The audit team found evidence of strategic employer engagement at local, regional and national level. Whilst students welcomed the initiative, there were mixed views, as some felt that it had not been communicated clearly and would have liked more support to complete it.

55 The Briefing Paper indicated that there was an institutional commitment to replacing, renewing and enhancing the student and staff learning and work environment. The audit team found evidence of achievements, for example the creation of a network of social learning zones and general leisure zones adjacent to catering areas. The audit team noted that staff and students were being invited to contribute to the estates development plans.

56 The University has adopted a strategic approach to the development of its information technology (IT) systems through the IT Systems Development Programme. The student experience has been enhanced, for example, through the introduction of an improved library management system which has been welcomed by the students. The team also found examples of technology-enhanced learning projects seeking to promote the use of technology. Examples include plagiarism detection and other software which facilitates interaction and immediate feedback in class, a virtual learning environment, and the online submission of course work. The team also saw evidence of a range of support information on learning technologies for students and staff. Meetings with staff and students however, confirmed that the student experience of the use of technology was variable, with some

students, for example, experiencing much greater staff use of the virtual learning environment than others.

57 The University's Centre for Excellence in Leadership and Professional Learning, with a focus on employability, leadership and entrepreneurship, is informing the Learning, Teaching and Assessment Strategy and the World of Work initiative. The audit team noted that outputs include the development of a whole curriculum model to enhance students' skills, knowledge and attributes related to their future aspirations, the introduction of activities to enhance students' employment prospects, new models of support to help students adjust to higher education learning, and new approaches to personal development plans which incorporate work-derived real-life employment projects. There are three national teaching fellows associated with the Centre.

58 The audit team found that the Learning Development Unit plays a significant role in enhancement activity. The Unit is responsible for the dissemination of good practice through its staff development activities, and annual conference and publications. The Learning Development Unit also coordinates the development, monitoring and review of institutional and local Teaching Quality Enhancement Fund-funded plans. There are plans to introduce Learning, Teaching and Assessment Strategy prompts into Personal Development Performance Review for all staff who teach and support learning. The audit team concluded that these initiatives, in conjunction with established mechanisms and events in faculties, maximise dissemination of effective practice and the development of enhancement-led systems.

59 The audit team concluded that the University was taking deliberate steps at institutional level to improve the student learning experience.

## **Section 5: Collaborative arrangements**

60 The audit team examined the University's approach to the development and maintenance of collaborative partnerships, and tested the efficiency of its management of academic standards and the quality of its provision in this area.

61 The arrangements for managing collaborative partnerships and the distribution of authority for quality assurance between the University and its partners vary according to the type of provision. For all programmes leading to the University's awards the University retains responsibility for academic standards. The quality of provision and assurance of academic standards for most provision is managed at faculty and school level under standard procedures also applying to internal provision.

62 There are close working relationships between all parties that have responsibility for collaborative partnerships, development opportunities for partner staff, and open access to electronic learning resources for partner staff and students. Designated link persons have a key role in managing collaborative links. University staff are in regular contact with key personnel at partner institutions, and partners are invited to attend meetings of the Partnerships Forum and staff development events. The University also consults partners in the development of its procedures and protocols for managing the quality and standards of collaborative provision, and there are regular visits at subject level by link tutors and non-academic staff.

63 The operation of most elements of collaborative provision which bear directly on the student experience are the responsibility of partner institutions. This includes the establishment of student representation systems; the collection and use of feedback from students; the provision of adequate learning resources, academic and pastoral support and information; and the appointment of suitably qualified staff. The audit team confirmed that



the University's requirements are understood by partners, and that they take their responsibilities seriously. The University has effective monitoring systems to maintain an overview of the areas where it has delegated responsibility to its partners. The appropriateness of arrangements for student representation, student feedback and academic and pastoral support, the quality of information for students and the appropriateness of teaching staff are first checked at validation. Annual monitoring reports, supplemented by link tutor mid-year and annual reports and boards of study minutes, are the means through which the University continues to monitor such arrangements, receives feedback from students in partner institutions and monitors actions taken by partners in response. The team found evidence in validation and link tutor reports that due process is followed, and that monitoring is effective. Partner institutions confirmed that the initial checking process was rigorous. The team concluded that the University approaches its collaborations in a developmental and supportive manner, and regards the University's support in collaborative provision of the student experience and of its partner institutions as good practice.

64 The audit team confirmed that the University has a robust partnership approval process, which includes due diligence enquiries, an institutional visit and approval by University committees, which is generally thoroughly implemented. All partnerships are governed by a contractual agreement which meets the precepts of the *Code of practice*. The University sets and maintains the academic standards of its collaborative provision through the usual processes of validation, external examining, annual monitoring and periodic review. The team found the two-stage programme validation and review process to be generally effective. The available evidence demonstrated that the proper processes are followed, that validation and review panels include the required external membership, and that all relevant matters are covered.

65 Programme monitoring for collaborative programmes varies from that for internal provision in the focus of the monitoring report and the level of consideration. The central monitoring tool is the annual Programme Assessment and Action Document. The audit team found this document to be a useful tool that enables adequate monitoring of collaborative programmes.

66 Programme Assessment and Action Documents are considered and then action taken both centrally for University issues and in faculties for subject-specific issues. Reports are subject to thorough scrutiny, respond appropriately to issues raised by external examiners and students, and are effective in identifying good practice. The audit team confirmed that the University effectively monitors its collaborative programmes at programme, faculty and institutional level. Monitoring of other aspects of collaborative arrangements delegated to the partner is adequately carried out by link tutors.

67 The assessment process for collaborative provision, like that for internal provision, is governed by the University Modular Framework assessment regulations. Variations are approved by committee. Collaborative programmes, like internal provision, are assessed through a two-tier assessment board system, comprising module and programme assessment boards. The appointment and role of external examiners for collaborative programmes are the same as for internal programmes. Appointment and briefing are undertaken in consultation with the partner institution. Reports for collaborative provision are received in the same way as for internal provision, and addressed in a similar manner. External examiners' reports express satisfaction with the standards and quality of programmes delivered by partner institutions. In cases where concerns were raised by external examiners, the audit team found evidence of decisive action taken to address the problem.

68 The audit team found the requirements of the *Code of practice* embedded in the University's procedures for the management of collaborative programmes, and found evidence of the existence and use of clearly written programme specifications which reflect subject benchmark statements.

69 In the awarding of honours degrees and determining degree classifications in overseas 'recognition and validation' provision, however, the audit team concluded that the University could not be certain that it recognises credits of the right quantity and level required by *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and its own regulations. The University's arrangements for this type of provision involve the granting of advanced standing (the recognition element) of 300 credits, 60 of which are at honours degree level, upon completion of an Advanced Diploma at partner institutions, for entry to a 60-credit progression programme validated by the University as an internal programme (the validation element), and delivered by the University in the United Kingdom over 14 weeks. On completion, students obtain an honours degree from the University. The recognition part of the arrangement is an approved exception to the usual requirements of the University Modular Framework for recognition agreements, namely that the normal maximum amount of credit from prior learning that may count towards an undergraduate award is 75 per cent. As far as the validation element is concerned, while the University Modular Framework states that students who only study level 3 of their programme at the University will be judged on their performance on modules taken at the University, there is the possibility of due consideration being given by the relevant Assessment Board to 'authoritative' marks gained elsewhere.

70 In the Collaborative provision audit report of 2006, the University received an advisable recommendation that it should reconsider the proportion of credit which may be used in a 'recognition and validation' agreement. After consideration, the University decided to continue with its arrangements unchanged in this regard, since external examiner reports for the internal progression programme were satisfactory, and a review of the partnership had not commented on the quantity or level of credits receiving recognition.

71 To judge the partner's Advanced Diploma awards for recognition against the University's honours programmes, the University had undertaken a curriculum mapping based on module learning outcomes. Where there was a similar programme running at the University, mapping of learning outcomes was carried out against modules from all levels of this programme. Where there was no such corresponding programme, partner module learning outcomes were mapped against expected learning outcomes of a University programme of that nature, with the level of study taken into account. Whereas this approach is sound for partner programmes that have a corresponding University programme, this is not the case where there is no such home programme. In such circumstances the mapping is not against actual programmes aligned to the University Modular Framework and FHEQ, but expectations.

72 The University states that it aligned its University Modular Framework to *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), published in 2008, and the audit team thus concluded that the University Modular Framework levels should correspond to levels 4-6 in the FHEQ. However, the University Modular Framework makes incomplete recognition of the 2008 FHEQ, which replaced the 2001 edition, and still refers to previous level designations. The University acknowledged that it had not undertaken a mapping of the level of the Advanced Diploma awards of the partner by mapping the overseas qualifications framework against the FHEQ. It had also not directly mapped the overseas qualification or its modules against the FHEQ or the University Modular Framework. In the University's mapping, however, 60 of the 300 recognised overseas credits are deemed to be as equivalent to University Modular Framework level 3, that is level 6 of the FHEQ. It is on this basis that the University awards honours degrees, in

a credit calculation that includes adding these 60 final-year level-6 credits from the partner award and 60 level-6 credits of the University's validated progression programmes. In the view of the audit team, as the University still uses previous level designations in its mapping process, and given the mapping difficulties for some of the partner's programmes where there was no University equivalent, it cannot know for certain whether partner qualifications straddle levels 5 and 6 when expressed in terms of the UK's FHEQ, and may give too much credit and/or credit at an inappropriate level to the partner's Advanced Diploma.

73 In the 'recognition and validation' arrangement, the University appoints external examiners for the semester programme that the partner's progression students spend studying in the UK. These external examiners, as well as reporting on assessment in the University's programme, should visit the partner. During the visit, the external examiners should have the opportunity to meet students, observe assessment boards, and view (but not moderate) work from the Advanced Diploma. At the time of the audit, not all of the external examiners had visited the partner, and had not been able, therefore, to observe and comment to the University on the standards of the partner's awards and the achievement of its students there. The review of the partnership is addressing this issue.

74 As the University has no direct control of the standards and quality of the overseas awards, the audit team concluded that the University should have been more careful in the academic mapping that it undertook to assure itself that imported overseas credits correspond to the requirements of the 2008 FHEQ and other external reference points. It is therefore essential that the University ensure that awards of the 'recognition and validation' type in overseas collaborative provision are aligned with the FHEQ published in 2008.

75 Student representation in collaborative provision matches the arrangements operating for internal programmes, and is well established. All programmes have a board of study, or equivalent, and this includes student representatives. Students studying on collaborative programmes reported that the representation system is generally effective and that their views are adequately represented. The audit team also found effective monitoring of student feedback on programmes. Actions for the University are followed up by the link tutor or are referred to other University staff. Students confirmed that their views are noted and acted upon.

76 The audit team confirmed that the University and its partners take their responsibilities seriously in the provision and monitoring of learning resources and student support. In addition to learning resources provided by partners, the majority of collaborative provision students also have access to the University's electronic learning resources. Staff development is a partner responsibility, but the University supports the development of partner staff, both academic and non-academic, through training and development events.

77 The University retains overall control of publicity material issued by partners relating to collaborative links, and has effective procedures for the approval of such materials. It monitors the quality of information provided by partners in student handbooks. In addition, it provides useful general student handbooks or guides for collaborative provision students; these include information about complaints, academic appeals and misconduct.

78 With the exception of its 'recognition and validation' awards, the University effectively manages the quality of learning opportunities in its collaborative provision and has effective systems to safeguard the standards of its collaborative provision. The audit team concluded that it is essential that the University ensure that awards of the 'recognition and validation' type in overseas collaborative provision are aligned with the FHEQ published in 2008.

## **Section 6: Institutional arrangements for postgraduate research students**

79 The University operates a number of postgraduate research awards. Its MRes and Professional Doctorate operate under the University's Modular Framework whilst its MPhil, MPhil with transfer to PhD, PhD direct and PhD by Publication (a staff-only award) operate under the University's Research Degrees Committee. The University is a member of the New Route PhD Consortium and is in the process of establishing this integrated award. The University also has the provision for dual awards with collaborative partners.

80 Admissions criteria are defined in the University Research Degree Regulations and faculty research degree committees have oversight of the admission of postgraduate research students, who are primarily located in areas which were successfully submitted to the Research Assessment Exercise. The minimum entry requirement has been amended to an upper second-class honours degree in keeping with recommendations published by QAA. Additional English language support for overseas students is provided by the International Study Centre.

81 The University acknowledges that there is a need to improve completion rates for postgraduate research students. The audit team noted that the main driver for the Research Degrees Committee during 2007-08 was the completion rate of postgraduate research students, and its wish to ensure that regulations and procedures are supportive of student progression and completion rates. Where a student is required to revise and resubmit their thesis following an oral examination the Research Support Office reviews and clarifies the supervisory arrangements to ensure adequate support during the revision period.

82 The University operates an effective 'traffic light' system for reporting and overseeing the student experience. The traffic light system consists of electronic student milestone reports to assist in monitoring student progression against regulatory requirements such as induction and ethical approval, and progression milestones such as registration, transfer and submission. Milestone reports are updated monthly and made available on a secure web portal by the Research Support Office to Research Degree Committee members, faculty research degree committee chairs and faculty research administrators. The audit team concluded that the use of electronic recording and performance indicators in the monitoring and review of postgraduate research students and in managing and enhancing the quality of their learning opportunities was a feature of good practice. The University subscribes to and promotes the Higher Education Academy Postgraduate Research Experience Survey, with above-national-average levels of student participation, and obtains further feedback through an exit questionnaire and annual monitoring reports.

83 Attendance at University induction programmes is mandatory for research students, and normally expected within three to six months of enrolment. There is good uptake, and these induction programmes are supplemented at faculty level. The Research Degree Regulations require that a student shall have at least two and not more than three supervisors. One supervisor is designated the Director of Studies and is responsible for supervision on a 'regular and frequent basis'. Additional advisers are permitted where they are able to contribute specialised knowledge or provide a link to an external collaborating organisation. The audit team noted that faculty research degree committees are charged with reviewing and assessing supervisory loads for individual staff members and that supervisory arrangements are reviewed as part of annual monitoring. It would be desirable for the University to provide more guidance on how many postgraduate research students a supervisor might be expected to manage.

84 The university-wide complaints procedure is applicable to research students, and arrangements exist for students unable to resolve a matter with their supervisory team.

85 New members of staff and inexperienced members of existing staff attend the University's Research Supervisors' Workshop before being approved as a supervisor.

86 A revised procedure has been introduced for transfer from MPhil to PhD. The revised process is intended to contribute to improvements in overall completion rates by providing a more structured process for transfer. The audit team formed the view that it was premature to attribute improvements in completion rates to this revised system.

87 There is a training framework for research students that includes a student-led skills audit completed at induction, and reviewed annually by the student and supervisor. The audit team found that not all students were familiar with the skills audit. Postgraduate research students confirmed that they are able to access research and generic skills training through the Masters in Research (MRes) programmes, and personal development training through the Centre for Staff Development. The team noted that the University is developing a code of practice to provide guidance for students, supervisors and schools/faculties to ensure that research students with teaching responsibilities are appropriately supported across the University. It concluded that, in the context of a lack of full policy, it would be desirable for the University to ensure that postgraduate research students undertaking teaching are provided with adequate guidance and support.

88 Examining teams for all postgraduate programmes must demonstrate examining experience and subject expertise. A research misconduct policy has been approved by the Academic Board which provides a procedure for dealing with complaints around research impropriety, and is in line with national guidelines.

89 The arrangements for postgraduate research students have been subject to review and development informed by the *Code of practice* and the outcomes of the QAA special review of research degree programmes, conducted in July 2006. The development of the University's Degree Regulations and Code of Practice provide a student-centred framework for all postgraduate research provision. Institutional oversight is maintained by the Academic Board, with clear reporting arrangements from faculty committees through the University Research Degrees Committee.

90 The audit team concluded that the University's procedures for the support, assessment and supervision of research degrees align with the *Code of practice, Section 1: Postgraduate research programmes*. The development of the University Degree Regulations was found to provide a student-centred framework for postgraduate research provision. Institutional oversight is maintained by the Academic Board, with clear reporting arrangements from faculty research committees through the University's Research Degrees Committee.

## **Section 7: Published information**

91 The audit team found that the accuracy of published information and the way in which the University manages information have been addressed since the last audit, and continue to be developed. One example is the introduction of new software which is a more user-friendly successor to the previous system. The Briefing Paper stated that all the information required is made available publicly, and that the University has formal mechanisms to ensure the accuracy, legality and currency of its published information, and the team found evidence that this was the case.

92 The University uses the web to convey most information, operates an in-house graphic design studio, and maintains an archive of all copyrighted material. All corporate information published by the University is generated, designed and approved by the Corporate Communications Team on application by faculties and service teams.

93 The University makes all information required by the Higher Education Funding Council for England publicly available. It also makes available the required data for the Unistats website. The University's public website provides information for staff, students and prospective students. The audit team saw a range of handbooks and leaflets which are made available in hard copy.

94 Information at faculty level is generated through the use of a content management system and, in response to the last Institutional audit, a workflow system has been installed. The content management system ensures that information is accurate and accessible. Web authors are employed in each faculty. Definitive versions of programme specifications are held on a facility that allows strict version control. The audit team concluded that the detailed nature of the University's programme specifications and their ready and secure availability through the internet were a feature of good practice.

95 Collaborative provision is governed by partnership agreements outlining partner organisation contractual responsibilities. Corporate Communications approves any associated publication materials.

96 The University produces an annual applicant guide for prospective students, and reviews its content to ensure that it meets applicants' needs. Students confirmed to the audit team that this information was helpful. Publication of course information is managed centrally, with every programme having to be approved in principle and validated in detail prior to the production of any marketing materials for recruitment.

97 The Academic Planning and Information Team together with faculty staff check the accuracy and completeness of the student record for the Higher Education Statistics Agency. This work includes referring to previous returns and to planning assumptions made.

98 Results of the University's 2009 Student Opinion Survey indicate that 76 per cent of students were satisfied or very satisfied with the accuracy of the programme information that they received before they commenced their studies. Eighty per cent were satisfied or very satisfied with the information that they received about their programme once on their courses, for example the programme handbook. External examiners' reports are made available to students at boards of study. However, the audit team found that students were not always aware of this. It would be desirable for the University to work towards ensuring that external examiners' reports are seen consistently by all boards of studies and, thus, by student representatives.

99 To improve communications to students and address the current variations across the institution, a Student Communications Group has been established to provide a coherent and consistent corporate level of communication with students before, during and after their time at the University. The Group's remit includes internal and external marketing, publications, public relations and publicity, the web, email and all digital platforms.

100 Overall, the team concluded that reliance can reasonably be placed in the integrity and reliability of the information that the University publishes about its educational provision.

## Section 8: Features of good practice and recommendations

### Features of good practice

- 101 The audit team identified the following areas as being good practice:
- the support provided by the Centre for Staff Development and the Learning Development Unit, and the range of activities available for staff, including the staff of partners (paragraphs 47, 76)
  - the early and prolonged engagement of external advisers in the development of proposed programmes of study (paragraph 20)
  - the introduction of Student Democracy Coordinators as a means of enhancing the effectiveness of the student voice (paragraph 36)
  - the impact on the student experience of staff engagement with pedagogic research and development (paragraph 39)
  - the University's support in collaborative provision of the student experience and of its partner institutions (paragraph 63)
  - the use of electronic recording and performance indicators in the monitoring and review of students and in managing and enhancing the quality of their learning opportunities (paragraph 82)
  - the detailed nature of the University's programme specifications and their ready and secure availability through the internet (paragraph 94).

### Recommendations for action

- 102 Recommendations for action that is essential:
- ensure that awards of the 'recognition and validation' type in overseas collaborative provision are aligned with *The framework for higher education qualifications in England, Wales and Northern Ireland*, published in 2008 (paragraphs 74, 78).
- 103 Recommendations for action that is advisable:
- ensure that the University Standing Panel is clearly placed within the academic management structure, that its membership and terms of reference are reviewed, and that the Panel is clearly referenced in publications (paragraphs 9, 21).
- 104 Recommendations for action that is desirable:
- work towards ensuring that external examiners' reports are seen consistently by all boards of studies and, thus, by student representatives (paragraphs 24, 98)
  - ensure that there is a clearly communicated and consistently operated system of deadlines for the provision to students of feedback on assessment (paragraph 29)
  - bring the practice of interim Personal Development and Performance Review into line with formal expectation (paragraph 48)
  - provide more guidance on how many postgraduate research students a supervisor might be expected to manage (paragraph 83)
  - ensure that postgraduate research students undertaking teaching are provided with adequate guidance and support (paragraph 87).

## Appendix

### **Liverpool John Moores University's response to the Institutional audit report**

LJMU welcomes the judgement of confidence in the soundness of its present and likely future management of the academic standards of home awards and the overwhelming majority of its collaborative awards, and the quality of the learning opportunities available to students.

The audit team has highlighted many features of good practice that have had a positive impact on the student experience including the: support offered by the Staff Development and Learning Development Units; early and prolonged engagement of external advisors in the curriculum design phase of programme proposals; effectiveness of Student Democracy Coordinators; support of the student experience within collaborative provision; use of electronic recording and performance indicators in the monitoring and review of students and in managing and enhancing the quality of their learning opportunities; and the detailed nature of the University's programme specifications and their ready and secure availability through the internet.

However LJMU is extremely disappointed that the audit team placed limited confidence in its present and likely future management of the academic standards of its collaborative overseas 'recognition and validation' awards - even if qualified as being concerned with "just one aspect of one element" of our extensive provision. This is a rather technical, narrow matter relating to mapping against the FHEQ. The University is clear that it has assured itself of the level and standards of these awards in a number of ways including mapping against its own provision which is appropriately located within the FHEQ (and a process that is described as sound by the audit team in the report), on-going liaison with the Malaysian Qualifications Agency, the use of external examiners and the use of external advisors at validation and programme review events. The audit team found no evidence to support the fact that standards of student attainment reflected an incorrect mapping of the level of the awards.

The University was very disappointed by its experience of this "hybrid audit". The process was not well-managed and did not afford us the opportunity to fully discuss the mapping issue. The awards concerned represent less than 0.25 per cent of all the University's collaborative awards, which were otherwise given a confidence judgement, with no recommendations specifically in relation to other collaborative awards.

Both of the two advisable recommendations had already been actioned prior to the audit visit, and this was confirmed to the audit team at the time. Naturally, all of the other minor recommendations in the report have already been addressed and actioned.



**RG 565 02/11**

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