



**University of Sunderland**

**Audit of collaborative provision**

**March 2011**

**Contents**

<b>Introduction.....</b>	<b>1</b>
<b>Outcomes of the Audit of collaborative provision .....</b>	<b>1</b>
Institutional approach to quality enhancement .....	1
Institutional arrangements for postgraduate research students studying through collaborative arrangements .....	1
Published information.....	1
Features of good practice.....	1
Recommendations for action.....	2
<b>Section 1: Introduction and background .....</b>	<b>2</b>
The institution and its mission .....	2
The information base for the Audit of collaborative provision .....	3
Developments since the last audit.....	3
The awarding institution's framework for the management of academic standards and the quality of learning opportunities .....	5
Selecting and approving a partner organisation or agent.....	6
Written agreements with a partner organisation or agent.....	7
<b>Section 2: Institutional management of academic standards .....</b>	<b>7</b>
Approval, monitoring and review of award standards.....	7
Academic Infrastructure and other external reference points .....	10
Assessment policies and regulations .....	11
External examiners.....	12
Certificates and transcripts.....	13
Management information – statistics .....	14
Overall conclusions on the management of academic standards .....	14

**Section 3: Institutional management of learning opportunities ..... 14**

Approval, monitoring and review of programmes ..... 14

Academic Infrastructure and other external reference points ..... 19

Management information - feedback from students ..... 19

Role of students in quality assurance ..... 20

Links between research or scholarly activity and learning opportunities ..... 21

Other modes of study ..... 22

Resources for learning ..... 23

Admissions policy ..... 24

Student support ..... 25

Staffing and staff development ..... 27

Overall conclusion on the management of the quality of learning opportunities ..... 28

**Section 4: Institutional approach to quality enhancement in collaborative provision ..... 28**

**Section 5: Institutional arrangements for postgraduate research students studying through collaborative arrangements ..... 31**

**Section 6: Published information ..... 31**

## Introduction

An audit team from the Quality Assurance Agency for Higher Education (QAA) carried out an Audit of collaborative provision at the University of Sunderland (the University) from 28 March to 1 April 2011. The purpose of the audit was to provide public information on the quality of the institution's management of the academic standards of its awards and the quality of learning opportunities available to students through collaborative arrangements.

## Outcomes of the Audit of collaborative provision

As a result of its investigations, the audit team's view of the University of Sunderland is that in the context of its collaborative provision:

- **confidence** can reasonably be placed in the soundness of the institution's present and likely future management of the academic standards of the awards it offers
- **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.

## Institutional approach to quality enhancement

The University sees quality assurance as underpinning quality enhancement and as the foundation for developmental work. A key principle supporting this approach is that quality enhancement should be seen as embedded, rather than becoming an additional requirement, and should be founded on the firm bedrock of quality assurance. The University is taking deliberate steps to improve the quality of learning opportunities for students in collaborative provision, both through institutionally-led enhancement activity and by engendering a culture of sharing good practice among both university and partner staff.

## Institutional arrangements for postgraduate research students studying through collaborative arrangements

The University has a number of research students who are studying for a research degree in their home country by distance learning. All this provision is, however, supported entirely from the University, and does not involve any collaborative agreements for the delivery of research programmes.

## Published information

The audit team found that reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards offered through collaborative provision.

## Features of good practice

The audit team identified the following areas of good practice:

- the University's strategic review of its collaborative partnership portfolio (paragraph 11)
- the University's commitment to close strategic alignment with local further education colleges (paragraph 12)

Audit of collaborative provision: annex

- the clear guidance and information provided to partners on the University's quality assurance systems, including in its operations manuals and the document entitled Quality Processes at the University of Sunderland (plain English guide) (paragraph 27)
- the proactive approach taken by Student and Learning Support Services, including its provision of online resources for collaborative students (paragraph 113).

## Recommendations for action

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

Recommendations for action that the team considers advisable:

- review the formal membership of those assessment boards which incorporate consideration of collaborative students, revise its regulations accordingly and review current arrangements for actions to be taken if a board is inquorate (paragraph 50)
- review its arrangements for the planning and approval of partner provision where the University is not directly involved in curriculum design, delivery and marking, so as to ensure the effective management of students' expectations (paragraph 73)
- ensure that it meets information requirements set out in HEFCE 2006/45 in relation to the public availability of programme specifications (paragraph 165)
- review arrangements for ensuring the accuracy and currency of all publicly available information on approved partnerships and collaborative programmes (paragraph 167).

Recommendations for action that the team considers desirable:

- review the University's assessment feedback policy and ensure timeliness of feedback to collaborative students (paragraph 49)
- review the utilisation by partner students of turnitin™, and consider the development of University guidance to be given by tutors thereon (paragraph 52)
- expedite the engagement of independent expert advice for partner programmes in which it does not itself have subject expertise in order to provide ongoing assurance of the academic currency of provision (paragraph 82)
- work with its partners to review the means by which collaborative students gain access to external examiners' reports (paragraph 164).

## Section 1: Introduction and background

### The institution and its mission

1 The University's vision, as articulated in its corporate plan, is to be recognised as 'one of a new generation of great civic universities - innovative, accessible, inspirational and outward looking; with international reach and remarkable local impact'. The first aim of the University's academic strategy is 'to promote innovative and flexible learning opportunities responsive to the needs of a diverse market'. One of the objectives supporting this aim is to 'work with strategic educational partners at home and abroad who share [our] core values, to develop and promote viable models of distributed provision'.

2 In the academic year 2009-10 the University had 24,865 students, of whom 10,233, or 41 per cent, were associated with collaborative provision. This proportion is one of the highest of any English university and has been a significant factor determining the University's approach to collaborative provision. In particular, a consequence of the

University's review of the management of collaborative provision following the 2006 QAA Audit of collaborative provision was its decision not to establish separate structures for collaborative and non-collaborative provision, reflecting, in part, the high proportion of the University's students enrolled on collaborative provision.

3 Of the 10,233 students associated with partner institutions in 2009-10, 8,524, (83.3 per cent), were undergraduates and 1,709 (16.7 per cent) were taught postgraduates. Just over half (5,258, 51.4 per cent) were studying overseas and 4,975 (48.6 per cent) were studying in the UK. Two-thirds of the latter (3,287, 32.1 per cent of the total) were in further education colleges (FECs) or other publicly-funded organisations. At the time of the audit, the University had 71 partner institutions on its Collaborative Register, although the University had decided not to continue in partnership with 33 of these colleges. Of the 38 remaining, 17 were in the UK and 21 were overseas. The UK partners consisted of 11 FECs (including nine in the north-east region); one sixth-form college; two other publicly-funded organisations with an educational remit; and three private providers. The number of students enrolled in partner institutions had more than doubled since the 2006 audit, while the number of partnerships had decreased by some 30 per cent.

## **The information base for the Audit of collaborative provision**

4 The University provided the audit team with a briefing paper and supporting documentation, including that related to the partner link visits selected by the team. The index to the briefing paper was referenced to sources of evidence to illustrate the institution's approach to managing the security of the academic standards of its awards and the quality of its educational provision. The team had access to all documents referenced in the briefing paper either in hard copy or through the institution's intranet.

5 The students' union did not produce a student written submission, having produced a submission for the institutional audit in March 2009. At the time of the audit, the union's officers confirmed that they had been consulted in the preparation and sign-off of the text of the briefing paper.

6 In addition, the audit team had access to:

- the report of the previous Institutional audit (March 2009)
- the Audit of overseas provision report of the University of Sunderland and the European University of Cyprus New York College, Athens and Thessaloniki (May 2008)
- the report of a review of postgraduate research degree programmes (July 2006)
- the report of the previous Audit of collaborative provision (April 2006)
- the institution's internal documents
- the notes of audit team meetings with staff and students at the University and at partner link visits.

## **Developments since the last audit**

7 The period since the last Audit of collaborative provision has been one of significant development for the University. Reorganisation of service departments was followed by restructuring of the faculties and academic committee arrangements; the introduction of new procedures for quality assurance and enhancement; and a change of strategy for collaborative provision. During this period, the University successfully addressed the majority of the recommendations from the previous Audit of collaborative provision report; this work continues to develop as revised approaches to the management of collaborative provision are subject to evaluation and refinement.

8 The audit team considers that there is scope for further improvement in relation to two recommendations from the previous audit: firstly, in the extent to which reports from external examiners differentiate between multiple partners that offer the same programme; and secondly, in relation to the provision of site-specific management information using data held on the student information tracking system (SITS). While the external examiner template has been revised, the team considers that the University is not yet fully in a position to know when an examiner's comments are generic or specific to a partner organisation. While significant progress has been made, further development is required to optimise the use of student data as management information. The audit team encourages the University to capture and use the full data set for all collaborative students, irrespective of funding status or partnership model, and to use comparative student data to evaluate its partner organisations.

9 In relation to the remaining recommendations from the last audit, the University has taken the following action. The framework for managing standards and quality of collaborative partnerships has been reorganised to ensure the active involvement of staff from administrative services. Revised approaches to the quality assurance of collaborative provision were introduced in 2009 and are specified in the Academic Quality Handbook. Quality assurance arrangements now include: periodic partnership review at six-yearly intervals, with interim review and the option of developmental engagement; formal consideration of external review reports; and a process to safeguard the interests of students progressing to the University on articulation routes. The University has clarified that it does not require its external examiners to visit partner organisations, though the team heard of a planned visit by an external examiner to view student art work 'in situ' at an overseas partner offering Model B provision. A plain English guide to quality processes has been produced for University and partner staff and students to clarify understanding of the requirements and challenges of collaborative provision.

10 The University undertook a review of its portfolio of collaborative provision in 2007. The review reflected the University's commitment to widening participation and to the region in respect of home students. This approach benefits students in FECs who need to study locally, people in work, those with a disability, or those who are 'first in family' or 'returners to education'. The review also reflected the University's new international plan, agreed in 2009 following a review of private partnerships, in respect of provision for overseas students. The plan's aim is to develop a high-quality partner network, with a particular focus on partners who can deliver cross-university opportunities. The University now favours the development of partnerships where partners have critical mass and secure records of collaboration. Overall the University intends to work with a smaller number of more significant partners.

11 As a result of this review, the University will, in due course, close half of the partnerships that were in place in 2007. Following agreement to discontinue a partnership, it is identified as being in 'teach-out' which leads to close monitoring of the quality of learning by University staff. The University has taken appropriate steps to monitor the quality of the student experience in such situations (see paragraph 132). The audit team considers the University's strategic review of its collaborative partnership portfolio to be a feature of good practice.

12 There have been changes in the way that the University manages its regional strategic partnerships, intended to foster the development of mutual interest and benefit the region involved. Individual meetings between the Vice-Chancellor and the principals of local FECs have replaced meetings involving a consortium of institutional heads. New bilateral agreements (see paragraph 25), which are progressively replacing strategic partnership agreements, retain a commitment to support the development of a region, as well as a partner's mutual interests, while reflecting the need for greater commercial confidentiality.

The audit team considers the University's commitment to close strategic alignment with local further education colleges to be a feature of good practice.

13 Within faculties, the new role of centre leader offers considerable potential for the effective oversight and management of collaborative provision, and augments the work of the programme leader. The recently introduced position of partnership liaison officer, offering well-publicised student support services on site at local strategic partner FECs and tailored to student needs, was described as effective by partner staff and students whom the audit team met.

## **The awarding institution's framework for the management of academic standards and the quality of learning opportunities**

14 The University introduced a new academic strategy in September 2008. This contains three strategic aims that form the basis of the framework for managing academic standards and quality. The Academic Board 'owns' this strategy and has responsibility for the assurance of academic standards and quality. Within a simplified Academic Board committee structure, the Academic Development Committee (ADC) chaired by the Deputy Vice-Chancellor (Academic) has a remit for Strategic Aim 1, concerning the development of programmes and student recruitment. The Academic Experience Committee (AEC) chaired by the Deputy Vice-Chancellor (Academic-Student Experience) has a remit for Strategic Aim 2, concerning the student experience and learning environment. Both committees share a remit for Strategic Aim 3, concerning student employability and outreach.

15 The Academic Board delegates responsibility for the assurance of standards and quality to the AEC, which in turn delegates operational oversight of the processes which assure quality and standards to the Quality Management Sub-Committee (QMSC). Representatives from all faculties are expected to report developments to their faculties. The QMSC has operational responsibility for the approval, monitoring, review and enhancement of on and off-campus programmes. This enables consistent coverage of similar provision within a clear and simple committee structure. A Research and Innovation Committee (RIC) focuses on policy and strategy for research programmes, although none is offered through collaborative partners.

16 Faculty deans are responsible for academic and resourcing matters within each of the University's four faculties and are members of the Academic Board. Three associate deans in each faculty have responsibilities that correspond with Strategic Aims 1 to 3 (see paragraph 14) and are ex officio members of the ADC, AEC, or RIC accordingly. The academic committee structure within faculties mirrors that at institutional level, and committees are chaired by associate deans according to their responsibilities. Hence the associate dean with a remit for the development of programmes and student recruitment attends the ADC and chairs the relevant faculty ADC, while faculty AECs and faculty QMSCs are usually chaired by the associate dean with a remit for the student experience and learning environment.

17 In addition to the academic committees, two informal groups at institutional level are concerned with collaborative provision. The Collaborative Practitioners Group provides a forum in which University staff can consider best practice, consistency of practice across faculties and any concerns about a partnership. It also provides a valuable forum in which to develop new materials, such as the recently revised operational manuals. The Higher Education in Further Education Practitioners Group, to which all further education partners are invited, meets for a day once a term. It considers publicly-funded provision only with discussion of matters of mutual interest, such as IQER, any concerns and best practice, and

includes staff development by University staff. The audit team was advised that informal groups concerned with aspects of collaborative provision operate in some faculties, for example, the Faculty Learning Enhancement Group, the Faculty Transnational Education Group and a Centre Leaders' Forum. The team was advised that while there was no requirement for informal practitioner groups to provide reports to committees, in all cases cross-representation supported the communication and transmission of ideas.

## Selecting and approving a partner organisation or agent

18 The University operates what it described as a series of models of collaboration. These are summarised below:

- Model A - the validation of a programme designed by a partner
- Model B - design and development of a programme rests with the University, while the development of teaching and learning materials and assessment are shared with a partner
- Model C - design and development of a programme and the provision of teaching and assessment are shared between the University and a partner
- Model D - the delivery by a partner of a programme designed by the University, which also provides both teaching materials and assessments
- Model E - independent learning and distance learning provision managed directly by the University
- Model F - programmes delivered and assessed entirely by 'flying faculty' from the University.

19 The models are intended to provide a mechanism for managing the risk of delegating activities to a partner and safeguard academic standards and quality. A decision on the extent of delegation and the model to be used is taken during the risk analysis stage of the partnership approval process. In considering which partner institutions to sample as part of the audit process, the audit team chose to focus on partnerships involving Models A to D since these constituted the majority of the University's partnerships at the time of the audit.

20 The Academic Development Committee exercises oversight on behalf of the Academic Board for the initial approval of any new collaboration. This follows initial consideration by the Deputy Vice-Chancellor (Resources) and the Deputy Vice-Chancellor (Academic-Student Experience) of the compatibility of the educational objectives of a proposed partner with those of the University. Due diligence review is now a prerequisite for any new partnership, and a clear process has been delineated and is being used. A due diligence panel, chaired by the Deputy Vice-Chancellor (Resources), reviews proposals against relevant criteria. The panel is advised by representatives of the University's Legal Service and by the Director of Planning and Finance.

21 The outcome of the due diligence panel is reported to the ADC and, if the outcome is positive, a desk-based quality and standards review is undertaken by a partnership development and approval panel that includes external advice. This then leads to a risk analysis which informs a site visit, and all information is then used to confirm the appropriate model of collaboration to be used. In parallel, a business plan is developed which must be approved by the Deputy Vice-Chancellor (Resources) before a contract can be signed and the new partnership commence. Programme validation is used to approve any new programmes developed by a new partnership.

22 A final report and evidence that requirements have been met is considered by the Deputy Vice-Chancellor (Academic-Student Experience) on behalf of the Academic Board,



who confirms to the ADC that due process has been followed, including the approval of a business plan by the Deputy Vice-Chancellor (Resources). Academic Board approval leads to the production of a collaborative provision agreement that is signed on behalf of the University by the Vice-Chancellor or a deputy vice-chancellor. The audit team was advised that the University does not use agents in this context.

23 The audit team was satisfied that, on the basis of the evidence considered by it, the above procedures are operating as intended, and considered that the University has in place effective arrangements for selecting and approving a partner organisation.

## **Written agreements with a partner organisation or agent**

24 The format of the University's agreements with partner organisations varies. These are summarised below.

25 The University has recently introduced bilateral agreements for its partnerships with FECs in the region. They are replacing strategic partnership agreements as contracts with FECs come up for renewal. These documents are comprehensive in delineating the nature of the relationship, and commit both parties to engage in activities that support development in the region.

26 The title of the contractual document which specifies the nature and scope of a partnership is being changed from 'Memorandum of Agreement' to 'Collaborative Partnership Agreement'. These agreements are comprehensive; they describe the nature, scope and duration of a partnership, and establish the respective responsibilities of the awarding institution and the partner organisation. The approach to the preparation of the collaborative partnership agreements takes into account legal advice, and their content covers the main precepts of the relevant sections of the Code of practice for the assurance of academic quality and standards in higher education (*Code of practice*), published by QAA. The University offers programmes for what it describes as partnerships for 'closed' client groups, that is, client groups that are sponsored by employers. In these cases it produces what is, in effect, a service level agreement to describe the nature and scope of the provision.

27 Overall the audit team found that written agreements produced by the University in respect of its partnerships were comprehensive and clearly written, and consistent with the requirements of the *Code of practice*, published by QAA. They are augmented by documentation such as the plain English guide to quality processes, and the operational manuals that provide guidance on the effective operation of a partnership with the University. The audit team considers that the clear guidance and information provided to partners on the University's quality assurance systems, including in its operations manuals and the document entitled Quality Processes at the University of Sunderland (plain English guide), is a feature of good practice.

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

### **Approval, monitoring and review of award standards**

28 Ultimate responsibility for the management of academic standards, including those related to collaborative provision, resides with the Academic Board. The University's quality assurance processes are set out in the University's Academic Quality Handbook, which the audit team judged to be comprehensive and robust.

29 The University makes a clear distinction between initial partnership approval and programme approval. Following the University's due diligence process (see paragraph 20) the partnership development and approval panel considers the suitability of a partner to deliver particular programmes, the appropriate level of delegation (model of collaboration - see paragraph 18) and the nature of the subsequent programme approval event. The audit team reviewed evidence which confirmed that this process is undertaken as laid down before a formal collaborative provision agreement is signed.

30 The periodic review of a partnership is required to renew the collaborative provision agreement at the end of a six-year period. This broadly follows the same process as initial partner approval, with the additional review of the experience of working with the partner to evaluate academic standards and the quality of the student experience. This informs the University's assessment of whether the partnership should continue, what recommendations need to be stipulated, and whether the existing model of collaboration remains appropriate. From its consideration of a number of partnership review reports, and the responses to the recommendations made, the audit team was assured that this process is effective in identifying areas of potential risk, and that a mitigation strategy is developed where risk is deemed significant. This may be combined with a limited renewal of the collaborative provision agreement for less than the full six years.

31 The process of programme approval and re-approval is the same for programmes delivered on and off-campus, with many programmes delivered at multiple sites. Programme approval requires the scrutiny of a programme specification and module outlines against *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ) and relevant subject benchmarks. There is also detailed consideration of the proposed learning, teaching and assessment methods, as well as the suitability of learning resources provided by the partner institution. As with partnership review, programme review is conducted on a six-year cycle, and is similar to the programme approval process, but with the additional consideration of the experience and achievement of current and past students. The audit team reviewed two approval and three re-approval reports for programmes delivered in collaboration with a partner institution. They confirmed that the process is thorough with effective external engagement.

32 Each approval and re-approval report reviewed by the audit team contained detailed recommendations to be addressed before the programme could be delivered, as well as recommendations to be considered as part of the annual monitoring process. The satisfactory discharge of those recommendations which are, in fact, conditions for approval, is signed off by the panel chair, and formally considered and approved by the Quality Management Sub-Committee (QMSC) on behalf of the Academic Board. In one of the partner institutions visited by the audit team, the proposed programme had not been allowed to start until the partner institution had appointed suitably qualified academic staff. Having reviewed the evidence, the audit team was able to confirm that the process of programme approval and re-approval secures academic standards and identifies issues which need to be addressed before a programme can be approved formally by the University. However, the audit team found that the dual use of the term 'recommendation' in these processes to cover actions required as a pre-condition to running a programme and actions required following the start of a programme, resulted in some degree of confusion in its discussions with University staff, which could have been avoided had an alternative word been adopted.

33 The University's process for considering minor modifications to programmes applies equally to on and off-campus provision. Proposed modifications require external examiner approval and approval from the programme boards of study and the relevant faculty quality management sub-committee. Approved modifications are then ratified by QMSC. At the time

of the audit no minor modifications had been requested in respect of programmes operating under Model A, but the audit team was able to confirm that for other models of collaboration minor modifications had been proposed by partner institutions, and that the consideration and approval process for considering such changes was rigorous and robust.

34 Consistent with its approach to approval and re-approval, the University draws a clear distinction between the annual monitoring of a partner and that of a programme. Partner review is described as giving consideration to higher-level issues around the management and development of a partnership, while programme review in a collaborative context ensures that comparable standards and quality of provision are maintained alongside the wider review of the programme, which may also be taught on-campus and/or at other sites. To achieve these aims, for the majority of its collaborative provision, the main subject contact at each partner submits an evaluative report on each programme or subject area delivered by the partner. This is completed after the close of each academic year and informs the University programme leader's annual review (monitoring report) which covers both on and off-campus delivery. In Model A provision, the partner produces an annual review of the programme for which it is responsible, without being required to deliver a separate partner report.

35 These processes have undergone refinement since the last QAA Collaborative provision and Institutional audits; this involved improvements to the templates for both partner and programme reviews, including the incorporation within them of centre leader reports (discussed further in paragraph 75), and the introduction of systematic follow-up measures to ensure that issues are addressed at faculty and university-level. Programme reviews are also now based around a 'development grid' maintained by the relevant programme boards of study during the year, a concept being piloted at the time of the Institutional audit. The timing of the current audit meant that some of these refinements, such as the collation of issues from centre leaders' reports via each faculty into an overarching University report on collaborative matters to be presented to the Academic Experience Committee (AEC) each February, had still to be implemented. Others were in the early stages of implementation, and evidence of their effectiveness and impact was limited. Nonetheless, the team found evidence of the developmental approach being used effectively (see paragraph 155), and the programme leader at one partner responsible for Model A provision spoke positively of the benefits of the 'development grid' approach to annual review.

36 Although centre leader annual reports were not available for most partnerships at the time of the audit, the audit team did read two such reports for 2009-10, one relating to an overseas partner the other to a UK private provider. These drew on meetings with both students and staff, and alerted the University to matters concerning standards (such as assessment) as well as quality (such as facilities and resources). In the opinion of the team, these reports offered the University a helpful assessment of the health of the partnerships involved, independent of that provided in the partners' own reports.

37 The audit team was also provided with an overview report on collaborative provision issues, prepared by Academic Services on the basis of faculty consideration of annual reviews for 2008-09, which had been received by the University's QMSC in June 2010. This was an example of the University's concern to ensure that difficulties affecting the management of partner programmes were followed up, a concern due to be addressed further through the collation of centre leaders' reports for the AEC.

38 The audit team did, however, have some more general reservations about the effectiveness of the annual review process. The sample of partner annual reports read by the team offered a good deal of detail, but the extent to which local teaching staff had contributed to them, or read them retrospectively, varied according to internal systems.

Several recent partner reports had missed the deadline for submission, a point noted for example in the overview report considered by QMSC, notwithstanding the University's efforts to secure adherence to the required schedule. As for programme annual reviews, the team noted an instance where a programme was delivered both on-campus and at a single overseas partner, and observed that issues specific to one or the other, such as marking practices at the partner, were systematically identified. However, this was atypical, since other programmes sampled by the team were delivered at multiple partner sites - some in double figures - and the annual reviews covering these rarely drew attention to matters pertaining to individual partners. The team was concerned that the lateness of some partner reports and the virtual invisibility of individual partners within some programme annual reviews might undermine the annual review (annual monitoring) process overall, preventing the University from fulfilling the intentions expressed in its Academic Quality Handbook.

39 The team concluded, nevertheless, that the recent introduction of the position of centre leader, a requirement for every partner programme since October 2010 following trials in two faculties, was a major initiative towards addressing the problems associated with the ongoing monitoring of partners. The team was assured by the University of its intention to keep the expectations placed upon centre leaders under review, and in the light of the critical importance of this role (discussed further in paragraphs 74 to 80) the audit team encourages the University in this.

40 The University has established a framework for the consideration and approval of articulations whereby accreditation of prior achievement is conferred to groups of individuals. Within this framework it has developed a typology of articulations and progression agreements, which are subject to different approval processes depending on the level of risk involved. Irrespective of the level of risk, however, all articulations require programme leaders to map the learning outcomes of the proposed 'feeder' qualification against those for the relevant stage of the University award and, if approved, this is signed off at faculty level. In reviewing the audit trail of approved articulations, the audit team concluded that this process is rigorous and contributes to the effective maintenance of academic standards at the point of admission.

## **Academic Infrastructure and other external reference points**

41 The University has embedded the elements of QAA's Academic Infrastructure within its own regulations and quality assurance procedures, as specified within its Academic Quality Handbook. The audit team found evidence that the University made extensive use of the *Code of practice, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, published by QAA, in its review of its collaborative processes in September 2009, and against its arrangements for distance learning in June 2010. The team was also able to confirm that the University has used the European Standards and Guidelines and the Bologna Process to inform its review of its quality processes. In addition, staff at partner institutions confirmed that they had received detailed guidance on quality assurance issues sufficient to ensure compliance with the Academic Infrastructure, in particular those sections of the *Code of practice* directly related to collaborative provision. In general, elements of the Academic Infrastructure are reflected appropriately in programme development, and checked effectively at programme approval and re-approval events and within the annual monitoring process.

42 Programme specifications are scrutinised within the programme approval and re-approval process, for which there is a standard University template which is completed for all programmes. The audit team was informed that, historically, the University had not updated programme specifications subsequent to formal approval. However, these are now

regularly updated within the annual programme review process, with any substantive changes to a programme specification requiring consideration by the relevant external examiner. Changes to the learning outcomes of a programme require that programme to be brought back for university-level re-approval.

43 In reviewing programme specifications involving collaborative provision, the audit team formed the judgment that they are primarily completed for quality assurance purposes and, in their current format, do not provide a description of a programme sufficiently concise to be readily understood by all current and prospective students. Nor could the team locate programme specifications on the University website. University staff confirmed that while programme specifications are contained within student handbooks they are not at present made publicly available. The audit team was informed that the University intends to review the way that its programme specifications are made publicly accessible. The implications of this are considered at paragraph 165.

44 While the programmes considered as part of this audit were appropriately aligned with the FHEQ award descriptors, the audit team noted that the University has retained the use of levels 1 to 3 for its undergraduate awards. Given the number of collaborative partners which offer sub-degree qualifications, the team believes that this practice may lead to some confusion on the part of potential students and other interested parties, and that levels 1 to 3 should be reserved for qualifications which precede higher education as specified in The National Qualifications Framework and The Qualifications and Credit Framework.

45 Based on the evidence reviewed, the audit team can confirm that the University fully engaged with a range of external reference points. This engagement is clearly evidenced within the quality assurance documentation.

## **Assessment policies and regulations**

46 The University has developed standard assessment regulations for its undergraduate and taught postgraduate programmes, and these apply equally to on-campus and collaborative provision. Where there are programme-specific regulations these are approved by the Deputy Vice-Chancellor (Academic) and reported to the QMSC. In its review of the minutes of assessment boards, the audit team concluded that these assessment regulations are applied consistently across all students.

47 Marking and moderation procedures vary according to the model of collaboration and are specified in the relevant collaborative provision agreement and operations manuals. Only in Model A does a partner set and mark student work. For Model D, which constitutes the majority of its collaborative provision, the University sets and marks all assessments; and for Models B and C the University approves the assessments when they are set by the partner and moderates the partner's marking.

48 Off-campus students have access to information about assessment which is equivalent to that available to on-campus students. For the programmes reviewed, the audit team was able to confirm that collaborative students are provided with a Student Handbook that gives generic information covering a student's programme of study, including information and links to generic or programme-specific assessment regulations. More detailed information is provided within the module guides produced for all modules, and these contain information on module-specific learning outcomes, the learning and teaching methods used, and information on assessment methods, schedule and criteria.

49 In its Academic Quality Handbook the University states that it aims to provide feedback to students within four working weeks of an assignment submission. However, in

its meetings with staff and students at the University and at collaborative partners, and in its review of annual monitoring reports, the audit team identified that the notification of assessment marks to collaborative students can take substantially longer than this. The team was advised that such delays can be due to the timing of assessment boards in relation to the pattern of delivery at partner institutions. While recognising the existence of the operational difficulties associated with collaborative provision, the team believes that these delays have the potential to affect adversely the academic performance of collaborative students in comparison to on-campus students. The audit team, therefore, considers it desirable for the University to review its assessment feedback policy and ensure the timeliness of feedback to students in partner institutions.

50 The Academic Quality Handbook specifies procedures for the operation of module and programme assessment boards. All assessment boards are chaired by a senior member of academic staff from the University, and for programmes with on and off-campus provision the results are considered at the same board. From its discussions with members of University staff, and its consideration of the constitution of assessment boards, the audit team concluded that there is currently a lack of clarity concerning the formal membership of assessment boards involved in the consideration of progression and award decisions of collaborative students. In particular, the team concluded that at the time of the audit there was a lack of clarity with regard to the membership of centre leaders and representatives from partner institutions within such boards. There was also evidence that some of these boards confirmed progression and award decisions even though they may not have been quorate. While the team found no evidence that this lack of clarity or possible inaccuracy had undermined the academic standard of any University award, the team believes that these issues have the potential to result in the inconsistent treatment of students across assessment boards. For this reason the audit team considers it advisable for the University to review the formal membership of those assessment boards which incorporate the consideration of collaborative students, revise its regulations accordingly, and review current arrangements for actions to be taken if a board is inquorate.

51 Off-campus students have access to the same appeals and complaints processes as on-campus students, and these procedures are described in the Student Handbook. Student discipline is a matter for the partner institution except for academic offences which are referred to the relevant faculty infringement panel which reviews the evidence and, as far as possible, conducts the disciplinary procedure in the same way for on and off-campus students. The audit team was able to confirm whether the Academic Board exercises oversight of the number, nature and outcomes of student complaints and appeals and was informed that to date there has not been a significant variation in the number of complaints and appeals from collaborative and non-collaborative students.

52 In its meetings with staff and students from the University and partner institutions the audit team was informed that the academic plagiarism detector turnitin<sup>TM</sup> is often used formatively and summatively to detect the occurrence of academic offences. Responsibility for deciding how turnitin should be used is delegated to faculty and programme teams. The team found evidence that turnitin is not used consistently across different providers delivering the same programme, with at least one partner reporting that it allowed its students to submit a piece of work to turnitin on numerous occasions before submitting it for summative assessment. To ensure greater consistency, the audit team considers it desirable for the University to review the utilisation by partner students of turnitin, and consider the development of University guidance to be given by tutors thereon.

## **External examiners**

53 External examiners are appointed for all University programmes, and are formally approved at institutional level by the QMSC. Criteria for the appointment of external examiners involved in collaborative provision are the same as those for on-campus programmes. To encourage a consistent approach to the assessment of standards, the same external examiner covers a programme wherever it is delivered. The audit team was able to review materials presented at the University's external examiners induction programme, which includes consideration of specific issues related to collaborative provision, including the different models of collaboration and the nature of the annual monitoring process for collaborative provision.

54 All external examiners are required to submit an annual external examiner module and/or programme report using standard University templates. These reports are considered at relevant programme boards of study and made available to partner institutions. A written response is made to each report. The focus of these reports is on the confirmation of academic standards rather than aspects of quality enhancement. External examiners are no longer required to visit partners unless their examining duties necessitate this.

55 From its scrutiny of a number of external examiner reports, and the way in which they are formally considered and responded to, the audit team was able to confirm that they are appropriately considered and responded to within University committees up to the Academic Board. In addition, the QMSC receives an annual overview report focusing on issues raised by external examiners in relation to collaborative provision. The reports read by the team varied in the extent to which they addressed partner-specific issues, and some staff at partner institutions stated that the external examiner reports they had received tended to offer only generic feedback on academic standards and quality.

56 External examiners involved with collaborative students are asked to comment within their reports on any specific concerns in relation to particular partners. Other than for Model A provision, faculties provide comparative information on the performance of collaborative students within the assessment boards and via annual programme review reports. The audit team was informed, however, that the University has recently reviewed the presentation of results at examination boards to enable external examiners more readily to make comparisons across different providers. From the evidence submitted to the team, external examiners typically commend the consistency of marking across different providers, but occasionally they report that marking standards can vary slightly across different providers, with the attendant need to retain rigorous cross-moderation procedures.

57 The audit team confirms that the University makes strong and scrupulous use of independent external examiners in the summative assessment of collaborative students in order to secure academic standards.

## **Certificates and transcripts**

58 The audit team was able to examine a number of University certificates and transcripts issued to collaborative students, and confirmed that collaborative students receive the same form of certificate/parchment as those studying on-campus. A certificate gives the name of the award and the date of graduation. The accompanying transcript shows the modules passed and the number of credits gained, including the credits and level awarded for prior learning. The transcript confirms the language of study and assessment (currently this is solely in English). The team was informed that the marks for Model A provision are recorded by the partner, and progression and award outcomes are inserted by faculty staff on the student information tracking system, allowing the University to issue the certificate.

59 In the view of the audit team, the certificates and transcripts issued by the University are clear and provide appropriate information.

## **Management information – statistics**

60 The audit team evaluated the use made of management information at programme, faculty and institutional level for collaborative programmes, and considered this to be effective. At programme level this is primarily considered within assessment boards and in the annual monitoring process, where standardised reports are produced that include information on the comparative performance across partners where appropriate. This information is then considered at the relevant programme board of studies. Management information is also considered within periodic programme review and re-approval process.

61 At institutional level the relative performance of collaborative students is monitored via the consideration of a range of statistical reports, such as the proportion of on and off-campus students awarded different degree classifications, designed to oversee academic standards and student learning opportunities. From the consideration of these reports the audit team concluded that, while there are some instances where differences are apparent in the performance of on and off-campus students, the University has implemented effective mechanisms designed to identify and address any resulting concerns.

## **Overall conclusions on the management of academic standards**

62 As a result of its investigations, the audit team concluded that, in the context of its collaborative provision, confidence can reasonably be placed in the soundness of the University's present and likely future management of the academic standards of the awards it offers.

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

### **Approval, monitoring and review of programmes**

63 Within its processes for partner and programme approval and review (see paragraph 29), the University pays close attention to the quality of learning opportunities. Scrutiny of the CVs of partner staff, and the examination of facilities and resources, figure prominently in the procedures set out in the Academic Quality Handbook. For example, as already noted (see paragraph 20) a new partner is not approved until a due diligence panel has examined the institution's ethos, reputation and financial stability; a partnership development and approval panel has scrutinised documentation relating, inter alia, to learning resources; and a site visit has been conducted by members of the panel, during which facilities and resources are reviewed and meetings held with academic and support staff.

64 Whatever the model of collaborative provision involved, the collaborative provision agreement, when signed, commits the partner to maintaining an agreed level of learning resources, to ensuring that its staff maintain subject discipline currency at a level higher than the level at which they are teaching, and to submitting for University approval all changes to staffing. Approval of a new programme for delivery by a partner follows standard University procedures, though the event may be held at the partner's premises to facilitate examination of resources. A risk-based approach is adopted to the addition of an already-approved



programme or a new site of delivery to an existing partner's portfolio, with an option for the Academic Development Committee (ADC) to require a site visit by a partner review panel.

65 The audit team considered these processes to be well thought through, with the capacity to provide the University with robust assurance of the quality of learning opportunities at partner institutions. The team also saw examples of their observance in practice. An overseas partner with long-established links with one faculty, which significantly expanded its portfolio during the course of 2010, serves as an illustration of the University's different processes in action.

66 In January 2010 the ADC considered a proposal from the faculty involved, on behalf of the partner, to permit delivery of their programmes at additional sites. This was recommended to the Deputy Vice-Chancellor (Academic) for approval at the March meeting of the ADC, but only on receipt of a satisfactory site visit report. This was followed by a scheduled periodic review of the partner in May 2010, at which the opportunity was taken to approve further programmes, managed by two other faculties, for delivery at various sites used by the partner, but again only after members of the review panel had visited each of the sites concerned. Although a single, detailed report was produced covering both the renewal of the partnership and the approval of programmes, partner staff assured the audit team that they were aware during their participation in the event of the separate processes involved.

67 Partner staff also explained to the audit team the procedures for their selection and training, and for the submission of CVs to the University, all of which are conducted rigorously. The University's systematic receipt of CVs for approval, sometimes leading to rejection, or to a restriction on the modules which an individual could cover, was confirmed by staff at several partner institutions.

68 The audit team did, however, have concerns over the processes for the recent approval of a new programme, a Foundation Degree (FdSc) designed by, and for delivery by, a local college partner under the University's Model A arrangements. Discussions had been taking place between the partner and the relevant faculty aimed at replacing an existing HND programme with a FdSc in the same subject. Although discussion had continued for much of 2009-10 they had only reached the stage where the proposal was considered by the faculty's Quality Management Sub-Committee (QMSc) in June 2010. The University, which does not have a firm cut-off date for programme approvals prior to delivery in the next academic year, wished to support the partner and facilitate the commencement of the FdSc in September 2010, if possible. Accordingly, the proposal was considered by the ADC as a late, tabled item at the beginning of July 2010, only for there to be unexpected delays in receipt of documentation necessary for approval. In the event, according to documentation scrutinised by the team, students registered for an HND in late September, one day before an approval panel met to consider the FdSc which was intended as its replacement. The panel consented to the approval of the new FdSc, 'effective from 1 November 2010', while making some recommendations which had to be addressed before the programme could start. One of these recommendations included the provision of additional information on staffing, deemed insufficient for approval at the time the event was held. On the day following the approval panel's decision, an officer of the University's Student Recruitment and Business Partnerships unit advised the partner that it might be possible to transfer the students on to the FdSc, subject to their consent, once due process following the approval event had been completed, provided that work done on the HND in the meantime could be shown to be compatible.

69 Minutes of meetings held at the local partner college and within the faculty during October and November contained no hint that approval of the FdSc would not eventually be forthcoming. Indeed, one faculty meeting described the college's programme as having been

'successfully validated'. In due course, however, in the absence of satisfactory further information on staffing, the relevant faculty associate dean was obliged to conclude that the qualifications of partner staff were currently insufficient to allow delivery of the programme. The University's formal position, communicated to the college on 9 and 10 December 2010 and recorded in the minutes of QMSC on 15 December 2010, was that the programme itself had been approved following sign-off of fulfilment of the panel's recommendations, but that delivery at the college concerned had not been approved because of the level of staff qualifications. The HND would, therefore, continue, pending resolution by the college to the University's satisfaction of the staffing issues, and would be subject to a scheduled periodic review if there had been no resolution by Easter 2011. Minutes of college meetings confirmed that by 15 December 2010 this was also the college's understanding of the position.

70 The audit team considered that, in several respects, the University had acted correctly in its handling of this process. The distinction between approval of a programme and approval to deliver at a particular site is provided for in the Academic Quality Handbook. The team, however, queried the reality of this distinction in circumstances where the partner's own design of the programme precluded it from being delivered elsewhere. The University justified its procedures on the grounds that ultimate authority to grant approval was vested in different places. Partner staff were grateful for the help and support of the University in preparing for the approval event. For its part, the audit team accepts that the University advised the partner that there could be no guarantee as to the outcome of the approval process and acknowledges that students registered for an approved award, the HND, not for the yet-to-be-approved FdSc.

71 In eventually refusing to allow delivery of the FdSc to proceed, the University upheld academic standards and quality, reflected in this case by its requirement that partner staff should be qualified to a level higher than that at which they would teach. Nevertheless, when visiting the partner concerned, the audit team was left in no doubt that the University's decision not to permit delivery, communicated over two months after an apparently-successful approval event, had come as a considerable surprise to staff and especially to the cohort of first-year students, who had been led to believe that they would be studying for a FdSc. These students clearly felt that what they saw as a reversion to the HND had affected them adversely, both in financial terms and in loss of the contact hours and formal work-based learning which the FdSc would have entailed, and which they were expecting.

72 The audit team concluded that, notwithstanding the formal correctness of the University's position in requiring registration for the approved HND without any guarantees to the contrary, it had contributed to this unfortunate situation in several ways. The refusal to allow delivery at the college, on the grounds of insufficiently-qualified staff, came a considerable time after the approval event had been held. While accepting that reservations over staffing had been raised at that event, the team was of the opinion that any weaknesses in this area could and should have been identified at a much earlier stage during the faculty's liaison with the partner in planning the programme and preparing for the approval event. The University's well-meaning decision, despite delays in receipt of paperwork, to allow an event to be held in late September, for a programme which students believed they would be embarking upon forthwith, increased the risk that problems identified during the approval process would cause its collapse for lack of time to address them. On the day after the approval event, a University service department was encouraging the partner to consult with students in the belief that they might eventually transfer to the FdSc, a belief which turned out to be misplaced.

73 It was clear to the audit team that students' expectations had been poorly managed. By allowing programme planning and the approval process to extend well beyond the

intended date of commencement, only for delivery then to be prohibited, the University was partly responsible for this situation. Accordingly, the University is advised that, in Model A programmes such as this, where it is not directly involved in curriculum design, delivery and marking, it should review its arrangements for planning and approval, so as to ensure the effective management of students' expectations.

74 In its consideration of the University's arrangements for the annual monitoring of partners and collaborative programmes, the audit team recognises the key role now played by centre leaders in providing up-to-date information independent of that supplied by the partners themselves (see paragraphs 36 to 39). This is indeed the University's formal position since, in dealing with the annual monitoring of collaborative provision, the Academic Quality Handbook places the annual visits and reports of centre leaders at the heart of the process. The Handbook confirms that there must be two visits to a partner each year (with every site of delivery managed by the partner visited at least once each year), and that these visits should incorporate: meetings with staff and students; reviews of learning resources, of publicly-available literature and of the security of assessment; involvement, where feasible, in both staff and student induction; and, where overseas and private UK partners are involved, the peer observation of teaching.

75 Findings from these visits inform a centre leader's annual report, compiled according to a template which includes summaries of meetings with staff and students, items of good practice, issues of concern and an action plan. This report is then forwarded to relevant programme leaders to feed into their annual programme reviews, as well as to the faculty quality officer, the principal partner contact and - if serious issues are identified - senior University personnel such as the Director of Academic Services or the faculty's associate dean (student experience) as applicable. Given that centre leaders have only been a university-wide requirement for all partner programmes since October 2010, the audit came too early for this process to be observed in all faculties, but those centre leader reports which the team was able to sample had been completed conscientiously, and the audit team is confident that the process has the potential to enhance significantly the value of the annual monitoring and review of partners and their programmes.

76 The audit team recognises the contribution which centre leaders can make to quality enhancement, and the provision made by the University for them to be trained and to share good practice (see Section 4). Partners spoke warmly of the energetic support of centre leaders with whom they were in regular contact, and the team was impressed by the commitment shown by those post holders whom it met. There are, however, some areas of concern. One is that, since centre leaders are faculty-based appointments focusing essentially upon single programmes or clusters thereof, several partnerships had a number of different centre leaders assigned to them. Indeed, one local partner deals with seven different centre leaders; another, an overseas partner, with four.

77 Centre leaders in these situations submit reports which relate largely to that area of the partnership for which they have disciplinary responsibilities, rather than to the partnership as a whole. Given that partners' annual reports are also submitted by programme or subject area, the University is not receiving an annual overview of the partnership wherever there is diversity of provision, except through its own processes of collation at faculty level and beyond. The audit team was, however, assured by senior University representatives that there would be a review of centre leaders' roles and responsibilities at the end of the first year of operation, including consideration of their duties in the context of multi-faculty partnerships. Any revision of duties would have implications for workload.

78 The role description of a centre leader covers the duties outlined above for a partner visit. It also embraces liaison with the relevant programme leader or University

department over delivery and assessment schedules; attendance at programme assessment boards; monitoring progression from the partner to the University; checking partner websites; ensuring correct partner student registration and maintaining viable cohorts; and the provision of information about the operation of the partnership to University and faculty committees and working groups as required. Centre leaders who met the audit team also spoke of the staff development they would conduct during visits to partners, and their role in monitoring the currency of the continuous professional development of partner staff. Some partners who met the team added that they would also provide their centre leaders with the CVs of staff requiring University approval. All this led the audit team to explore whether the University's expectations of these post holders were reasonable, especially since one assigned to an overseas partner, who was also the programme leader for the relevant provision, had drawn attention in his annual programme review for 2009-10 to what he perceived to be workload pressures, given that he was on a fractional contract.

79 Evidence presented to the audit team showed one centre leader to have responsibilities involving five different local and overseas partners, covering nine programmes between them. Another was allocated to five local partners; others to three or four. One centre leader linked to three overseas partners and a private UK provider combined the role with that of head of department; another attached to two local partners with that of associate dean of his faculty.

80 The fact that some staff were, in effect, becoming specialists in the role of centre leader, and that the duties were sometimes discharged by senior faculty staff, could be interpreted as an indication of the significance which the University attaches to the position. Nevertheless, the team encourages the University, as part of its forthcoming end-of-year review of the operation of the centre leader system, to revisit arrangements for workload allocations. These are currently based upon a Framework for Academic Workload Planning, last updated in 2008, which makes no specific reference to the role. This offers parameters within which faculties have discretion to assign hours, and guidance on how the task should be approached. It was, however, made clear to the audit team that allowances did vary from one faculty to another, albeit in the context of different types of partnership. Given the critical importance of this role, especially for the monitoring and enhancement of the quality of learning opportunities, the team is of the opinion that a more systematic mapping of duties to workload allocation would be beneficial to all parties.

81 In some local partnerships the University offers an award for the successful completion of a programme in which it does not itself have core expertise. It was explained in the University's briefing paper that these are in 'areas of particular expertise in the colleges concerned'; all delivered under Model A arrangements; and are 'supported by an External Programme Adviser'. An external programme adviser was described as 'a subject specialist able to act as a consultant' and to 'support the link between the specialist area at the college and the cognate expertise at the University'. The audit team was informed that until 2009-10 the role had been that of adviser to the college involved, but that, following a review, the University had decided to make them appointments at the discretion of the relevant faculties (from whose budgets their fees would be paid), with a remit not only to support the partner in curriculum development but also to advise the University, through a formal meeting and an annual report, especially so as to maintain and enhance academic quality. The role is carefully distinguished from that of external examiner, whose principal responsibilities cover academic standards.

82 The audit team considers that the University has made a good case for such advisers, particularly as a means of ensuring the continued academic currency of the provision. It was perhaps surprising, therefore, that at the time of the audit none were in place, faculties having, thus far, exercised their option not to make such appointments. The team was, however, assured that the matter was under review, and that there was

active discussion between one local partner college and the faculty concerned about the appointment of such an adviser. The audit team considers it desirable that, in partner programmes for which it does not itself have subject expertise, the University expedites the engagement of independent expert advice, in order to provide ongoing assurance of the academic currency of the provision.

## **Academic Infrastructure and other external reference points**

83 The emphasis placed by the University on the importance of the Academic Infrastructure in the context of collaborative provision, already discussed above in paragraphs 41 to 45, may be illustrated in two ways. First, during 2009-10, Academic Services, on behalf of QMSC, conducted systematic mapping exercises of the University's practice against the precepts of the *Code of practice, Section 2*, published by QAA. One of these exercises related to collaborative arrangements in general, the other to those pertaining to a partner where delivery was based on distance learning. Among the relatively few matters identified for further attention (none of which related to distance learning) was one in respect of precept A26, as a result of which the University has reviewed its requirements for programme handbooks provided to partner students. Second, in January 2008, in preparation for QAA IQER visits, local college partners were given staff development by Academic Services on the significance of different components of the Academic Infrastructure.

84 Very little of the University's collaborative provision is subject to professional and statutory regulatory body (PSRB) scrutiny, but the University has a clear process for handling such provision as exists. Academic Services maintains a database of all PSRB activity, and may intervene alongside the Deputy Vice-Chancellor (Academic) if issues arise which have implications for the University as a whole. Normally, however, liaison with PSRBs, and processes for programme approval, monitoring and review which involve PSRBs, are entrusted to the relevant faculties. The audit team saw evidence of professional body representation at the periodic review of provision in one faculty, which included a FdA programme delivered at a partner institution.

85 The audit team also tracked, through the minutes of a faculty QMSC, the preparations made for, and successful outcome of, a professional body visit to an overseas partner for accreditation purposes. Both instances of interaction with a PSRB at faculty level were reported to the subsequent meeting of the University's QMSC, and thereafter to the Academic Experience Committee (AEC). The template for partner annual reports, revised for 2009-10, also requires a statement of actions taken in response to external reviews, including professional body accreditations, received during the year in question. Overall, the audit team concluded that the system of faculty engagement with PSRBs, under the oversight of central University committees and services, is operating successfully.

## **Management information - feedback from students**

86 In its briefing paper the University acknowledged that, sometimes for cultural reasons, there are difficulties in obtaining evaluative feedback from partner students. Most partner students who met the audit team, including those from overseas institutions, had some familiarity with module, stage or programme-based questionnaires. Scepticism was, however, expressed by students over how far improvements had been made as a result, but the audit team did learn from one overseas partner student of a positive response received to an issue raised in this way. The team was also informed of students at a local partner college receiving feedback on their evaluations through a 'You Said, We Did' poster in the learning resources centre.

87 Annual reports from partner institutions to the University normally draw upon student opinion, and the team saw evidence of this in the case of one local college partner which issued induction, mid-year and end-of-year questionnaires and used these in its reports to the University. The annual report template applicable up to 2008-09 made provision for students' evaluative feedback to be forwarded to the University. The revised template for 2009-10 encouraged more local analysis of such evaluation through the inclusion of a section specifically focused on the quality of the student experience. For example, two overseas partners visited by the team, though duly appending student feedback to their reports for 2008-09, made only brief references to the content thereof. By contrast, in 2009-10, both gave more detailed attention to students' comments in the body of their reports, ranging over curriculum content, the quality of teaching, assessment guidance and feedback, learning resources and student support.

88 As discussed in paragraph 38, the audit team is not convinced that issues raised in partner reports, including student concerns expressed within them, are adequately represented in annual programme reviews wherever these cover activity at several different partners. However, with the appointment of centre leaders, the University now has an opportunity for local issues identified through partner reports to be addressed during the meetings these post holders are required to hold with students as well as staff during their twice-yearly visits.

89 The University canvasses the opinions of students in partner institutions biennially through its own centrally-administered surveys and, in particular, seeks to use the findings of the National Student Survey (NSS). Students in local partner colleges are encouraged to participate, both through individual letters from the Deputy Vice-Chancellor (Academic) and through the efforts of University partnerships liaison officers attached to the colleges. In 2010 the off-campus response rates, though below those for on-campus students, were in excess of 50 per cent.

90 The University was able to present overall NSS data for each of its local further education college partners to the November 2009 and November 2010 meetings of the AEC, data from which it is fair to conclude that - with the important exception of learning resources - most students who responded were at least as satisfied with their experiences as those based on-campus. Given the importance placed by the University in its briefing paper on comparability in the quality of the various student experiences for the 41 per cent of the student body covered by collaborative arrangements (a substantial minority of which were in local colleges) these findings are significant. Nevertheless, they passed without comment in the minutes of relevant meetings of the AEC, and also in the written responses and action plans arising from the NSS submitted by faculties, which focused on on-campus results. This was despite the hope expressed at the November 2010 meeting that 'faculty knowledge will aid the interpretation' of partner data.

91 The audit team acknowledges the considerable efforts made by the University to incorporate NSS data into its quality management of local college partners' provision. The team considers, however, that there is more work to be done, both within faculties and within the AEC, in order to maximise the use of this data in a collaborative context.

## **Role of students in quality assurance**

92 Sabbatical officers of the University's students' union (USSU) are full members of the Academic Board, its committees and the QMSC. As such, they may participate in discussion and decision-making on any matters relating to collaborative provision which come before these committees. Although no student written submission was submitted in connection with the audit (see paragraph 5), the team was informed that the union was

represented on the working group which prepared for it, and that the University's briefing paper was signed off by the union executive. The union also prepared a helpful paper on its interaction with collaborative students, from 2008-09 onwards, which was presented as evidence to the audit team.

93 For on-campus provision, the University has a well-established Student-Staff Liaison Committee system, involving elected student representatives. The audit team found evidence that a similar system is in operation among several partners. It was apparent from discussion with students engaged in collaborative programmes, both at partner sites and during the main audit visit, that familiarity with a student representation system was widespread. This was particularly the case with students based at local partner colleges, at one of which the team was informed that elected representatives are given time to report back to their class. Beyond this, the team saw evidence of minuted meetings of staff and student representatives, albeit under a variety of titles, held not only in local partner colleges but also on the premises of a UK private provider. At one overseas partner the team noted the existence of a student-staff liaison committee, operating in line with the University's approved model, which had been established following a recommendation at a periodic review.

94 In the case of an employer partnership, it was reported that no student representation system had been established, but in this case there had been full discussion between representative students and the University programme leader and other stakeholders at the conclusion of delivery of the programme involved. The audit team was offered examples by students in partner institutions of improvements made as a result of the efforts of student representatives, including increased library provision and the incorporation of field visits into the programme.

95 Those partner student representatives who met with the team reported that they had received no training for the role. However, the USSU employs a Student Representation Coordinator whose training programmes have been accessed by representatives from two local partner colleges. USSU has forged particularly close relations with one of these colleges, helping the college set up its own representation department, maintaining communication with its student representatives, and inviting participation in the annual student representation awards ceremony.

96 Overall, the audit team concluded that the University's evident commitment to affording students a meaningful role in quality assurance, a commitment shared by USSU, was being given practical expression in several collaborative contexts, especially among local partner colleges.

## **Links between research or scholarly activity and learning opportunities**

97 The contractual agreements entered into between the University and its collaborative partners, for all Models A to D, all oblige partners to ensure that staff involved in delivery engage in continuous professional development, scholarly activity and/or research so as to maintain currency at a level above that at which they teach. Reports of periodic reviews of partners sampled by the audit team showed that University panels are expected to enquire about the fulfilment of these obligations and there was evidence that they did so.

98 In the case of one overseas partner, a review panel's concerns about the lack of access by staff to continuous development in pedagogy contributed to a decision by the University to renew the partnership for only twelve months, pending a further review.

In another context, that of a visit by a partnership development and approval panel to a prospective new UK partner, a requirement for approval was imposed, ensuring that the tutors' work-planning model would accommodate time for preparation, scholarly activity and research.

99 The audit team was informed that the University was at an early stage in its thinking about how to develop collaborative research projects with some of its partners, although this was currently a possibility with one major partner overseas. The team did learn, however, of the participation of four of the University's local strategic partners in a FDTL 5 project entitled 'Engaging Students with Assessment Feedback: What Works?', the results of which were reported to a seminar in March 2009 open to partner as well as University staff. One of these colleges has custody of a national collection of flora which required staff delivering the associated programmes to be at the forefront of disciplinary knowledge.

100 Several staff in partner institutions are enrolled on higher degree programmes with the University, including a number taking professional doctorates. Staff at one overseas partner, who worked as practitioners alongside their teaching duties, also informed the audit team of their registration for professional doctorates, although at a different UK university. As its contribution to the continuous professional development of staff, the University offers a wide range of staff development opportunities (see paragraph 142), including sessions on podcasting for pedagogic purposes, supported by Teaching Quality Enhancement Fund (TQEF) funding, which have been delivered at two local partner colleges.

101 Overall, the audit team concluded that the University keeps the professional development and scholarly activity of partner staff under review, and makes a direct contribution to the provision of development opportunities for staff in partner institutions.

## **Other modes of study**

102 In accordance with the *Code of practice, Section 9: Work-based and placement learning*, published by QAA, the University acknowledges work-based learning and placements with employers as forms of collaborative provision. The audit team noted that no employers are entered on the Collaborative Provision Register, but the University explained that most such arrangements are confined to the provision of placements. In the few cases where it has been deemed appropriate for contractual agreements similar to those for full partnerships to be entered into with employers, the responsibilities devolved by the University are limited.

103 The audit team examined one such agreement, entitled an 'Employer's Work-Based Learning Agreement', covering a Foundation Degree programme developed and delivered at the request of a locally-based public service. This was modelled on a conventional memorandum of agreement/collaborative provision agreement, with the respective obligations of the University and the employer clearly set out. The employer undertook to provide premises for some of the delivery, and to release students at its own expense, but all teaching and assessment was fully in the hands of University staff. A similar contract had been agreed with a major utility company, and again the team found respective obligations clearly delineated, with the University fully responsible for all delivery and assessment, in this case for a BA top-up and MSc.

104 Operations manuals, standard features of the quality management of most collaborative partnerships, were not in evidence for employer partnerships, but the audit team accepted that these were unnecessary in a context in which the University retained all teaching and marking for itself. Nor were there any partner annual reports, but the audit team did see a programme specification and programme handbook for employer-related



provision. The team was also provided with completed annual programme reviews, including one where 'teach-out' arrangements apply. The team was, therefore, satisfied that, proportionate to risk, the quality assurance of provision with employer partners is at present secure.

105 The University recognises that its arrangements for collaboration with employers would benefit from further refinement, and to this end the AEC has approved proposals from a working group for implementation following staff development in 2011-12. These proposals include clear definitions of different types of arrangement with employers, setting out the implications thereof for contractual obligations, approval and review, and give the audit team confidence in the future management of this aspect of the University's provision.

106 One further area of interest to the audit team was the quality management of a partnership in which all delivery is by distance learning. This involved a Model D arrangement, with the University supplying all learning materials and conducting all assessments, but with partner staff engaged in delivery and providing support to students through an online learning environment. As noted in paragraph 83, the University had mapped this partner's practice against the relevant section of the *Code of Practice*, published by QAA, in 2009-10 and had assured itself that all precepts were being observed. Through that mapping exercise, robust arrangements were reported to be in place in such matters as back-up for the online system and the security of assessment.

107 The team read the most recent annual reports from the partner, and also the centre leader's reports, relating both to the UK headquarters and to a study centre overseas, and found all these to be conscientiously completed and reassuring in their content. In all cases students' opinions had been elicited and, with minor exceptions, had been positive in tone. Good ongoing liaison between the University and staff in partner institutions was also apparent. In the light of this, the audit team concluded that the University is managing securely the distance learning provided through this partnership.

## Resources for learning

108 The provision of learning resources in partner institutions is the responsibility of the institution itself. This is made clear in the memorandum of agreement/collaborative partnership agreement and the model operations guidelines. Students in partner institutions are expected to have access to key texts for their programmes at local libraries. Some partner institutions have arrangements with local libraries to provide additional access to learning resources.

109 The University assures itself that provision is appropriate in each partner through the presence of a Student and Learning Support Services (SLS) representative on University panels considering new partners, and for new programmes delivered at existing partners. If, following a desk-based review of provision at a partner, the SLS is not satisfied with learning resources in a prospective partner institution, an SLS representative may be required to visit the institution and make recommendations before partner approval can be granted.

110 All students in partner institutions have access to Sunspace, the University's virtual learning environment (VLE). Students to whom the audit team spoke during visits to partner institutions demonstrated an awareness of their access to the VLE, and regarded it as a key location for information regarding the University, such as programme/module handbooks and details about library provision. Students whom the team met had no concerns regarding the accessibility of this resource.

111 All students in partner institutions have access to the University library, but staff and students whom the audit team met indicated that, in reality, the physical distances involved mean that only on-campus students and students at local partner colleges make regular use of this facility. Students may also obtain access to University online library services such as e-journals, and are able to request postal loans, copies of book chapters and inter-library loans. Information about these services is provided in a set of web pages tailored for students in partner institutions. The SLS employs a Liaison Librarian who has responsibility for supporting students within collaborative provision wanting access to the library. A member of the SLS staff is currently seconded to a JISC-funded project on the provision of electronic resources for students in collaborative provision.

112 The audit team found the online information and tools provided for students within collaborative provision useful and engaging. The online pages linked to contact details for relevant staff and included a 'live chat' feature to enable students to use an instant messenger to talk to a member of University staff.

113 During meetings with relevant staff, the audit team was informed of plans within the SLS to run 'road shows' in partner institutions covering the use of library services. In strategic, local partner colleges, partnership liaison officers were also seen to be useful in providing advice on provision of learning resources (see paragraph 13). The team found provision of these support services for collaborative students, including online materials such as one-to-one 'live chat' support and online tutorials, to be well advertised and easy to use, and considers the proactive approach taken to supporting students in partner institutions by Student and Learning Support Services, including its provision of online resources, to be a feature of good practice.

114 In one of the partner institutions visited by the audit team, students claimed, however, not to be able to obtain access to the University's inter-library loans services. The team was told that the University does not directly monitor the take-up of these services, although technically it would be possible to do this. The University may wish to consider how to increase awareness of this service among students in partner institutions.

115 Overall, the audit team was satisfied that the University has in place adequate measures to ensure the quality and accessibility of learning resources offered to students through collaborative provision.

## **Admissions policy**

116 Responsibility for the University's admissions policy in the context of collaborative provision lies with the Director of Student Recruitment and Business Partnerships (SRBP). The policy is reviewed regularly through the Admissions Review Panel and Admissions Coordinators Group (ACG). The policy sets out criteria for admission and the procedures for the recruitment and admission of students, and is applicable to programmes delivered across all models of collaborative provision.

117 The University ensures that all staff involved with the admissions process receive appropriate training and development in admissions and related areas via in-house training coordinated through the ACG. The audit team was informed during the audit that, following the departure of the Director of SRBP, the University is in the process of redistributing the responsibility for recruitment and admissions from within SRBP to the Marketing and Communications Department.

118 The respective responsibilities of the University and each partner institution concerning admissions arrangements are set out in the Operations Manual Guidelines for

each partnership model (see paragraphs 17 and 18) and within an annex of the memorandum of agreement/collaborative partnership agreement for each partner. In Models B to F admissions are solely the responsibility of the University, although partners are actively engaged in recruitment and receive application forms before passing them to the University.

119 Under Model A provision, admissions are the responsibility of the partner institution but remain subject to the University's admissions policy. The admissions criteria used by the partner institution are approved by the University through the programme approval process described in paragraphs 29 to 32 of this report. Where non-standard entry applications are concerned, the partner institution must liaise with the University to reach an agreement regarding any potential offer.

120 In the light of discussions with staff in the partner institutions visited by the audit team, the team is confident that the processes described above are well understood by relevant staff and are operating effectively. In one instance the team found students who had experienced problems associated with admissions. The error, which had caused delays and confusion in confirming students' places on a course, had been acknowledged by the institution involved and had been resolved.

121 The University's academic strategy and its admissions policy set out a clear commitment to the promotion of the experience of university education to participants from under-represented groups. The audit team considered that the University's strategic commitment to widening participation is evident at all levels of the institution and was reflected in meetings with students during the audit visit. Staff whom the team met in the University and at local partner colleges clearly understood and espoused this vision and their involvement in its realisation.

122 The University permits accreditation of prior learning where this learning has been achieved through formal study or through work experience outside the framework of a higher education programme. The accreditation process is set out in the Academic Quality Handbook. The audit team noted that this was managed effectively in the context of employer-related provision, where it was particularly beneficial to the students concerned.

123 In the view of the team, the University has in place a coherent and clearly defined admissions policy with respect to collaborative provision that is being consistently applied. The University's approach to admissions meets the expectations of the relevant section of the *Code of practice*, published by QAA, and makes a positive contribution to the management of the quality of learning opportunities.

## **Student support**

124 The University's academic strategy commits the University to provide 'a high quality academic experience for [our] learners with exemplary support in a contemporary learning environment'. Individual support, both pastoral and academic, for students in partner institutions is, in the first instance, the responsibility of the institution involved, and the relevant memorandum of agreement/collaborative provision agreement makes clear the respective responsibilities of the University and the partner in this regard.

125 During meetings the audit team held with students and staff in partner institutions, the understanding and effectiveness of this approach to student support was demonstrated. Students are aware of the services that are available via the University, but tend to make use of local provision in the first instance. For most students, institution tutors are their

key contact for student support issues, who would then normally refer them to relevant colleagues.

126 The services of the USSU are available to all University students, including those in partner institutions. However, where it is felt that an issue is best dealt with by a partner institution, the USSU advice team will often refer students back before offering support (see also paragraphs 95 and 96).

127 Students whom the audit team met during its visit to local partner colleges were aware of the presence and services available from USSU through email contact and publications presented to them during induction. However, students indicated that they would generally make use of provision locally before contacting USSU. USSU is developing a number of links with local partner colleges, including the City of Sunderland College. The team was also told that USSU has established a group aimed at supporting student retention and focusing particularly on international students. The scheme was said to be growing, but students whom the team met did not appear to be familiar with the scheme.

128 The University's procedure for handling complaints and appeals is described in the Student Handbook and relevant programme handbooks. Students can obtain access to the services of USSU regarding complaints and appeals but, as noted above, most students whom the team met during partner visits stated that they would contact their college-based tutor in the first instance. Students are aware that information regarding complaints and appeals is available online and within their programme/module handbooks.

129 Students are satisfied that the information provided to them within their programme and module handbooks is sufficient for their needs. They pointed to the University's VLE as a key location for any information that they might require in relation to University procedures and policies.

130 The University has established higher education centres in a number of local strategic partner colleges (see paragraph 12). Eight of these colleges are supported by partnership liaison officers who are employed by SRBP to act as a point of contact for students on behalf of the University and provide advice to students on issues such as progression to the University. The audit team was told that at the time of the audit there were six such officers supporting eight partner institutions. The team heard positive comments from both students and teaching staff regarding the work of these officers who were regarded as a valuable resource and key point of contact between students and staff and the University.

131 The audit team found that induction processes varied depending on the partner institution and its geographical proximity to the University. For the most part, however, students were satisfied that the information which they had been provided was sufficient. The involvement of the University in student induction varied, with some institutions hosting several visits from University staff, whereas others had relied upon local induction sessions supported by literature provided by the University. Students who top up their studies and move to the University campus are often treated as new students for the induction process and are, as a result, given the same induction to the University as first year students.

132 At the time of the audit, 33 partnerships were in the process of termination or 'teach-out' as the University describes the process (see paragraph 3). Given the number of partnerships involved, the audit team considered the support offered to students in such circumstances. The team was informed that the process for managing teach-out provision focused on the experience of the student as a priority. On the commencement of a teach-out arrangement, partner institutions are given a teach-out schedule which sets out the

expectations of them in the support of students. This schedule contains an action plan for individual students based on their expected completion dates.

133 During the teach-out period, centre leaders continue to monitor the situation and report to the relevant faculty. The audit team was not told of any issues that had been raised with USSU officers regarding teach-out provision in terms of student feedback, although these officers are not directly involved with these processes. Students whom the team met during the audit visit seemed unaware of what the consequences would be if they were required, for example, to resubmit work or repeat a module after the completion of the teach-out agreement. University staff assured the team that, although there were no formal guidelines regarding this situation, provision would be made to protect the experience of the student and enable them to complete their programme. If a partner institution refused to continue a programme, any students in such a situation would be supported in transferring to another institution or by other means, including the use of flying faculty.

134 Overall, the audit team was confident that the University has in place appropriate measures to ensure that its expectations relating to student support in partner institutions are met. Guidance to students is provided primarily through module/programme handbooks and at induction, and students are aware of how to find further information.

## **Staffing and staff development**

135 Academic staff in partner institutions must be approved by the relevant University faculty when a new partnership is established or a new programme added to an existing partnership.

136 Formal responsibility for the appointment of staff varies with the model of collaborative provision. In Model A, for example, the partner institution is responsible for the appointment of teaching staff according to University criteria, but appointments must be signed off by the University before a staff member can commence teaching on University programmes. If any staff changes are made, the University must be informed.

137 In other models of collaboration the University is more involved, requiring partners to submit to the University the CVs of staff whom the partner proposes will teach on a programme prior to their appointment. Staff in these partnership models explained to the audit team that, although the partner is responsible for conducting interviews, an appointment would not be made without approval from the University. In all cases the University has the final say in whether or not a tutor can teach on a course.

138 Staff recruited to teach on approved programmes are expected to have at least one year's experience at higher education level at least one level above that which they will be responsible for delivering, and hold at least an undergraduate qualification or equivalent within the subject area of the programme on which they are teaching. Where a tutor has less than one year's experience, the staff member in the partner institution with academic responsibility for the programme involved must ensure that the individual is mentored for at least the first year of their employment. Staff appraisal and related processes are the responsibility of the partner institution.

139 In all models a partner institution must submit a CV approval matrix to the relevant centre leader, detailing the names of tutors whom it proposes will lead each programme and module. Staff appointed subsequent to an initial validation, or those wishing to teach additional modules, must also be approved through the above system. Changes are recorded in the annual monitoring report produced by the partner institution.

140 During visits to partner institutions the audit team met senior managers and teaching staff where a good understanding of this system was evident. Staff with faculty responsibilities whom the team met during the audit visit also had a good understanding of their responsibilities in this regard. The team also heard of an instance where the University had not allowed a member of staff at a partner institution to teach on an additional module, suggesting that the University's oversight of staff in collaborative provision works effectively in practice.

141 The centre leader provides a key point of contact for staff within partner institutions. The audit team was informed by staff during visits to partner institutions that this role provided a valued link between the institution and the University, and staff welcomed the opportunity for informal conversations and the support that that this provides.

142 The centre leader is responsible for coordinating staff development in relation to programme developments and changes at the University. They are required to comment on any staff development issues in their annual report to the University. In all models of provision, a partner institution is responsible for ensuring that staff teaching on a University programme engage in continuous professional development or scholarly activity/research. The audit team found that the provision of staff development varies across the partners visited as part of the audit, but in all cases at least some provision was evident.

143 Frequent reference was made to staff development initiatives organised by the University, including the annual collaborative provision conference, to which further education staff in partner institutions are invited, and to faculty conferences which are open to a wider range of partner staff. In addition are the activities of the Higher Education in Further Education Practitioners Group, which meets on a regular basis. Academic Services also run a regular series of staff development events targeted at staff teaching in collaborative provision.

144 Staff in partner institutions referred to visits from University colleagues at least annually to discuss staff development, although this provision was much more in evidence in local strategic partner colleges. Staff at the University whom the audit team met acknowledged this disparity, but highlighted the difficulties presented by the cost of travel to overseas partners. However, the team heard of an example in one faculty where staff from partner institutions had visited the University for a training conference which had been positive and would be repeated.

145 In the view of the audit team, the University has put in place measures to assure itself that staff engaged in delivering a University programme in a partner institution are appropriately qualified for their role, and that partner organisations are aware of their responsibilities in this regard and for ongoing development and appraisal activities.

## **Overall conclusion on the management of the quality of learning opportunities**

146 As a result of its investigations, the audit team concluded that, in the context of its collaborative provision, confidence can reasonably be placed in the soundness of the University's present and likely future management of the quality of the learning opportunities available to students in partner institutions.

## **Section 4: Institutional approach to quality enhancement in collaborative provision**

147 The University's academic strategy sets the framework for the development of its academic and related activity. The focus of the Strategy is the enhancement of the student experience, with an ambition for academic excellence that embraces the promotion of innovative and flexible learning opportunities.

148 The University sees quality assurance as underpinning quality enhancement and as the foundation for developmental work. One of the key principles of the review of quality assurance processes begun in 2007 was that quality enhancement should be seen as embedded, rather than becoming an additional requirement, and should be founded on the firm bedrock of quality assurance. The University's quality management policy affirms and reiterates a commitment to developing what are traditionally regarded as quality assurance processes so that they also facilitate enhancement, while recognising that processes and activities may variously have both a quality assurance or quality enhancement focus.

149 The University's review of collaborative processes was set within the context of this commitment, while also responding directly to the findings of the 2006 QAA Audit of collaborative provision and the 2008 QAA Audit of overseas provision of institutions with partnerships in Greece and Cyprus. It was evident to the audit team that, in planning and implementing the review, the University had: clearly identified its enhancement objectives; undertaken a thorough and systematic planning of implementation, set out in a comprehensive and detailed plan incorporating clear timescales; and was engaging in ongoing reflection on, and evaluation of the outcomes.

150 It was also clear to the audit team that implementation had been supported by the dissemination of information about the new processes to collaborative partners, including presentations at the higher education in further education enhancement sessions; staff development on the new annual programme review process, specifically for partners offering provision under Model A; and the development of the guide, Quality Processes at the University of Sunderland, generally referred to as the plain English guide. The team considers the University's strategic review of its collaborative partnership portfolio to be an area of good practice and considers that the planning and implementation of the new collaborative processes have made a significant contribution to the University's enhancement activity.

151 Against the background of enhancement of the collaborative processes generally, the audit team noted particular elements of improvement and innovation. These included: the strengthening of the due diligence process in partner approval and review, based on tighter central control and risk assessment (see also paragraphs 20 and 29); the institution-wide adoption of the centre leader role; and the introduction of a developmental focus in annual review.

152 One of the key features of the new processes has been the establishment of the centre leader role as an institution-wide element of the collaborative support framework. The audit team heard that this role was a feature of good practice that had been transferred from the former School of Computing and Technology, now part of the Faculty of Applied Sciences, where centre leaders had been operating for a number of years. The team concurred with the University's view of the importance of this role in providing a consistent means of communication between partners and faculties, notably links with programme leaders and associate deans, and in enabling a wider view of provision than just one programme.

153 The audit team also noted the centre leader's role in the ongoing monitoring of partner provision and in annual reporting, through the centre leader report. The team considered that this aspect of the role enhanced the annual review process, supplementing partners' annual self-reporting through annual direct and documented University evaluation

of partner provision, feeding into on-campus processes both at programme level, to programme study boards, and at faculty level, to associate deans (student experience).

154 Other aspects of the centre leader role provided for the enhancement of existing processes and practice, notably in relation to ensuring the accuracy of published information (see paragraphs 162 and 166) and requirements relating to partner visits. While it was evident, and readily recognised by the University, that the centre leader role and its operation needed further refinement and will evolve in the light of experience (see paragraphs 74 to 80), the audit team concluded that its introduction across the University's portfolio of collaborative provision constitutes a significant, strategically-led enhancement.

155 The audit team learned that the University had introduced a developmental focus in annual monitoring, incorporating development grids into redesigned annual review templates (see also paragraph 35). The team considered that the development grids are being used effectively, as a dynamic tool to guide and record activity on an ongoing basis, and that programme-level enhancements had been achieved as a result of this institutional initiative. In one instance, for example, the developmental approach has led to the provision of support for partners, during visits and virtual video visits, in understanding the use of assessment criteria in marking and feedback. In another case, the developmental process identified a need for staff development concerning student transition to higher education, which has subsequently been provided to partners.

156 Outside the specific context of the review of processes, the audit team explored the University's wider enhancement agenda and found a broad range of activity within collaborative provision, operating at institutional, faculty and programme levels. The institutional annual collaborative conferences and the higher education in further education enhancement workshops of the Higher Education in Further Education Practitioners' Group provide opportunities for the dissemination of information, staff development and sharing of good practice. Both are well attended by delegates from locally-based partners.

157 The audit team learned of the delivery of a programme of academic development designed specifically for partner staff during 2011, and of developments underway to produce an induction/refresher package for dissemination of good practice at higher education level for teaching staff in partner institutions. The team also saw evidence of opportunities for sharing good practice on a smaller scale through events arranged for partner institutions by University staff, such as programme 'away days' and 'cluster group' meetings. For overseas partner institutions, the team learned of staff development activity at faculty and programme level provided on visits to partner institutions or virtual video visits and, as in the case of the 2010 Faculty of Applied Science Transnational Partnership Event, at the University.

158 The University acknowledged that communicating with colleagues overseas is inevitably more difficult. To address this difficulty, a collaborative partner communication system on Sunspace is currently being piloted with further education partners. In due course, the system will be for staff at all partner institutions, and will comprise dedicated spaces for faculties, Quality Assurance and Enhancement, Academic Development, and Student and Learning and Support.

159 Further development of the University's institutional learning and teaching enhancement agenda is planned, focusing on enhancement themes. These have been identified from data relating to student satisfaction, attainment, retention, performance and graduate employment, and include data relating to off-campus provision, with outcomes being evaluated against associated key performance indicators. The audit team learned that work is being undertaken at faculty level and that the Quality Management Sub-Committee



will have a key role in identifying and delivering against institutional priorities for learning and teaching enhancement.

160 The audit team concluded that the University is taking deliberate steps to improve the quality of learning opportunities for students in collaborative provision, both through institutionally-led enhancement activity and by engendering a culture of sharing good practice among both University and partner staff.

## **Section 5: Institutional arrangements for postgraduate research students studying through collaborative arrangements**

161 The University has a number of research students who are studying for a research degree in their home country by distance learning. All this provision is supported entirely from the University, and does not involve any collaborative agreements for the delivery of research programmes.

## **Section 6: Published information**

### **Student information (oversight by the awarding institution)**

162 The University maintains oversight of information provided to students by partner organisations through its centre leaders. Centre leaders are required to check programme-level materials provided for current students. Guidelines for programme handbooks are provided by the University for on and off-campus provision. The students whom the audit team met confirmed that information provided in programme handbooks and materials is clear, accurate and comprehensive. Students know how to gain access to detailed information on academic regulations and rules regarding misconduct, together with the procedures for complaints and academic appeals. Students from partner institutions meet staff from the University during their visits to the institution, and those from local further education colleges know that a partnership liaison officer is available on campus on designated dates.

163 The language of teaching and assessment is English, and the audit team learned of one instance where this has been reinforced by the University as an outcome of the formal review of a partnership. An up-to-date version of the Register of Collaborative Provision is published on the University website. This is maintained by Student Recruitment and Business Partnerships (SRBP) in the light of amendments supplied monthly by Academic Services.

164 The requirements of HEFCE 2006/45 are not met in relation to the accessibility of the reports of external examiners or the publication of programme specifications. The students whom the audit team met from partner institutions have not seen reports of external examiners, nor do they appear to understand the role of an external examiner. Students at sample partner institutions said they did not normally meet external examiners. This was confirmed as standard practice by staff of the partner institutions and the University. The team was advised that in one instance it was planned that an external examiner would in future visit an overseas partner institution and meet students; however this was not the norm. University staff confirmed that while external examiners' reports are normally contained in annual review documents considered at a programme board of study, to which student representatives are invited, they could not confirm that all collaborative students had access to these reports. The audit team considers it desirable for the University

to work with its partners to review the means by which students in partner institutions gain access to external examiners' reports.

165 The University does not currently publish copies of its programme specifications (see also paragraphs 42 and 43). In their current format, the programme specifications used by the University are regarded by the University as unsuitable for publication. While they are made available to current students in programme handbooks, the audit team agreed that they are not well suited to this purpose. The team heard of an intention to generate electronic programme specifications that could become part of a broader set of online information provided for students. The audit team considers it advisable for the University to ensure that it meets the information requirements set out in HEFCE 2006/45 in relation to the public availability of programme specifications.

## **Publicity and marketing**

166 Advice on the use of the University's logo and name is provided to partner institutions by the Marketing and Communications team and centre leaders. The Marketing and Communications team may give advice directly to partners, or through staff of the SRBP or the relevant faculty. Centre leaders are required to check programme-level publicity materials provided for prospective students during twice-yearly visits, and to confirm their suitability in an annual written report. This includes printed and online materials such as a traditional prospectus and programme leaflets. Some further education colleges use short, innovative promotional films featuring staff and students on YouTube and maintain a presence on Twitter and Facebook. As the role of centre leader is new and has yet to be evaluated, the audit team was unable to comment on the effectiveness of this means of monitoring publicity and marketing materials.

167 The audit team found an inconsistency in printed prospectus material from a local partner institution, and met students who felt that they had been seriously misled by the institution about the availability of a programme of study that was subject to validation at the time of their enrolment. This matter has been considered in detail elsewhere in this report (see paragraphs 68 to 73). In addition, the team uncovered significantly inaccurate information on the University's own website in the online prospectus pages entitled 'Study in your country'. It was apparent that the information provided for students through these pages had not been updated in line with the published Register of Collaborative Provision, hence the audit team cannot confirm the effectiveness of the University's approach to checking its own and its partners' marketing materials. Given this, the audit team considers it advisable for the University to review arrangements for ensuring the accuracy and currency of all publicly available information on approved partnerships and collaborative programmes.

168 The above concerns about inconsistencies between different University prospectuses concerning the availability of programmes notwithstanding, the audit team found that, in general, reliance could reasonably be placed on the accuracy and completeness of the information that the University publishes about the quality of its educational provision and the standards of its awards offered through collaborative provision.

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